Misconceptions of People towards Non-Governmental Organizations Aid to Internally Displaced Persons in Gonidamgari Bolori 2 Ward of Maiduguri Metropolitan Council of Borno State, Nigeria

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Abstract:- Let it be no doubt or fear of contradictions that the northeast Nigeria has faced one the worlds devastating terror by the non-state armed group called Boko-Haram. For more than a decade, Boko-Haram crises have subjected the population in the region into acute humanitarian crises. The crises instigated internal displacement of people with resultant escalating non-governmental humanitarian needs. The organization (NGOs) both national and international set to respond to these ever-increasing needs among these vulnerable populations. This study was explored to investigate and find out the Misconceptions of people towards the non-governmental organizations aids to these internally displaced persons, the knowledge of the people towards NGOs, and the consequences of misconceptions of people towards the NGO respectively. The research is a non-experimental descriptive survey design. It was conducted in Gonidangari Bolori 2 of Maiduguri metropolitan council of Borno State, northeast Nigeria. The target population of the study area was 3,000 according to 2006 Nigerian National Population Census. The sample size was 353 obtained using Taro Yamane's formula. The instruments for data were a self-constructed questionnaire which was administered using research assistants. The data were obtained manually, analyzed, and presented using tables, frequencies, and percentages. The results of the study revealed that (45.04%) were aware of the functions of NGOs. (54.95%) have no knowledge of the NGOs' functions. (72.23%) agreed that NGOs operate double standard activities i.e., NGOs have hidden motive and agenda apart from giving aids. (42.49%) mentioned that food assistance was supplied to the internally displaced persons and as well as the insurgents. (58.64%) opined that the Nigerian government can shoulder the needs of the victims affected by the crisis. Despite the assistance given by the NGOs, Majority of the respondents (80.02%) holds that if the NGOs remain in the state, insurgency will not come to an end. The study recommends that the NGOs should consider awareness raising on their activities and functions as part of the project in Gonidamgari Bolori 2 Maiduguri Borno State Nigeria. People within the community should be

encouraged to understand the aim and objectives of the project to be implemented by the NGOs. There should be inclusivity of the community members with regards to the NGOs project planning and implementation. The field of Humanitarian crises and responds should be included in nursing curriculum as nurses are very important stakeholders in Emergency management and crises response in the humanitarian sector. The study can help clarify and correct any misconceptions residents may have about the role and intentions of NGOs. This can lead to a better understanding of the assistance provided and foster trust between the community and aid organizations. By addressing misconceptions, the study can contribute to building a collaborative relationship between the residents and NGOs. Increased trust may lead to more effective cooperation in addressing the needs of the internally displaced persons. As the study identifies and dispels misconceptions, community members may be more likely to actively participate in programs and initiatives implemented by NGOs. This increased engagement can enhance the impact of aid efforts. Understanding specific misconceptions can inform NGOs about the unique challenges faced by the community. This knowledge can lead to the development of more targeted and culturally sensitive interventions to address the residents' needs effectively. By addressing misconceptions, the study can contribute to empowering the community. When residents have accurate information about aid efforts, they may feel more in control of their situation and be better positioned to advocate for their needs. The study can guide NGOs in refining their communication strategies to better convey their mission, goals, and the nature of their assistance. This can lead to more effective outreach and engagement with the community. Addressing misconceptions contributes to building trust and credibility for NGOs. A positive perception of aid organizations can lead to better reception and acceptance of their services by the community. Insights from the study can inform NGOs about the specific needs and concerns of the community, allowing them to adapt and tailor their programs accordingly. This ensures that aid efforts are responsive to the realities on

the ground. If there are misunderstandings or conflicts between NGOs and the community, the study's findings can pave the way for conflict resolution. Open dialogue and understanding can help build stronger partnerships. As misconceptions are addressed, NGOs can operate in an environment of mutual trust and cooperation, leading to increased effectiveness in delivering aid and support to internally displaced persons. In a nutshell, a study on misconceptions towards NGOs aiding internally displaced persons in Gonidamgari, Bolori 2 ward, can contribute to building positive relationships, fostering community empowerment, and enhancing the overall effectiveness of humanitarian efforts in the region.

Keywords:- Boko-Haram, Non-governmental Organizations, Misconceptions, Community, Borno State.

I. INTRODUCTION

The plight of internally displaced persons (IDPs) is a critical issue in conflict-ridden regions, and Borno State in northeast Nigeria is no exception. The persistent insurgency by the Boko Haram terrorist group has led to a mass displacement of individuals who have been forced to seek refuge in IDP camps. In this challenging environment, nongovernmental organizations (NGOs) have stepped up to provide aid, support, and relief to the affected populations. However, despite their efforts, misconceptions and misunderstandings held by the local population can hinder the effective delivery of aid and impede the assistance reaching those who need it most. In the world today, several nations were regarded as disaster ridden. Boko-Haram as a terrorist group is one of the deadliest forms of insurgence group with pandimentional and dynamic modus operandi. Borno State, located in northeastern Nigeria, has been plagued by the persistent and devastating insurgency led by the extremist group Boko Haram since 2009. The Boko Haram crisis has had far-reaching consequences, including widespread violence, displacement, and a severe humanitarian crisis. The conflict has resulted in the loss of thousands of lives, extensive destruction of infrastructure, and the displacement of millions of people from their homes.(Babagana, 2015).

Boko Haram, officially known as Jama'atu Ahlis Sunna Lidda'awati wal-Jihad, which translates to "People Committed to the Propagation of the Prophet's Teachings and Jihad," was founded in the early 2000s by Mohammed Yusuf. Initially, the group aimed to establish a strict interpretation of Islamic law (Sharia) in Nigeria's predominantly Muslim regions, including Borno State. The insurgency gained momentum in 2009 when Boko Haram clashed with Nigerian security forces. The group's initial attacks targeted police stations, government buildings, and security personnel. Over time, their tactics evolved, and they began targeting civilians, schools, places of worship, and public spaces, resulting in numerous casualties and widespread fear among the population. The conflict in Borno State has led to a severe humanitarian crisis, with millions of people affected. The violence and displacement have resulted in food insecurity, malnutrition, inadequate healthcare, and limited access to education. According to the

United Nations, Borno State has one of the highest concentrations of IDPs in Africa, with over 1.8 million people displaced. (Babagana, 2016).

NGOs have played a crucial role in responding to the humanitarian needs arising from the Boko Haram crisis in Borno State. These organizations operate independently of the government and focus on providing essential services, including food, water, healthcare, education, and shelter, to the affected populations. NGOs often work in partnership with international organizations, local authorities, and community-based groups to deliver aid effectively. NGOs have been instrumental in establishing and managing IDP camps, where displaced individuals seek shelter and access to necessities. These organizations work tirelessly to alleviate the suffering of IDPs and provide support in the form of emergency relief, livelihood programs, psychosocial support, and long-term development initiatives. Their presence and activities are essential in addressing the immediate and long-term needs of the displaced population. (Kashidrema et.al, 2010).

Despite the significant efforts of NGOs, challenges persist in delivering aid to IDPs in Borno State. These challenges include access constraints due to ongoing violence, inadequate funding, security concerns, logistical difficulties, and, as this research focuses on, misconceptions and misunderstandings held by the local population towards NGOs' aid to IDPs. Addressing these challenges and misconceptions is crucial for improving the effectiveness of humanitarian interventions and ensuring that assistance reaches those in need. The Boko Haram crisis in Borno State has had devastating consequences, including widespread violence, displacement, and a severe humanitarian crisis. NGOs have played a critical role in responding to the needs of IDPs, providing essential services and support. However, challenges, including misconceptions, hinder effective aid delivery. Understanding and addressing misconceptions are essential for enhancing collaboration between NGOs and the local community, ultimately improving the assistance provided to internally displaced persons in Borno State. (Faroug, 2015).

Internally displaced persons (IDPs) have been an issue of national and international concern since the 1980s. It attracted more attention in the 1990s especially at the the Guiding Principles on Internal introduction of Displacement into the United Nations Commission on Human Rights in 1998 (Cohen, 2004; Stepputat & Sorensen, 2001). IDPs are people who flee their homes because of conflicts, communal clashes, war situations, terrorist's activities, systematic violation of human right, natural disaster, etc. and are further exposed to risk, within their own country (Tajudeen & Adebayo, 2013; Daudu, 2010; Stepputat & Sorensen, 2001). In the view of Ibeanu (1998), IDPs are people who involuntarily migrate, because the continue stay in their homes have become intolerable as a result of the failure of the state to protect their lives. To protect their lives, IDPs trek to long distant places where they assume to be safe with little or no hope of getting succour(Galadima & Aluaigba, 2015). This implies that IDPs are physically vulnerable and exposed to further

attacks and violence within their own country since the state cannot protect them or guarantee their security. (Ashimi, 2012).

The plights of the IDPs are perceived to be worse compared to other Moving and Vulnerable people (MVPs) because they are not recognized legally and internationally in terms of the legislature (Mapiko & Chinyoka, 2013). Thus, they are neglected both within and outside the shores of their country. In terms of origin, the majority of the IDPs are from the NortheasternNigeria, with as much as 75% of them coming from Borno state and more than 9% coming from Adamawa and Yobe states (IOM report, 2015).

One dimension to the impact is the vast majority of the IDPs that were displaced because of Boko Haram activities. According to IOM DTM report (2015), out of 2,151, 979 IDPs identified as of December 2015, 84.5% were displaced because of Boko Haram activities, while about 12.9% and 2.6% were displaced as a result of communal clashes and natural disaster respectively (p. 3). Another dimension to the impact of Boko Haram activities on IDPs is the frequent attacks and bombings right inside the IDPs camps. For example, according to Marama, a female suicide bomber recently had her way into the IDPs camps killing 8 and injuring about 7 (2015). This clearly suggests that there is a negative and significant causal relationship between Boko Haram activities and the plights of IDPs. (United Nations Office of High Commissioner for refuge, UNHCR, 2014).

There are gender and age disparities in the plights of the IDPs, with women and children under 18 constituting a higher percentage of the displaced people than men. For example, the IOM DTM survey results indicate that out of 20738 IDP households included, 51.8% of the IDPs are female while 48.2% are male. The results further indicate that 55.7% of the IDPs are children below 18 years, and more than half of them are within 0 - 5 years age bracket (2015, p. 2). Because women and children under 18 are more displaced than men, they bear more burdens of the effects and are exposed to further risks even as displaced people. According to UNFPA report, some of the IDPs women and girls are victims of sexual abuses; and are infected by various sexually transmitted diseases including HIV, with some of them being pregnant for Boko Haram insurgents (2015). For more than one year, many IDPs children have been out of school and fear going to back school, because of the terror they experienced while in school (Galadima & Aluaigba, 2015). Thus, women and children are more vulnerable to the activities of Boko Haram than the men.

IDPs Fathers and brothers mostly have been killed by the insurgents as infidels or by the Nigerian security forces as suspected members of the Boko Haram sect (Galadima & Aluaigba, 2015; Walker, 2012). Some of the IDPs men have watched their household violated, maimed, abducted, or kidnapped, and could not help it (Galadima & Aluaigba, 2015). Most of them have been depressed, because apparently, they can no longer protect and cater for their families. Some of the IDPs men have joined the "civilian JTF" to help fight Boko Haram, and with their brave

support, the fight against Boko Haram has recorded huge success (Blanchard, 2014). They IDPs men in most cases, pay the ultimate price as they take their fate into their own hands. They have lost their joy and means of livelihood as men.

II. RESEARCH METHODS

A. Research Design

Non-experimental descriptive survey design was used to investigate the misconception of people towards Non-Governmental Organization Aids to internally displaced persons in Gonidangari Bolori 2 Ward of Maiduguri Metropolitan Council of Borno, Nigeria.

B. Study Setting.

The area of the study was Gonidamgari Bolori 2 ward of Maiduguri Metropolitan Council of Borno State. The study was carried out from October to November 2017. Gonidamgari Bolori 2 ward was named after an Islamic Scholar "Imam Baba Goni Damga" who first settled in the area in 1948. Gonidangari is in the north-West Maiduguri the capital of Borno State. It is close to Bulabulin Alajeri from the north, Ummarari settlement from the west, Old Maiduguri at the east and Maiduguri Railway Terminus from the south. Gonidangari was occupied by both Muslims and Christians, although Muslims were the dominant. There were about 25 Community heads called "Bulama". The most dominant residents of Gonidangari were Kanuri by tribe. Other tribes include Babur, Shuwa, Margi and Hausa Fulani. They were mostly businessmen and women. Some certain number of the people in the area were civil servant whereas others were students. The area has public elementary school and Junior secondary school called universal basic education. The residents live happily and share values and norms prescribed in their various cultures.

C. Target Population.

The target population of the study was all the residents of Gonidamgari Bolori 2 Maiduguri Borno State who are 3 000

D. Sample and Sampling Technique.

Simple random sampling technique was used for the study. This is where every member of the population has equal chance of being selected as part of the sample.

E. Instruments for Data Collection.

A self-administered Questionnaire (SAQ) adapted from(Saljaba, 2015) were used as instrument for data respondents' collection with focused on the sociodemographic characteristics in section A of the questionnaire, knowledge of people towards NGOs section B, aids given by the NGOs section C and section D composed of the consequences of the Misconception of people towards NGO aids respectively. The SAO were then given to the respondents to fill and returned within 3 days. The administration of these questionnaires was done with the help of 2 research assistants. Finally, 353 questionnaires were issued, and the same number was retrieved 100% responses obtained for the respondents.

F. Data Analysis Procedures.

Data were collected, analyzed, and presented in tables, frequency, and percentages. Statistician was involved and the frequencies, tables and percentages were advised to be used to describe demographic characteristics as well as to investigate on the misconceptions of people towards non-governmental organizations aid to internally displaced persons (IDPs).

G. Ethical Consideration.

Ethical clearance was obtained from the University of Maiduguri Teaching Hospital School of Nursing. This was given in the form of a letter of introduction to be administered to the Community Heads of Gonidamgari Bolori 2 for approval. The rights and privacy of participants were protected. All respondents participated in this study based upon confidential and voluntary participation. Informed consents have been obtained from all participants in this study. Moreover, the study protocol, informed consent form, and questionnaire were reviewed and approved by the ethical and research committee to guarantee the respondents rights and interests.

III. RESULTS

Table 1: Socio-Demographic Characteristics of the Respondents (n=353)

	Table 1: Socio-Demographic Characteristics of the Respondents (n=353)				
S/N	OPTIONS	VARIABLES	FREQUENCY	PRECENTAGE	
1	AGE	18-20	49	3.8%	
		21-25	34	9.6%	
		26-30	90	25.4%	
		31-<35	180	50.9%	
		TOTAL	353	100%	
2	GENDER	MALE	206	58.4%	
		FEMALE	147	41.6%	
3	LEVEL OF EDUCATION	PRIMARY	240	67.6%	
		SECONDARY	90	25.4%	
		TERTIARY	23	7%	
		TOTAL	353	100%	
4	RELIGION	CHRISTIANITY	33	9.3%	
		ISLAM	320	90.65%	
		OTHERS	NIL	NIL	
		TOTAL	353	100%	
5	TRIBE	KANURI	199	56.37%	
		BABUR	25	7.08%	
		SHUWA	9	2.54%	
		MARGI	60	16.99%	
		HAUSA	57	16.14%	
		OTHER	3	0.84%	
		TOTAL	353	100%	
6	OCCUPATION	CIVIL SERVANT	10	2.83%	
		STUDENTS	43	12.18%	
		FARMERS	300	84.98%	
		OTHERS	NIL	NIL	
		TOTAL	353	100%	

Table 1. present the socio-demographic data or the characteristics of the respondents. The data was obtained from the various age groups. Most of the respondents (180/353) accounting for 50.9% fall between the ages of 31-<35brackets. While 90/353 (25.4%) are between the age average of 26-30. For 49/353 accounting for (3.8%) of the respondents. Moreover, the data above revealed that 34/353 (9.6%) of respondents were at the age of 21-25 years respectively. From the table above the results shows that majority of respondents 206/353 (58.4%) were males. And 147/353 (41.6%) were females. Majority of the respondents 240/353 (67.6%) have attended elementary school level of education. Total of 90/353 (25.4%) have attended secondary school level of education whereas 23/353 (7.0%) have had

tertiary level of education. Majority of the respondents practice Islam as religion (320/353) 90.65% and (33/353) 9.3% practice Christianity.

Majority of the respondents were Kanuri by tribe (199/252) 56.37%. furthermore, (57/353) 16.14% were Hauwa by tribe. Total of (25/353) 7.08% were Babur tribe. The above table also revealed that (9/353) were Shuwa Arab by tribe. Other tribes have the total of (3/353) 0.84%. additionally the table above shows that majority of the respondents were farmers (300/353) 84.98%.A total of (43/353) 12.18% were students and (10/353) 2.83% of the respondents were civil servant respectively.

Table 3: The knowledge of people towards NGOs (n=353)

S/N	OPTIONS	VARIABLES	FREQUENCY	PERCEPTAGES
1.	ARE YOU AWARE OF THE	YES	159	45.04%
	FUNCTIONS OF NGO?	YES	194	54.95%
		TOTAL	353	100%
2	IF YES, WHAT IS THE	HEALTHCARE		
2	SOURCE OF	PROFESSIONALS	4	1.1%
	INFORMATION?	HOSPITAL/SEMINARS	6	1.6%
		FRIENDS	190	53.8%
		FAMILIY MEMBERS	153	43.3%
		MEDIA	NIL	NIL
		OTHERS	NIL	NIL
		TOTAL	353	100%
3	DO NGOs GIVES OUT	YES	153	56.6%
	THEIR AID WITH BIAS?	NO	200	43.34%
		TOTAL	353	100%
4	IF YES, WHAT KIND OF	GENDER	54	15.29%
_	BIAS	AGE	199	56.37%
		RELIGION	100	28.32%
		OTHERS	NIL	NIL
		TOTAL	NIL	NIL

Table 2 presents the knowledge of people towards the NGOs. Majority of the respondents were aware of the NGOs functions (194/353) 54.95%. A total of (159/353) of the respondents 45.04% were not aware of the NGOs functions. Majority of respondents (190/353) 53.8% know the functions of the NGOs through friends. Furthermore, 43.3% (153/353) of the respondents knew the functions of NGOs through family members. A total of (4/353) 1.1% know the function of the NGOs through healthcare professionals. (6/353) 1.6% of the respondents get to know the NGOs functions through hospitals and seminars respectively.

Majority of the respondents (200/353) 56.6% did not agree that NGOs render their services with bias. Whereasa total of (153/353) 43.32% agreed that NGOs render their services with bias. Majority of the respondents (199/353) 56.37% indicated that NGOs shown bias in age group when rendering services. While (100/353) 28.32% of the respondents indicated that NGOs shows bias based religion. A total of (54/353) 15.29% of respondents have indicated bias and preferences of services rendering based on gender of beneficiaries.

Table 3: Misconceptions of People towards NGOs.

S/S	OPTIONS	VARIABLES	FREQUENCY	PERCENTAGE
1.	ARE THE NGOS	YES	255	72.23%
	OPERATING	NO	98	27.76%
	DOUBLE			
	STANDARD			
	ACTIVITIES?			
		TOTAL	353	100%
2	IF YES,	• Food are supplied to victims likewise insurgency	150	42.4%
	IDENFITY	These terrorist grow and never become extinct		
	THESE DOUBLE	• Despite attack to all many sector, NGOs are not	15	4.2%
	STANDARD	attack.		
	PRACTICE	• NGOS are to humanitarian aids, hence the	50	14.1%
		terrorist is also assisted.	100	28.3%
		NGOS benefited when ever blood shed occurs same as the terrorist.	20	5.6%
		NGOs were empowered by the Nigerian Money looters to instigate disharmony among people.	15	4.2%
		• The insurgents suffered period of hunger and relieved by the NGOs.	1	0.2%
		• Despite the huge number of NGOS the suffering of		
		the victims have not reduce.	3	0.8%
		TOTAL	353	100%

3	DO YOU BELIEF	YES	300	84.9%
	THAT THE NGOS	NO	53	15.1%
	HAVE			
	RELATIONSHIP			
	WITH THE			
	TERRORIST?			
		TOTAL	353	100%
4	DO YOU BELIEF	YES	194	56.4%
	THAT THE ACT F	NO	154	43.6%
	TERRORISMS			
	WILL NOT COME			
	TO AN END			
	UNTIL THE			
	NGOS LEAVE			
	THE COUNTRY?			
		TOTAL	353	100%

Table 3 present the misconceptions of people toward the NGOS. Majority of the respondents (255/353) 72.23% agreed that the NGOS operated double standard activities. Whereas (98/353) of the respondents did not agree that the NGOS operated double standard activities. In investigating if yes of the operating double standard activities, majority of the respondents (150/353) 42.4% identified that food items were supplied to the victims affected by Boko-Haram as well as the insurgents (Boko-Haram). 4.24% of the respondents says that these terrorists developed and grows and never become extinct. 14.16% says despites the attack on the various sectors, the NGOs were not attacked in any way. 28.32% identified that the NGOS benefited when the insurgents lunched attack. 4.42% of the respondents agreed that the NGOs were employed by the Nigerian money looters to instigates disharmony. 0.28% of the respondents identified that the insurgents suffered time of hunger and

was relieved by the NGOs. 0.84% says that despite the number of NGOs were many and starving was on the increased. From the table above in exploring the relationship of the NGOS with terrorist, majority of the respondents agreed that the NGOs have relationship with the terrorist organization. 15.01% did not agreed. 55.3% of the respondents believed that the act terrorism will not come to and end until the NGOS leave the country. 43.63% of the respondent did not agree to that. 41.07% viewed that the NGOs are less important since they help the terrorist group. 56.56% viewed that the NGOS should be told not to help the insurgents. 1.13% viewed that the federal government should be informed of the NGOS functions and activities. 1.13% said that the NGOS promotes and contributes to the success of the insurgents hence they should be banned from all operations.

Table 4: Consequences of Misconceptions of People towards NGOs Aids. (n=353).

S/N	OPTIONS	VARIABLES	FREQUNECY	PERCENTAGE
1	CAN NIGERIAN GOVERNMENT	YES	207	58.6%
	ALONE SHOULER THE NEEDS OF	NO	146	41.4%
	THE PEOPLE AFFECTED BY			
	INSURGENCY?			
		TOTAL	353	100%
2	DO YOU COLLECT RELIEF	YES	211	59.8%
	MATERIALS FROM THE NGOS?	NO	142	40.2
		TOTAL	353	100%
3	IF YES, WHICH OF THE	MONEY	80	22.7%
	FOLLOWING ITEMS WERE	FOOD ITEMS	180	50.9%
	SUPPLIED BY THE NGOS?	ANIMALS	15	4.2%
		CLOTHINGS	NIL	NIL
		TENT	50	14.1%
		TOILET FACILITIES	28	7.9%
		TOTAL	353	100%

Table 4 present the data collected on the consequences of the misconceptions towards the NGO aids. 58.64% agreed that the Nigerian government can shoulder the need of the victims affected by insurgency. 41.35% did not agree that Nigerian government can shoulder the need of the victims. 59.77% did collected relief materials from the NGOS, 40.22% did not collect relief materials from the NGOs. 22.66% were assisted with Cash relief, 50.99% were

assisted with food items, 4.24% were given Nonfood items like clothing as relief materials, 14.16% were being given other nonfood items Infection prevention items for latrines (Toilets) and constructs toilets to them respectively. 99.9% of the respondents used the relief items given to them respective.

IV. DISCUSSIONS OF FINDINGS

The result of this study indicates that most of the respondents are within the age of 31-<35 years (50.9%) most of whom are males206(58.4%)and have attended elementary school level of education 240 (67.6%). These findings established the dominance of those with elementary school level of education in the study area. The findings indicates that majority of the respondents have no knowledge of NGO functions 194 (54.95%) while 159 (45.04%) have knowledge of NGOs functions. This in essence implies that most of the respondents have no knowledge of the NGOs functions. In investigating the sources of knowledge of the NGO functions among the respondents, 190 (53.83%) have the knowledge of NGO function through friends whereas 153 (43.34%) knew the knowledge of NGO functions from family members. The result shows that, majority of the respondents were aware of the NGOs functions through friends. By this finding, there is limited awareness raising by the NGOs to the people on their functions. More so, there will be lots of horns and cons related to NGO functions among the people as thethere are less avenues for elaborate explanations to the people. This finding was in concurrence with that of Saljaba, et.al that majority of leaving in community where NGOs operate don't carry the community members along from project initiations. assessment, planning, Implementation, Monitoring and evaluation and closure. Based on this, the NGOs did not adopt and appreciate culture of inclusion, where communities of implementation have saying in the project design mainly for their benefits. Communication and awareness creations by the NGOs to the people is very key as the people's understanding on the project matters.

Natural and man-made disasters strike without warning, causing immense devastation and upheaval in affected areas. In such challenging times, Non-Governmental Organizations (NGOs) play a crucial role in providing humanitarian aid, support, and relief to affected communities. However, when NGOs lack awareness of the needs, culture, and dynamics of the communities they serve, it can result in dire consequences for both the NGOs themselves and the community members they aim to assist. One of the primary consequences of NGOs' lack of awareness is the inefficient allocation of resources. Without a thorough understanding of the specific needs and priorities of the affected community, NGOs may allocate resources improperly or disproportionately. This misalignment can lead to critical resources being wasted or misused, resulting in a lack of essential supplies reaching those who need them most urgently. Moreover, communities may have distinct cultural, religious, or dietary requirements that must be considered for effective resource allocation. Failing to recognize and address these unique needs can result in frustration, discontent, and a loss of trust between NGOs and community members.

The lack of awareness by NGOs regarding the local context and community dynamics can result in inadequate relief measures. Disasters impact

communities differently based on factors such as geography, socio-economic status, and cultural practices. By overlooking these nuances, NGOs may fail to deliver appropriate relief measures, leaving community members without the support they require. For instance, a relief program that fails to consider the specific health challenges or cultural sensitivities of the community may not effectively address the immediate needs and long-term recovery efforts. This can exacerbate suffering, hinder rehabilitation, and undermine the overall effectiveness of the NGO's intervention.

Cultural sensitivity is paramount when working in disaster-ridden locations. NGOs that lack awareness and sensitivity towards local customs, traditions, and beliefs risk inadvertently offending or alienating community members. Such insensitivity can result in a breakdown of trust and cooperation, hindering the NGO's ability to effectively engage with the community and implement sustainable solutions. Additionally, cultural insensitivity can lead to the imposition of foreign values and practices, further eroding the community's sense of ownership and self-determination in the recovery process.

NGOs have a responsibility to empower communities in their recovery journey. However, the lack of awareness of the unique strengths, skills, and capacities within a community can undermine empowerment efforts. By overlooking the potential for community engagement and participation, NGOs inadvertently reinforce dependency instead of fostering self-reliance. This can perpetuate a cycle of aid disempowerment, dependence, and long-term vulnerability among community members, hindering their ability to build resilience for future disasters. NGOs that neglect to build awareness among community members regarding disaster preparedness, risk reduction, and sustainable practices create a significant gap in longterm sustainability. Sustainable development requires the active involvement and ownership of the community. Without awareness and education on disaster management, climate change adaptation, and sustainable livelihoods, community members may remain illequipped to respond effectively to future challenges. Consequently, the long-term impact of the NGO's intervention may be severely limited, hindering the community's ability to recover, adapt, and thrive independently.

NGOs play a critical role in supporting disasterridden communities, but their effectiveness hinges on their awareness and understanding of the unique needs, dynamics, and aspirations of the communities they serve. Failure to develop this awareness can result in inefficient resource allocation, inadequate relief measures, cultural insensitivity, diminished community empowerment, and long-term sustainability challenges. To ensure impactful interventions, NGOs must prioritize community engagement, cultural sensitivity, and capacity-building efforts. By fostering awareness and empowering community members, NGOs can pave the way for more resilient and sustainable recoveries in disaster-ridden locations.

On the misconceptions of people to the NGOs aid to internally displaced in the study area. (72.23%) 255of the respondents agreed that NGOs operate double standard activities whereas (27.76%) 98 of the respondents did not agree that the NGOs operate double standard activities. This implies thatmost of the respondents agreed with are of the view that the NGOs operate double standard activities in the study area. In identifying the aspects or areas NGOs possessed double standard activities. (42.4%) 150 respondents agreed that NGOs were double standard as they supplied food to the victims affected by Boko-Haram and as well as the Insurgents group (Boko-Haram). 100 of the respondents (28.3%) went further to agreed that since NGOs are for humanity, therefore, they still assisted the Boko-Haram. 4.2% of the respondents accounting for 15 out of 353 agreed that due to the assistance by the NGOs the Boko-Haram expanded and never became extinct. 5.6% of the respondents agreed that the NGOs benefited from the insurgency and more especially when blood was shed occurred. Another 4.2% of the respondents (15) and agreed that NGOs were empowered by the Nigerian money looters in order to instigate disharmony among people. 0.2% of the respondents opined that the Boko-Haram Insurgents sufferedperiod of hunger which was relief by the NGOs. 0.8% of the respondents believed that despite the number of NGOs within the community, the sufferings of people did not reduce. This connotes that most of the respondents agree that the NGOs do operate double standard as they supply the victims affected by Boko-Haram and the Boko-Haram themselves.

Furthermore, 84.9% of the respondents (300)believed that the NGOs have relationship with the insurgents' group (Boko-Haram). Whereas 15.1% (53) of the respondents did not agree. In exploring the investigations whether terrorisms will come to and end in the country, 56.4% of the respondents agreed that terrorism will come to and end in the country. 43.6% of respondents do not agree that terrorism will come to an end in the country. This shows that most of respondents' belief that Boko-Haram will come to and end in the country. 41.1% of the respondents were of the view that the NGOs aid were less important since they also assist the terrorist group (Boko-Haram). 56.6% of the respondents believed the NGOs should be warned to deceased from assisting Boko-Haram. 1.1% of the respondents agreed that the federal government of Nigeria should be informed of the double standard functions of the NGOS. 1.1% of the respondents viewed that the NGOs contributed to the success of the Boko-Haram Insurgency hence the NGOs should be banned from the operation in the study area.

V. CONCLUSION AND RECOMMENDATION

The findings of this study discovered that a sizeable number of people in Gonidamgari Bolori 2 ward of Maiduguri Metropolitan council of Borno State have insufficient knowledge of NGOs functions and their modus operandi. It was also deduced from these studies that people

have less or no idea of how NGOs function and the principles backing the NGOs' activities. People greatly misconceived NGOs from different angles of views in terms of operations. The implications of these studies to nursing are that Misconceptions can affect both perceptions and nursing professionals and the delivery of healthcare services. Misconceptions about NGOs may erode trust in healthcare providers, including nurses. When people hold misconceptions about the motives or competence of NGOs, they may extend those perceptions to healthcare professionals working with these organizations. This can lead to a lack of trust in nurses, making it challenging to establish effective therapeutic relationships and collaborate on patient care. Building trust is crucial in nursing, as it influences patients' willingness to share important health information and adhere to treatment plans. Misconceptions about NGOs can affect access to healthcare services. If people perceive NGOs as inefficient or unreliable, they may be hesitant to seek care or follow through with recommended treatments. This can result in delayed or inadequate healthcare utilization, leading to worsened health outcomes. Nurses working in NGOs may encounter difficulties in reaching out to communities and delivering essential healthcare services, exacerbating health disparities, and preventing early interventions.

Misconceptions about NGOs may also impact the perception of cultural sensitivity and respect in nursing practice. NGOs often work in diverse communities with different cultural backgrounds, beliefs, and practices. Misunderstandings about NGOs may give rise to concerns that healthcare providers, including nurses, do not respect or understand local cultures and traditions. Consequently, this can hinder effective communication, adherence to treatment plans, and patient satisfaction. Nurses must be sensitive to the cultural context of the communities they serve to ensure patient-centered care. Perceptions of NGOs can influence the recruitment and retention of nurses in underserved communities. If NGOs are perceived negatively or inaccurately, nurses may be reluctant to join or remain in organizations that are associated with those misconceptions. This can lead to a shortage of nursing professionals in areas that need their expertise the most, further exacerbating healthcare disparities. Addressing misconceptions and promoting a positive image of NGOs is essential to attract and retain competent nursing staff in community-based healthcare settings.

Misconceptions about NGOs may hinder collaborative efforts between nurses and NGOs. Nurses often work closely with NGOs to deliver healthcare services and However. address community health needs. misconceptions prevail, it can create barriers to effective collaboration. Lack of understanding and trust between nursing professionals and NGOs may result in fragmented healthcare delivery, duplication of efforts, and inefficient use of resources. Building mutual understanding and fostering collaboration between nurses and NGOs are crucial for improving healthcare outcomes and community well-being. Misconceptions about NGOs in the community can have significant implications for nursing professionals and the delivery of healthcare services. Addressing these misconceptions is vital to ensure trust, access to healthcare, cultural sensitivity, recruitment and retention of nurses, and effective collaboration between nurses and NGOs. By promoting accurate information, fostering understanding, and engaging in community education, nurses can play a crucial role in dispelling misconceptions and facilitating positive relationships between communities and NGOs, ultimately improving healthcare outcomes for all. Therefore, the following recommendations are madearound community education and awareness, it will be very important to conduct community education programs to provide accurate information about NGOs, their roles, and the services they provide. This can be done through community meetings, workshops, and awareness campaigns. Collaborate with local leaders, community organizations, and healthcare professionals to deliver educational sessions that address misconceptions and provide insights into the positive impact of NGOs in healthcare delivery.

These misconceptions can be eliminated through transparent communications. the establishment of transparent communication channels between NGOs, nursing professionals, and the community will be beneficial in this regard. This can be achieved through regular community meetings, open forums, and the use of local media outlets to disseminate information. More So, Utilizations of various communication methods, including social media, websites, and newsletters, to share success stories, testimonials, and the outcomes of NGO interventions in the community.

Moreover, Cultural Sensitivity and Community Involvement is another avenue to employ in dealing with misconceptions in Gonidamgari Bolori 2 of Maiduguri Metropolitan Council of Borno state. It is important to Prioritize cultural sensitivity in nursing practice and NGO interventions. Encourage nurses and NGOs to actively engage with the community, respect local customs and traditions, and involve community members in the planning and implementation of healthcare programs. Seeking for input from community members residing at Gonidamgari Bolori 2 and to understand their specific needs, preferences, and concerns. This will help tailor healthcare services to the community's cultural context and increase acceptance and participation. For visible and impactful intervention, the NGO interventions should be visible and measurable within the community. This can be achieved by regularly evaluating and documenting the outcomes of healthcare programs, highlighting improvements in health indicators, and sharing success stories. Engage community members as partners in the evaluation process, seeking their input and feedback to ensure that interventions are meeting their needs effectively. Another area is the professional development training, provide professional development and training programs for opportunities nursing professionals working in NGOs. This should include cultural competency training, effective communication skills, and community engagement strategies. Foster a supportive environment that encourages continuous learning and provides resources for nurses to enhance their

knowledge and skills in delivering culturally sensitive healthcare.

Furthermore, advocacy and public relations is also very crucial in the overcoming misconceptions towards NGOs aid to internally displaced persons in Gonidamgari Bolori 2, engaging in advocacy efforts to raise awareness about the positive contributions of NGOs and nursing professionals in the community. This can involve collaborating with local media, organizing public events, and showcasing success stories to challenge misconceptions. And finally, developing public relations campaigns that highlight the collaborative efforts between NGOs and nursing professionals, emphasizing the positive impact on community health and well-being.

By implementing these recommendations, misconceptions surrounding NGOs in Gonidamgari Bolori 2 community can be addressed, leading to improved understanding, trust, and collaboration between NGOs, nursing professionals, and the community. This will ultimately contribute to more effective healthcare delivery and better health outcomes for all community members.

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