



Khadjetou and Aicha receive treatment in a UNICEF-supported in-patient facility for severely wasted children with medical complications in Maradi.

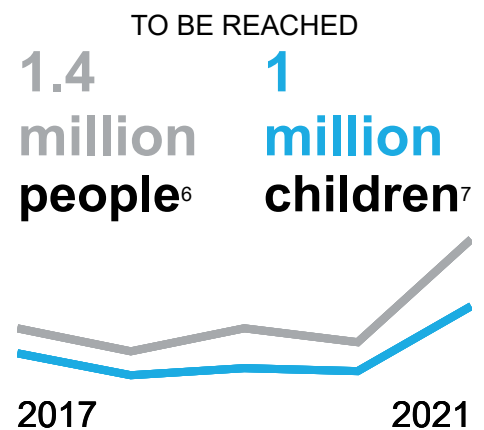
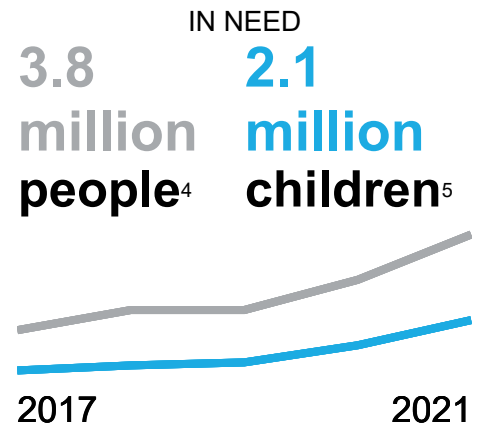
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Humanitarian Action for Children

Niger

HIGHLIGHTS

- Niger is facing a combination of quick onset and protracted humanitarian crises that have been exacerbated by the impacts of the coronavirus disease 2019 (COVID-19) pandemic. Some 3.8 million people, including 2.1 million children, will need humanitarian assistance in 2021.¹
- Insecurity is leading to population displacements and access to people in need is a challenge. The country is also affected by exceptionally heavy flooding; the number of children at risk of malnutrition is on the rise; and access to basic services remains limited.
- UNICEF will provide a timely, coordinated and multi-sectoral² humanitarian response in regions facing recurrent population displacement³ and other crises; and support the implementation of the Government's national COVID-19 response plan, focusing on the needs of children and women.
- UNICEF requires US\$ 102.2 million to provide life-saving, multi-sectoral assistance to vulnerable children and women affected by multiple humanitarian crises in Niger.



KEY PLANNED TARGETS



457,200

children admitted for treatment for severe acute malnutrition



120,000

children vaccinated against measles



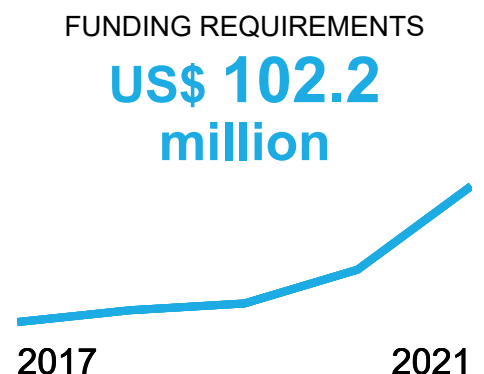
3,600

women and children accessing gender-based violence risk mitigation/prevention/response



125,000

children receiving individual learning materials



HUMANITARIAN SITUATION AND NEEDS

Niger is facing a prolonged, multi-dimensional crisis, including recurring armed conflict, displacement, malnutrition, epidemics and climate-related disasters, including floods. The context in Niger is also characterized by deep structural challenges and the socio-economic impacts of COVID-19, and the presidential, legislative and municipal elections. In 2021, 3.8 million people, including 2.1 million children, will need humanitarian assistance in Niger.⁸ Many of those in need are located in hard-to-reach areas with limited humanitarian access, which remains a major bottleneck to the delivery of assistance.⁹

Persistent hostilities between armed groups along the borders with Burkina Faso, Libya, Mali and Nigeria have led to significant displacements. The growing number of internally displaced persons, refugees and migrants in Niger is also increasing the vulnerability of host communities. Attacks on civilians in the Lake Chad region have prevented nearly 266,000 people in Diffa from returning home.¹⁰ Insecurity along the borders with Burkina Faso and Mali have exacerbated needs in Tillabéry and Tahoua, where over 195,000 people are displaced. In addition, over 64,000 people who have fled inter-communal violence in northern Nigeria are currently living in Maradi region.¹¹

COVID-19 has placed additional strain on the health system, resulting in delays in life-saving vaccination campaigns, which may lead to rising cases of measles and polio. Exceptionally heavy flooding affecting over 632,608 people¹² has highlighted the country's vulnerability to climate-related threats and is seriously undermining food security, nutrition and access to water. In 2021, an estimated 2.7 million people will experience food insecurity;¹³ an estimated 1.3 million children under 5 years will suffer from malnutrition,¹⁴ including over 457,200 children who will suffer from severe acute malnutrition (SAM); and 1.1 million people will require access to emergency Water, Sanitation and Hygiene (WASH) services.¹⁵ COVID-19-related school closures have affected 3.7 million students, and nearly 400,000 children may remain out of school due to insecurity or damage caused by flooding.¹⁶

As humanitarian needs continue to rise in 2021, especially in regions bordering Burkina Faso, Mali and Nigeria, in part due to the socio-economic impacts of COVID-19, household coping mechanisms will be further stretched. In this context of acute vulnerabilities, girls are at risk of abduction, forced marriage and sexual exploitation, and boys are at risk of being economically exploited for work or being recruited into armed groups. Children without appropriate care, including children on the move and children living in the street, are particularly vulnerable.

SECTOR NEEDS



Nutrition

2.2 million people need nutrition assistance¹⁷



Water, sanitation and hygiene

1.9 million people lack access to safe water and sanitation¹⁸



Child protection, GBViE and PSEA

678,107 children need protection services^{19,20}



Education

555,000 children need access to education²¹

STORY FROM THE FIELD



Dr. Kadri working at the in-patient treatment facility in Maradi region where UNICEF supports SAM treatment.

"I thought I would lose my daughter. But when I saw how health care workers took care of us, I was hopeful. After three days of treatment, Aicha started to eat and play," says Khadjetou, the mother of a child suffering from SAM in Maradi.

Malnutrition is a major threat to children's health and development in the Niger. More than 4 in 10 children under 5 years are stunted, robbing them of developing their full potential. Since 2014, Dr. Souleyman Kadri has been working as a vocational pediatrician in the UNICEF-supported in-patient facility for severely wasted children with medical complications in Maradi.

[Read more about this story here](#)

HUMANITARIAN STRATEGY

In 2021, UNICEF will work with national and international actors to strengthen health and nutrition systems across the Niger and increase national capacities to reduce risks and respond to cyclical and chronic emergencies.²² Key activities will include preventing acute malnutrition, treating SAM, supporting vaccination campaigns and facilitating cholera preparedness and response. The WASH-in-Nutrition strategy will be expanded so that nutrition services, including early detection, referral and treatment, are complemented by WASH interventions in health facilities and communities.

UNICEF will continue to respond to acute emergencies, including new population movements.²³ Working through the Rapid Response Mechanism, UNICEF and partners will increase in-country response capacities, provide technical leadership, centralize the procurement of non-food items and scale up humanitarian cash transfers. UNICEF will also prioritize efforts to access vulnerable communities in insecure and hard-to-reach areas; facilitate preparedness and contingency planning; integrate humanitarian action and development programming; and support durable solutions.

Across the country, UNICEF will focus on increasing access to and the quality of inclusive education for crisis-affected school-aged children, including migrant and displaced children. Communities affected by population movement and natural disasters will gain access to safe water and sanitation facilities through life-saving and transition actions, and crisis-affected children will receive comprehensive child protection services. UNICEF has also identified key actions²⁴ for addressing gender-based violence in emergencies, and will implement a plan for preventing sexual exploitation and abuse.

UNICEF will continue to be among the first responders to the COVID-19 outbreak, supporting the Ministry of Health in the areas of risk communication and community engagement, infection prevention and control, supply and logistics, epidemiological surveillance and health care. The Government will receive technical and financial support to ensure the continuity of social services, scale up the national adaptive safety net programme to mitigate the socio-economic impacts of the pandemic on the most vulnerable, and render the social protection system more shock responsive and sensitive to children's nutrition and protection needs. Throughout the response, UNICEF will prioritize its cross-sectoral commitments, including gender equality, disability inclusion, early childhood development and adolescent development and participation.

UNICEF's operations in the Niger are led by four field offices that enable wide coverage and quality programming across the country. UNICEF leads the WASH, education and nutrition clusters/sectors and the child protection area of responsibility at the national and decentralized levels and actively participates in the multi-sectoral cash working group.

Progress against the 2020 programme targets is available in the humanitarian situation reports: <https://www.unicef.org/appeals/niger/situation-reports>

2021 PROGRAMME TARGETS



Nutrition

- **457,200** children aged 6 to 59 months with severe acute malnutrition admitted for treatment



Health

- **120,000** children aged 6 to 59 months vaccinated against measles
- **85,000** children and women accessing primary health care in UNICEF-supported facilities
- **500** health care providers trained on detecting, referral and appropriate management of COVID-19 cases



Water, sanitation and hygiene²⁵

- **378,097** people accessing a sufficient quantity of safe water for drinking, cooking and personal hygiene
- **296,671** people accessing appropriately designed and managed latrines
- **788,116** people affected by an outbreak of water-borne disease accessing hygiene kits and sensitization activities



Child protection, GBViE and PSEA

- **152,503** children and caregivers accessing mental health and psychosocial support
- **3,600** women, girls and boys accessing gender-based violence risk mitigation, prevention or response interventions
- **1,140** unaccompanied and separated children reunified with their primary caregiver or provided with family-based care/alternative care services²⁶
- **283,596** children affected by the crisis benefiting from sensitization²⁷



Education²⁸

- **125,000** children accessing formal or non-formal education, including early learning
- **125,000** children receiving individual learning materials
- **5,000** schools implementing safe school protocols (infection prevention and control)



Social protection and cash transfers

- **5,000** households reached with humanitarian cash transfers across sectors
- **75,779** households reached with cash transfers through an existing government system where UNICEF provided technical assistance and funding



C4D, community engagement and AAP

- **12,000,000** people reached with messages on access to services²⁹
- **3,000,000** people participating in engagement actions for social and behavioural change
- **1,300,000** people who shared their concerns and asked questions/clarifications to address their needs through established feedback mechanisms



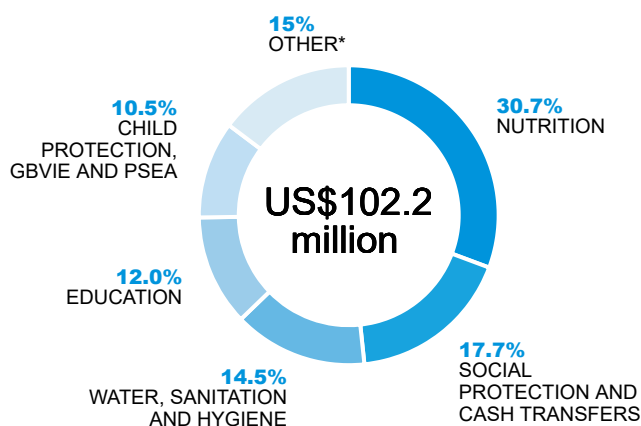
Non-food items

- **171,500** displaced persons and people affected by natural disasters provided with non-food items kits³⁰

FUNDING REQUIREMENTS IN 2021

UNICEF requires US\$102.2 million to provide life-saving, multi-sectoral assistance to vulnerable children and women affected by violence and trauma due to the multitude of humanitarian crises in Niger. Without sufficient funding, UNICEF will be unable to reach vulnerable children suffering from conflict-related displacements or natural disasters with the critical multi-sectoral assistance and protection they need. The 2021 appeal is significantly higher than the revised 2020 requirement of US\$62.2 million because UNICEF is expecting to cover protracted and new humanitarian needs, including increasing population movement and the worsening impacts of floods. The 2021 appeal also reflects UNICEF's contribution to the implementation of the Government's COVID-19 response plan. Requirements for health, communication for development and social protection services have increased significantly as a result of increase COVID-19-related needs. Niger also requires additional support for nutrition, WASH, child protection and the Rapid Response Mechanism due to the rising humanitarian needs and the impacts of COVID-19.

This funding – particularly flexible or softly earmarked funds – will enable UNICEF to provide life-saving services and non-food items to the most vulnerable children and families in the Niger, prepare for future emergencies, and act quickly and respond strategically where the needs are greatest.



*This includes costs from other sectors/interventions : Non-food items (7.7%), C4D, community engagement and AAP (3.0%), Health (2.5%), Cluster coordination (1.6%).

Sector	2021 requirements (US\$)
Nutrition	31,364,724
Health	2,545,000 ³¹
Water, sanitation and hygiene	14,783,338
Child protection, GBVIE and PSEA	10,733,010 ³²
Education	12,240,170 ³³
Social protection and cash transfers	18,046,061 ³⁴
C4D, community engagement and AAP	3,100,000
Cluster coordination	1,601,925
Non-food items	7,821,489
Total	102,235,717

Who to contact for further information:

Ilaria Carnevali
Representative a.i., Niger
T +227 80066001
icarnevali@unicef.org

Manuel Fontaine
Director, Office of Emergency Programmes (EMOPS)
T +1 212 326 7163
mfontaine@unicef.org

June Kunugi
Director, Public Partnership Division (PPD)
T +1 212 326 7118
jkunugi@unicef.org

ENDNOTES

1. Office for the Coordination of Humanitarian Affairs, 'Niger: 2021 Humanitarian Response Plan', OCHA, February 2021.
2. This includes social protection, non-food items, nutrition, health, WASH, communication for development, child protection and education services.
3. The most affected regions are Diffa, Maradi, Tillabéry and Tahoua. Nevertheless, the entire country will benefit from a humanitarian response based on alerts and needs, depending on the type of crisis.
4. Data source are the Humanitarian Needs Overview from 2017 to 2021. 'Niger: 2021 Humanitarian Response plan.'
5. Ibid.
6. This figure was calculated using 457,200 children between 6 months and 5 years to be reached by the nutrition sector; 440,770 children older than 5 years to be reached by the child protection sector through the sensitization activities; 15,762 children under 6 months to be reached by the WASH sector; 331,009 adults to be reached by the WASH sector; and 171,500 people to be reached with non-food item assistance, not included in the counting of the target for the other sectors. This includes 722,283 women and 59,482 people with disabilities. UNICEF is committed to needs-based targeting, which means covering the unmet needs of children; and will serve as the provider of last resort where it has cluster coordination responsibilities.
7. This figure was calculated using 457,200 children to be reached by the nutrition sector; 440,770 children to be reached by the sensitization activities of the child protection sector; 15,762 children under 6 months to be reached by the WASH sector; and 99,470 children to be reached with non-food item assistance, not included in the counting of the target for the other sectors. This includes 516,733 girls and 39,260 children with disabilities.
8. 'Niger: 2021 Humanitarian Response Plan', OCHA, February 2021. Disaggregated data: 3.8 million people in need include: 1.94 million women of which 81,396 with disabilities, and 1.86 million men, of which 78,204 with disabilities. About 2.1 million children in need include 1,065,900 girls of which 41,681 with disabilities, and 1,024,100 boys, of which 39,304 with disabilities.
9. Access constraints negatively impact the monitoring of the situation, the assessment of needs and confirmation of alerts, and the delivery of assistance.
10. This includes 126,543 refugees, 34,324 returnees, 102,726 internally displaced persons, 2,103 asylum seekers; 55% children, 79% women and children (Source: UNHCR, DREC-MR, September 2020). United Nations High Commissioner for Refugees (UNHCR) and Government of Niger, September 2020.
11. Ibid.
12. Niger Ministère des Affaires Humanitaires et Gestion des Catastrophes, September 2020.
13. Niger Food Security Cluster, October 2020.
14. UNICEF and World Food Programme (WFP) joint estimates on Global Acute Malnutrition and expected SAM cases due to food security deterioration and the socio-economic impacts of COVID-19, May 2020.
15. Niger has one of the highest mortality rate due to unsafe WASH services: 70/100.000, while the regional average for Africa is 45/100.000, World Health Organization, 'World Health Statistics 2019: Monitoring health for the SDGs', WHO, 2019.
16. Niger Education Cluster, October 2020.
17. 'Niger: 2021 Humanitarian Response Plan'.
18. Ibid.
19. Due to space constraints, the following acronyms appear in the appeal: GBViE (gender-based violence in emergencies); PSEA (prevention of sexual exploitation and abuse); C4D (communication for development); and AAP (accountability to affected populations).
20. 'Niger: 2021 Humanitarian Response Plan'.
21. Ibid.
22. Including flooding, malnutrition and disease outbreaks.
23. In Diffa, Maradi and along the borders with Mali and Burkina Faso.
24. This includes capacity building of community-based child protection mechanisms, establishing referral pathways to One-stop Social Welfare Shops offering quality interventions and other services.
25. The remaining people in need of access to WASH services will be covered by other cluster members, the Government and development programme actors.
26. This includes children associated with armed forces and armed groups.
27. Sensitization is conducted through community-based mechanisms (including youth clubs and peer educators) and covers themes such as child protection rights, prevention of recruitment and child marriage, the importance of birth registration, prevention of child abuse such as child labour and violence in schools and communities, gender-based violence, the importance of education, COVID-19 mitigation measures, the risk of flooding (drowning, places not to go/play, etc) and mine risk education.
28. The same 125,000 children targeted for accessing formal/non-formal education are also targeted to receive individual learning materials.
29. The population targeted is higher than the total number of people/children to be reached because the target includes mass media outreach.
30. The distribution of non-food items is done through the Rapid Response Mechanism and other partners/mechanisms.
31. The beneficiary numbers have been increased in order to reflect the increased reach of the planned activities and to align with the HRP.
32. The increase in budget is in part due to the inclusion of PSEA activities that will benefit only a small number of direct beneficiaries but a large number of indirect beneficiaries due to heightened awareness and competencies. Furthermore, while the sensitization target was slightly reduced, the target for psychosocial support has tripled which is a cost-intensive intervention and which now accounts for a considerable share of the overall CP budget.
33. The budget has been revised to reflect the difference in costs per beneficiary by intervention type.
34. The target for humanitarian cash transfers was increased to align with the updated HRP, which takes into account the deteriorating humanitarian situation. The funding requirements for social protection activities increased to address the additional socio-economic needs due to the COVID-19 pandemic, and now includes the carry-over of the national emergency COVID-19 cash transfer distribution (which was delayed in 2020 due to elections).