

## UNICEF Humanitarian Action 2010

# NIGER

### SITUATION UPDATE

Combined with chronic food insecurity and high levels of maternal and child malnutrition, common to the entire Sahel region, Niger is in the grip of a severe food and nutrition crisis, which will continue at least until the end of the hunger season, in October. Even before the current crisis, child malnutrition was high. The June 2010 Child Survival and Nutrition Survey found the national prevalence of global acute malnutrition (GAM) in children under five at 16.7 per cent, and of severe acute malnutrition (SAM) at 3.2 per cent, both above the emergency thresholds (15 per cent for GAM and 2 per cent for SAM). Based on these rates, the Nutrition Cluster estimated the caseload to be 384,000 cases of SAM in 2010. Displacements of food insecure families towards cities or neighbouring countries are starting to affect school attendance. Some schools in southern districts are reported to have been closed down due to a lack of pupils.

Recent data shows that 7.1 million people (48 per cent of the national population) are food insecure, of which 3.3 million are severely affected.<sup>1</sup> About 40 per cent of agricultural villages had production losses of over 50 per cent. The gap in cereal production is at least 410,000 metric tons.<sup>2</sup> The national livestock is threatened by the significant fodder deficit affecting pastoral and agro-pastoral areas, leading to massive and premature transhumance to the south. On average, food prices are higher than in the period before 2009, and the rising trend in food insecure areas is similar to that observed in 2005. Moreover, displaced families now face difficulties in urban and semi-urban cities in terms of lodging conditions and access to basic social services. During the 2010 epidemic season, 2,714 cases of meningitis were registered, with 223 deaths, and an average rate of lethality of eight per cent.

### KEY RESULTS FOR CHILDREN

As of 20 June, more than 114,000 severely malnourished children aged six to 59 months have been admitted for treatment in Therapeutic Feeding Centres since the beginning of the year, of which almost 14,000 had to be treated inpatient due to medical complications and/or lack of appetite. The number of weekly admissions increased from 5,000 in mid-April to 8,000 by mid-May. These figures are double the planned figures for 2010. The response scale up was made possible with an adequate supply of ready-to-use therapeutic food (RUTF) and essential drugs, increased hospitalisation capacity and availability of an extensive network of NGO partners. The first phase of the blanket feeding (free distribution of Corn Soya Blend, in addition to sugar and oil provided by WFP) has been launched targeting 295,000 children between six and 23 months of age. For the first time UNICEF is linking the blanket feeding operation with active screening of children for acute malnutrition. A second phase is due to start in July targeting a further 205,000 children, bringing the total to 500,000 children, which is double the 250,000 originally planned.

The Regional Health Divisions and NGOs involved in the nutrition crisis are collecting technical information for further construction and/or rehabilitation of water and sanitation facilities to be carried out in health centres, as well as appropriate WASH packages for vulnerable communities. Contingency and communication plans for cholera and diarrheal diseases have been validated which plan the positioning of supplies in affected districts, the dissemination of messages and water treatment. Some 513,000 people in the five districts in epidemic districts were vaccinated against meningitis (compared to the 1.3 million planned for 2010). Thanks to the 'building back better' of five primary schools and one middle school, 3,500 children from the Agadez region affected by floods and conflict in 2009 were able to go back to school.

### INTER-AGENCY COLLABORATION

UNICEF is Cluster lead for Nutrition, WASH and Child Protection. The Nutrition Cluster contributed to the government response plan to the nutrition crisis, based on a consensus reached in the Cluster meetings. Through a working group, the Cluster revised the strategic approach to include the use of lipid-based supplements for prevention and treatment of moderate malnutrition. A joint Government/ UN agencies vulnerable assessment survey was conducted in April 2010.

### FUNDING REQUIREMENTS

On 4 April, the UN System launched an Emergency Humanitarian Action Plan (EHAP) calling for US\$190 million in funding, of which UNICEF is requesting US\$22 million to tackle child malnutrition and US\$1.4 million for WASH-related

<sup>1</sup> April 2010 Vulnerability Survey SAP/ INS/ WFP/FAO/UNICEF/EU/ FEWS-NET/ UNDP.

<sup>2</sup> USAID's Famine Early Warning Systems Network (FEWS); Ministry of agricultural development, February 2010.

interventions. In June, UNICEF revised the needs in the mid-year CAP. The below HAR mid-year review requirements includes the ones presented as part of the EHAP mid-year review<sup>3</sup>.

Funds received against the HAR 2010 (US\$)						
Sector	Original 2010 HAR requirements	Revised HAR requirements	Funds received	Funding gap	Additional funds utilized in 2010	Final funding gap
Health	2,475,000	2,475,000	0	2,475,000	0	2,475,000
Nutrition	14,723,200	32,175,292	14,353,786	17,821,506	1,426,009	16,395,497
Water, Sanitation and Hygiene	800,000	1,391,000	0	1,391,000	0	1,391,000
Education	700,000	700,000	0	700,000	0	700,000
Child Protection	550,000	1,994,000	0	1,994,000	0	1,994,000
<b>Total*</b>	<b>19,248,200</b>	<b>38,735,292</b>	<b>14,353,786</b>	<b>24,381,506</b>	<b>1,426,009</b>	<b>22,955,497</b>

\*The total includes a maximum recovery rate of 7%. The actual recovery rate on contributions will be calculated in accordance with UNICEF Executive Board Decision 2006/7 dated 9 June 2006.

### EMERGENCY PROGRAMME PRIORITIES: JULY – DECEMBER 2010

#### Health

- In the event of a cholera epidemic, affected children and women will receive information on the prevention of cholera and more than 15,000 cases will be treated.
- Ten thousand women and children displaced by floods or by the nutritional crisis will have their medical needs met through sufficient supply and pre-placement of a contingency stock.
- As part of a pilot project, 400,000 people will be vaccinated against Meningitis with the new conjugated MenA vaccine before the start of the new season in December.
- Prevention and treatment of the three killer diseases (diarrhoea, IRA, malaria) will be improved among 1,400,000 children, to prevent their nutritional status from deteriorating.

#### Nutrition

- Identification of cases of acute malnutrition will be improved, and access ensured to adequate case management. UNICEF will continue to strengthen the national programme for the management of severe acute malnutrition. With the World Food Programme, UNICEF will work on scaling up management of moderate malnutrition.
- The implementation of blanket feeding for 924,000 children aged 6 to 23 months in most vulnerable areas will continue.

#### Water, Sanitation and Hygiene

- All intensive nutritional rehabilitation centres (CRENIs) will be ensured access to clean water and provided hygiene and sanitation kits. Hand washing facilities will be installed in all centres for outpatient nutritional rehabilitation for severe malnutrition.
- Sanitation and water supply facilities will be facilitated in CRENIs in Zinder, Maradi, Tahoua and Diffa.

#### Education

- In the event of floods or other disasters in 2010, disruption of schooling will be minimised by supporting schools that accept displaced children, through measures such as providing school kits and materials to build temporary learning spaces.

#### Child Protection

- Awareness will be raised among the displaced population on risks of exploitation, abuse and violence through local radio, dramas and dialogue.
- Child victims of abuse, street and separated children will be provided with adequate support (psychosocial, medical and legal), as well as non-food items.
- The knowledge and capacity of the new Child Protection Cluster will be increased to effectively address and coordinate emerging child protection issues, including how to address the food security crisis within the child protection strategy framework.

<sup>3</sup> At the time of dissemination of the mid-year review of the HAR, the UNICEF requirement of the Niger Emergency Humanitarian Response Plan had increased to US\$ 57,983,414.