

**Monthly Humanitarian Situation Report, UNICEF Niger**  
*Reporting on December 2012*

**Highlights**

- 1) On 13 December 2012, the National Mechanism for the Prevention and Management of Disasters and Food Crises (DNPGCCA) released preliminary data of the vulnerability analysis carried out in September 2012. At least 10 Departments will be moderately at risk of food insecurity with 185 zones at risk covering 3,243 villages with an estimated 2.4 million people.
- 2) As of 30 December 2012, 368,746 children under-five have been admitted to therapeutic feeding centres for severe acute malnutrition (SAM), while another 462,306 have been receiving treatment for moderate acute malnutrition (MAM).
- 3) As of end December, a cumulative total of 5,285 cholera cases and 110 deaths since the beginning of the year with a case fatality rate of 2.08 percent have been reported against 2,480 cases reported at the same period in 2011. Since week 50, zero cases have been reported. UNICEF partners continue to monitor the situation in Tillabéri and Tahoua regions.
- 4) As of 31 December 2012, the preliminary figures released by the UNHCR Level 2 registration, indicate a total number of 50,000 officially recorded refugees in camps and other spontaneous sites in Niger.
- 5) As part of the CO overall preparedness and within the framework of Mali+3, UNHCR in collaboration with UNICEF and WPF elaborated a concept note on addressing urgent operational challenges for the short (1-3 months) and medium-term (up to 8 months) to ensure continuity of service delivery in refugee camps.



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*A girl collects water from a bladder installed by UNICEF at the Seno site in Niamey, Niger, 2012. Nearly 750 families, living in areas near the Niger River and other high risk areas, have recently been relocated by the Government to the site as fears grew over rising river levels. UNICEF and partners are providing assistance to meet the immediate needs of the families.*

## **Situation Overview & Humanitarian Needs**

- Due to favourable agro-climatic conditions, preliminary 2012/13 crop estimates indicate that production levels exceeded expectations, and that overall, despite production losses estimated at 27,200 MT consequent to floods, food outlooks for Niger in 2013 are good. However, on 13 December 2012, the National Mechanism for the Prevention and Management of Disasters and Food Crises (DNPGCCA) released preliminary data of the vulnerability analysis<sup>1</sup> carried out in September 2012. At least 10 Departments will be moderately at risk of food insecurity with 185 zones at risk covering 3,243 villages for an estimated 2.4 million people. Even though the overall food outlook for 2013 is good, a high prevalence and heavy caseload of acute malnutrition (290,181) is expected because food security does not immediately translate into adequate nutrition. Malnutrition is still high and remains a concern and, in addition to the treatment of SAM, the underlying causes of malnutrition will need to be addressed.
- Within the framework of the Mali+3 contingency plan, UNICEF initiated discussions with ICRC and our regular partners for Standby Agreements (SBA). Given that UNICEF already has PCAs with most of these partners, they have indicated their availability to continue should remote programming be activated.
- As part of the continued response to the overflowing of the Komadougou River which caused much damage in the Diffa region, UNICEF released education kits to ensure 594 children (including 285 girls) continue their education. To cover the needs in the hygiene sector, funding amounting to over US\$22,000.00 was disbursed to the regional health authorities for the construction of 55 latrines and sensitization activities. Another US\$12,000.00 was allocated to the regional hydraulics department to dig 3 boreholes for which UNICEF provided manual pumps amounting to over US\$5,000.00.
- Within the framework of the Letter of Understanding (LoU) between UNICEF and UNHCR stipulating that UNICEF will support education for refugees, UNICEF signed PCAs with Oxfam-UK, Plan International and Catholic Relief Services to offer education for children in the camps of Abala, Mangaizé and Tabareybarey (Ayorou), as well as at the spontaneous sites of Kizamou, Miel and Tiguizéfane.
- In 2012, the creation of the Emergency Unit reinforced inter-agency collaboration, namely with OCHA. This has facilitated a systematic and better flow of information which resulted in optimized Cluster and inter-cluster coordination. Furthermore, the Cluster system provided a solid platform for overall coordination and a framework for partnership amongst government, UN Agencies, NGOs and donors.
- UNICEF's strong operational capacity allowed for a rapid response to the multiple crises the country faced throughout the year. Prepositioning of emergency buffer stocks was crucial for speedy response and timely delivery of humanitarian assistance to more than 12,000 households in the regions of Diffa, Dosso, Niamey and Tillabéri and to 13,000 refugees in camps and spontaneous sites. In addition, the CO Emergency Task Force (ETF) ensured effective internal coordination for emergency response leading to an integrated approach to encompass nutrition, health, WASH, education and child protection interventions.

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<sup>1</sup> Source : Résultats des Rencontres Techniques du DNPGCCA sur l'évaluation de la situation alimentaire nutritionnelle et pastorale, Maradi 23 et 24 novembre 2012

<b>&gt; Estimated Affected Population 2012</b> (Estimates based on the Household Survey on Vulnerability to Food Insecurity, (DNGPC-SAP, November 2011))			
	<b>Total</b>	<b>Male</b>	<b>Female</b>
Total Affected Population	6,421,934	3,146,748	3,275,186
Children Affected (Under 18) as a proportion of Total Affected Population	3,660,502	1,793,646	1,866,856
Children 6 to 59 months	1,083,187	563,933	519,254
Children 6 to 23 months	712,888	349,315	363,573
Pregnant women treated for MAM	97,067	--	97,067
Estimated annual caseload of SAM (severe acute malnutrition in under-5 children)	393,737	219,208	174,529
Estimated annual caseload of MAM (moderate acute malnutrition in under-5 children)	689,450	344,725	344,725
Total Displaced Population (refugees and returnees from Mali)	65,012 <sup>2</sup>	29,255	35, 757

### **Inter-Agency Collaboration and Partnerships**

- In 2012, thanks to an early warning, the emergency response started on time, mobilized a substantive amount of resources and progressed as planned. Coordination amongst government and humanitarian partners has been effective. The cluster system in place was fully operational. UN agencies worked closely. Relief activities were in full motion on the different fronts mentioned above. Although the main thrust was on food security and nutrition, an integrated approach was developed to encompass health, WASH, education and child protection interventions, in line with what was recommended by the WCARO real time independent assessment (RTIA) in July.
- The Cluster System continued to provide a solid platform for sectorial coordination amongst government, UN Agencies, NGOs and donors, through regular meetings and working groups, including at sub-national level. A large number of national and international NGOs participated in the response and regularly attended cluster meetings, as well as monthly information meetings and field missions organized by OCHA. Extensive sharing of information was ensured through a constant flow of emails, field reports and information bulletins.
- Within this overall coordination and partnership framework, UNICEF maintained a day-to-day collaboration with WFP and FAO on nutrition and food security, with WHO on health-related issues, with UNHCR on refugee issues, with UNDP on early recovery and resilience and with OCHA in coordination and information management. Cooperation agreements with NGOs, an essential part of the delivery of UNICEF's humanitarian assistance in Niger, complemented what was directly executed with government partners.
- Furthermore, UNICEF, FAO, WFP and UN-WOMEN elaborated and signed a joint strategy that will innovate school feeding interventions. This strategy will remove hindering factors preventing the schooling of girls, in particular in rural areas. The UNCT also elaborated a joint concept note on strengthening resilience in Niger. Another promising partnership with the World Bank, within the

<sup>2</sup>Source: UNHCR – <http://data.unhcr.org/MaliSituation> - As of end December this figure has been revised downwards to 50,000 individuals registered during a Level 2 registration exercise. However, for planning purposes the figure of 65,012 was used by partners for the emergency response.

framework of social protection, led to the inclusion of key family practices (KFP) in the package offered to beneficiaries and has secured more than US\$10 million out of the US\$70 million required for this project.

- Within the framework of the REACH initiative –comprising UNICEF, WFP, FAO, WHO and the Government of Niger, an international facilitator specialized in nutrition was recruited to assist the High Commission for the ‘3 N Initiative’ (*Les Nigériens Nourrissent les Nigériens*), and approximately US\$4.7 million (3.5 million Euros) were secured from the European Union for the implementation of REACH.
- In Niamey, the levels of the Niger River did not reach alert levels in early December as expected. However, under the leadership of the governorate for the Niamey region, joint preparedness activities were undertaken, including the permanent relocation of 705 households living in flood-prone areas. This has prevented disastrous consequences on populations already at risk.

## **Programme response (2012)**

### **Nutrition**

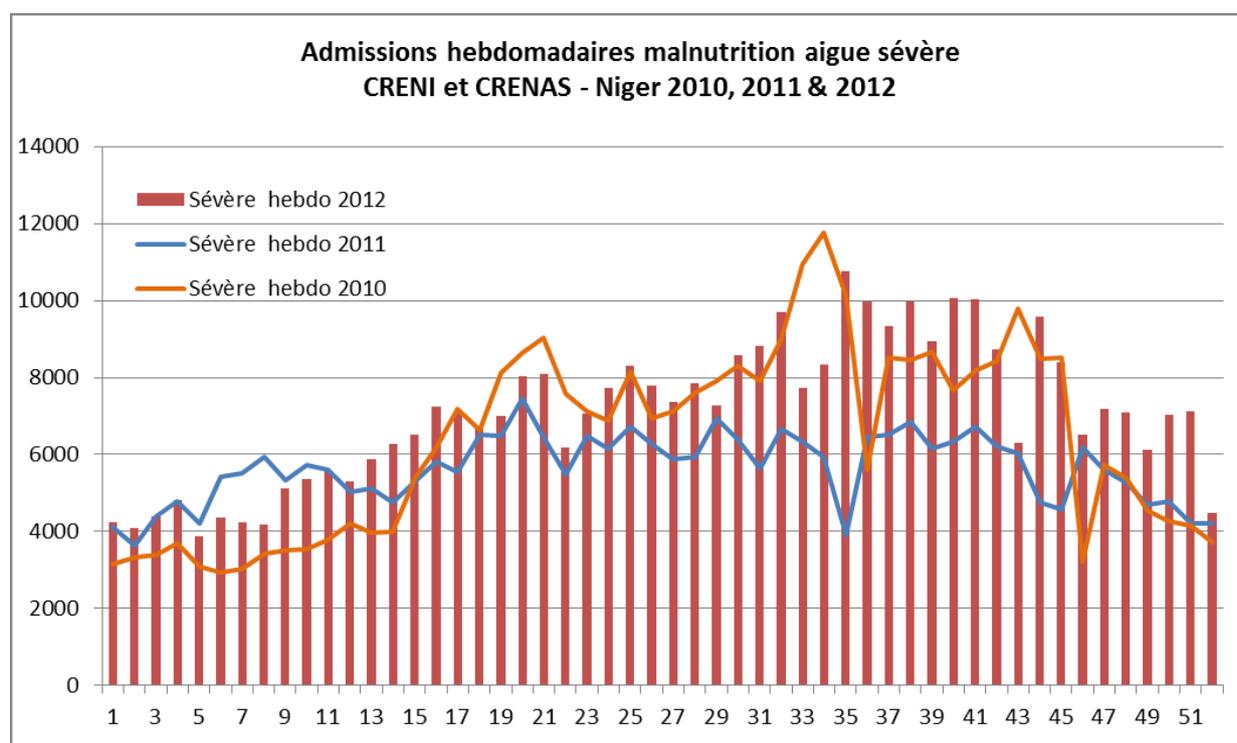
Estimated # / % coverage	UNICEF & operational partners			Sector / Cluster		
	UNICEF Annual Target	Cumulative results ( #)	% of Target Achieved	Cluster Annual Target	Cumulative results ( #)	% of Target Achieved
Children <5 with Severe Acute Malnutrition admitted to therapeutic care	393,737	368,746	93.6%	393,737	368,746	93.6%
All children <5 with Severe Acute Malnutrition discharged	393,737	368,746	93.6%	393,737	368,746	93.6%
Children <5 with Severe Acute Malnutrition discharged recovered	295,302	313,434	106%	295,302	313,434	106%
Number of health centres with SAM treatment	NA	898	NA	NA	898	NA
Children <5 with Severe Acute Malnutrition with complications admitted to therapeutic care	60,000	51,428	85.7%	60,000	51,428	85.7%
List of UNICEF Operational Partners: MoH, WHO, WFP, Save the Children, MSF (Belgium, Switzerland, Spain), CONCERN, World Vision, ACH, COOPI, CRF, Alima/Befen, Forsani, Help						

### ***UNICEF and Partners’ Programming***

- From the beginning of the year, a cumulative number of 368,746 under-five children have been admitted for treatment (as of 30 December 2012). The death rate amongst children receiving SAM treatment remained below 2%. The pipeline of RUTF provided by UNICEF through local (Plumpy Nut) and offshore procurements (F-75 and F-100 therapeutic formulas) was secured until the end of the year. Over the same period, 462,306 cases of MAM have been treated in 1,145 supplementary feeding centres (CRENAM).
- In partnership with the NGOs ACTED, AKARASS, Islamic Relief and Plan Niger, UNICEF will implement a joint strategy elaborated in collaboration with UNHCR and WFP, aiming at preventing malnutrition and ensuring the treatment of malnourished children in refugee camps. Currently, psychosocial activities are being implemented by the NGO Help only in child-friendly spaces. The Protection Section is considering extended its current partnership with Help to provide such support to malnourished children in the refugee camps.
- In 2012, the food crisis led to a deterioration of the nutritional status in general. Acute malnutrition rates varied from 17% in 2010 to 12% in 2011 and 14.8% in 2012 (SMART 2012). The strengthening of services for the treatment of malnutrition cases and the surveillance system resulted in the treatment of 369,000 children suffering from severe acute malnutrition (SAM) and of more than 462,000 children treated for moderate acute malnutrition (MAM) with satisfactory performance indicators.

- Throughout the year, the Nutrition Cluster continued to coordinate the management of cases of acute malnutrition country wide with a focus on quality improvement. In this respect, the Cluster worked with the WASH Cluster to implement the WASH in Nut strategy. In addition, 2012 has seen significant improvements in therapeutic supplies and CMAM data management. However, the burden resulting from a large caseload on an already fragile health system will need to be addressed with bold actions to reduce the incidence of the various forms of malnutrition. Therefore, the Nutrition Cluster took the decision to link emergency to development, with a focus on reduction of incidence of stunting (chronic malnutrition) through a multi-sector and integrated approach targeting the first 1000 days (from pregnancy to two years of age).
- Due to favourable agro-climatic conditions, preliminary 2012/13 crop estimates indicate that production levels exceeded expectations with an increase of cereal production of 22% compared with the average production over the last five years, and of 43% compared to 2011. The consequent availability of food and the improvement of key family practices, including an increase in exclusive breastfeeding from 13% in 2006 to 23% in 2012, should contribute to a reduction in children malnutrition rates.

### **Severe Acute Malnutrition – Weekly admissions to In/Outpatient treatment as of 30 December 2012<sup>3</sup>**



## **WASH**

### **WASH in Nutrition**

Estimated # / % coverage	UNICEF & operational partners			Sector / Cluster		
	UNICEF Target	Cumulative results (#)	% of Target Achieved	Cluster Target	Cumulative results (#)	% of Target Achieved
Nutritional centres delivering the WASH minimum package	469 (1)	96	20.46%	898 (2)	695 (3)	77.4%
The number of hygiene kits with key hygiene messages distributed to SAM affected carer / mother and child	100,000	65,457 (4)	65.45%	368,746 (5)	67,557	18.32 %

UNICEF Operational Partner: Save the Children UK

(1) Nutritional centres in the targeted regions of Maradi, Zinder and Tillaberi

<sup>3</sup> Source: Scaling up report, Ministry of Health, UNICEF, 15 November 2012

- (2) *Functional nutritional centres in country*
- (3) *Nutritional centres provided with potable water source or sanitation facility.*
- (4) *Under monitoring*
- (5) *Number of Couple child/mother in nutritional centres in country as of 30 December.*

### **UNICEF and Partners' programming**

- In 2012, the WASH Cluster has made considerable efforts to promote the 'WASH in Nut' strategy within both the WASH and Nutrition clusters, and also with several key donors. In addition, 898 CRENI for the treatment of acute malnutrition were equipped with hand-washing facilities and soap to sensitize mothers, whose children had been admitted as in-patients, to the practice. The Cluster will continue to promote and advocate for the inclusion of WASH elements within any Nutrition intervention.
- As UNICEF's partner in WASH in Nut, ACH received funding of over US\$600,000 (502,000 Euros) from both CIDA and ECHO to implement activities in the Department of Keita (Tahoua Region) and Mayahi (Maradi Region). ACF is currently organizing the minimum kits for the agreed upon Cluster targets, i.e. CRENI and carer mother/child. Distribution of these kits should start in February.
- Within the framework of the LoU signed with UNHCR, the response to the Malian crisis also mobilised Cluster partners for the implementation of WASH activities in the refugee camps. These included safe water supply through water trucking, the installation of bladders, the construction of boreholes equipped with motor-pumps and of latrines for safe hygiene practices. UNICEF provided funding and supplies either directly to UNHCR or through PCAs with regular partners.
- The response to the cholera outbreak was stepped up in the affected regions with the rehabilitation of boreholes, the provision of chlorine and Aquatabs to disinfect households and water supplies. Those activities were made possible thanks to ECHO and CERF funding made available to partners through UNICEF. However, due to unforeseen delays in the implementation of response activities on the ground, and given that the incidence of the disease has drastically declined (since week 50 zero cases have been reported), a two-month extension to the current PCA has been granted to implement prevention activities by the end of the project.

### **Other WASH Emergency Responses**

#### **UNICEF and Partners' programming**

- Following the risk of overflowing of the River Niger, which was expected to reach its alert level of 530cm in early December, approximately 8,000 people were relocated from five residential areas of Niamey to the Seno site.
- The WASH Cluster succeeded in mobilizing partners to assist with services to the families relocated at the resettlement site, by providing water points, hygiene facilities and hygiene promotion.

The table below present details of WASH services delivered by Cluster and implementing partners:

<b>Sector</b>	<b>Activities</b>	<b>Quantity provided</b>	<b>WASH Partners</b>
Water supply	Taps stands	6	Government
	Bladder of 10m <sup>3</sup> each	6	UNICEF
	Water trucking	60,000/d	Oxfam
	Drilling	2	World Vision Intern.
Sanitation	Latrines	100	Oxfam
		50	Qatari Red Crescent
	shower	50	Qatari Red Crescent
Waste Management	Garbage containers	350	Government
Hygiene promotion	Educational hygiene messages		Government

## Health

Estimated # / % coverage	UNICEF & operational partners		
	UNICEF Target	Cumulative results (#)	% of Target Achieved
Children <5 receiving measles vaccination*	4,068	5,277	130%
Families receiving 2 ITNs*	5,456	4,092	75%
<i>UNICEF Operational Partners: MoH, WHO, MSF (Belgium, Spain, Switzerland), Concern, Save the Children, Alima/Befen, Help</i>			
* Refugee camps of Mangaizé, Ayorou and Abala			

### UNICEF and Partners' Programming

- Epidemiological reports released by the Ministry of Health for week 52 (24 to 30 December) including cumulative data from 01/01/2012 to 30/12/2012 indicate the following:
  - Meningitis: 314 cases, 56 deaths representing a fatality rate of 17.80%
  - Measles: 1,840 cases suspected, 8 deaths representing a fatality rate of 0.40%.
  - Cholera: 5,285 cases (compared to 2,480 in 2011), 110 deaths, case fatality rate 2.08%
- As of December, 3,888,044 cases of malaria have been reported against 2,571,072 in 2011. This will likely impact negatively on the already difficult nutritional status of thousands of children. UNICEF has already supplied, in collaboration with the Ministry of Health, 600,000 Rapid Diagnostic Test (RDT), 2 million pediatric treatment and 250,000 impregnated bed nets (LLIN).
- For 2012, preliminary results from the EDSN-MICS show enormous progress have been achieved to improve child survival. Child mortality rates have been tremendously reduced (36%) dropping from 198 to 127 per thousand between 2006 and 2012. Such progress reflects a significant improvement in availability of basic health services and behavioural change in terms of disease prevention. From 2006 to 2012, the percentage of unvaccinated children has decreased from 19% to 4% and the percentage of women attending prenatal consultations delivered by qualified health personnel has almost doubled from 46% to 83%. These results confirm the conclusions published in the Lancet on the reduction of child mortality in Niger<sup>4</sup>.

## Child Protection

Estimated # / % coverage	UNICEF & operational partners			Sector / Cluster		
	UNICEF Target	Cumulative results (#)	% of Target Achieved	Cluster Target	Cumulative results (#)	% of Target Achieved
Children with safe access to community spaces for socializing, play, learning in the refugee camps	10,000	6,233	62 %	10,000	6,569	65 %
<i>UNICEF Operational Partners: Ministry of Population, Promotion of Women and Protection of Children, Islamic Relief, Plan Niger, World Vision, Help</i>						

### UNICEF and Partners' Programming

- Since October, figures regarding children (age 5 to 14) with safe access to community spaces for socializing, play, learning in the refugee camps remained stable. Indeed, the capacity of actual operational partners is not sufficient to implement new activities in the camps and reach the target. UNICEF is expecting to sign soon new PCAs.
- In Abala, Mangaizé and Ayorou camps, UNICEF partners and Cluster members (World Vision, Plan and Help) are conducting activities for monitoring child rights violations. Activities include

<sup>4</sup> Source: *The Lancet*, [Volume 381, Issue 9860](#). Reduction in child mortality in Niger: a Countdown to 2015. September 21, 2012

interventions in child-friendly spaces and community outreach to support vulnerable children and/or children with problematic behaviour.

- In each refugee camp, action plans have been developed to monitor and follow up the implementation of activities for unaccompanied and separated children (UASC). In addition, the mechanism of identification of UASC has been put in place by UNHCR and UNICEF partners. So far, a total of 30 UASC were identified in the camps and other refugee settlements, family tracing was conducted with the support of ICRC which led to contact with the families of 19 children.
- Psychosocial activities and mother-to-child stimulation are offered in 10 CRENIS in the regions of Zinder and Maradi to support malnourished children and their mothers. All construction work in the CRENIs have been finalised and play and psychosocial kits have been made available to facilitate support in these facilities. In collaboration with the nutrition sector, the protection section is currently identifying the 10 CRENIS in Niamey and Tahoua in which similar activities will be implemented.
- Further to the flooding in Diffa, UNICEF dispatched 5 tents and recreation kits to set up Child Friendly Spaces (CFS) on the spontaneous sites housing relocated families. Community volunteers and local government staff were trained by Save the Children to strengthen their capacities in conducting recreational and psychosocial activities. A total of 223 children, amongst whom 127 girls, benefitted from these activities.
- Partners were trained on Children Associated with Armed Groups and Forces (CAAGF) to ensure preparedness to respond to a possible worsening of the situation in North Mali and potential CAAGF crossing the border into Niger. An action plan was drafted by participants with most activities related to prevention and sensitisation. A working group will be established to discuss further programmatic needs. A sectoral contingency plan is being elaborated with partners and government institutions as well.
- In 2012, the adoption of the national Child Protection policy represents an important milestone in the development of a coherent vision for child protection. However, the persistence of very often forced early marriage practices constitutes a violence to which girls are still submitted to, particularly in rural areas. Early marriage often leads to school drop-outs, early pregnancy with related risks for mother and new-born and high morbidity and mortality rates for children. The adoption of the bill protecting girls at school is faced with resistance from certain lobby groups. Achievements in Child Protection have led to a substantial increase in birth registration and in the care of vulnerable children. As a result, the number of functional birth registration offices has increased by more than two thirds and the capacity to manage cases of vulnerable children has more than doubled between 2009 and 2011.

## Education

Estimated # / % coverage	UNICEF & operational partners			Sector / Cluster		
	UNICEF Target	Cumulative results ( 1 )	% of Target Achieved	Cluster Target	Cumulative results ( 2 )	% of Target Achieved
# and % of school-aged girls and boys including adolescents with continued access to formal and non-formal basic education	105,000	52,600	50%	150,000	67,600	45%
UNICEF Operational Partners: Regional Directions of the National Education of Agadez, Diffa, Dosso, Maradi, Niamey, Tahoua, Tillabery, Zinder; ONGs : Aide et Action, Oxfam GB, Save The Children, Humanitaires sans frontières, Plan Niger, Catholic Relief Services, Handicap International						

(1) Cumulative results as of 31 December 2012 including children affected by floods and children who resumed school further to the Back to School campaign.

The impact evaluation of the Back to School (BTS) campaign that was planned for December 2012 was delayed due to the involvement of most of the Ministry of Education's staff in the national General Census of the Population and

Housing carried out during that period. BTS campaign related data are therefore expected to be available by the end of February 2013.

(2) *Cumulative results as of 31 December 2012 including children affected by floods and refugee children.*

To date a total number of 6,119 children of which 2,876 (52.03%) are girls<sup>5</sup> attend schools supported by UNICEF. This includes children in the refugee camps, children relocated from their school of origin to the new site of Seno (in the 5<sup>th</sup> District of Niamey region), and children from 7 schools in the Diffa region affected by floods in October 2012.

### **UNICEF and Partners' Programming**

Further to the signing of a Letter of Understanding (LoU) between UNICEF and UNHCR stipulating that UNICEF will support education for refugees, UNICEF signed PCAs with Oxfam-UK, Plan International and Catholic Relief Services to offer education for children in the camps of Abala, Mangaizé and Tabareybarey (Ayorou), as well as at the spontaneous sites of Kizamou, Miel and Tiguizéfane.

The Task Force for Education in Refugee Camps led by UNHCR holds regular meetings to address issues such as curriculum and teacher incentives. Within this framework, UNICEF and UNHCR undertook joint monitoring visits and produced joint reports.

- For children 3-5 years, pre-school education has been assured with currently 511 children enrolled. These numbers are distributed as follows: 109 pre-school students in the refugee camp Mangaize; 247 pre-school students on Camp Tabareybarey; and 155 pre-schol students in Seno.
- Abala refugee camp: Oxfam-UK provides education services to 1,667 refugee students of which 835 (50.08%) are girls, 27 Malian teachers, 2 school principals, 2 pedagogic advisors, 1 manager and 2 field agents have been recruited and trained; school supplies such as textbooks and furniture have been provided; and 30 classrooms have been constructed. Parental education, community mobilization and school committee awareness raising activities are also being offered.
- Mangaizé refugee camp (Ouallam): Plan Niger provides similar services to 1,122 refugee students of which 571 (50.89%) are girls. The construction of 7 semi-permanent classrooms has started and is expected to be completed by end February.
- Tabareybarey refugee camp (Ayorou): Plan Niger is also UNICEF's implementing partner in this camp. The education package is the same as above and is provided to 805 refugee students of which 375 (46.58%) are girls. Teachers are both Nigeriens and Malians. Since this camp might not be relocated, Plan Niger will speed up the bidding process for the construction of 10 semi-permanent classrooms.
- Spontaneous sites of Kizamou, Miel and Tiguizéfane: Catholic Relief Services provides education to 685 refugee students of which 334 (48.75%) are girls. UNICEF provided 30 school kits to complement the education package.
- Site of Agando (Tahoua region): Humanitaires Sans Frontières, a local NGO, is in the process of signing a USD50,000-PCA with UNESCO. These funds will be utilized to build 5 semi-permanent classrooms to strengthen the capacity of the public primary multi-grade school in Agando; hence, ensuring the education of 805 students of which 476 (59.13%) are girls. UNICEF will finance one classroom.
- Diffa region: As a reminder, Diffa region was severely affected by floods caused by increased water levels of the Komadougou River in October 2012. UNICEF provided to the 7 schools affected tarpaulins for temporary classrooms and 17 school kits to benefit 594 students of which 285 (47.97%) are girls.

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<sup>5</sup> Data of the new school in Seno have not been disaggregated by sex.

- **Site of Seno:** To prevent the impact of the upcoming floods in the Niamey region, the Floods Management Committee relocated some 750 households from four districts (Karadjé, Lamordé, Kirkissoye and Nogaré) at risk to the new site of Seno. Consequently, the existing public school in the village was expanded to accommodate 441 preschool, primary and Franco-Arabic students from these districts. In collaboration with the other Clusters, the Education Cluster worked closely with the Committee to provide intensive technical support to the local authorities and Regional Department of Education to evaluate and address the education needs of the expanded school.

Through joint efforts with humanitarian partners, UNICEF provided 50 tents and 10 school kits, and will also supply school furniture and additional tents for semi-permanent classrooms.

- Activities of the Education Cluster are ongoing, including monthly meetings, monitoring the five sub-clusters in the regions of Diffa, Maradi, Tahoua, and Zinder, advocacy for resource mobilization, strengthening partnership with other Clusters and capacity building of Education Cluster members.
- For 2012, the primary Education sector continued to register progress for both access and retention rates, particularly in urban areas. Between 2011 and 2012, the gross enrolment rate increased from 76% to 79%, and completion rate from 51% to 56%. However, this increase has not been translated into reducing inequities between urban and rural areas and between boys and girls. The gross enrolment rate varies from 108% in urban areas compared to 71% in rural areas, and from 88% for boys versus 71% for girls. The rapid increase in the demand for education combined with high demographic growth rate is exacerbating pressure on school infrastructure which can already barely reach reasonable levels of quality. Also to be noted is the increase in the use of temporary structures (from 39% in 2007 to 48% in 2012) and the unavailability of school benches. In 2012, the ratio learner-bench is 4.6 and varies between 3.6 and 5.1 in urban and rural areas respectively. Insufficient school infrastructure and capacity, quality of the schooling environment and qualified teachers remain primary educational challenges.

## HIV/AIDS

Estimated # / % coverage	UNICEF & operational partners		
	UNICEF Target	Cumulative results (#)	Cumulative results as % of target
HIV positive pregnant women continuing to receive ARVs for PMTCT	11,900	2,880	24%
Children under1 5 who continue to receive ART	1,900	460	24%

*UNICEF Operational Partners: Solthis, UNFPA, World Bank, WHO, UNAIDS*

Data reported above refers to the entire country. Final data for 2012 are not available as yet.

### **UNICEF and Partners' programming**

- Niger has an estimated HIV prevalence rate of infection of 0.8%. The emergency response is included in the HIV National Strategic Framework, targeting 80% of pregnant women and 60% of affected children. Systematic HIV testing for all children with malnutrition who are not responding to treatment is implemented in Niger (following the recommendations of nutrition protocols). However, monitoring and follow up processes aiming at getting quantitative data on number of children tested and referred are not operational.
- The incremental risks linked to the current situation of refugee/returnee families are being addressed by specialized NGO and supported by UNFPA (counselling, screening, care).
- In 2012, HIV/AIDS education was taken into consideration by the Ministries of Basic and Higher Education. HIV/AIDS education is included in hygiene education training for school administrators, teachers and students. At the community level, hygiene education is included in activities for Parental Education and community preschool animators.

## Supply and Logistics

- Since January 2012, UNICEF has ordered a total of US\$29.1 million of supplies of which 80% for the nutritional response. Of these supplies, US\$18.7 million have been received, and US\$10.8 million have been delivered to partners and beneficiaries.
- US\$728,684 has been delivered to partners since the last report of which 77.04% are nutritional supplies.

## Human Resources

- All staff of UNICEF Country Office continued to be involved in the emergency response including International and National consultants recruited locally.
- The three stand-by personnel for WASH and Protection are continuing to give their support to the coordination of clusters until the first quarter of 2013.
- The office is currently working on the immediate and further human resources needs in surge capacity for 2013.

## Funding as of 31 December 2012

Funding Requirements				
Appeal Sector	Requirements (as per HAU June 2012)	Funds received (as of end 2012)*	Funding gap (end 2012)	
	\$	\$	\$	%
<b>NUTRITION</b>	31,439,921	27,945,386	3,494,535	11%
<b>HEALTH</b>	2,835,500	2,668,441	167,059	6%
<b>WASH</b>	3,343,460	5,648,505	(2,305,045)	-69%
<b>EDUCATION</b>	1,500,000	1,629,213	(129,213)	-72%
<b>CHILD PROTECTION</b>	556,400	955,181	(398,781)	-9%
<b>TOTAL</b>	<b>39,675,281</b>	<b>38,846,726</b>	<b>828,555</b>	<b>2%</b>

\*\*Figures represent Other Resources-Emergency budget allocations at country level, which may have been received prior to 2012 and excludes indirect programme support costs.

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