





Humanitarian Situation Report No. 3

Reporting Period

1 July to 30 November

Niger

HIGHLIGHTS

- As of 6 November 2023, the Ministry of Humanitarian Action and Disaster Management registered a total of 170,858 people impacted by flooding, including 52 deaths.
- As of 26 November 2023, the diphtheria epidemic has affected 30 of the country's 72 districts, with 3,037 cases¹ and 217 deaths². Zinder is the most affected region, accounting for more than 85% of all identified cases (cases have also been reported in Tillaberi region and Niamey).
- There is an urgent need for continued international assistance to vulnerable displaced groups, including migrants, families, children, refugees, and asylum seekers. Niger currently hosts more than 700,000 internally displaced persons, refugees, and asylum seekers.
- The consequences of the Economic Community of West African States sanctions continue to affect the nutrition supply chain and other humanitarian supplies. Transportation costs for alternative via road are estimated at more than US\$ 1 million and at more than US\$ 15 million for air transportation.

UNICEF RESPONSE AND FUNDING STATUS*

9	Nutrition	SAM admissions	89%
	Z	Funding status	28%
	Health	measles vaccination	11%
	Η̈́	Funding status	12 6
•	WASH	Safe water access	39%
	Š	Funding status	29%
	Child protection	MHPSS access	23%
	profe	Funding status	12 6
	Education	Education access	28%
	_	Funding status	5%
	Social protection and Cash Transfer	Cash transfer	0%
	Sc prot and Tra	Funding status	0%

SITUATION IN NUMBERS



3,700,000

People in need of humanitarian assistance³



2,000,000Children in need of

humanitarian assistance⁴



430,000

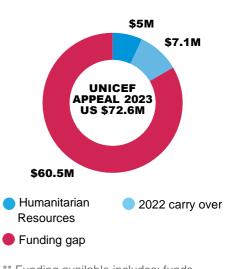
Under-five children affected by SAM nationwide⁵



209,397

Internally displaced people in Tillaberi / Tahoua⁶

FUNDING STATUS (IN US\$)**



^{**} Funding available includes: funds received in the current year; carry-over from the previous year; and repurposed funds with agreement from donors

FUNDING OVERVIEW AND PARTNERSHIPS

For its emergency response in Niger, UNICEF appealed for US\$ 72.6 million to provide life-saving, multi-sectoral assistance to vulnerable children and women affected by humanitarian crises. UNICEF's humanitarian assistance is provided in coordination with other humanitarian actors under the 2023 Humanitarian Response Plan (2023 HRP), in partnership with the Government and Non-Governmental Organizations (NGOs).

As of 30 November 2023, US\$ 4.97 million had been mobilized in response to the appeal. These funds were received from thematic humanitarian funding, SIDA, Norway, Spain and ECHO. Adding the US\$ 7.07 million carried over from 2022 appeal, the total amount available is US\$ 12.07 million, representing 17% of the amount requested for the response in 2023. The funds mobilized to date only partially cover the needs in seven sectors: Health (12%), Nutrition (28%), Child Protection (12%), Education (5%), WASH (29%), Essential Commodities (24%) and Cluster Coordination (3%).

UNICEF expresses its sincere gratitude to all donors for the contributions received so far that have enabled us to continue providing essential goods and services to vulnerable children and women. The mobilization of additional funding is critical to ensure that all needs are met.

SITUATION OVERVIEW AND HUMANITARIAN NEEDS

On 26 July 2023, a coup d'état occurred in Niger, resulting in the detention of the president by the National Council for the Safeguard of the Homeland (Conseil National pour la Sauvegarde de la Patrie). As a result of the coup, ECOWAS imposed unprecedented sanctions, restricting Niger's access to banking service and limiting its commercial and service exchanges with neighbouring countries. In addition, key donors announced funding restrictions and conditionalities, effective immediately. As a result of this situation, it was announced on 6 October that the 2023 state budget, initially estimated at US \$5.3 billion, would be reduced by 39%.

Specifically, the cost for alternative road transportation via Burkina Faso and Chad is estimated at more than US\$ 1 million, and the cost of air transport for nutritional and medical supplies blocked at the border with Benin is estimated at more than US\$ 15 million. UNICEF, in collaboration with other UN agencies, continues to advocate for cross-border transportation through Benin. In addition, UNICEF has secured about 30% of the nutrition supply needs for Quarter 2 of 2024, but an additional gap is foreseen starting April 2024.

The harmonized framework completed in November 2023 shows that 2.3 million people in Niger will be in crisis or emergency food insecurity between October and December 2023 (about 9% of the total population), compared to 1 million people for the same period in 2022. The number of severely wasted children is expected to increase slightly from 430,487 in 2023 to 436,348 in 2024, due to the expected rising prevalence of people facing food insecurity (12.4% expected in 2024, equivalent to 3,231,825 people, compared to 11%, equivalent to 2,872,278 people, for the same period in 2023).

Non-state armed groups (NSAGs) remain active and continue to displace populations in Niger, particularly in Diffa, Tillaberi, and Tahoua regions, which account for about 90% of the total displaced population of about 734,000 in Niger as of 30 November 2023.

As of 6 November 2023, 170,858 people (20,150 households) were

registered as affected by the floods, including 52 deaths. The impact of these adverse weather conditions also includes the loss of 2,924 livestock, the collapse of 15,345 homes and 2 health centres, and the flooding of 2,207 hectares of crops. Maradi is the most affected region, with 68,640 people, followed by Tillaberi (31,806 people), Tahoua (25,091 people), Zinder (24,619 people), Diffa (10,266 people), Agadez (6,176 people), Dosso (4,166 people) and Niamey (94 people).

On 20 October 2023, the Ministry of Public Health, Population and Social Affairs officially announced an outbreak of diphtheria. The first case was reported in Zinder region on 17 July 2023, and by 26 November, a total of 3,037 diphtheria cases had been reported in all eight regions of Niger, including 217 deaths, resulting in a case fatality rate of 7.1%. The most affected regions are Zinder, with 2,360 cases (77.7% of the total caseload), and Agadez, with 296 cases (9.7% of the total caseload). Children are most affected by the outbreak, with 47% of confirmed cases in those aged 5-14 years and 22% in those aged 12-59 months. Infants under one year of age account for 2.5% of cases, and approximately 28.5% of cases are in persons aged 15 years and older. In response to the outbreak,

SUMMARY ANALYSIS OF PROGRAMME RESPONSE

Health

UNICEF supported health facilities during the period of high malaria endemicity by providing treatment kits for uncomplicated and severe malaria cases in four health districts of Niamey, the Niamey Regional Hospital, the Matameye District Hospital, the Maradi Regional Hospital and the Zinder National Hospital. This enabled 7,500 people suffering from uncomplicated and severe malaria to be treated.

DIPHTHERIA: UNICEF, in collaboration with the Ministry of Public Health and other partners, including WHO, provided vaccines, supplies and technical and financial support, and supervised the vaccination campaign.

UNICEF supported the Ministry of Health in the management of this epidemic: technical support, purchase of vaccines and consumables for the response, purchase of Azithromycin for case management and the treatment of5,000 people. The first round of the vaccination response has taken place, and to date 306,912 children aged 0-14 have been reached by the vaccination response.

MALI BORDER CRISIS (Tahoua and Tillaberi regions): Following a measles epidemic in the health district of Tchintabaraden, Tahoua region, affecting both the host population and those displaced by armed conflict, UNICEF supported the vaccination of 17,095 children aged 6 months to 14 years. In the health districts of Torodi and Tillaberi, UNICEF supported mobile clinics to treat a total of 11,212 patients, including 2,435 displaced people and 3,404 children under the age of five.

In Maradi region, UNICEF responded to the increasing number of malaria cases (about 700 new cases reported at Maradi Regional Hospital since July 2023) by providing four malaria kits (two kits for uncomplicated and two for severe malaria cases) for the treatment of 2,600 patients. In Maradi and Zinder regions, UNICEF is working to increase the supply of health commodities, while partnering with NGOs to improve health preparedness and response capacity.

Nutrition

Since the beginning of 2023, 382,821children with severe acute malnutrition (SAM) have received treatment at health centres, representing 89% of the annual caseload. Following the onset of the political crisis, at least 178,115 children with SAM were admitted for

treatment. Of these children, 94% were successfully discharged as cured, 3% dropped out of the treatment, 0.155% deceased during treatment and 2.6% did not respond to the treatment.

During the reporting period, a total of 33,480 cartons of Ready-to-Use Food (RUTF), 812 cartons of therapeutic milk (F100 and F75), and other medicines were delivered to 20 health districts and two regional hospitals in Maradi and Zinder to cover the needs for the last quarter of 2023. These supplies will help to provide care for over 48,000 children suffering from SAM. Furthermore, eleven health workers, nine facilitators, and 232 community health workers in the district of Mayahi (Maradi) have been trained to enhance the skills of child caregivers in their communities to support malnourished children.

UNICEF also supported the prevention and treatment of malnutrition in Agadez region, by providing tents and hygiene materials, and by building the capacity of health workers in the nutritional recovery centre of the regional hospital.

Moreover, joint actions to prevent severe acute malnutrition between the Ministry of Health and its nutrition partners, including UNICEF, supported the screening of 4,573,639 children in the eight regions, with 53,844 cases of SAM identified and referred for treatment.

UNICEF signed six-month humanitarian partnership agreements with seven NGOs (HELP, Vision Plus, Goal, DEMI-E, TUN, CR, ADKOUL) to implement a package of nutrition interventions that includes community-based approaches for the prevention, early detection and treatment of acute malnutrition, such as training of community health workers in acute malnutrition management and the mother-MUAC approach, supply delivery and mobile clinics. These partnerships with NGOs will also allow UNICEF and the nutrition sector to strengthen coordination at the decentralized level.

Child protection, GBViE and PSEA

UNICEF supported the construction of 48 community recreation centres to provide emergency community psychosocial support to at least 35,000 children, of whom 1,000 benefited from case management. 32,321 individuals (16,730 adults, and 15,591 children) were reached with child protection interventions to address and reduce gender-based violence risks.

UNICEF has also initiated the dissemination of crucial household items, including 1,065 recreational kits, 2,000 dignity kits and 1,000 protection kits, to cover the needs of over 20,000 children (including 14,000 girls) and parents affected by displacement, flooding, and the current political situation. As military operations restrict access to certain locations, UNICEF has bolstered the capacity of 1,300 of the existing 3,600 community-based child protection mechanisms (36%) to act as primary child protection actors.

UNICEF supported the establishment of 101 new CVPEs (comité villageois de protection de l'enfant) and strengthened the capacity of 2,600 members of existing CVPEs. A total of 2,920 children (including 669 girls) were identified, provided basic care, and referred, while 6,700 children received basic psychological support in emergency areas in Maradi and Tillaberi regions. In addition, CVPE members conducted awareness-raising activities in the villages, reaching 12,587 people, and managed and referred 607 protection cases.

MALI BORDER CRISIS (Tahoua and Tillaberi regions): UNICEF has provided protection services to 260 at-risk children, including 99 unaccompanied children, identified by community child protection mechanisms in six municipalities of Tillaberi region.

These children were referred to relevant partners for psychological support and medical assistance and were placed in temporary host families, while social services and authorities assisted with family tracing and additional support. In addition, UNICEF, with the support of social workers from the departmental protection directorate and youth networks, conducted community awareness campaigns on gender-based violence and established redress mechanisms, reaching 3,789 people (1,696 women and girls) in Tillaberi, including 155 people (70 women, 30 men, 20 boys, and 35 girls) in the Gueben Zogui IDP sites. Psychosocial support was also provided through theorganization of a football match with mixed teams of host communityand IDP children, benefiting 50 children (20 girls).

Education



School built with UNICEF financial support on the Guezza site, Tahoua region. UNICEF ensures continuity of education to children affected by shocks.

During the reporting period, UNICEF supported continuity of learning for 44,094 children in the four crisis-affected regions (Diffa, Maradi, Tillaberi and Tahoua) through the installation of Temporary Learning Spaces (TLS), equipment and distribution of learning and teaching materials.

LAKE CHAD BASIN CRISIS (Diffa region): To facilitate a smooth start of the 2023-2024 school year and continuity of learning, UNICEF, in collaboration with the Diffa Regional Directorate of Education provided 28 TLS for 1,400 pupils. In addition, 3,860 individual learning materials were distributed in primary and junior secondary schools in Diffa region. Around 1,500 children from the four Diffa schools that were burned down by Non-State Armed Groups (NSAGs) in early July 2023 and one neighbouring school benefited from 500 table-benches, 200 mats, 50 desks, 50 teacher chairs, and 200 easel boards. U-Reporters also carried out activities (sanitation, renovation of blackboards, benches, etc.) to facilitate the start of the new school year in the same primary schools in the urban commune of Diffa.

MALI BORDER CRISIS (Tahoua and Tillaberi regions): UNICEF established a four-classroom junior secondary school in the Guezza site, including teachers' accommodation, latrines and an independent hydraulic system for at least 200 learners. In addition, 30 TLS were established to benefit 1,500 learners, and other learning materials were distributed to 16,850 students. In Tillaberi region, as part of the Back-to-School campaign, UNICEF provided 18,584 pupils with individual learning materials to support their return to school in 36 communes.

In response to the attack on the Bankata school in the Makalondi municipality, UNICEF provided four TLS to the host school (Makalondi Centre) for 200 pupils. UNICEF also provided U reporters with 500 gloves, 500 brooms and 1,580 T-shirts to encourage teenagers to participate in civic engagement initiatives.

OTHER REGIONS: In Maradi region, UNICEF trained 104 members of school management committees (CGDES) and 52 school principals to develop emergency preparedness and management plans.

Water, sanitation and hygiene

During the reporting period, 70,752 additional individuals (38,914 children) were reached through hygiene promotion and the distribution of hygiene kits to 11,139 households.

LAKE CHAD BASIN CRISIS (Diffa region): Efforts were made to improve access to WASH services for both host populations and IDPs. The extension of the N'Gagam water supply network provided access to drinking water to around 2,000 additional people. In partnership with the NGO IDELA, UNICEF promoted good hygiene and sanitation practices (including support for the construction and use of 150 emergency household latrines) among some 10,311 people in the municipalities of Gueskerou and Bosso and distributed critical WASH kits to about 15,000 vulnerable people. In addition, UNICEF supported the implementation of a WASH strategy in 74 villages of the Gueskerou municipality, providing 47,174 people with access to safe water and 2,390 latrines. In response to flooding in Bosso municipality, 10,090 affected individuals (1,954 households, including 5,805 women, and 1,076 children) benefited from UNICEF's assistance to improve their access to safe water, hygiene, and sanitation. UNICEF, together with its implementing partner, facilitated a WASH response training for 38 community volunteers, focusing on flood response and cholera prevention. A total of 4,490 individuals, including 1,512 children, were made aware of WASH issues through this initiative.

MALI BORDER CRISIS (Tahoua and Tillaberi regions): A total of 118,538 people had access to safe drinking water in Tillaberi (74,767) and Tahoua (43,771) regions, including 37,386 with UNICEF support in Tillaberi (26,927) and Tahoua (34,972). In addition, 93,070 people were reached with critical WASH supplies (including hygiene items) and services in Tillaberi (50,609) and Tahoua (42,461) regions, including 55,485 people with UNICEF support in Tillaberi (21,182) and Tahoua (34,303). A total of 9,810 SAM children benefited from WASH kits provided by WASH cluster partners in Tahoua (912) and Tillaberi (8,898) regions. Meanwhile 10,669 people gained access to latrines in Tillaberi (10,039) and Tahoua (630) regions, with the support of WASH cluster partners (10,075) and UNICEF (594).

OTHER REGIONS: In response to floods, 6,630 households benefited from the distribution of soap and Aquatab. In addition, 62 emergency latrines were constructed and 29,441 people were sensitized on appropriate hygiene and sanitation practices in the Zinder and Maradi regions.

DIPHTHERIA EPIDEMIC: WASH supplies for infection, prevention and control (IPC) (53 boxes of soap, a 25 kg drum of calcium hypochlorite, and three handwashing stations) were distributed to health facilities in the most affected health district of Matameye in Zinder region. Fifty-five (55) community health workers were trained to support the IPC at the community level in Matamey health district. Hygiene kits (soap, Aquatabs) were distributed to 161 households and handwashing stations were provided to 20 public institutions (schools, health facilities, markets) in Kantche municipality (Zinder region). Priority was given to households and institutions with cases

or contact persons. As part of the preparedness actions to prevent the disease, 10,000 Aquatab tablets, 10,000 PUR sachets, and 200 boxes of soap were provided to the Regional Directorate of Public Health (DRSP) in Maradi region.

Social protection and Cash Transfer

During the reporting period, UNICEF continued to prepare for the implementation of the 12-month drought cash programme targeting 27,000 households in 336 villages and 18 municipalities in Tahoua, Maradi, Zinder, Dosso and Agadez regions, through the recruitment of targeting/registration firms, cash distribution services and an external monitoring firm as well as the establishment of a strong internal coordination mechanism to ensure that all contracted service providers, implementing partners and relevant UNICEF staff are adequately connected, informed and operationally linked to jointly deliver support to the most vulnerable households. Efforts have also been made to adapt the programme to changing circumstances to avoid disruption of cash distributions, by adopting a resilient approach, based on alternatives to complement the Government's cash transfer system where capacity is limited. Special attention is being given to the implementation of risk mitigation measures, as UNICEF will directly implement all delivery functions (targeting, data collection and registry management, payments and monitoring, postdistribution monitoring and grievance redress). In line of this activity, 20 UNICEF staff were trained in the use of the Humanitarian cash Operations and Programme Ecosystem (HOPE) platform for cash transfer. Similarly, 10 staff from targeting firms were trained in the protocol, including the digitalized questionnaire and access to the HOPE ecosystem for processing data.

Cross-sectoral (HCT, SBC, RCCE and AAP)

2,000 adolescents and youth, including 900 girls from host communities and internally displaced populations, were reached through UNICEF's support to youth-led entrepreneurship programmes in the municipalities of Diffa, Kindjandi, and Maine Soroa in Diffa region. This initiative has strengthened the capacity of local youth associations to promote social dialogue in 90 villages/neighbourhoods and created 80 networks to connect these associations across the four municipalities of Diffa, Gueskerou, Chetimari, and Maine Soroa.

RCCE interventions: 4.4 million people, including around 2.1 million women were reached through communication campaigns on the prevention and management of malaria, measles, cholera and diphtheria cases, as well as on the promotion of immunization, nutrition, education, child protection, social cohesion and support for unaccompanied children, including the prevention of sexual abuse and exploitation. 172 community and private radio stations were involved in the campaign. 121,549 complaints were collected through an online feedback mechanism established by UNICEF as part of its support to various initiatives, such as the drought cash transfer and the Back-to-School campaign. This mechanism, which was part of comprehensive planning and accountability measures to support affected populations, allowed 2,016 of these complainants to receive feedback through a digital platform. The messages were produced in French and four national languages (Hausa, Zarma, Tamajeck, and Fulfuldé) and transmitted through the unlimited access service line. 1,850 monitoring committees, 1,700 listening clubs, and more than 800 young volunteers have been instrumental in UNICEF's continued efforts to strengthen social listening and feedback.

Approximately 16,900 people, participated in UNIICEF-supported community forums on issues such as the release of school buildings used as relocation sites for disaster victims, the education of children in IDP sites, and the allocation of new sites. These forums were part of a community social communication strategy that included socio-

behavioural surveys, household surveys, and home visits to gauge perceptions about immunization. 90% of the 320 households surveyed expressed support for vaccination. Additionally, advocacy sessions with four community leaders resulted in commitments to promote immunization activities in their respective areas.

Essential Household Items

Throughout the reporting period, UNICEF, in partnership with RRM partners, provided support to 7,900 displaced households, comprising 54,135 individuals, with Non-Food Items (NFIs), dignity, and WASH kits. Shelter kits were also provided to 29,819 of the most vulnerable displaced persons. A total of 49 displacement alerts were reported, leading to 82 assessments (MSA, ERP, and WASH) carried out by RRM actors in Diffa, Maradi, Tahoua, and Tillaberi. The results of these assessments were shared with the humanitarian community through OCHA and the clusters. UNICEF actively participated in the technical coordination of the Rapid Response Mechanism7 (RRM), which is operational in four priority regions: Diffa, Maradi, Tahoua, and Tillaberi. The humanitarian situation remained critical, characterized by a volatile security environment and floods. The RRM serves as the primary emergency response mechanism in Niger.

RapidPro⁷

During the reporting period, a total of 23,865 health-related reports were received, including 21,008 weekly reports on the management of COVID-19 vaccine stock, 2,482 for routine immunization stock management, and 375 for malaria cases. Additionally, 2,748 monthly reports were received in the Education sector, and 357 on hygiene and sanitation in the WASH sector . These figures represent approximately 50% of the expected reports for the given period. To improve the use of data, UNICEF has developed a series of data visualization dashboards in response to user demand. UNICEF continues to monitor and improve data availability and data-driven decision-making.

HUMANITARIAN LEADERSHIP, COORDINATION AND STRATEGY

During the reporting period, UNICEF continued to lead the Clusters, Area of Responsibility and Working Groups for Education, Child Protection, WASH and Nutrition sectors, and played an active role in the Health Cluster and Multi-Sector Cash Working Group. As part of emergency preparedness, draft plans for the regions of Diffa, Tahoua, and Maradi are currently available or under finalization.

To improve synergy and effectiveness of nutrition interventions in this context of transition, coupled with the lean season and epidemics. UNICEF has supported the organization of several coordination meetings, with the nutrition in emergency working group and the Nutrition technical group under the lead of the government. From August to October, the Emergency Partners Group held five meetings to discuss sector contingency plans and possible solutions to avoid interruption of nutrition interventions in the field. The objectives were to anticipate the consequences of the border closures and prepare advocacy notes for submission to the Humanitarian Country Team. The Nutrition Technical Group held two coordination meetings in August and October, chaired by the Ministry of Health. These meetings addressed the issue of the nutrition package in the implementation of mobile clinics and recommendations on the infant and young child feeding, nutrition, and early childhood development package to be implemented at the national level.

The Child Protection AOR actors have conducted an analysis which shows that 639,860 children (90% of the target) have not yet

benefited from interventions under the 2023 Humanitarian Response Plan (HRP) and that about 64,000 additional children would require assistance if ECOWAS sanctions remained in place for the next three months. Funding requirements are estimated between US\$ 4,901,050 and US\$ 6,683,514.

Despite some restrictive humanitarian access measures, actors of the child protection Area of Responsibility (AOR) have provided psychosocial support to 30,141 vulnerable children and parents including 23,926 children, 11,805 of whom were girls —between August and October 2023. Within this group, 9, 748 unaccompanied or separated children (4,664 girls), including victims of violence and at-risk children, have received individual assistance. In addition, 464 actors in the field have been trained in community-based psychosocial support, minimum standards for child protection and case management and more than 100 stakeholders benefited from sessions organized by the AOR at the national level since the 26 July coup. The AOR also conducted a child protection severity/needs analysis as part of the Humanitarian Programme Cycle-2024. A total of 1,020,442 children in need have been identified and 612,866 people (including 83 % of children) have been targeted for the Humanitarian Response Plan 2024. During the reporting period, the Child Protection AOR actors developed messages to be disseminated within the community to prevent family separation and child recruitment which have been identified as potential consequences of sanctions against Niger. In collaboration with the Protection Cluster, the Child Protection AOR actors also developed key messages about protection threats resulting from sanctions and funding restrictions and shared them with donors and ECOWAS. Eventually, the Child Protection AoR continued to disseminate the referral circuit and organize capacity building sessions on child protection in emergency situations, including on the centrality of protection and inter-sectoral coordination, organized in collaboration with NorCap, the Global Education Cluster and the Education Cluster in Niger.

Under the leadership of UNICEF, the Education Cluster supported the Back-to-School campaign for 439,365 children (51% girls) and teachers and the launch of the new school year in the four emergency-affected regions (Tillaberi, Tahoua, Diffa and Maradi) for the enrolment of 2,164,843 children (4% in pre-primary, 78% in primary and 18% in secondary). In preparation for the Back-to-School campaign, several Education Cluster meetings were held, including with thematic groups (Safe Schools, Literacy, and Nonformal Education), 10 organizations were involved in raising awareness on safe return to school, 111 people, including 48 women, actively participated in a webinar on the International Day for the Protection of Education from Attack. 48 people (23 women) were trained in gender-transformative approach and inclusion, and 41 focal points from 21 organizations were trained in reporting using the 5Ws form.

UNICEF participated in the monthly meeting of the technical and financial partners' working group on health financing. One of the objectives of this meeting were to review the level of funding in the current context. It also sought to identify priority topics/areas of focus to ensure the continuity of basic health services for the population.

UNICEF has been working on the WASH emergency preparedness and response plan for the country, based on the critical scenario with the integration of new risk zones, in particular the city of Niamey and its surrounding area, with the aim of reaching 50,000 people. The UN Emergency Relief Coordinator has requested a waiver from ECOWAS, aiming to facilitate the delivery of humanitarian supplies currently held up at Niger's borders. This step is essential to ensure access to essential services, including vaccines and life-saving treatment for child malnutrition.

HUMAN INTEREST STORIES AND EXTERNAL MEDIA

 L'UNICEF à pied d'œuvre pour enrayer l'épidémie de diphtérie au Niger https://www.unicef.org/niger/fr/communiqu%C3%A9s-de-

presse/lunicef-%C3%A0-pied-d%C5%93uvre-pour-enrayer-l%C3%A9pid%C3%A9mie-de-dipht%C3%A9rie-au-niger

- Laoualy se remet d'une malnutrition sévère au Niger https://www.youtube.com/watch?v=ESyGQeyCH_k
- Tahoua: sauver les enfants de la malnutrition https://www.youtube.com/watch?v=_M5in9wVLB8
- Un village de Maradi touché par le changement climatique accède à l'eau potable https://www.unicef.org/niger/fr/recits/un-village-de-maradi-touché-par-le-changement-climatique-accède-à-leau-potable
- L'arrivée de l'eau au village a changé nos vies https://www.youtube.com/watch?v=mHhDGzgyQiY
- La santé des enfants n'a pas de prix https://www.youtube.com/watch?v=fsJgrRz8kJc
- Children under the protection of their adoptive father in Zinder https://www.unicef.org/niger/stories/children-under-protection-their-adoptive-father-zinder

HAC APPEALS AND SITREPS

- Niger Appeals
 https://www.unicef.org/appeals/niger
- Niger Situation Reports https://www.unicef.org/appeals/niger/situation-reports
- All Humanitarian Action for Children Appeals https://www.unicef.org/appeals
- All Situation Reports https://www.unicef.org/appeals/situation-reports

NEXT SITREP: January 2024

ANNEX A SUMMARY OF PROGRAMME RESULTS

Sector				UNICEF and IPs response			Cluster/Sector response		
Indicator	Disaggregation	Total needs	2023 targets	Total results	Progress*	2023 targets	Total results	Progress*	
Nutrition									
Children aged 6 to 59 months with severe acute malnutrition admitted for treatment	Total	430,000	430,000	382,821	▲ 89%	430,000	382,821	▲ 89%	
Primary caregivers of children 0-23 months receiving infant and young child feeding counselling	Total	-	400,000	772,156	▲ 193%	-	772,156	-	
Children aged 6-23 months receiving micronutrient powder	Total	-	230,000	104,481	45%	-	104,481	-	
Health									
Children aged 6 to 59 months vaccinated against measles	Total	-	152,100	17,095	1 1%	-	-	-	
Children and women accessing primary health care in UNICEF-supported facilities	Total	-	140,000	41,476	▲ 23%	-	-	-	
Water, sanitation and hygiene									
People accessing a sufficient quantity of safe water for drinking and domestic needs	Total	1.3 million	230,000	90,144	4 39%	425,635	196,292	46%	
People accessing appropriate sanitation services	Total	1.3 million	125,000	2,890	▲ 2%	117,416	21,138	18%	
People reached with critical WASH supplies	Total	1.3 million	430,000	144,797	▲ 29%	733,610	225,039	▲ 31%	
Child protection, GBViE and PSEA									
Children and parents/caregivers accessing mental health and psychosocial support	Total	-	150,000	35,000	▲ 20%	161,415	46,640	▲ 29%	
Women, girls and boys accessing gender- based violence risk mitigation, prevention and/or response interventions	Total	-	380,000	59,138	4%	504,422	93,474	▲ 18%	
People with safe and accessible channels to report sexual exploitation and abuse by personnel who provide assistance to affected populations	Total	-	150,000	14,080	9%	-	14,080		
Children who have exited an armed force and groups provided with protection or reintegration support	Total	-	1,500	29	▲ 2%	-	29	-	
Education									
Children accessing formal or non-formal education, including early learning	Total	364,599	132,300	36,884	▲ 4%	164,041	36,884	▲ 3%	
Children receiving individual learning materials	Total	364,599	125,000	53,020	17%	164,041	218,443	114%	
Children/adolescents accessing skills development programmes	Total	-	10,000	-	0%	6,809	_	0%	

Schools implementing safe school protocols (infection prevention and control)	Total	17,000	2,500	-	0%	2,500	- 0%
Social protection and Cash Transfer							
Households reached with cash transfers through an existing government system where UNICEF provided technical assistance and/or funding	Total	-	10,000	6,450	0%	-	
Households reached with UNICEF funded multi-purpose humanitarian cash transfers	Total	-	5,000	-	0%	-	
Essentials Households Items							
Displaced persons and people affected by natural disasters provided with essential household items	Total	863,000	171,500	81,918	▲ 48%	-	-
Cross-sectoral (HCT, SBC, RCCE and AAP)							
People reached through messaging on prevention and access to services	Total	-	10 million	8.9 million	A 89%	-	-
People who participate in engagement actions	Total	-	246,500	12,114	5 %	-	
People sharing their concerns and asking questions through established feedback mechanisms	Total	-	89,100	24,756	▲ 28%	-	

^{*}Progress in the reporting period 1 July to 30 November

ANNEX B FUNDING STATUS

		i	Funding gap			
Sector	Requirements	Humanitarian resources received in 2023	Other resources used in 2023	Resources available from 2022 (carry over)	Funding gap (US\$)	Funding gap (%)
Health	5,795,600	478,940	-	190,532	5,126,128	88%
Nutrition	20,000,000 ^{8,9}	2,591,893	-	3,041,163	14,366,944	72%
Child protection, GBViE and PSEA	7,312,500 ¹⁰	659,009	-	216,498	6,436,993	88%
Education	12,031,400	581,955	-	15,018	11,434,427	95%
Water, sanitation and hygiene	8,082,200	-	-	2,381,357	5,700,843	71%
Social protection	4,800,000 ¹¹	-	-	-	4,800,000	100%
Cross-sectoral (HCT, SBC, RCCE and AAP)	5,110,300	-	-	-	5,110,300	100%
Essential commodities	7,821,500	658,514	-	1,180,673	5,982,313	76%
Cluster coordination	1,601,900	-	-	45,000	1,556,900	97%
Total	72,555,400	4,970,311	0	7,070,241	60,514,848	83%

^{*}repurposed other resources with agreement from donors

ENDNOTES

- 1. Ministry of Public Health, November 2023.
- 2. A case-fatality rate of 7.1%.
- 3. OCHA, Humanitarian Response Plan HRP Niger, 2022.
- 4. OCHA, Humanitarian Response Plan HRP Niger, 2022.
- 5. UNICEF, 2023
- 6. Government & UNHCR, September, 2023. 133,236 IDPs in Tillaberi and 76,161 in Tahoua.
- 7. http://nigerdatahub.ne/
- 8. UNICEF has reviewed the cost of emergency response for nutrition in light of a more coordinated approach to prevention and treatment of severe wasting.
- 9. US\$100,000 is for activities linked to the prevention of sexual exploitation and abuse.
- 10. US\$210,000 for prevention of sexual exploitation and abuse and US\$200,000 for gender-based violence in emergencies. Forty per cent of the funds will be used to support risk mitigation in the various programmatic sector interventions.
- 11. 4,000 households will receive multipurpose cash based on the minimum expenditure basket validated by the Multisectoral Cash Working Group of the Niger in collaboration with the government unit in charge of social safety nets. This basket amounts to CFAF81,549 (US\$125.50) per month per household. An amount of US\$200 is estimated per household (including transfer costs), for a total budget of US\$800,000.