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Nutrition (%)

>3.5 milion Children screened for acute malnutrition on a monthly basis during the lean season (from July to October).

Health

>500,000

Children reached by community-based health services.



Districts in four at-risk regions supported by UNICEF to prevent an outbreak of wild poliovirus.

Child protection

>290,000 Children who received birth certificates.

165 Cases of child marriage stopped or delayed through community-based child protection committees.



NATIONAL POLICY FOR NUTRITION SECURITY

Adopted in 2018 and demonstrating firm commitment from the government to tackle the root causes of malnutrition.

Education

415,100

Children supported through outreach activities, provision of learning materials, and diversification of education services.

EDUCATION AND TRAINING SECTOR

PLAN Launched its revision process with UNICEF support to align with Sustainable Development Goal (SDG) 4.

Social policy

Paroles des Jeunes

A multi-sectoral roadmap for youth empowerment and entrepreneurship launched in 2018.



Water sanitation hygiene

Bagaroua

First municipality (Tahoua region) in Niger to reach open defecation free (ODF) status, providing a safe environment to 90,000 people in 129 villages.



Communities that were ODF, bringing safe sanitation and hygiene to 26,870 people.



OUR GOALS our achievements

Realizing the rights of every child, especially the most disadvantaged, in five goal areas.



Every child survives and thrives

"Once we arrived at the health centre, the nurses screened him and told me he had serious health complications due to the lack of nutrients in his body. They weren't able to assist him at the health centre so we were referred directly to the regional hospital in Maradi...I was scared of losing him."

22-year-old Saratu, mother of three, who managed to bring her 13-month-old son, Kabir, to a hospital when he stopped eating. Niger has one of the highest number of severely malnourished children with medical complications in the Sahel region.





Although Niger has continued to see child survival improve over the years, the country is still affected by high levels of both chronic and acute malnutrition.

1 in 12 children does not survive to see their fifth birthday

1 in 40 newborn babies dies in the first month of life (neonatal period)

48% of children under 5 are failing to thrive due to stunting.

3.2% of children under 5 suffer from SAM, a lifethreatening condition.

Source: United Nations Inter-agency Group for Child Mortality Estimation 2018; National Nutrition Survey, October 2018.



Saving newborn lives

Access to quality health services throughout pregnancy, at the time of birth and soon after is key to newborn and maternal survival in Niger. In 2018, UNICEF continued to support the care and treatment of vulnerable and sick newborn babies and young infants through evidence-based high impact interventions.

UNICEF supported the government to strengthen essential newborn care, resuscitation and Kangaroo Mother Care (a method of skin-to-skin care that is particularly useful for nursing low birth weight babies).

A total of 120 health workers were trained on newborn resuscitation and supported Kangaroo Mother Care. Out of the 11,365 babies born in mother and child referral centres in Maradi and Zinder regions between 2017 and 2018, nearly 7,800 were hospitalized. Among these, 1,636 babies were preterm and had low birth weight: 432 of these newborns received Kangaroo Mother Care

In addition, Niger started piloting a new WHO directive on the management of possible serious bacterial infections (PSBI) in infants in the framework of a UNICEF and Bill and Melinda Gates Foundation partnership. Through this approach, trained health workers in primary care facilities use simplified antibiotic regimens to treat sick newborns and young infants on an outpatient basis.

The approach was integrated in the new National Strategic Plan on Maternal, Newborn, Child and Adolescent Health and implementation, supported by UNICEF, started in four pilot health districts in Maradi region (Madarounfa, Guidan Roumdji, Mayahi and Dakoro). A total of 396 health staff in 165 integrated health centres and health posts were trained to deliver PSBI management in the four targeted health districts and supplies were provided.

Newborn care was also strengthened through the construction and equipping of a newborn resuscitation block in maternal and child centres in three regions where partners, including UNICEF, are supporting efforts to reduce newborn deaths.

Bringing health services closer to children

More than half a million children were reached by curative, preventive and promotional health services, provided by a cadre of 5,650 trained community volunteers. This was made possible through the scale up of the integrated community case management (iCCM) package. iCCM, which is supported by UNICEF and others partners, now covers more than a third of the country's 72 districts – 27 districts in total.

Also, key milestones were reached to institutionalize community health with the development of a 2019–2023 National Strategic Plan for Community Health and the launch of Niger's roadmap to accelerate community health institutionalization at the Global Conference on Primary Health Care in 2018.

Tackling vaccine-preventable diseases

UNICEF continued to support child immunization, which was integrated with other essential services as part of an 'Immunization-Plus' platform. Efforts were focused on strengthening routine immunization and responding to outbreaks of vaccine-preventable diseases.

While Niger was certified in 2016 as having stopped transmission of wild poliovirus, in 2018, circulation of vaccine-derived poliovirus type 2 was confirmed in three districts in Zinder region, indicating low individual and herd immunity. An outbreak response was launched in 30 districts in four at-risk regions, with UNICEF supporting both health and social mobilization components.

Progress was also made to protect children from other vaccine-preventable diseases. According to WHO and UNICEF estimates, the national rate of Penta-3 vaccination coverage increased from 69 to 81 per cent between 2016 and 2017. UNICEF contributed to this result through vaccine and consumable procurement services, as well as technical support to improve systems at national and local levels.

UNICEF technical assistance also helped to improve the quality of routine immunization, especially through cold chain optimization and capacity building in vaccine management and equity analysis that helps to identify children who have not been vaccinated. UNICEF focused on improving micro-planning through the implementation of guidelines for the Reach Every Child immunization strategy.

In 2018, outbreaks of measles and meningitis continued to threaten the lives of children. With UNICEF support, more than 158,000 children between the age of 9 months and 14 years were vaccinated against measles while more than 52,000 children and young adults (2–29 years) were inoculated against meningitis.

Nutrition Policy launched

Significant advocacy on the part of UNICEF, other UN agencies and humanitarian and development partners, as well as extensive UNICEF support to the Nigeriens Nourish Nigeriens Initiative, resulted in strengthening the enabling environment for nutrition. An important milestone in nutrition was the adoption of the National Policy for Nutrition Security and its action plan, signaling the government's commitment to tackle the root causes of malnutrition through a multi-sectoral, holistic approach to prevention.

More than half a million children were reached by curative, preventive and promotional health services, provided by a cadre of 5,650 trained community volunteers.





More than 380,000 children under 5 suffering from SAM, including more than 66,000 children with medical complications, were admitted in the national treatment programme.

Addressing Niger's high levels of malnutrition

Childhood wasting has remained at high and critical levels for more than a decade in Niger, including in years with no major food crises. To address the alarming situation, UNICEF and other partners have been supporting malnutrition screening in the context of large-scale seasonal malaria chemoprevention campaigns, which now cover all 61 malaria endemic districts.

More than 3.5 million children were screened for malnutrition on a monthly basis during the lean season in 2018 (July-October). During each round, 30,000–35,000 children were found to suffer from severe acute malnutrition (SAM) and were referred to a health facility for treatment.

MUAC-by-mothers

A partnership between UNICEF, WFP and the NGO ALIMA helped to improve early diagnosis of acute malnutrition. More than 680,000 women of reproductive age were trained in Maradi region to use a tool to measure the mid-upper arm circumference of their children (MUAC) and to detect oedema. They were also sensitized on infant and young child feeding (IYCF) practices. The 'MUAC-by-mothers' approach recognizes that mothers are the best placed to identify early signs of malnutrition. It also reinforces their roles in protecting and promoting their children's health.

Treating SAM

More than 380,000 children under 5 suffering from SAM, including more than 66,000 children with medical complications, were admitted in the national treatment programme. Administrative data show that among children who exited the SAM programme in a health facility, 89.5 per cent were cured, 1.6 per cent died, and 6.3 per cent defaulted, surpassing global minimum standards for SAM treatment quality.

UNICEF provided critical support to the national treatment programme through supply provision, technical and financial assistance and support for admission data compilation and analysis.

Improving feeding practices

Chronic malnutrition remains very high in Niger, with nearly 1 in 2 children affected by stunting. IYCF is a cornerstone of stunting reduction programmes, as improved feeding practices can lead to improved intakes of energy and nutrients, leading to better child health and survival.

In 2018, IYCF interventions were carried out in 43 per cent of 18,647 villages nationwide, covering 46 out of 72 districts. IYCF scale-up was in large part made possible by a partnership between the Ministry of Health, the European Union, UNICEF and several NGOs that supports a comprehensive package of preventive interventions in 17 municipalities. An impact survey of this project showed that the exclusive breastfeeding rate in the 17 municipalities had increased from 35 to 50 per cent but that more effort was needed to improve progress in minimum dietary diversity.

Every child learns

"It's not always easy for them. But I know that these little ones will at least be integrated back into the formal system after a few months. Here they can learn the basics and therefore be more comfortable with their classmates in the regular school."

Madame Amina, who teaches at the Alternative Education Centre in Diffa. The centre caters for children who have not been able to enter the formal education system on time. Many live in remote rural areas, farming or raising livestock with their parents and siblings.





Despite a marked improvement in primary and secondary school enrollment since 2016, the education sector in Niger faces challenges in access to education and quality of learning.

53% of children aged

Against 10 boys, only 7 girls attend secondary

8% of children in the last

Only 1 in 10 children

Supporting equitable access to education

Providing education to all children, especially the most vulnerable, is of key importance to Niger's social and economic progress. UNICEF is supporting this priority by helping to bring girls, children with disabilities and nomadic children – children who are most at risk of school exclusion – back into the fold of education.

In 2018, more than 415,000 children or 8 per cent of all children between the ages of 7 and 16 were reached through the expansion of alternative education and skills training centres. This included the provision of education and/or training services for 4,500 particularly vulnerable children such as children with disabilities, out-of-school children and youths.

Menstrual hygiene management (MHM), violence prevention and the importance of girls' education were key areas of UNICEF support at community level. In Maradi, Zinder and Tahoua regions, more than 3,400 people were trained on MHM, helping to break taboos that negatively affect girls' school attendance. This included 500 members of school management committees and mothers associations and 2,000 girls and 968 boys in 120 schools.

In addition, 2,200 school management, parents and mothers committees were also trained to manage and reduce violence in and around schools and to encourage girls to go to school.

The successful piloting of the nomadic school model in Maradi was recognized by the Ministry of Primary Education and was expanded to Agadez in 2018 (see box on page 13).

Improving the quality of education

Good education is essential for children's development and future prospects. In Niger, concerted effort is put on improving the quality of basic education so that children can get the best foundation in life.

In 2018, the Ministry of Primary Education, with UNICEF support, developed a national learning assessment plan to ensure that pupils' learning outcomes at all levels are regularly checked and that remedial measures are implemented.

Additionally, UNICEF supported the training of 1,137 headmasters in pedagogical and administrative leadership, as well as 20,350 teachers representing 27 per cent of the primary school teaching force of Niger on mathematics, gender and violence prevention. The Ministry of Primary Education also developed a pre-school children's assessment sheet to monitor their primary entry skills.

Innovative approaches to bring learning to hard-to-reach children were used. Distance coaching for teachers and self-learning drills for out-of-school children were introduced in Diffa region. This resulted in students gaining 19 percentage points in mathematics over a period of three months.



Strengthening the education system

As the lead agency of the group of financial and technical partners in the education sector, UNICEF intensified its system strengthening work in education in 2018.

At the upstream level, UNICEF was designated as the partner agency for the Global Partnership for Education (GPE) grant to accompany the Education and Training Sector Plan mid-term revision process. As part of this process, UNICEF launched eight sectorial studies that are expected to orient the revision of the sector plan towards SDG 4.

A study on the profile and causes of out-of-school children highlighted the magnitude of the phenomenon in Niger. It also paved the way to include solutions to school exclusion in the upcoming GPE funding. A comparative study on interventions to promote girls' education informed the ongoing revision process of the National Policy on Girls' Education and Training.

In addition to regular support to the production, publication and dissemination of the annual statistical bulletins for primary and secondary education, UNICEF spearheaded innovation to improve timeliness and quality of data. This was done through RapidPro – an SMS-based system used to monitor enrolment and drop out in emergency schools in Diffa region; EduTrack – an SMS-based system for education statistics; and Data Must Speak – an approach for effective data use that provides an interface between rights-holders and duty-bearers through data.

These innovations are expected to support the ongoing decentralization process, by allowing community, municipality and regional actors to access user-friendly data on the situation of their schools, as a basis for collective action and shared accountability.

SCHOOLS FOR NOMADIC CHILDREN

Nomadic children in rural
Niger are particularly
disadvantaged when it
comes to their education.
With parents traveling
to graze their herds four
to five months at a time,
nomadic children need an
infrastructure to support their
school attendance.

Thanks to funding from the Norwegian government, UNICEF, together with Catholic Relief Services and CADEV, has built a model nomadic school in Bermo. The school provides education, boarding, three meals a day and a team of mothers who look after the children while their families are away.

Every child is protected from violence and exploitation

"My father saw me as an expensive problem. Something else to pay for. And so when I started to refuse to get married, to say I wanted to continue studying, he didn't support me at all, but rather fought with me about it...I've no idea where I got the strength to keep fighting, but I did it."

At the age of 16, Roumanatou was promised in marriage to a much older man but managed to stop it from happening. Now she is a pioneer in her region, fighting for girls' right to an education.



Ending child marriage

Child marriage is a prevalent and deeply rooted practice in Niger, tied to issues such as poverty and lack of opportunity. It traps girls in a life of early child bearing, increases the risk of abuse and violence, and reduces girls' chances of completing their education. UNICEF is playing a key role in helping to end child marriage in the country.

At the national level, UNICEF, in collaboration with UNFPA, other sectors, civil society and faith-based leaders, supported the Ministry of Women's Empowerment and Child Protection to develop a national strategic plan on ending child marriage (2019–2021).

The ongoing community-based approach to child protection in Maradi, Zinder and Tahoua regions expanded to 46 out of the targeted 48 municipalities, reaching more than 100,000 people. Child protection committees were able to delay or cancel 165 cases of child marriage, address 1,282 cases of abuse and ensure that 385 children, including 104 girls, resumed school. More than 3,850 adolescent girls participated in the programme, which helped to empower them as actors of social change in ending harmful practices against children.

Strengthening the civil registration system

Birth registration is a fundamental right that gives children an official identity and access to protection and other social services. In Niger, only 6 out of 10 children are registered at birth.

To increase children's access to birth registration, the policy and law governing the sector have been revised to modernize the civil registration system. In the first half of 2018, nearly 290,000 children got their birth certificates.

As a result of sustained UNICEF advocacy, the government also paid the large salary backlog for civil registrars. A new cadre of 976 civil registration officers was trained, and 444 birth registration centres were monitored with UNICEF logistical support.

Better access to child protection services

Access to child protection services improved during 2018. Seven additional services were created at departmental level and 40 social workers were trained. As a result, more than 9,300 children and adolescents who were at risk or were victims of violence, abuse or exploitation, as well as children on the move, received quality care. These included all 131 unaccompanied Nigerien children expelled from Algeria, who were assisted by the Zinder Regional Child Protection Directorate.

Thanks to joint advocacy by the European Union Capacity Building Mission Sahel and UNICEF, a unit for the protection of women and minors was created within the National Gendarmerie. With this development, all security and defense forces now have a specialized child protection unit.

In the justice for children area, 75 justice actors were trained on child protection issues and judicial procedures, in order to better fulfill their role as child protection referents. Forty-four new brigade chiefs were assigned to the Juvenile Police and 75 Juvenile Police Units were operational in 2018.



Violence against children and women is rampant in Niger.

3 in 4 adolescent girls are married before the age of 18

1 in 4 adolescent girls is married before the age of 15.

6 in 10 women think that a man has valid reasons to heat his own wife

8 in 10 children have experienced violent discipline

Source: Enquête Démographique et de Santé et à Indicateurs Multiples.



GOAL AREA

Every child lives in a clean and safe environment

"In Niger, nomads are constantly on the move. Simple habits such as washing hands can save children's lives among nomadic families. That's our message today, tomorrow, and the day after."

Malam Kadai, WASH officer



Ending open defecation

Niger has one of the highest rates of open defecation in the world, which poses risks to child and community health.

Ending open defecation is not just about providing clean and safe toilets but also about changing the behaviour of entire communities. In Niger, UNICEF is doing this through the Community-led Total Sanitation (CLTS) approach, which has a strong social behaviour change component.

As the leading partner for CLTS, UNICEF supported the government and its partners to develop the national CLTS implementation guide and a summary booklet of the National Open Defecation Free Roadmap. Trainers from 30 government bodies and national and international NGOs were then capacitated to scale up CLTS.

In 2018, 157 communities with close to 100,000 inhabitants began the journey to becoming open defecation free (ODF). Sixty-three communities were certified ODF, bringing safe sanitation and hygiene to 26,870 people, including children.

As part of its continuous advocacy to increase funding for rural sanitation, UNICEF supported the launch of the 'One Parliamentarian, One ODF municipality' initiative. UNICEF also supported Niger's preparation for the AfricaSan Conference 2019 in South Africa which helped to strengthen political will for sanitation at the national level A water, sanitation and hygiene (WASH) sector basket fund to support the implementation of CLTS in 600 communities was set up in 2018 thanks to UNICEF advocacy.

Municipality-wide WASH approach

UNICEF moved forward with the conceptualization of a municipality-wide WASH approach. This approach supports effective management of competencies transferred by the central government as part of the decentralization process.

The model includes municipality-wide CLTS; support to water point management and water safety; capacity strengthening in planning, implementation and monitoring; and mobilization and transparent management of resources generated by water tariffs. Ten municipalities signed memoranda of understanding with UNICEF to kick-start this approach.

Bagaroua municipality in Tahoua region paved the way for the municipality-wide WASH approach. It became the first municipality in Niger to reach ODF status, providing a safe environment to nearly 90,000 people in 129 villages. The CLTS process also inspired collective action, with communities building latrines in 25 primary schools and six health centres.



Access to the basics of life remains very low in Niger.

46% of the population has access to safe drinking water – 36% in rural areas vs. 89% in urban areas

13% of the population has access to basic sanitation service – 6% in rural areas vs. 44% in urban areas.

7 in 10 people practice open defecation.

Programme, 2017.



Every child has an equitable chance in life

"When you think of a place that inspires innovation, you probably won't think of my country. When you think of the next great tech developers, you probably won't think of a young Nigerien girl. But I thought differently."

Latifa Hassane Salissou, Miss GeekAfrica 2018, Niger. Latifa codes apps that save lives and shows that a girl can do anything.





Empowering the youth

Young people are a growing force in Niger and can drive the country's development if provided with the right opportunities and investments. This is why the government is paying increasing attention to youth empowerment and participation.

In 2018, a UNICEF-supported national study of the aspirations of youth and the effectiveness of youth policies in Niger triggered a multi-stakeholder process for youth-inclusive policy making and planning at central and decentralized levels. This resulted in a multi-sectoral roadmap called 'Parole des Jeunes' (Words of Youth) aimed at promoting youth empowerment and entrepreneurship. The roadmap will be implemented by a multi-stakeholder platform of key central ministries, regional and local authorities, youth organizations and civil society organizations with oversight by the Prime Minister's Office.

Strengthening information systems and prospective analysis

Scenario building and prospective analysis were carried out through a UNICEF-supported partnership between the Vienna-based International Institute for Applied Systems, the Ministry of Planning, the Ministry of Population and the National Statistics Institute.

Education-focused scenarios brought to light the role of education and the importance of investing in girls' education to accelerate the country's demographic transition. It also highlighted the challenge of adequate planning in the context of rapid population growth and the education system's stagnation.

Poverty remains high in Niger and social sector budgets are not adequate to increase the coverage and quality of services for children and women.

Nearly half (48%) of the population in Niger lives below the poverty line.

Niger ranks at the bottom of the Human Development Index, at 189 of the 189 surveyed countries and territories in 2017.

Only 6.5% of the national budget is spent on health (well below the 15% Abuja Declaration target)

Source: Niger Demographic and Healtl Survey, 2012; UNICEF Country Office Annual Report 2018; UNDP, Human Development Indices and Indicators: 2018 Statistical Update.



Children in Niger are threatened by low human development, chronic and sudden humanitarian crises and insecurity in Diffa, Tillabery and Tahoua regions.

2.3 million people in

Close to 250,000 displaced people, refugees and returnees required support as a result of armed conflict

Over 53,000 displaced in Tillabery and Tahoua regions emergency assistance.

More than **3,800** cases of cholera, 4,600 cases of measles, 1,490 cases of meningitis and 13 cases of vaccine-deprived polio were

Flooding affected more than 200,000 people across the

Humanitarian action

"On a normal day, we wake up early to pray, we help a bit at home and then we come to the centre to play with other children and learn something new. I really want to improve my French language. One day I want to be a nurse."

Aisha was 11 when her mother died at the displacement site in Lake Chad's Karamga Island. Now, at the age of 13, she and her younger sister Shadia (11) are being raised by foster mother, Hadjara, who is a family friend from back home in Nigeria. Aisha and Shadia attend a child-friendly space every day to learn, play, make friends, and have fun.

Emergency response

UNICEF supported the government to implement Niger's Humanitarian Response Plan, working closely with other humanitarian partners in Diffa, Tillabery and Tahoua regions. Children and women in these regions are affected by armed conflict and human displacement. UNICEF was also the lead coordination agency for the nutrition, WASH and education clusters and the child protection sub-cluster, as well as the technical lead for the Rapid Response Mechanism, which provides critical multi-sectoral assistance to emergency-affected children and families.

Nutrition

UNICEF support to the national SAM treatment programme helped to provide life-saving treatment to more than 380,000 children. As in previous years, the SAM treatment programme met international standards for cure, death and default rates. To identify children with malnutrition early, more than 3.5 million children were screened during the hunger season and referred for treatment where needed.

Health

More than 158,000 children under 14 years were vaccinated against measles. UNICEF also provided medicines and backed social mobilization to respond to the cholera outbreak. More than 117,000 children under 5 in conflictaffected communities benefited from emergency health services, including via mobile clinics.

WASH

Around 350,000 people gained access to safe drinking water in Diffa, Tahoua and Tillabery regions. UNICEF continued to support CLTS activities in emergencies, resulting in more than 33,600 people living in an environment free of open defecation. To respond to the cholera epidemic, UNICEF support helped to reach more than 453,000 people with hygiene promotion and water treatment products.

Child protection

More than 7,500 children benefitted from psychosocial support through 57 child-friendly spaces in Diffa and Tillabery regions, including 14 dedicated to adolescents. UNICEF technical and financial support also reached 126 children suspected of association with armed groups. In addition, 112 out of the 178 unaccompanied and separated children were reunified with their family and 83 child refugees were transferred from Libyan detention facilities to the capital, Niamey, for resettlement. Child survivors of violence were afforded better services through the Child Survivor Initiative.

Education

Close to 40,000 children in regions affected by armed conflict were reached with formal and non-formal education. This was achieved through temporary or rehabilitated classrooms, a Back-to-School campaign, provision of learning material, teacher training and school risk preparedness and response plans.

Essential household items

More than 52,400 people affected by floods or forced displacement were provided with essential household items through a partnership with the Ministry of Humanitarian Action and Disaster Relief, the Civil Defense and the Rapid Response Mechanism.

More than 7,500 children benefitted from psychosocial support through 57 child-friendly spaces in Diffa and Tillabery regions, including 14 dedicated to adolescents.







A large network of community volunteers in six out of eight regions (Maradi, Zinder, Diffa, Tahoua, **Dosso and Tillabery**) in Niger is supported to promote positive family and childcare practices.

Cutting across programmes

"The current narrative on Niger is primarily focused on deprivations, inequalities and risks that youth and children face. We need a narrative that radiates hope and potential for Niger, a discourse that focuses on opportunities, linked to the potential of youth to contribute positively to its development and progress."

HE Mrs. Lalla Malika Issoufou, Niger's First Lady

UNICEF uses cross-cutting strategies to reinforce results for children across all sectors and programmes.

Partnerships with the media

Media engagement helped UNICEF to enhance awareness of key children's issues in Niger. More than 20 public events were covered by national media and 12 television programmes on the work of UNICEF and its partners were broadcasted on national television. UNICEF also organized its first-ever media competition to encourage journalists to report on children's rights. In addition, UNICEF online supporters doubled over the year with a 60,000-monthly reach and 10,000-monthly engagement.

Innovation

UNICEF is known for promoting innovative high and low-tech tools and strategies to accelerate results for children. In Niger, examples of this include a distance-coaching programme for teachers and school directors in Diffa region; tablet-based education in 10 schools across the country and radio education programming in crisis environments. Several data generation initiatives are also supported.

Community engagement

Community dialogue and engagement are a key means of creating social and behavioural change. A large network of community volunteers in six out of eight regions (Maradi, Zinder, Diffa, Tahoua, Dosso and Tillabery) in Niger is supported to promote positive family and childcare practices.

In 2018, key messages on health, nutrition, WASH, education and child protection were also amplified through 160 community radios and networks,



which helped to increase demand for social services and kept service providers accountable for the quality of services. More than 3,200 volunteers were trained and disseminated information on health and child protection.

Amplifying the voice and action of young people

To help youth organize and make their voice heard, UNICEF supported various platforms in 26 municipalities throughout the country. These included 44 youth peace brigades that mediate community conflicts and 19 youth dialogue structures that help young girls and boys to participate in municipal decision making. Around 1,600 youths, including 320 adolescent girls and young women, were active in these platforms.

Youth advocacy

UNICEF strengthened its youth-led advocacy efforts in 2018, including participation in the regional Africa Dialogue and #KidsTakeOver initiatives. In close collaboration with the African Development University, a series of #ActivateTalks were started, bringing together young people, innovators and thought-leaders to showcase solutions for issues confronting young people. This advocacy tool, inspired by TED talks, was supported by 52 digital influencers and reached an estimated 3 million people through social media.

Using technology and sports for youth empowerment

UNICEF supported the national competition 'e-Takara' to promote techbased youth projects that address the challenges faced by Nigerien youth. A national tournament for young girls was also organized through a partnership with the National Football Federation, generating public debates on gender stereotypes in the country.

Working with community leaders

UNICEF continued to work closely with 573 traditional and religious leaders to promote positive social norms. These leaders have a strong influence on communities and can share information on service availability and promote positive behaviour to enhance children's health, nutrition, education and protection. A milestone in children's rights was achieved by a prominent traditional leader in Tahoua region who banned child marriage in his constituency in 2018.

To help youth organize and make their voice heard, UNICEF supported various platforms in 26 municipalities throughout the country.



Finances

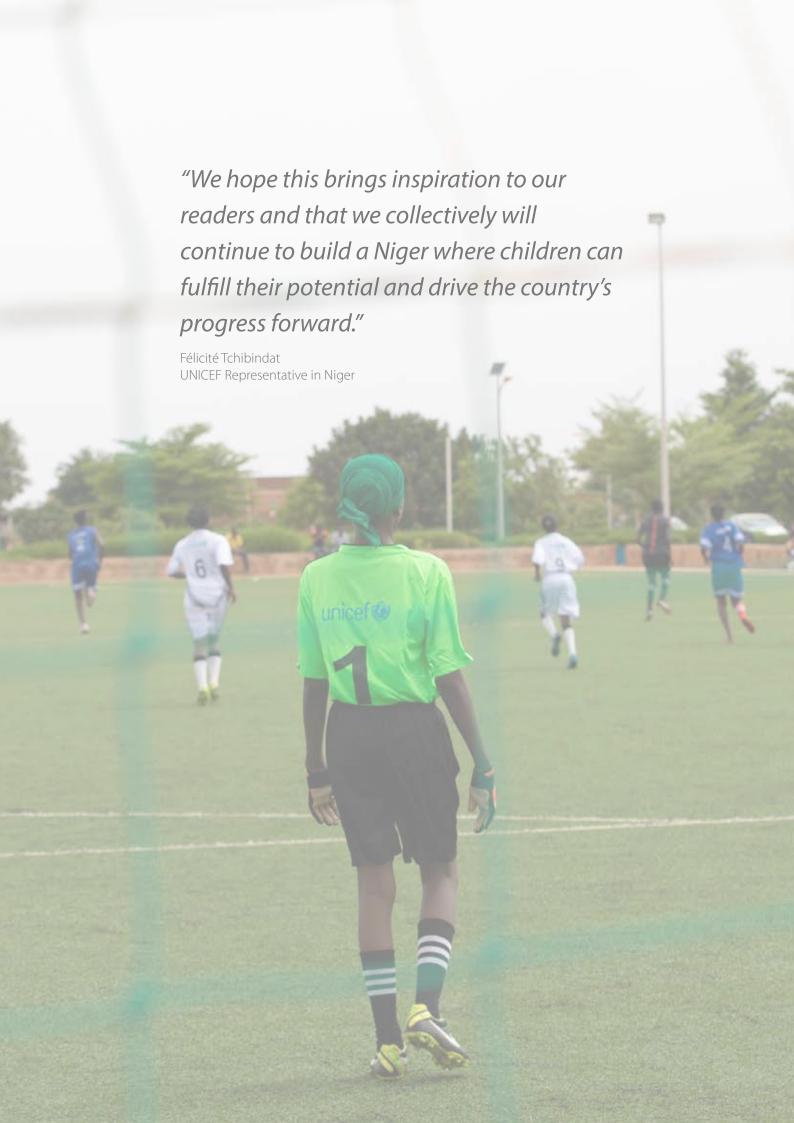
PROGRAMME BUDGET (US\$), 2018

Programme	Regular Resources (RR)	Other Resources – Regular (ORR)	Other Resources – Emergency (ORE)	Total Allocated
Health	4,044,017	3,717,465	601,254	8,362,736
Nutrition	3,122,303	1,802,499	27,389,886	32,314,688
Wash	2,053,788	935,091	3,309,324	6,298,203
Education	2,069,517	6,710,072	965,849	9,745,438
Child protection	2,796,994	2,140,015	1,458,600	6,395,608
Social policy	1,545,570	225,889		1,771,459
Communication for development	1,389,259	1,808,329	32,103	3,229,691
Programme effectiveness & intersectoral	6,984,701	415,397	1,856,186	9,256,284

DONOR CONTRIBUTIONS (US\$), 2018

Donor	Contribution (us\$)
Canada	2,091,402
Czech Republic	452,489
European Commission	6,166,646
France	629,972
French Committee for UNICEF	284,216
German Committee for UNICEF	2,969,765
Germany	61,364
Global – Education	328702
Global – Health	364,166
Global – Nutrition	328,702
Global – Thematic Humanitarian	93,405
Global – WASH	355161
Global Partnership for Education	515,747
Italian Committee for UNICEF	65,784
Japan	700,000
SIDA (Sweden)	731,172
Spain	571,429
The United Kingdom	10,448,747
UNAIDS	75,000
United States Fund for UNICEF	958,225
UNOCHA	1,956,977
USA (BPRM)	1,350,000
USA (OFDA)	234,825
USA (USAID)	200,000
USAID (Food for Peace)	4,000,000





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