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for every child

**FOR EVERY CHILD, A FAIR CHANCE**

**PARTNERING FOR THE WELL-BEING OF WOMEN AND CHILDREN IN NIGER**



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for every child

For more information

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## Dear Friends and Partners

The past years have been an exceptional journey for UNICEF in Niger. The country has made progress in advancing children's and women's rights.

The child mortality rate significantly decreased over the past decade from 328 to 95 per 1,000 live birth between 1990 and 2015 thanks to comprehensive health, nutrition and water, sanitation and hygiene interventions engaged by the Government and its partners.

UNICEF and its partners have led intensive advocacy efforts in the country, leading to substantial developments in legislations, policies, strategies and national programming. UNICEF took a leading role in organizing a roundtable on girls' education in 2017, resulting in a list of 10 Commitments signed consensually by the Government, Cooperating Partners, Civil Society and traditional, religious and community leaders, a first for Niger. This led to the adoption by the government of a decree in December 2017 for the protection of the girl-child in school to guarantee access and retention until age 16.

The government also demonstrated its engagement to tackle child marriage through a pledge to end this harmful practice and develop an action plan, made by the President of Niger during the high-level meeting of the African Union campaign. In child survival, the Government developed in 2017 its health sector development plan and adopted key policies in the Water, Hygiene and Sanitation sector, setting a clear vision for the development of those sectors for the coming years.

Niger continues however to face simultaneous emergencies that are stretching the capacities of the government and humanitarian partners to respond adequately. Children in Niger face malnutrition, recurrent disease epidemics and outbreaks, cyclical floods, drought and displacement. The situation is exacerbated by instability in neighboring countries, resulting in an influx of thousands of refugees, returnees and migrants, all needing access to basic social services for survival. The issue of migration has taken a new dimension with the evacuation of refugees and migrants from Libya to transit countries, including Niger.

The UNICEF Niger programme has made progress in leaps and bounds in many areas. It has not been without its challenges. But our vision has remained steadfast—to ensure that no child is left behind in Niger, and that the most vulnerable and disadvantaged children are given the best opportunity for a healthy life, to fulfil their potential and to remain protected against harm.

The current programme comes to its end in 2018. It offers the opportunity to align the new 2019-2021 Country Programme Document with the newly approved 2017-2021 national development plan, UNICEF's Strategic Plan 2018-2021 and the Sustainable Development Goals. We look to the future with optimism and with the willingness to work harder and more effectively for Niger's children.

For every child, a fair chance

Félicité Tchibindat  
UNICEF Representative in Niger

# UNICEF IN NIGER

## Niger: a nation with challenges and opportunities



Niger is a landlocked country of 1.27 million square kilometres situated in the heartland of the Sahel region with an estimated population of 21.5 million in 2018. It is bordering Algeria, Mali, Chad, Nigeria, Benin and Burkina Faso. It has ethnically diverse populations of 10 main ethnic groups (Hausa, Zerma, Songhai, Tuareg, Tubu, Arab, Peul, Kanuri, Budumas, Gurmanche).

Today, Niger has one of the fastest population growth rate in the world (3.9% p.a.), and the youngest population structure with a median population age of 15 (58.2% of the

population under the age of 18). Fertility rate is estimated at 7.3 births per woman. Despite its vast territory and underexploited natural resources (agricultural land, the Niger river, uranium, petrol, gold), Niger remains among the poorest country in the world in terms of GDP per capita (907 USD PPP).

Owing to rapid population growth and insufficiently high and sustained economic growth rates, GDP per capita in 2016 is 40% lower than in 1960. About 48% of children live under the monetary poverty line and 75% of under-five children are deprived from three or more essential access services.

Niger continues to be confronted with a very serious problem of undernutrition that include very high levels of acute and chronic malnutrition as well as rampant micronutrient malnutrition.

Niger's security environment has significantly deteriorated owing to heightened insecurity in neighbouring countries (Mali, Libya, Nigeria) affecting the North-West and South-East regions of Niger. With regards to all emergency situations, 2.3 million people are estimated to be in need of humanitarian assistance in 2018.

### Political and Economic Context

Politically, since the adoption of a new constitution in November 2010 and presidential elections in 2011 and 2016, Niger has known relative political stability although it continues to be exposed to significant social unrests. Over the past five years, regional issues have emerged negatively affecting the country's political and economic outlook.

Since 2011, violent extremist armed groups have been responsible for significant instances of violence perpetrated against civilians in the

regions of Diffa, Tillabéri, and along the border with Mali in Tahoua region. Violent criminal activities and transnational trafficking and smuggling activities also continue to negatively affect the security and stability of the country, especially in Agadez region, but also in Diffa, Tillabéri, Tahoua and Maradi regions.

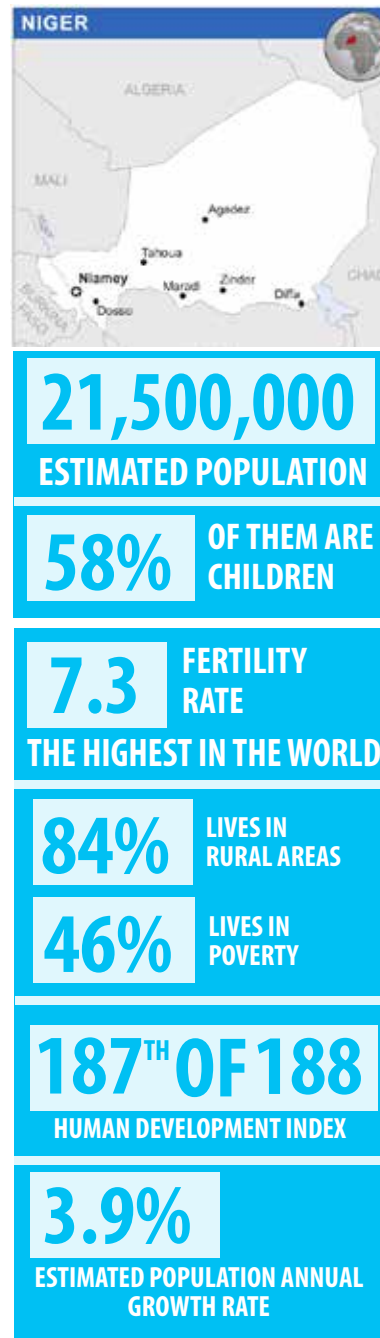
Niger is expected to remain a hub between Sub Saharan and northern Africa for trafficking and smuggling activities (such as migrants or fuel smuggling, weapons or drugs trafficking). A state of emergency has been declared in three regions (Diffa, Tillabéri et Tahoua) due to rising insecurity stemming from the fallout of the Libya crisis in 2011, insurgency and extremist groups spilling over from Mali (various Djihadist groups) since 2012 and Nigeria (Boko Haram) since 2015. In 2017, 248,000 people in Diffa (equivalent to 37% of the region's population) have been forcibly displaced.

Falling oil and uranium world prices, economic recession in Nigeria, reliance on rain-fed agricultural which employs the vast majority of the population, makes Niger's economy vulnerable to shocks and longer-term global commodity price trends and have constrained the government's ability to collect revenue in recent years. With Niger's population rising exponentially

(3.9% per annum in 2012 equivalent to doubling population time of 18 years), policymakers are confronted to the difficult task of increasing the coverage of essential social services while improving the quality of these services at the same time.

Economic growth slowed from 11.8% in 2012 to 5% in 2015. The government's ability to invest in social and economic infrastructure is constrained by the country having a structurally low taxation base (below 18% of GDP) as well as rising defence and security expenses due to the deteriorating security environment. Consequently, Niger's budget deficit increased from 1.2% of GDP in 2012 to 6.1% in 2015.

In 2017, greater efforts have been made to accelerate the implementation of policies aimed at improving budget transparency and accountability, and decentralising competencies and resources to municipalities in key domains concerning the well-being of children (education, health, water and sanitation, environment) ■



# SITUATION OF WOMEN AND CHILDREN

Niger's population of 21.5 million in 2018 is 50% female, 80% rural and 58.2% (12 million) below 18 years. In 2016, around 49 per cent of the population live under the national consumption poverty line, 46 percent in extreme poverty (1.90 USD per day). As they grow up, children face high likelihood to see their human development potential stemmed, with compromised productive and earning capacity during adulthood, locking them into a vicious circle of intergenerational transmission of poverty.

## For every child, nutrition

Niger continues to be confronted with a very serious problem of undernutrition that includes very high levels of acute and chronic malnutrition as well as rampant micronutrient malnutrition. Rates of acute malnutrition typically signify an emergency level, even in years and places of no declared food and livelihood emergencies, and estimated to affect over a million children annually, of which some 400,000 with a severe form of acute malnutrition with elevated risk of mortality. Currently, about

one in two children under five years of age (about 2 million) are suffering from chronic malnutrition, are thus at increased risk of death and chronic diseases and potentially compromised cognitive development.

With rapidly increasing population growth, even with significant efforts in treatment and prevention, high burden of undernutrition is likely to continue. While the country has made significant efforts in service delivery and improving enabling environment, nutrition efforts continue to be hampered by lack of predictable funding. Over 90% of resources currently invested for scaling up nutrition interventions are from humanitarian sources or development funding with one-off, short – medium term contribution.

According to a recent investment case analysis supported by UNICEF, the impending withdrawal of humanitarian funding for national nutrition program (planned by 2019) and the end of programs supported by development funding (with most ending by mid-2018) may contribute to unravel progress in preventing and treating malnutrition achieved thus far and may adversely affect the positive trend in mortality reduction.

## Giving every child the best start in life

As three in four girls in Niger are married before the age of 18 (one in 4 before the age of 15), girls become a mother very early with known consequences on their development potential. High rates of malnutrition, high prevalence of violence against children, and low accessibility to pre-school learning opportunities, compounded by the extremely low literacy rate among parents and carers, and widespread monetary and multidimensional poverty, contribute to creating an unfavourable environment hampering the human potential of children in Niger.

## For every child, health

There has been important progress in reducing child mortality with over the period 1990-2015 with under-five mortality rate decreasing from 328 to 95 deaths for 1,000 livebirths. Main causes of child deaths are pneumonia (19%), diarrhoea (11%), malaria (11%), meningitis (5%), prematurity (9%), asphyxia (8%), and infections (6%). Maternal mortality remains high at 535 deaths per 100,000 livebirths. Most causes of deaths among children and women

are due to low access to quality preventive and curative care with just 48% of children and mothers living within 5 km of a health centre providing essential health care in 2015 (PDS). For instance, less than one-fifth of emergency basic obstetric maternal and neonatal emergency care needs are covered, exclusive breastfeeding during the first 6 months of life is practiced by less than 25% of mothers, and only 20% of under-five children sleep under insecticide-treated bed nets.

#### For every child, safe water

Use of improved drinking water sources increased from 34% in 1990 to 58% in 2015 despite major hydrogeological constraints. However, Niger is also facing the effects of climate change and variability that affect the availability of water resources due to the progressive drying up of surface water and the low recharge of groundwater. Eliminating open defecation remains a challenge, as it is practiced by about 73% of the population (against 85% in 1990) including 86% in rural areas compared to 14% in urban areas. Rapid urbanisation compounded by the lack of urban planning lead to increased risks of flooding and epidemics affecting urban population due to lack of systems and infrastructures for the treatment

of waste water and insufficient waste and sludge management.

#### All children learning

Niger has made significant progress since 2001 in expanding access to education. In 2016 the gross enrolment ratio in primary education stood at 76% (compared to 35% in 2001) while in lower secondary education it was about 34%. Nevertheless, Niger's education system continues to face severe internal efficiency, quality, and exclusion issues. In 2016, the completion rate for primary education was 78% but dropped to 19% for lower secondary education. The average repetition rate was as high as 19%. According to the latest 2014 PASEC assessment, over 93% of pupils in primary grade 2 and primary grade 5 do not reach a sufficient threshold of competency in reading and mathematics. School exclusion remains widespread with 38% of primary school age children and 70% of lower secondary school age adolescent estimated to be out-of-school. In terms of equity, significant disparities remain unsolved. Girls continue to face extremely reduced chances to access education (the gender parity index at 0.83 for based completion rate in primary education, and at 0.73 for completion rate in lower secondary education); geographic disparities are even

greater with Diffa standing for the most marginalized region (primary completion rate is 22 percentage points below the national average); children from the poorest households are 1.6 times more likely to never attend school than the children from the richest households. In recent years, although the education sector benefits from approximately 20% of the state budget, this share of public expenditures is below that dedicated by other countries in the Sahel to the education sector (e.g. 30-35% in Burkina Faso, Mali and Senegal).

#### All children protected from violence, abuse and exploitation

Most children in Niger grow up in economically vulnerable families where they are exposed to significant risks of abuse, exploitation and violence. Three out of four girls in Niger are married before their 18th birthday, the highest rate globally. In response to the Boko Haram instigated humanitarian crisis in the east of the country, UNICEF has supported 12,000 displaced children to receive psychosocial support in child-friendly spaces as well as 150 children formerly associated with armed groups benefiting from programmes aimed at reintegrating them back into their communities. The national birth registration rate is only 64% ■

# WHAT IS LIKE TO BE A CHILD IN NIGER ?

Growing up in Niger is not easy. The journey from a mother's womb to the vulnerable adolescent years is fraught with risk and challenges. Niger has the world's eleventh highest rate of mortality among children under the age of 5, a population that barely has access to proper sanitation. Primary and secondary school attendance is low, early marriage is very common and child care and feeding practices are poor, contributing to high levels of child illness and death.

**52%**

of the population uses basic drinking water services

**73%**

of the population still practices open defecation.

**76%**

Primary gross enrollement rate

**34%**

Secondary gross enrollment rate



**38%**

of primary school age children are out-of-schools

**78%**

of lower secondary school age children are out-of-schools



**49%**

of the population has access to mobile phone

**4%**

of the population has access to internet

**4 out of 10**

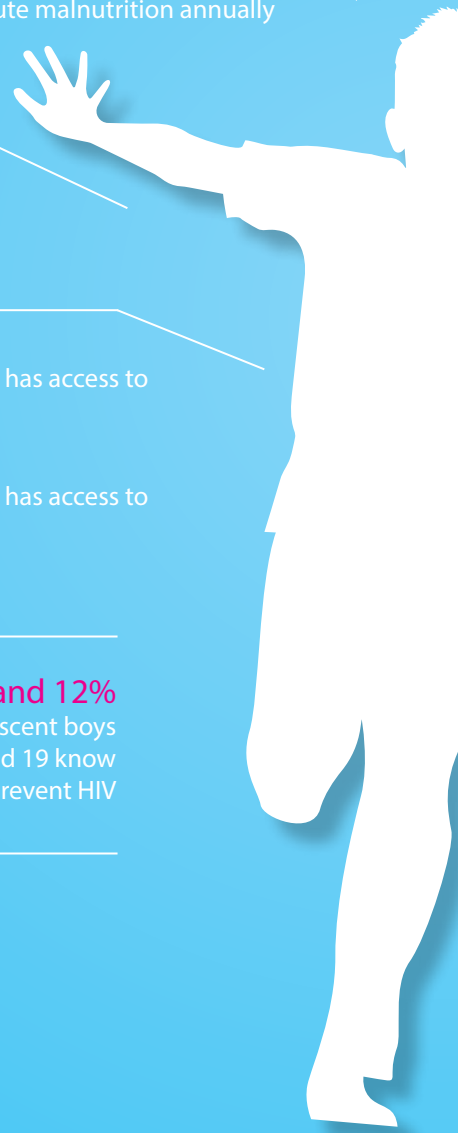
children under 5 years of age are stunted

**350,000+**

children under 5 years require treatment for severe acute malnutrition annually

**21% and 12%**

of respectively adolescent boys and girls aged 10 and 19 know the means to prevent HIV





**1 in 10 (95/1,000)**  
children will never  
celebrate their 5th birthday



**2%**  
of women and girls  
have undergone FGM/C

**86,000**  
children under-5 still die  
every year from preventable  
and treatable diseases

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



**Only 20%**  
of children sleep under ITNs

**1 in 4**  
girls are married before  
the age of 15

**48,000**  
people live with HIV

**31%**  
Estimated rate of child  
labour

**52%**  
of pregnant women receive ARVs for  
PMTCT

**38%**  
Antenatal care (4 visits)



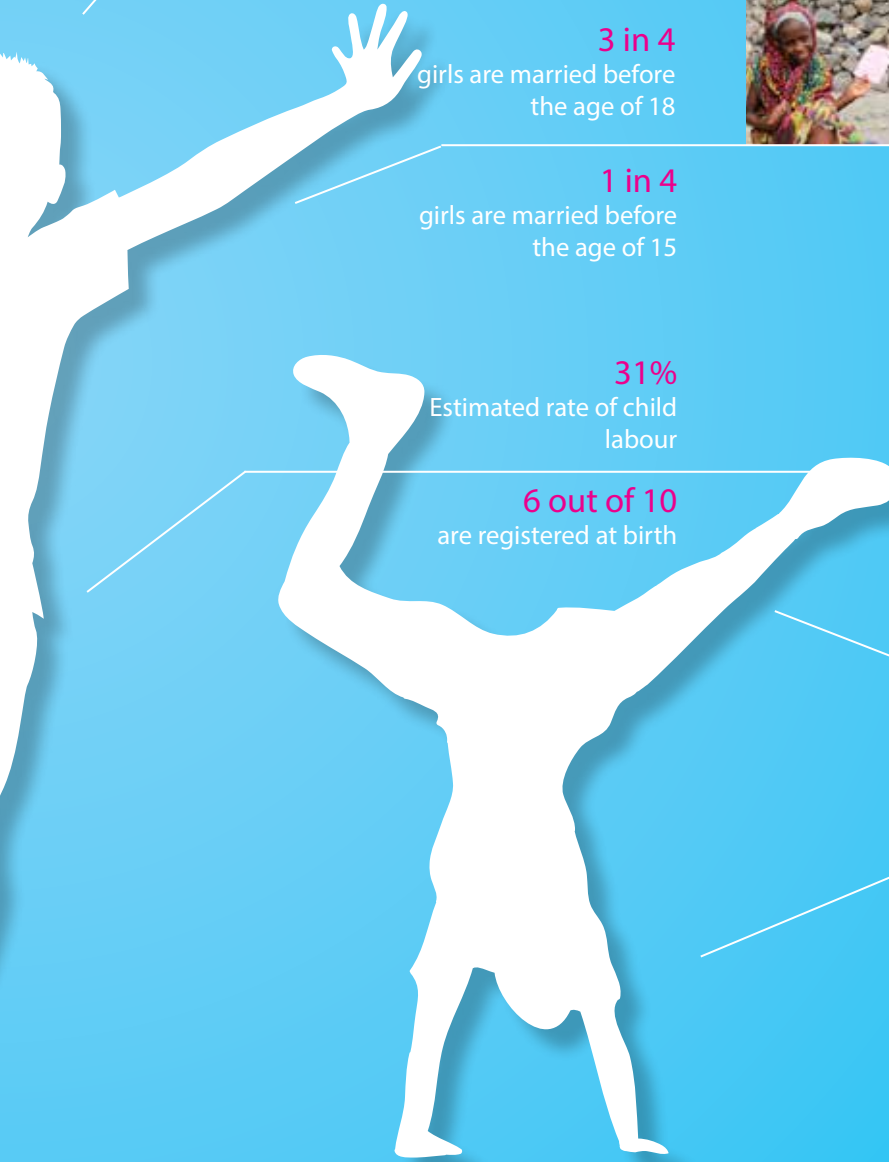
**6 out of 10**  
are registered at birth

**1 in 4**  
children are exclusively  
breastfed

**4 in 10**  
of women give birth with the help  
of qualified health personnel



**1 in 23 (535/100,000 live births)**  
women risk of maternal death



## Partnering for the well-being of women and children



UNICEF is mandated to advocate for the protection of children's rights, help meet their basic needs and expand their opportunities to reach their full potential. In Niger, UNICEF and its partners have a critical role to play given the poor development outcomes experienced by children, who make up 58 per cent of the total population of 21.5 million.

Addressing the major challenges to the realization of children's rights in Niger is therefore the main thrust of the 2014-2018 Government of Niger-UNICEF country programme. The programme was launched in 2014 after an extensive consultative process with the Government of

Niger and other key stakeholders.

The current country programme has six programme components: child survival and development, which comprises the sub-components health, water, sanitation and hygiene (WASH) and HIV and AIDS; nutrition; education; child protection; communication for development; social policy, planning and monitoring and evaluation and cross-cutting humanitarian action and communication, advocacy and partnerships for children.

UNICEF focuses its efforts 'upstream' to create an enabling national policy and legislative environment for child rights, and 'downstream', prioritising geographical areas or population groups that are the most vulnerable, disadvantaged and under-reached by essential social services. The overall aim is to reduce social disparities and build resilience among communities affected by crises and shocks to their livelihoods.

The country program aims to strengthen existing partnerships with the Government, national and international NGOs, technical and financial partners and donors, in order to maximize both the overall and the sectoral results. Partnerships with national and local entities

(communities, youth associations, local authorities, the media and the national private sector) play a key role in the areas of social and community change and advocacy in respect of children's rights. Within the United Nations system, the programme is implementing joint initiatives with other UN agencies on topics such as resilience through the convergence municipalities' strategy.

UNICEF continues to leverage resources from international development cooperation partners in accordance with the international principles and standards elaborated within the Paris Declaration.

Opportunities for UNICEF to build strategic public-private partnerships remain dependent upon a range of political and economic factors. UNICEF remains committed to advancing emerging opportunities, particularly in programme areas such as Climate change, "Children on the Move", Migration, demographic dividend, youth and the 'second decade of life', Nutrition (food fortification initiatives). Non-traditional areas such as youth skills development, are also anticipated to provide opportunities for high impact public-private partnerships ■

# WHAT DO UNICEF AND PARTNERS WANT TO ACHIEVE?

## Education

School-age children, especially girls, children living in rural areas and vulnerable children have access to and make greater use of quality basic education services.



## Nutrition

Children under 5 years of age and pregnant and breastfeeding women, particularly the most vulnerable, have access to and make greater use of quality promotional, preventive and curative care services for the prevention of chronic malnutrition, management of acute malnutrition and reduction of micronutrient deficiencies.



## Child Protection

The most vulnerable children and adolescents are better protected from abuse, violence and exploitation.

## Social policy, planning, monitoring and evaluation

The rights of children, particularly the most vulnerable, are better reflected in national and local development policies, strategies and programmes, as well as in the allocation and use of public resources



## Communication for development

Leaders, communities, families and young people adopt norms and behaviours that are more favourable for the survival, development, protection and participation of children.

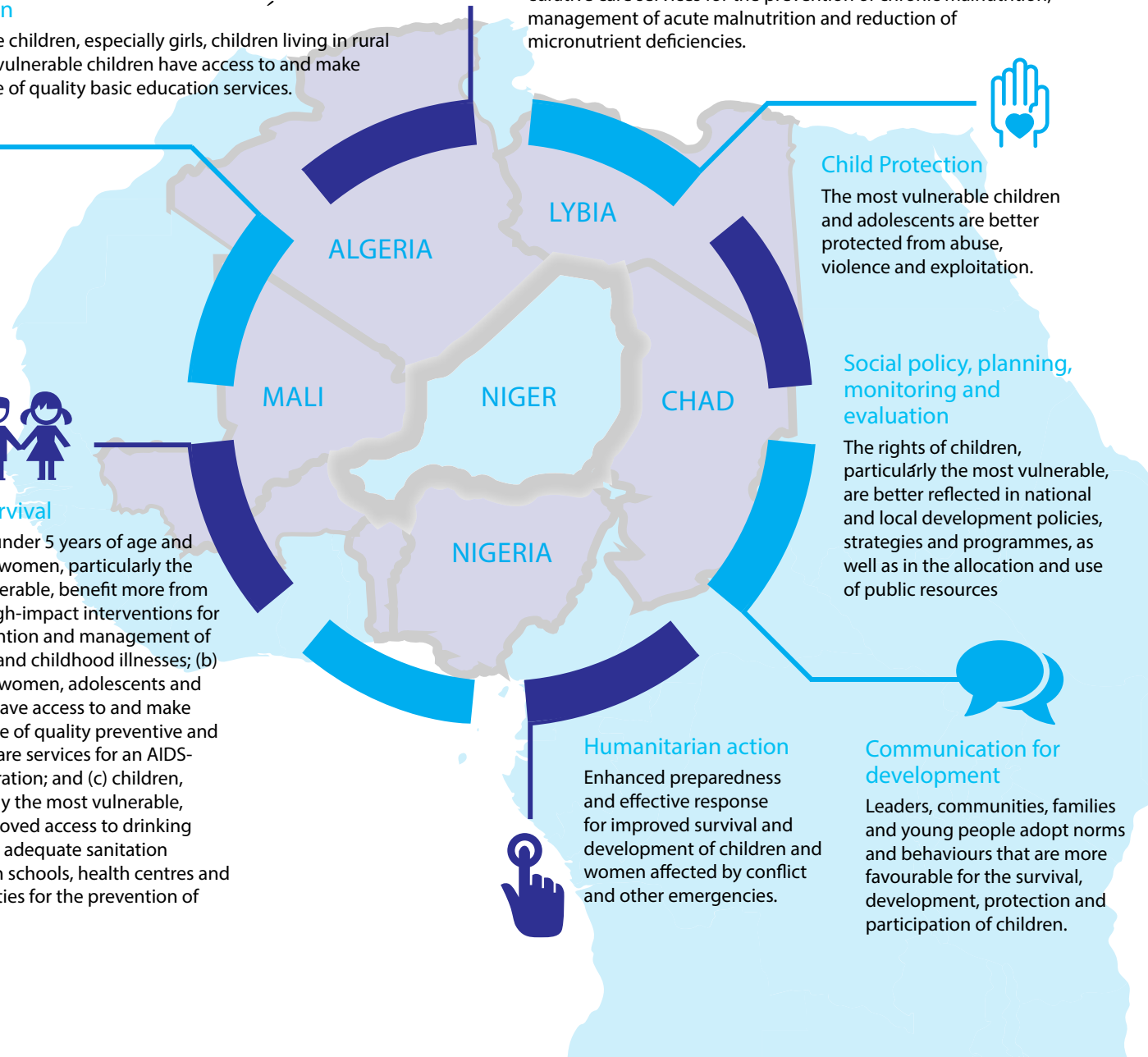
## Humanitarian action

Enhanced preparedness and effective response for improved survival and development of children and women affected by conflict and other emergencies.



## Child survival

Children under 5 years of age and pregnant women, particularly the most vulnerable, benefit more from quality high-impact interventions for the prevention and management of maternal and childhood illnesses; (b) pregnant women, adolescents and children have access to and make greater use of quality preventive and curative care services for an AIDS-free generation; and (c) children, particularly the most vulnerable, have improved access to drinking water and adequate sanitation facilities in schools, health centres and communities for the prevention of illnesses.



OVERALL



VISION

ENSURE THE FULL REALISATION OF THE RIGHTS OF CHILDREN IN NIGER AND A REDUCTION OF DISPARITIES, WITH THE AIM OF ACHIEVING EQUITY

EVERY CHILD SURVIVES AND THRIVES

EVERY CHILD LIVES IN A SAFE AND CLEAN ENVIRONMENT

EVERY CHILD AND ADOLESCENT LEARNS

EVERY CHILD IS PROTECTED FROM VIOLENCE AND EXPLOITATION

EVERY CHILD HAS A FAIR CHANCE IN LIFE

HOW DO WE PLAN



TO ACHIEVE IT?



MODELLING INNOVATIVE SERVICE DELIVERY AND COMMUNITY ENGAGEMENT



RIGOROUS EVIDENCE GENERATION TO DEMONSTRATE EFFECTIVENESS OF APPROACHES FOR ADVOCACY



STRATEGIC PARTNERSHIPS WITH UNITED NATIONS AGENCIES AND DEVELOPMENT PARTNERS



POSITIONING UNICEF AS KNOWLEDGE BROKER ON CHILDREN'S ISSUES

KEY



STRATEGIES



CAPACITY AND SYSTEM-BUILDING AND DELIVERY OF INTEGRATED PACKAGES OF INTERVENTIONS



GEOGRAPHICAL TARGETING ON THE MOST DEPRIVED REGIONS AND AREAS OF AGADEZ, DIFFA, MARADI, TILLABERI, DOSSO, TAHOUA AND ZINDER



ENHANCED FOCUS ON COMMUNITY PARTICIPATION AND SOCIAL AND BEHAVIOUR CHANGE



## CHILD SURVIVAL



## NUTRITION



## EDUCATION



## CHILD PROTECTION



### HEALTH

Quality high-impact interventions for the prevention and management of maternal and childhood illness



### HIV-AIDS

Access and use of quality preventive and curative care services for an AIDS-free generation



### WATER, SANITATION AND HYGIENE

Access to improved water sources & adequate sanitation in schools, health centers, communities



Access and use of quality promotional, preventive and curative services for the prevention of chronic malnutrition, management of acute malnutrition and reduction of micronutrient deficiencies



Access to and make greater use of quality basic education services



Children and adolescents, particularly the most vulnerable, are better protected against abuse, violence and exploitation



## COMMUNICATION FOR DEVELOPMENT

Leaders, communities, families and young people adopt norms and attitudes more favorable to the survival, development, protection and participation of children, including in emergency situations



## SOCIAL POLICY, PLANNING, MONITORING AND EVALUATION

Children, especially the most disadvantaged enjoy better recognition of their rights in national and local development policies, strategies and programmes as well as through allocations of public resources

## CROSSCUTTING PROGRAMMING

## EXTERNAL COMMUNICATION, ADVOCACY AND PARTNERSHIP FOR CHILD RIGHTS

# WHY INVEST IN NIGER? WHY UNICEF?



Niger is witnessing a profound shift in national priorities and dynamics, driven by an increasing investment in new strategies that aim at lifting thousands of people out of poverty.

The government's current vision for the country is unprecedented in its goals and scale. The newly developed Niger 2035 Sustainable Development and Inclusive Growth Strategy (SDDCI) aims for a dramatic expansion of individual capabilities and sustained human development progress. In this line, the five-year

Economic and Social Development plan II (PDES) 2017-2021 aims to stimulate economic growth through job creation in order to diminish poverty in a sustainable way. Owing to advocacy efforts from UNICEF and development partners, key issues affecting children were addressed in the new national development plan, notably in the areas of girls' education, child health and nutrition, and women's empowerment.

## Capitalising on this momentum

UNICEF can capitalise on this momentum and bring the

uniqueness and compelling strength of the equity approach it follows to help the country understand and address the root causes of inequity so that all children, particularly those who suffer the worst deprivations in society, have access to education, health care, sanitation, clean water, protection and other services necessary for their survival, growth and development.

## Making the difference

The UNICEF office in Niger was established in 1972. Since then, it has been continuously working to build a system that safeguards and promotes the chances of a better future for all children in Niger, promoting strategic thinking around important development issues and, whenever necessary, providing the basic ingredients to make it work.

The way in which UNICEF has been contributing to reduce child mortality provides a good example of the organization's ability to balance upstream and downstream work to adequately respond to children's needs. In face of the unacceptable death figures, UNICEF introduced the community-based approach for integrated management of childhood illnesses as a way to prevent fatalities by

improving child health through the community.

To make a meaningful difference in children's lives, it is important to be at the right place, at the right time. Our steady upstream work allows us to be strategically positioned to support the government in moments that can be decisive for the country to move forward and to take the right decisions.

An important example of this happened recently, in the education sector. UNICEF took a leading role in organizing a roundtable on girls' education in 2017, resulting in a list of 10 Commitments signed consensually by the Government, Cooperating Partners, Civil Society and traditional, religious and community leaders, a first for Niger. This led to the adoption by the government of a decree in December 2017 for the protection of the girl-child in school to guarantee access and retention until age 16.

The overall direction and strategy for our action falls within the United Nations Development Framework (UNDAF), which is itself set in line with the priorities of the Government of Niger.

### Large-scale interventions

All children should be given an opportunity to fully develop

their potential, and participate meaningfully in the events and processes that shape their lives. For this reason we work to protect and promote all their rights; and, in some areas, the scale of our interventions has the potential to make a difference in the life of every single child.

This is the case for example for immunisation. In Niger, UNICEF supplies all vaccines used by the national Programme of Immunisation. If we are able to reach the aspired universal coverage, we will be benefiting every child under five years old with an intervention that can be life-saving.

The scale of UNICEF's work in nutrition is also worth mentioning. UNICEF supports the Government in running the national treatment programme for severe acute malnutrition, and provides the necessary therapeutic feeding supplies for all affected Nigerien children.

### Knowledge Leadership

Over the years, UNICEF has been conducting or supporting research, analyses and publications that have been pivotal to shed light on the situation of children of Niger and advise decision-makers on the best strategies to achieve changes for children. For instance, Niger's

2035 Sustainable Development and Inclusive Growth Strategy (SDDCI), the National Gender Policy and the five-year Economic and Social Development plan II (PDES) 2017-2021 were finalised in 2017 with technical support from UNICEF and development partners. UNICEF also developed a cost-effectiveness analysis of the national multisectoral nutrition security policy action plan, to help decision-makers prioritize interventions to achieve the greatest impact.

### Partnerships, Leveraging and Convening Power

UNICEF has built the reputation of a credible partner. UNICEF is frequently called to solve issues and convene partners, particularly in situations in which mandates overlap and thus responsibilities are not clear. UNICEF Niger continues to foster strategic partnerships with sister agencies, technical and financial partners, civil society organisations, media and members of parliaments to advance children's rights in Niger ■

# Thank You!

UNICEF is funded entirely by voluntary contributions. Our work in Niger would not be possible without the sustained commitment, efforts, and the generous contributions received from committed partners. We thank all our donors for their support and look forward to continued collaboration to ensure a better future for all children in Niger.

## UNICEF National Committees

Consolidated Funds from National Committees  
French Committee for UNICEF  
German Committee for UNICEF  
Italian Committee for UNICEF  
Spanish Committee for UNICEF  
Swedish Committee for UNICEF  
United States Fund for UNICEF  
UNICEF Mexico

## Bilaterals

The Government of Australia  
The Government of Canada  
The Government of France  
The Government of Germany  
The Government of Italy  
The Government of Japan  
The Government of Netherlands  
The Government of Niger  
The Government of Norway  
The Government of Spain  
The Government of Switzerland  
The United Kingdom

Swedish International Development Cooperation Agency  
Norwegian Agency for Development Cooperation  
Bureau of Population, Refugees and Migration, U.S. Department of State  
Office of U.S. Foreign Disaster Assistance  
USAID Food For Peace

## Multilaterals, Foundation and Alliances

European Commission  
European Civil Protection and Humanitarian Aid Operations  
GAVI, the Vaccine Alliance  
Bill and Melinda Gates Foundation  
Centers for Disease Control and Prevention  
African Development Bank

## United Nations

UNDP – Multi Donor Trust Fund  
UNDP  
UNFPA  
UNOCHA CERF  
World Food Program



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