The four main areas of humanitarian concern in Niger are child malnutrition, meningitis and cholera outbreaks, cyclical water floods and the insurgency of rebel groups in the region of Agadez since April 2007. UNICEF’s humanitarian action in 2008 will cover the needs of 350,000 malnourished children and reach 10,000 mothers and children affected by disease outbreaks, floods and the insecurity in the North.

### Summary of UNICEF financial needs for 2008

<table>
<thead>
<tr>
<th>Sector</th>
<th>US$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health and nutrition</td>
<td>6,413,000</td>
</tr>
<tr>
<td>Water, sanitation and hygiene</td>
<td>791,000</td>
</tr>
<tr>
<td>Education</td>
<td>230,000</td>
</tr>
<tr>
<td>Child protection</td>
<td>50,000</td>
</tr>
<tr>
<td>Mine action</td>
<td>40,000</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>7,524,000</strong></td>
</tr>
</tbody>
</table>

*The total includes a maximum recovery rate of 7 per cent. The actual recovery rate on contributions will be calculated in accordance with UNICEF Executive Board Decision 2006/7 dated 9 June 2006.*
1. CRITICAL ISSUES FOR CHILDREN

Child hunger and malnutrition still were a humanitarian issue in Niger in 2007 and will continue to be in 2008. The decline in global acute malnutrition (GAM) reported throughout 2006 shows the effectiveness of humanitarian response, however, the most recent survey conducted at the beginning of the lean season in June 2007 shows a slight increase in malnutrition rates. Malnutrition rates are still above alarm levels and conceal even more alarming situations for localized pockets of population and vulnerable age groups.

- Children under three are the most affected by malnutrition: 15.5 per cent of children aged 6-35 months are acutely undernourished. The situation is especially worrying in the regions of Agadez, Diffa, Maradi and Zinder where, in some areas, severe acute malnutrition in children under three is above the levels reached in 2005.

- Two regions out of eight are above the emergency threshold (>15 per cent), revealing a recent significant deterioration of the nutritional status of children under five. The global acute malnutrition rate is at a troubling 19.6 per cent in Diffa. In Agadez (17.5 per cent), the situation may be linked to the disruption in the provision of health services and in movement of people and goods following the insecurity experienced in the last few months.

- In the regions of Maradi and Zinder, considered as prime farming areas, the situation is also critical. Acute malnutrition rates have increased sharply during the 2007 lean season reaching 11.8 per cent and 14.2 per cent respectively.

The country cyclically faces epidemic outbreaks, particularly cholera and meningitis (type A and occasionally W135 and X). However, a comparison between the incidence of cholera and meningitis in July 2006 and July 2007 shows a drastic decrease in the entity of the outbreaks. In July 2006, 4,493 meningitis cases and 326 cholera cases were registered, compared to July 2007 figures of 22 cases of meningitis and 18 cases of cholera. Maintaining high alert levels and pursuing social mobilization on water, sanitation and hygiene is therefore crucial to continue containing epidemics.

Poor lodging conditions associated with widespread poverty in rural areas and inadequate water infrastructures expose the populations to cyclical flooding. The August and September 2007 floods affected 49,000 people in 7,300 households in seven of Niger’s eight regions.

Civilians are increasingly being caught up in insecurity caused by fighting between the Nigerien army and armed militias in the northern region of Agadez. This is expected to further impoverish the chronically poor and the vulnerable nomadic populations, putting children and women at great risk of marginalization, exploitation and trafficking. Since April 2007, clashes between rebel groups and the Government have caused the displacement of approximately 25,000 people. The situation is aggravated by the presence of anti-personnel mines in strategic areas. Although no mine injuries to children have been reported until today, it is imperative for UNICEF to begin mine-awareness education in the region affected by the insecurity.

2. KEY ACTIONS AND ACHIEVEMENTS IN 2007

As nutrition sector lead, UNICEF successfully supported the Government of Niger in the coordination of a network of 20 international and national NGOs for the treatment of acute malnutrition. A major effort was placed on making current nutrition response activities sustainable, by committing NGOs to play a coaching role rather than direct implementer and to further integrate their activities into national initiatives and standard protocols.

As of October 2005, a total of 221,540 malnourished children were treated at UNICEF-supported nutritional supplementary and therapeutic feeding centres. A blanket feeding operation reached approximately 80,000 children under three years of age in the regions of Tahoua, Maradi, Zinder and Agadez. In response to the June 2007 nutrition survey, UNICEF, the World Food Programme (WFP) and other partners have extended blanket feeding to 16,540 additional children in Tchirozérine (Agadez region), Boboye (Dosso region) and Gouré (Zinder region). In the region of Diffa, 52,000 under-five children received blanket supplementary foods, deworming, and vitamin A supplementation associated with mass screening for severe cases.
For the first time, the country can rely on an effective contingency plan to handle cholera that has facilitated the response to the 2007 outbreak. UNICEF provided emergency supplies to treat 1,000 severe cholera cases, most of them children under 18 years of age. Additional supplies for sanitation and hygiene (more than 370 kg of chlorine tablets) were provided to allow intervention teams to disinfect wells, houses and clinics.

A total of 224,475 people were vaccinated during the meningitis epidemic in the region of Doutchi and 350 children were treated with adequate antibiotics.

UNICEF contributed to the 2007 floods emergency response by reaching approximately 4,000 women and children with family kits, including insecticide-treated mosquito nets, blankets, 20-litre tanks, soap and 20 metres of tarpaulin for each family.

Despite the encouraging progress achieved in the education sector in recent years (gross enrolment rate has rocketed up from 37 per cent in 2000 to 57 per cent in 2007), the situation is still very challenging. Issues such as gender disparities, inadequate learning conditions and difficult school access for nomadic populations and the chronically poor are becoming more complex due to the insecurity in the northern area.

### 3. PLANNED HUMANITARIAN ACTION FOR 2008

#### Coordination and partnership
UNICEF will continue to participate in the emergency preparedness and response coordination mechanism chaired by the Secretary-General of the Cabinet of the Prime Minister, through a joint consultation committee that includes Government partners, UN agencies, the donor community and the network of NGOs. It will also provide leadership to the nutrition cluster.

#### Regular programme
The activities to be funded by this emergency appeal are complementary to the regular Country Programme activities, with a particular focus on the reinforcement of basic health services as part of the strategy to accelerate child survival and development through the implementation of evidence-based high-impact interventions at scale.

#### Health and nutrition (US$ 6,413,000)
In the area of nutrition, the overall goal is to reduce child mortality, to maintain the rate of acute malnutrition at or below 10 per cent by treating 350,000 under-five children (50,000 severe cases and 300,000 moderate cases) and, in the longer term, reduce the rate of stunting. The strategic approach adopted with national authorities and international NGOs is to implement curative and preventive packages of evidence-based high-impact interventions, including support to nutritional therapeutic and supplementary feeding centres through the national health system facilities and communities, and to implement effective nutritional surveillance. A nationwide blanket feeding operation is also part of the 2008 plan.

In the area of infectious and waterborne diseases, such as cholera and meningitis, UNICEF will further reinforce national and local preparedness prepositioning medical supplies and drugs in high-risk health districts. Alert will be particularly high given the strong risk of X meningitis outbreak in the Niamey urban area. UNICEF will also support the promotion of oral rehydration therapy and improved sanitation.

UNICEF will provide medical supplies to cover the needs of up to 10,000 people who may be displaced by floods or by the conflict in the northern area.

#### Water, hygiene and sanitation (US$ 791,000)
UNICEF needs to prepare for the displacement of people due to conflict or floods, and has estimated to approximately 10,000 people the possible flow in 2008. UNICEF will provide water and sanitation equipment, including water tanks, water cans, cups, water purification tablets, rakes and shovels to each household. It will also support the construction of latrines for those schools, health centres and households affected by the humanitarian crisis. Disinfestations and desludging are included in the immediate humanitarian response plan.
Education (US$ 230 000)
The education programme will focus on the training of education managers on minimal norms for education in emergency situations, and will provide teacher/parent education on key nutrition and hygiene practices in 50 preschool centres and 100 schools. Should population displacement continue through 2008 due to floods or to the escalation of the northern insecurity, UNICEF will support the schools receiving displaced children by distributing school kits and material to build temporary learning spaces. For those schools which may be damaged by floods, UNICEF will support the reconstruction/rehabilitation of classrooms.

Child protection (US$ 50,000)
UNICEF plans to reinforce those grass-roots organizations and NGOs which are organizing income-generating activities in the areas affected by the insecurity and those areas where natural disasters are likely to occur in 2008. The current forecast is to assist 1,000 disadvantaged households.

Mine action (US$ 40,000)
In 2008, UNICEF will begin its mine-risk education (MRE) in schools and communities of the northern region of Agadez. Activities will include the development of locally adapted education tools and the training of trainers on MRE.