This document complements the 2019–2020 Country operational plan and reflects IFRC support to the Niger Red Cross Society in the agreed areas of focus.

Main challenges in the country

According to the 2018 UN Human Development Index update, Niger is the lowest-ranked country in the world (189th). Niger is frequently affected by serious disasters such as floods, epidemics outbreaks, drought, food and nutritional insecurity, locusts. With the population of more than 22 million and the population growth rate of 3.9%, the population is extremely young. Scarcity, precarious living conditions as well as discrepancy between the population growth and economic growth (around 3.2%) represent an increasing challenge for the country, especially in the sectors of health, education and infrastructure. In addition, insecurity in neighbouring countries (Mali, Libya and Nigeria) as well as the military insurgency presence in Nigeria trigger massive population movements to and within Niger and exacerbate the vulnerability of people already suffering in the weak economy. The situation is currently worsening in 3 regions under the state of emergency, in Tillabery, Tahoua and Diffa. Most of Niger’s inhabitants are
subsistence farmers with small plots of dusty, infertile land. Recent droughts have worsened the food security and the overall humanitarian situation. For 2019, the humanitarian community in Niger anticipates 2.3 million people in need of humanitarian assistance, with an exponential increase of 500,000 people compared to 2018.

Humanitarian interventions largely depend on the country context. With reference to Niger, IFRC identifies a number of main risk factors influencing humanitarian access and capabilities to intervene. Inadequate funding represents the highest risk. Probability of military insurgency, limited logistics capacities and non-adherence to relevant procurement procedures represent medium risks. However, all of them have high impact.

The National Society role and profile

The Niger Red Cross Society (NRCS) has a very good reputation throughout the country and a long-standing experience in the areas of health and nutrition, food security, water, sanitation and hygiene, migration and disaster management. Since 2015, the National Society has been involved in several major humanitarian interventions such as Diffa region humanitarian crisis, outbreak of the Rift Valley fever, Niger meningitis operation, Niger hepatitis intervention, Niger Food Security and Nutrition intervention in Dosso region as well as Niger Floods. In 2018, they embarked on a complex emergency operation in Diffa region that will continue into early 2019, targeting 43,000 people (6,159 households) with health and WASH activities for 12 months.

Their interventions are based on the 2017–2021 National Society strategic plan, addressing key humanitarian issues in alignment with IFRC Strategy 2020, the 2017–2021 Social and Development Plan developed by the Niger Ministry of Planning, Africa Road Map 2017–2020 and the 9th PAC indicators. The Niger Red Cross Society has six specific objectives in the 2017–2021 strategic plan:

SO1: contribute to prevention, disaster management and resilience of the population at risk;

SO2: reinforce resilience of the vulnerable communities facing food insecurity, ecosystems degradation and climate change;

SO3: improve the living and health conditions of the vulnerable population;

SO4: improve WASH infrastructure and raise awareness on best hygiene promotion practices;

SO5: provide assistance to migrants in transit and support the needs of the local population living in the transit zones;

SO6: promote Red Cross and Red Crescent values and principles, culture of peace and non-violence.
In order to reach the above objectives, the National Society collaborates with a number of actors, including the Red Cross and Red Crescent Movement (the Movement), the UN system and ECHO. It also plays an active role in the Association of French-speaking African Red Cross and Red Crescent Societies (ACROFA).

**IFRC country office role**

According to Strategy 2020, IFRC has three core strategic aims: 1) to save lives, protect livelihoods and strengthen recovery from disasters and crises, 2) enable healthy and safe living and 3) promote social inclusion and culture of non-violence and peace. To that end, IFRC builds National Society capacities, pursues humanitarian diplomacy and provides relevant support. In other words, supporting the National Society is key for a country office.

IFRC country office in Niger is in daily contact with the National Society and supports raising their profile in the country, developing partnerships, funding opportunities and organizational capacities as well as promoting IFRC policies. IFRC country office promotes and develops strategic partnerships with UN institutions such as UNDP, UNHCR, UN Women, UNFPA and UNICEF. Through Memoranda of Understanding (MoUs), IFRC and Movement partners expect to strengthen Red Cross and Red Crescent role as the primary responder in Niger and the key actor in terms of liking relief and recovery with development (LRRD).

IFRC country office also exerts efforts in providing one voice with the Movement partners in the country, including the International Committee of the Red Cross (ICRC), as well as partner National Societies such as the Belgian Red Cross, French Red Cross, Iranian Red Crescent, Danish Red Cross, Luxembourg Red Cross, Qatari Red Crescent and Spanish Red Cross. Based on the Movement Cooperation Agreement for Diffa signed with ICRC and Luxembourg Red Cross in 2015, the Niger country office ensures that security procedures are followed in all activities and travels.

Within the advocacy framework, the country office develops and expands links with all stakeholders, such as local and national media, diplomatic missions, local authorities and NGOs.
ARIES OF FOCUS

15,000
PEOPLE WILL IMPROVE THEIR CAPACITY TO PREPARE FOR AND RESPOND TO DISASTERS.

500
HOUSEHOLDS WILL BENEFIT FROM SAFE, ADEQUATE AND DURABLE RECOVERY SHELTER AND SETTLEMENT ASSISTANCE.

15,000
PEOPLE WILL RESTORE THEIR LIVELIHOODS TO PRE-DESASTER LEVEL AND STABILIZE THEIR NET INCOME.

25,000
PEOPLE WILL HAVE ACCESS TO IMPROVED HEALTH CARE SERVICES.

15,000
PEOPLE WILL ACCESS CLEAN WATER, SANITATION AND HYGIENE PROMOTION

15,000
PEOPLE WILL CONTRIBUTE TO AND BENEFIT FROM MORE PEACEFUL, SAFE AND INCLUSIVE COMMUNITIES.

14,000
PEOPLE WILL IMPROVE ACCESS TO MIGRATION ASSISTANCE AND PROTECTION SERVICES.
STRATEGIES FOR IMPLEMENTATION

- STRENGTHEN NATIONAL SOCIETY CapacITIES
- ENSURE EFFECTIVE INTERNATIONAL DISASTER MANAGEMENT
- INFLUENCE OTHERS AS LEADING STRATEGIC PARTNER
- ENSURE A STRONG IFRC
AREA OF FOCUS

DISASTER RISK REDUCTION

Niger has a history of repeated disasters often causing deaths as well as local and cross-border population movement. These disasters have had a negative impact on the economy and created tensions between the local population and the different waves of displaced and refugees.

Since 2015, the Niger Red Cross Society has responded to several major humanitarian crises caused by droughts or floods, resulting with food insecurity, malnutrition and related health problems. In 2018, the National Society supported by the Movement partners engaged in the complex emergency, providing health and WASH services in Diffa into early 2019. The interventions of the National Society are in line with its strategic plan objectives 1 and 2 as well as with the Sustainable Development Goals (SDGs) 1, 2, 3 and 5.

In 2019–2020, IFRC will continue to support the National Society in early recovery and resilience, with the objectives to: a) provide coordinated gender sensitive and protective food and agricultural assistance; b) strengthen the ability of households to withstand shocks in crisis-affected areas and protect their livelihoods and c) strengthen the capacity of the National Society in collection, analysis and management of information. Specifically, IFRC will assist the National Society in:

1. Development of disaster preparedness and contingency plans
2. Establishing early warning community approaches
3. Training of staff/volunteers for the National Disaster Response Team (NDRT)
4. Training of trainers (ToT) in order to cascade down the NDRT know-how
5. Training of volunteers for Community Disaster Response Teams (CDRTs)
6. Equipping volunteers with DRR tools
7. Purchase and pre-positioning of stocks for timely response
8. Tapping into the educational networks to bring in technically inclined youth
9. Organizing awareness campaigns on climate change, mitigation, adaptation and risk reduction
10. Expanding forecast-based financing and forecast-based action
11. Establishing a national coalition with private, public and non-profit sector within the framework of 1 Billion Coalition (1BC)\(^4\)

IFRC will also continue to engage with ACMAD\(^5\) and AGHRYMET\(^6\) in order to secure access to accurate weather forecasting.

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>COMMUNITY CONTINGENCY PLANS IN PLACE</strong> 2</td>
<td></td>
</tr>
<tr>
<td><strong>COMMUNITY EARLY WARNING SYSTEMS IN PLACE AND LINKED WITH LOCAL OR NATIONAL METEOROLOGICAL SYSTEMS</strong> 2</td>
<td></td>
</tr>
<tr>
<td><strong>PEOPLE REACHED WITH PUBLIC AWARENESS AND EDUCATION CAMPAIGNS</strong> 15,000</td>
<td></td>
</tr>
<tr>
<td><strong>COALITION INITIATIVE PROMOTED AT 4 EDUCATIONAL INSTITUTIONS</strong> 1 BILLION</td>
<td></td>
</tr>
</tbody>
</table>
AREA OF FOCUS

SHELTER

Besides chronic needs caused by recurrent droughts and floods, people in Niger also suffer from some new phenomena, including an increasing number of armed groups and economic migration that exponentially increase the number of people in need.

Shelter is one of the main elements to consider in the population movement. Between 2014 and 2018, the Niger Red Cross Society provided shelter and non-food items in a number of interventions related to the population movement, drought and floods. New population movements are anticipated in the coming period, particularly in the areas that are not sufficiently stable. Thus, emergency response will continue. The National Society plans to increase the number of households receiving emergency shelter and technical support and to broaden partnerships around shelter for long-term resilience. These activities are in line with the National Society strategic plan objectives 1, 2, 3 and 5. They will also contribute to the realization of Niger’s set targets for the SDGs 5, 9 and 10.

In order to reduce vulnerability of displaced people, vulnerable host families and people affected by natural disasters, IFRC plans to further strengthen the capacities of the National Society in logistics and stock management.

Starting from the existing logistics capacities of the National Society (300 vehicles and warehouses in Niamey, Maradi, Zinder and Daffa of 1,00 tons and 500 tons respectively), IFRC plans to engage in:

1. Purchase, distribution and replenishment of shelter tool kits
2. Purchase, distribution of tarpaulins and reinforcement ropes
3. Purchase of local construction material
4. Construction of emergency shelters for disabled, sick and elderly people
5. Training of volunteers and targeted population in shelter construction
6. Post-distribution evaluation
7. Capacity development, including PASSA’ and regional trainings

IFRC will continue to encourage joint projects such as the “Shelter Safety” school project with Save the Children.
AREA OF FOCUS
LIVELIHOODS AND BASIC NEEDS

According to PREGEC results of the 2017–2018 agro-pastoral season, the food and nutrition situation in the Sahel and West Africa remained a concern due to early depletion of residual fodder biomass and temporary water points. This has led to early departure of transhumant herds to host areas, which has led to high concentrations of herds of animals in the pastoral enclaves and nature reserves with the potential risk of epizootic diseases. Similarly, the Cadre Harmonisé analysis confirmed a deterioration of the food and nutrition situation in the Sahelian belt, including Niger, due to deteriorating food conditions and livelihood erosion amongst poor and very poor households. During the pre-harvest hunger period (March–May 2018), more than 1.5 million people, mostly pastoralists and agro-pastoralists, were food and nutrition insecure. This situation was further aggravated by persistent civil insecurity in the Lake Chad Basin and was predicted to further deteriorate in the next lean season.

The Niger Red Cross Society (NRCS) has extensive experience in food and nutrition crisis management; it has successfully managed food security and nutritional operations in recent years (2005, 2008, 2011–2012, 2015). Over the years, they have diversified its response strategy and response tools (cash transfers) and provided systematic involvement of communities in operations. The interventions of the Niger Red Cross Society are in line with the National Society strategic plan and its objectives 1, 2, 3 and 5 and contribute to the realization of Niger’s set targets for SDGs 1, 2, 3, 5 and 8.

In 2019–2020, IFRC plans to follow resilience recommendations of the Cadre Harmonisé and support the National Society through:

1. Distribution of cash and food kits in the regions at IPC Phase 3 to 5 (Crisis, Emergency, Famine), focusing on young children, pregnant and lactating women

2. Provision of livestock feed and other pastoral vulnerability management tools

3. Monitoring of agro-pastoral activities through community-based surveillance
4. Investment in data collection required for food and nutritional security analysis

5. Markets and cross-border trade flows monitoring

6. Activities of vocational training centres

7. Distribution of livelihoods material and equipment for entrepreneurship to build resilience of people affected by protracted crises

8. Awareness-raising in public institutions (Ministry of Health, Ministry of Humanitarian Action and Disaster Management, Ministry of Planning) and within the humanitarian community related to prevention and humanitarian principles

PEOPLE REACHED WITH FOOD ASSISTANCE OR CASH FOR BASIC NEEDS 15,000

PEOPLE SUPPORTED WITH IN-KIND ASSETS OR CASH VOUCHERS FOR RECOVERY OR ECONOMIC ACTIVITIES 15,000

HOUSEHOLDS SUPPORTED IN INCREASING THEIR FOOD PRODUCTION 1,500

HOUSEHOLDS AND MSME’S STRENGTHENED, DIVERSIFIED AND PROTECTED THEIR LIVELIHOODS 600

OUTCOME

COMMUNITIES IN TARGETED AREAS, RESTORE AND STRENGTHEN THEIR LIVELIHOODS.
Niger’s health sector has made significant progress with development and implementation of the 2011–2015 health development plan by the Ministry of Public Health. The key health indicators show that child mortality rate fell sharply between 2010 and 2015. However, maternal mortality rate remained very high mainly due to lack of medical specialists in rural areas. Less than half of births are attended by qualified medical staff. The double burden of communicable and non-communicable diseases, as well as inequities in accessing health services are all factors that aggravate the situation. In terms of malnutrition, Niger exceeds the thresholds globally accepted by the World Health Organization (WHO). In addition, more than a quarter of Nigerian children (more than 225,000 each year) are born with low birth weight. This is often related to the nutritional status of the mother. Acute malnutrition affects more than one million children every year, including at least 350,000 with the most severe form. Of these cases, some 55,000 children have serious medical complications that require hospitalization and intensive care. More than 46,000 annual deaths of children are estimated to be directly related to all forms of under-nourishment (chronic, acute and micronutrient deficiency). Despite the efforts of the government, the percentage of public budget allocated to health remained around 6%, much below the recommendations of the 2001 Abuja Declaration.\textsuperscript{12}

The Niger Red Cross Society has a long-standing experience in managing epidemics and other disasters. Their health interventions heavily rely on information sharing and collaboration with the World Health Organization as well as on collaboration with the Ministry of Health. On behalf of the Niger's Ministry of Health, NRCS monitors the situation through a network of skilled volunteers situated in different local Red Cross committees. NRCS is also a member of the National Crisis Committee that meets regularly to monitor the epidemiological situation. Since 2015, the National Society has implemented health interventions related to measles, meningitis, Rift Valley fever, hepatitis E and cholera.
In 2019–2020, IFRC plans to assist the National Society in further development of their health services delivery to the most vulnerable people living in remote and difficult to reach areas, persons in need of immediate medical assistance and to extremely vulnerable groups like children, lactating mothers or persons with special needs, older persons and persons with disabilities. IFRC country office will specifically support the National Society health strategy for the region of Diffa. The activities will specifically focus on reducing morbidity, mortality and preventable diseases related to poor access to health care as well as on health consequences related to other disasters, including epidemics and floods. Furthermore, IFRC will support community preparedness, referral health care and further development of NRCS capacities to coordinate emergency health interventions. In particular, IFRC plans to:

1. Replicate successful community-based health and first aid approaches and interventions
2. Disseminate and promote essential health practices through mobile clinics (use of iodized salt, breastfeeding during the first 6 months of life, food supplements for young children aged 6 to 24 months)
3. Organize immunization campaigns
4. Organize vitamin A distribution
5. Promote hygiene and sanitation
6. Promote family planning including birth spacing

PEOPLE REACHED BY THE NATIONAL SOCIETY HEALTH PROGRAMMES AND SERVICES
25,000

COMMUNITY BASED HEALTH AND FIRST AID PLANS DEVELOPED
2

NATIONAL SOCIETY CONTINGENCY PLAN DEVELOPED TO RESPOND TO EPIDEMICS AND PANDEMICS
1
7. Encourage birth registration (new and old)
8. Develop capacities in integrated health centres and maternities
9. Strengthen the community outbreaks surveillance (early detection and efficient response)
10. Document and publish lessons learned about the effectiveness of community-based surveillance
11. Further develop collaboration with potential partners such as UNICEF, UNFPA, WFP, FAO and the government

The above interventions are in line with the Niger Red Cross Society strategic plan objectives 1, 2, 3, 4 and 5. They will also contribute to the realization of Niger’s set targets for SDGs 3, 5 and 10.

**Outcome**

Vulnerable people’s health and dignity are improved through increased access to appropriate health services.
Niger suffers from high water scarcity. Access to drinking water and sanitation are among the lowest in the world. According to the World Health Organization, of the total deaths in Niger, 23% are WASH-related. Sanitation coverage is low at 38.4% in urban areas and only 6.7% for the rural population. This context combined with limited humanitarian access due to insecurity, constantly increases basic WASH needs. In July 2017, Niger experienced its first hepatitis E outbreak and the Minister of Health called upon the Niger Red Cross Society to involve volunteers through community-based awareness campaigns and WASH activities. In August 2017, continuous rain resulted in extensive flooding, destruction of houses and loss of household belongings in several areas of Niger and required regular cleaning and disinfection campaigns, promotion of improved sanitation and provision of water and hygiene related items. The heavy rains recorded in the region since the beginning of the 2018 rainy season, added to the factors that caused the spread of cholera in Niger. In July 2018, a cholera epidemic outbreak was announced and required the country to scale up WASH interventions to increase common access to safe water. According to PDES, the needs for WASH interventions will increase due to expected further deterioration of the existing infrastructure, demographic pressure, limited government budget and scarcity of the existing resources. The needs will also further increase due to Diffa crisis, floods or migration. More often than not, communities lack infrastructure or the infrastructure is overloaded.

The National Society believes that continuing WASH activities will contribute to the reduction of the spread of hepatitis E and prevention of another potential epidemic. WASH interventions are in line with the NRCS strategic plan objectives 1, 3, 4 and 5 and will contribute to the realization of Niger’s set targets for SDGs 3, 5, 6, 7 and 12.

In 2019–2020, NRCS will continue to complement the government’s effort to reduce water-borne diseases through improved access to safe and clean water and promotion of sanitation and hygiene. Within that framework, IFRC plans to assist the National Society in:

1. Training of community WASH management committees
2. Door-to-door sensitization on good hygiene practices and distribution of hygiene kits
3. Chlorination of water at the sources of provision
4. Well construction
5. Rehabilitation of water points
6. Construction of family latrines
7. Capturing best practices from successful projects in order to scale up WASH programming

8. Development of partnerships to support further development of WASH interventions

WASH interventions will be integrated into four major crises in Niger, the population movement, epidemics, floods and malnutrition. A specific focus will be on endemic areas, including the regions of Diffa, Tillabery, Niamey, Dosso, Tahoua, Zinder and Maradi. Community participation represents a vital tool for success in reducing the risk of disease outbreaks.

IFRC country office in Niger also anticipates to join the ONE WASH initiative and invest in sustainable long-term water, sanitation and hygiene programmes. This initiative aims to contribute to the health and hygiene behavioural change through better communication and awareness-raising at community level and to support cholera vaccination campaigns.

IFRC plans to commission an evaluation of community-based management of water and sanitation facilities as a guiding tool for further development of capacities and expertise in this area.
AREA OF FOCUS

PROTECTION, GENDER AND INCLUSION

Gender-based violence (GBV) has increased with the increase of the population movement in Niger. It takes multiple forms, it can be physical, psychological, economic, sexual. Early and/or forced marriages are also a part of it. There are abandoned children, people with disabilities, the elderly, pregnant and lactating women, people with chronic sickness. These groups do not have the same strength and capacity of reaching common services. They have specific needs.

Protection, gender and inclusion are a novelty in the Niger Red Cross Society and are in line with the NRCS strategic plan objectives 1, 2, 3, 4, 5 and 6. In 2019–2020, the National Society will run a pilot community-based social inclusion project in Niamey. The National Society plans to address the needs of particularly disadvantaged or marginalized groups of children and adults (albinos, street children, families) roaming the streets for handouts. In addition, this new approach to the existing social situation will be applied to all programming.

With the goal to contribute to the positive social change in public attitude towards the above-mentioned vulnerable groups, IFRC will ensure technical assistance and engage in:

1. NRCS capacity and programme development (staff and volunteers) in the area of prevention, response to and mitigation of sexual and gender-based violence
2. Training of volunteers and facilitators in the field of social cohesion
3. Awareness-raising and sensitization campaigns for the communities related to disability and rights of disabled people
4. Development of skills and abilities of the target children and adults
5. Organization of social and cultural events and home visits

CHILDREN ASSISTED THROUGH TARGETED ACTIONS

ADULTS ASSISTED THROUGH TARGETED ACTIONS

PEOPLE INCLUDED INTO THE SENSITIZATION CAMPAIGNS

70,000 SWISS FRANCS SOUGHT
Organize workshops for the families of selected children

Create child-friendly spaces and playgrounds

Continuous dialogue and other accessible complaints and feedback mechanisms related to accountability to the targeted population

Facilitate Memorandum of Understanding with UNDP and UN Women

These activities align with the 2017–2020 Africa Road Map and will contribute to realizing Niger’s targets for SDGs 5 and 16.
Niger is by tradition an emigration, immigration and transit country. Its migration is essentially seasonal (after the harvest between January and April) within the country or towards neighbouring countries such as Libya and Algeria. To date, Niger is not a country with high migration to Europe. However, it is one of the main crossings for West African migrants. Hundreds of thousands of migrants are transiting each year through the city of Agadez, the main “regional hub” for those wanting to reach Libya and Algeria and eventually Europe. The EU has notably scaled up its engagement with the country to stem the flow of migrants transiting through Niger and increase the number of returns. Consequently, the migratory routes have shifted to more dangerous ones, waiting periods in Agadez ghettos have got longer, smugglers are more difficult to find and the price of the journey has increased. This situation leaves people and especially women at great risk of finding themselves in “debt bondage”. Restrictions of movement within Niger are increasing, not only towards the north but also on the axis Niamey-Agadez. These limitations imposed by the agreement with EU\(^{17}\) are in conflict with the principle of the freedom of movement within the ECOWAS\(^{18}\) space. According to the IOM\(^{19}\) Population Flow Monitoring data for August 2018, the trends show more outgoing than incoming flows, with 9,187 individuals leaving Niger versus 5,319 individuals entering (daily average of 296 individuals leaving and 172 individuals entering). There are concerns about the consequences of EU migration policies on the local economy as a large part of the economy depends on the transit of migrants.

The National Society and IFRC already have extensive experience implementing similar programmes in Kantché region, which represents the region of origin for most of Nigerien migrants (Zinder). Based on the IFRC Global Strategy on Migration 2018–2022, the Niger Red Cross Society increasingly focuses on resilience, protection and human dignity of the vulnerable population. Their interventions are in line with the National Society strategic plan objectives 3, 4 and 5 and contribute to the realization of Niger’s set targets for SDGs 1, 2, 3, 5, 8 and 10.
IFRC has a strong migration message and a clear migration strategy (IFRC Global Strategy on Migration 2018–2022)—IFRC supports people wherever they are. In line with this strategy and its main priorities, Niger country office plans to assist the National Society in 2 main areas, advocacy and programming and will:

1. Offer sustainable solutions (skills development, vocational and technical training) for communities at risk
2. Promote dignifying living alternatives (livelihoods, living conditions, income generating activities for women)
3. Respond to emergency situations related to migration through immediate assistance (NFI, food, shelter kits, water, psycho-social support, health support, hygiene items)

It is anticipated that integration of awareness, skills development and livelihoods stabilization will reduce the desire for migration in young people. Similarly, women who will get technical training and income generating incentives are expected to be more interested in developing their businesses in their places of origin.

IFRC country office will also support capacity development of the National Society by:

1. Organization of trainings and workshops for the National Society staff and volunteers
2. Development of the National Society strategic plan for migration, including coordination with ICRC in developing the RFL21 segment)

IFRC country office in Niger is a part of the national consultation framework for migration. Jointly with UNHCR and IOM, IFRC plans to further influence decision-making and policy development related to the protection of migrants.
STRATEGY FOR IMPLEMENTATION

STRENGTHEN NATIONAL SOCIETY CAPACITIES

In 2019–2020, the National Society plans to actively engage in: a) prevention of disease outbreak, complementing their government’s and relevant Cluster efforts; b) disaster risk reduction (DRR); c) protection, gender and inclusion; d) integrated humanitarian response.

There are several risk factors influencing the National Society response capacity including military insurgency, insufficient funding, low beneficiary participation or inadequate logistics and procurement expertise. Contingency planning, engagement of partners, community ownership and training are some of the measures that could mitigate the impact of these factors.

IFRC will continue encouraging NRCS to function in line with Red Cross Red Crescent best practices, whilst empowering them to expand their reach and ensuring that lessons are learnt. In 2019–2020, IFRC assist the National Society by:

1. Organizing capacity assessment
2. Capacity building in all sectors and especially of young people
3. Ensuring volunteers are a key component of the National Society structure
4. Encouraging preparation of strategic plans for youth and volunteer engagement
5. Ensuring that effective systems are in place (finance, logistics, admin, communications)
6. Ensuring that Statute and Governance are in place
7. Ensuring that the management is regularly audited
8. Addressing the implementation gaps in terms of geographical coverage and needs in order to increase relevance, impact, sustainability, efficiency and effectiveness of interventions
9. Developing communication approaches to increase visibility and rebrand the National Society
10. Positioning the National Society as a key local actor, first responder and partner of choice
11. Raising awareness and advocating for support to the National Society
12. Supporting the National Society in resource mobilization and partnership development to provide sustainable development of services and direct funding for the change process taking place in governance and management
In order to ensure adequate protection for the National Society volunteers working in emergency response or performing longer-term activities, IFRC will seek funds and provide insurance through IFRC global insurance.

The above activities will be in line with the National Society strategic plan 2017–2020 and its objective 6 and will contribute to the realization of Niger’s set targets for SDG 16.

THE NATIONAL SOCIETY HAS THE NECESSARY LEGAL, ETHICAL AND FINANCIAL FOUNDATIONS, SYSTEMS AND STRUCTURES, COMPETENCES AND CAPACITIES TO PLAN AND PERFORM.

STRATEGY FOR IMPLEMENTATION

ENSURE EFFECTIVE INTERNATIONAL DISASTER MANAGEMENT

Due to persistence of the crisis and low return trends in the areas of departure, NRCS and IFRC will increasingly focus on strengthening resilience, protection and human dignity of those affected. The National Society Strategic plan 2017–2020 and its objective 1 provide the basis for continued contribution towards prevention, disaster management and strengthening resilience of the population at risk.

IFRC Strategy 2020 points out the need to place more attention on young people by empowering them to be in leadership positions and to participate in voluntary, governance, management and community activities. The National Society plans to build capacity of young people in every sector including DRR, thus also contributing to the human resource development of Nigerian citizens. Within the concept of One Programme, the National Society plans to address the implementation gaps in terms of geographical coverage and needs, as well as increase the relevance, impact, sustainability, efficiency and effectiveness of their interventions.

To support the National Society, IFRC intends to increase collaboration with all partners, put in place a proper framework for the design, planning and implementation of projects, including compliance, accountability and sustainability. Specifically, IFRC country office plans to be actively engaged in:

1. Human resource development, employing an Organizational development delegate and an Operations coordinator who will represent focal points for the Movement partners in the area of National Society capacity and programme implementation

2. Selection and screening of candidates for the National Society NDRT

3. Training and coaching of the members of the National Society Disaster Management Unit
4. Provision of IT and IM services to the National Society and partner National Societies

5. Provision of logistics services to the National Society and partner National Societies

6. Coordination with partner National Societies and ICRC

7. Coordination with other humanitarian actors, through Humanitarian country team meetings (observer status), UNOCHA Cluster meetings or the Millennium Challenge Account (MCA)

OUTCOME

EFFECTIVE AND COORDINATED INTERNATIONAL DISASTER RESPONSE IS ENSURED.

STRATEGY FOR IMPLEMENTATION

INFLUENCE OTHERS AS LEADING STRATEGIC PARTNERS

Based on their respective strategic plans, the Niger Red Cross Society and IFRC jointly address the key humanitarian issues in Niger, contributing at the same time to the wider mission of the Movement. They play an active role at national and regional forums and provide input related to decision-making processes at government or inter-governmental levels. It is expected that the role and influence of the Movement will further increase with further promotion of national and international partnerships that are mostly based on MoUs engaging two or multiple partners. One of the immediate goals is to strengthen the position the Movement as primary responder in Niger and the key actor in terms of linking relief and recovery with development. In order to reach that goal, the National Society and IFRC are actively engaged in building relations to create trust and provide leadership through:

1. Publishing humanitarian news on monthly basis in IFRC social media portals

2. Promotion of humanitarian values and principles in educational institutions

3. Development of joint positions and policies with Movement partners

4. Commissioning evaluations of their interventions to promote results and learn for the future

5. Development of a strategy for involvement of Niger in 1 Billion Coalition initiative
Development of the funding strategy for linking relief, recovery and development

Promotion of strong relations with the UN agencies, including mutual agreements

Collaboration with the government i.e. Ministry of Health and Ministry of Humanitarian Action and Disaster Response

DECISIONS THAT AFFECT THE MOST VULNERABLE ARE INFLUENCED AT LOCAL, NATIONAL AND INTERNATIONAL LEVELS.

STRATEGY FOR IMPLEMENTATION

ENSURE A STRONG IFRC

In line with the IFRC Strategy 2020 and its 2019–2020 operational plan for Niger, IFRC country office in Niger will ensure collaboration with all partners in the organizational development of the Niger Red Cross Society in thematic areas such as disaster risk reduction, shelter, livelihoods, health and migration. To make this collaboration effective, one Movement partner will take the role of a focal point for all Movement actors.

IFRC country office will continue strengthening its team in Niger. In order to improve their competencies and ensure compliance with IFRC norms and standards as well as efficient operations, the country office in Niger will continue to provide access to technical training and coaching in finance, administration, human resources, reporting, security and resource mobilization. It will ensure staff appraisals and new hires. It also plans to continue strengthening the finance team to comply with the required accountability norms and standards.

With support of the IFRC regional office in Nairobi and its Humanitarian Diplomacy Unit, the country office will be also developing some humanitarian diplomacy tools for the joint advocacy efforts of the Movement with the government.

These plans are in line with the National Society strategic plan objective 6 and the objectives of the Africa Road Map 2017–2020. They will also contribute to the realization of Niger’s set targets for SDG 16.

IFRC IS EFFECTIVE, CREDIBLE AND ACCOUNTABLE.
ENDNOTES

1. 2019 Country operational plan outlines the results that IFRC wants to achieve in collaboration with the Niger Red Cross Society;
2. WASH – water, sanitation and hygiene;
3. PAC – Pan-African Conference of African Red Cross and Red Crescent Societies;
4. 1BC — The One Billion Coalition for Resilience provides an opportunity for individuals, households, communities, and organizations to work together to increase collective impact in resilience-building in communities world-wide;
5. ACMAD – African Centre of Meteorological Application for Development;
6. AGHRYMET is a specialized institute of the Permanent Interstate Committee for Drought Control in the Sahel (CILSS);
7. PASSA – Participatory Approach for Safe Shelter Awareness;
8. PREGEC — Regional System for the Prevention and Management of Food Crisis;
9. Since 1999, the Permanent Interstate Committee for Drought Control in the Sahel (CILSS) has been engaged in the development and testing of the Harmonized Framework for the analysis and identification of areas at risk and vulnerable groups in the Sahel (Cadre Harmonisé);
10. IPC – Integrated Food Security Phase Classification;
11. MSME — Micro, Small and Medium Enterprises;
12. The Abuja Declaration and Frameworks for Action on Roll Back Malaria was a pledge made in 2001 by members of the African Union during a conference in Abuja, Nigeria. In it, the member nations pledged to increase their health budget to at least 15% of the state’s annual budget, and request Western donor countries to increase their support. Tracking the progress of the efforts, the World Health Organization reported in 2010 that only one African country had reached that target, while 26 had increased health expenditures and 11 had reduced it. Nine others maintained their existing expenditures;
13. WASH – Water, Sanitation and Hygiene;
14. Safer water, better health, WHO, 2008;
16. ONE WASH Initiative — Recently established global integrated approach to combine health, WASH, nutrition, water for livestock and environmental sanitation in cholera ‘high risk’ areas. It operates in full alignment with the Global Task Force on Cholera Control road map, IFRC Global Water and Sanitation Initiative & IFRC cholera strategy;
17. EU – European Union;
18. ECOWAS – Economic Community of West African States;
19. IOM – International Organization for Migration;
20. 1) Greater and more consistent IFRC action on migration through increased strategic attention, understanding the vulnerabilities and response to migrants’ needs; 2) Stronger IFRC action along migratory trails to reduce the risks that migrants face and address migrants’ needs through assistance, protection and advocacy; 3) Greater focus on the most vulnerable and marginalized, ensuring that existing services are accessible and acceptable to migrants of all kinds, and establishment of dedicated programming where necessary; 4) Increased impact of advocacy and humanitarian diplomacy with governments, in particular through strategic use of National Societies’ role as humanitarian auxiliaries to public authorities, and 5) Strengthened partnerships within the Movement, as well as with external actors;
21. RFL – Restoring Family Links;
22. Clusters are groups of humanitarian organizations, both UN and non-UN, in each of the main sectors of humanitarian action. They are designated by the Inter-Agency Standing Committee (IASC) and have clear responsibilities for coordination;
Contact information of the IFRC Niger country office, for partners who wish to find out more

Niger country representative
Alberto Bocanegra Vidal
Tel. +227 88 69 99 99
alberto.bocanegra@ifrc.org

International Federation of Red Cross and Red Crescent Societies

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