

# Emergency Plan of Action (EPoA) Niger : Cholera epidemic

<b>DREF Operation</b>	<b>Operation n°: MDRNE014;</b> <b>Glide n° : <a href="#">EP-2014-000151-NER</a></b>
<b>Date of issue: 30</b> December 2014	<b>Date of disaster: 12</b> December 2014
<b>Operation manager:</b> Pierre Kana, IFRC Country Representative	<b>Point of contact:</b>
<b>Operation start date:</b> 24 December 2014	<b>Expected timeframe:</b> Three months (December 2014 – February 2015)
<b>Overall operation budget:</b> CHF 261,637	
<b>Number of people affected:</b> 91,113 population at risk (183 people directly affected)	<b>Number of people to be assisted:</b> 3,000 households / 15,000 people
<b>Host National Society(ies) presence (n° of volunteers, staff, branches):</b> 200 of volunteers, 8 staff, 5 branches, (in Diffa region)	
<b>Red Cross Red Crescent Movement partners actively involved in the operation:</b> Niger Red Cross, Luxembourg Red Cross and IFRC	
<b>Other partner organizations actively involved in the operation:</b> Government (Ministry of Public Health), Médecins Sans Frontières (MSF), Save the Children, United Nations Children's Fund, World Health Organization	

## A. Situation analysis

### Description of the disaster

On 12 December 2014, 10 cases of cholera was reported in the Chetimari area of Diffa region in Niger. By 14 December 2014, 91 cases and four deaths had been reported; and by 16 December this had risen to 137 cases, and eight deaths. From 1 January to 30 November 2014, there had been 260 cases of cholera reported, and as such this increasing number of cases is a cause for concern. The Ministry of Public Health (MPH) in Niger has declared it an epidemic, and the called for international assistance. The epidemic has been attributed to an influx of refugees from neighbouring Nigeria (Damassak region), which was caused by increasing insecurity in the North East of the country as a result of Boko Haram attacks in the area. As of 18 December 2014, 96 per cent of cases (131) are within the Nigerian refugee population; and 4 per cent (six) within the host population. In the Diffa region, the situation is exacerbated by the presence of up to 100,000 people that have been displaced are being hosted in provisional camps and families. No cases have been reported in the camps so far, however the Chetimari area is located 3km from the Gagamari provisional camp, which hosts 16,000 approx. people, and as such the population remain extremely vulnerable. As of 20 December 2014, 183 cases have been registered since the start of the epidemic. The health centres In the Bandi, Chetimari, Diffa and Zarwaram health centres, which are receiving the most cases, the estimated population of these areas is which receive most of the cases are population by an estimated number of 91,113 people.

### Summary of the current response

#### Overview of Host National Society

The Red Cross Society of Niger (NRCS) has a long standing experience of implementing a cholera operation given the recurrence of cholera in the country, and is active in the affected areas with a pool of trained volunteers in the areas of first aid, hygiene promotion and first aid. The NRCS in collaboration with the International Federation of Red Cross and Red Crescent Societies has responded through the existing MDRNE013 Population Movement Emergency Appeal; as well as mobilized resources from interventions being carried out within other regions. It has included the provision of medicines, mobilization/training of volunteers to carry out public awareness raising/sensitization; however there are remaining needs that cannot be met through the existing operations, and as such further assistance is being requested. Please note that the Diffa region was not included as part of the targeted areas in the MDRNE013 Population Movement Emergency Appeal,

and as such a response through this operation is not possible. Following the emergency situation, and request by the Niger authorities to respond, a DREF allocation is requested to enable activities to be carried out to meet the needs of the affected populations in the region, specifically in Chetimari.

### **Overview of Red Cross Red Crescent Movement in country**

The International Committee of the Red Cross, IFRC and Luxembourg Red Cross all have country representations in Niger, with offices located in the capital of Niamey, however all of them are also based in Diffa region. On 13 December 2014, the IFRC Niger country representation in collaboration with the Diffa Red Cross regional committee provided training for 34 NRCS volunteers on hygiene promotion. The NRCS volunteers have since begun sensitization sessions on the prevention and control of cholera in the Gagamari camp and surrounding villages, and distributed 900 pieces of soap to those households that were identified as being most vulnerable. To provide a quick response, the soap has been borrowed from a similar operation being implemented in other regions (Tillabery and Maradi). Two hands washing tools and materials have also been installed in the camp to encourage people washing their hands. The IFRC Niger country representation has also provided medicines and materials (25 boxes of gloves, 25 boxes of ringer lactate and catheter, 9,000 tablets of amocycillin). In addition, 10 NRCS volunteers from the Diffa Red Cross regional committee have been mobilized to prepare cholera treatment sites, and have constructed two tents to be served as patient's shelter, which were donated by the Luxembourg Red Cross. The ICRC has installed water points (eight in total), and will support if/should more needs emerge in health or WASH (rehabilitation of water points etc.), however at present they have no plans to respond. The Luxembourg Red Cross will be complementing the DREF operation through the construction of public latrines and isolation tents (if needed).

### **Movement Coordination**

Since the beginning of the epidemic, the NRCS has consulted with the ICRC, IFRC, and Luxembourg Red Cross; and monthly coordination meetings are now planned for all those Red Cross Movement members present in the Diffa region. The NRCS will also be encouraged to organize internal and external coordination and cluster meetings with different government and other agencies on a regular basis.

### **Overview of non-RCRC actors in country**

The Regional Public Health Department in Diffa has set up two cholera treatment sites, one at the Chetimari health centre and another in the city of Diffa. The regional staff (doctors and nurses) have been deployed to the sites. The Governor of Diffa region visited the sites to encourage and support the operation. The World Health Organization (WHO) has also been involved in the response, and indeed, even before the epidemic (in June 2014), pre-positioned two complete cholera kits (IDDK Interagency) in the Diffa region, with another kit being shipped. The WHO has also deployed an emergency staff member and epidemiologist to strengthen the response. The MPH in response to this situation and thorough investigations has organized a mission led by the Secretary General to assess the situation. Different coordination meetings are held at the regional level to evaluate the situation and assess the needs and the gaps. MPH, with the support from Médecins Sans Frontières (MSF), the Red Cross Movement, WHO and the United Nations Children's Fund (UNICEF), is carrying out prevention and response activities. Most of activities are related to cholera treatment of identified cases, water chlorination and hygiene promotion.

## **Needs analysis, beneficiary selection, risk assessment and scenario planning**

Since 12 December 2014, there has been a considerable increase in the number of confirmed cases, and as such the Regional Public Health Department has requested assistance from different partners including the Red Cross Movement. In the Diffa region, the proximity of the displaced people and the poor hygiene practices and behaviors constitute high risks of cholera spreading in an area which is already vulnerable (by the massive influx of population from Nigeria, malnutrition and food insecurity). As of 18 December 2014, the IFRC/NRCS has identified needs related to community mobilization/public awareness raising and sensitization, provision of water purification chemicals, disinfection of water supply and sanitation facilities, as well as surveillance. The most affected population are from Chetimari, Gagamari, Zarwaram, Diffa city and Bandi health centers. According to the Regional Direction of Public Health of Diffa, that population is estimated at 91,113 persons, of which 3,000 households (15,000 people), in 30 of the most vulnerable communities will be targeted through this DREF operation. However, additional needs are continuing to be identified and will be shared with the partners involved in the response as soon as possible. Please refer below for a breakdown of the most urgent needs:

- Shelter (tents to isolate the patients);
- Potable water (aqua tabs);
- Cleaning and disinfecting materials for latrines;
- Soap & detergent;
- Medicines and materials to support the health centre treating of all patients;
- Sprayers and disinfecting product;
- Water containers (jerrycans, buckets, bowls and cups, and hand washing equipment;

- Information Education and Communication (IEC) materials (radio, TV, leaflets and box images, megaphones);
- Protection materials for volunteers (masks, boots, gloves, suits protection),
- Hygiene and sanitation materials (barrows, shovels, brooms, brushes, plastic gloves,

## B. Operational strategy and plan

### Overall objective

Contribute to the prevention and control of the cholera epidemic in the Diffa region, specifically the districts of Chetimari and Diffa, through support to the efforts of the Ministry of Public Health and other partners

### Proposed strategy

- NRCS volunteers will receive training on response against the cholera outbreak using the Epidemic Control for Volunteers manual (100), disinfection of facilities and use of oral rehydration solutions (40) and on cholera surveillance via SMS (30). Each training has been budgeted at CHF 21 per volunteer (Facilitators (CHF 3), Meals (CHF 8), transport (CHF 6), materials (CHF 4). The NRCS volunteer will be equipped with protective items (gloves and boots).
- Public awareness raising / sensitization activities related to cholera prevention, control and hygiene promotion at community and household levels. NRCS volunteers and supervisors will also be issued with megaphones (24), which they use to support awareness raising / sensitization campaigns related to the prevention and control of cholera. Leaflets (10,000) will be distributed, and image boxes (12) used to support awareness raising / sensitization campaigns on the prevention and control of cholera. Radio and television spots will also broadcast to extend the reach of prevention and control messages to the target population.
- Two cholera kits, 10 oral rehydration solutions (ORS) and tetracycline will be deployed to the affected area to support the management of cholera cases. NRCS volunteers will provide sensitization on the proper use of ORCS. Cell phones will be issued to NRCS volunteers (and supervisors) to support surveillance in the most vulnerable communities, and enable cases to be reported quickly via SMS. Referral mechanisms from community to existing health care facilities and cholera surveillance through SMS will also be established.
- NRCS volunteers will distribute aqua tabs to 3,000 household and provide sensitization on how to use them for water purification. Each household will receive 20 aqua tabs, which will enable them to purify 90 litres of water.
- Fifteen hand washing kits (100 litre water container, metal support with a cup and soap) will be installed in public places such as market places, and NRCS volunteers deployed to provide sensitization on how to use them. The regional committee will be equipped with quick lime, liquid soap and sprayers to enable them to disinfect sanitation 30 sanitation facilities in the affected areas.
- Hygiene related NFIs (bleach, bowls, cups, detergent and soap) will be distributed to 3,000 families to assist them with disinfection of facilities at household level. In addition, 100 households that have been identified as being most vulnerable will also receive buckets and jerry cans for safe water storage.
- Twenty school hygiene promotion clubs will be established and equipped with materials including barrows, broom, brush, plastic gloves and shovels.

All the activities will be done in close cooperation with the community and through advocacy to the community, religious and traditional leaders as well as other actors. By attending coordination meetings at national level, a continuous assessment and analysis of the situation will be accomplished.

### Operational support services

#### Human resources

The Diffa Red Cross regional committee at branch level will mobilize 100 community based volunteers for the operation. The NRCS volunteers will support the DREF operation, and be assigned to support the range of activities (to be confirmed based on their schedule) It has been budgeted at CHF 5 per day per volunteer, per day for sixty days. Twenty regional supervisors will be deployed to support the volunteers (Per diem of 20 CHF per week). The NRCS National Headquarters (NHQ) will support the Diffa branch during the implementation of the operation by involving its staff. The NRCS Health and WATSAN (Water, Sanitation and Hygiene Promotion) Coordinators will extend their support to the regional committee and manage the operation through collaboration with the field staff. The IFRC and Luxembourg Red Cross are strengthening the capacity of the regional committee at field level through the recruitment of new staff including a Programme Manager, WATSAN focal point and an Accountant, which will supplement the existing Finance Assistant, Nutritionist and a Shelter Manager. EPoA includes training of 100 volunteers in a range of relevant areas to support the response, specifically: Epidemic Control for volunteers, disinfection of facilities, use of ORS, cholera surveillance (via SMS) and supervision. A RDRT will also be

deployed full-time for two months, and it's anticipated that this will help strengthen the capacity of the Niger Red Cross to effectively implement the operation. The IFRC Niger Operations Manager who will be responsible for the overall coordination of the DREF operation.

### **Logistics and supply chain**

Logistics support to the operation includes delivering a range of relief items in line with operational priorities. The primary tasks may include:

- Local procurement of hygiene related NFIs and water and sanitation tools in line with IFRC and NRCS guidelines
- If items are unavailable, they may be requested from partners on the field or from the Regional IFRC warehouse in Dakar, Senegal.
- Reception and storage of items before delivery to distribution sites will be managed according to IFRC warehouse management rules and regulation as well as Coordination of transport of all relief items.

#### **Quick links**

- [Emergency Items Catalogue 2009](#)
- [Logistics Standards Online](#)
- [Procurement Portal](#)

A vehicle will be leased, and a driver recruited full time for three months to support the DREF operation.

### **Information technologies (IT)**

The IFRC IT manager, who has been deployed in Diffa since the beginning of the emergency, will insure information sharing by enhancing communication systems through the installation of internet and radio, and providing computer and telephone devices to the NRCS staff and volunteers for short messages related to epidemic surveillance.

### **Communications**

The NRCS will work closely with the structures and services of the MoPH and share information on cooperation with partner, authorities and the media. The national headquarters will ensure that the work of volunteers the Red Cross are visible through the local and international media, via materials visibility and platforms social media and online publications.

### **Security**

In Diffa region, the security situation is generally calm; however caution will be taken to ensure that volunteers and staff involved in the operation are protected. The IFRC Niger Country Representative is responsible for the security of all IFRC personnel in country and all IFRC operations are to be conducted in accordance with IFRC minimum security requirements and the security plans for Niger. Ad hoc security measures are taken in cooperation with ICRC (present in Diffa), and the Red Cross regional committees and the Luxembourg Red Cross. The IFRC operation is adapting to changing circumstances, and key information is obtained through on-going participation of the Red Cross in task force meetings, led by the Governor of Diffa and OCHA. The IFRC security regulations were last updated in September 2014 and according to the situation in North-East of Nigeria, will be reviewed in January 2015 prior to the last support mission of Africa Zone Security Coordinator in Niger.

### **Planning, monitoring, evaluation, & reporting (PMER)**

The IFRC Sahel regional representation will support the implementation of the DREF operation through its regional Communication, Finance, Health and PMER Senior Officers, as well as from the Regional Representative for Advocacy and Humanitarian Diplomacy. Competency transfer and skills building will be performed through training and learning-by-doing processes. Monitoring and reporting will be carried out according to the IFRC monitoring framework by the Diffa regional committee WATSAN focal point, supervised by the RDRT based in Diffa. Both will be working in cooperation with the IFRC and NRCS Operations Managers, which will ensure that a proper monitoring and reporting system are put in place in close coordination with the NRCS Secretary Executive. Each Monday, activity planning meetings are organized in Diffa, with all Programme Managers to share the week plan and integrate the intervention for more impact and efficiency.

### **Administration and Finance**

The NRCS has a permanent administrative and financial department, which will ensure the proper use of financial resources in accordance with conditions to be discussed in the Memorandum of Understanding between the National Society and the IFRC Niger country representation.. The management of financial resources will be according to the procedures of the NRCS and guidelines specific to DREF.





## Contact information

### For further information specifically related to this operation please contact:

- **Niger Red Cross Society:** Ali Bandiaré, President; Tel: +227 96 97 35 29; email: [crniger@intnet.net](mailto:crniger@intnet.net)
- **IFRC Country Representation:** Pierre Kana, Country Representative; Tel: +227 20 738 334; email: [pierre.kana@ifrc.org](mailto:pierre.kana@ifrc.org)
- **IFRC Regional Representation:** Momodou Lamin Fye, Regional Representative for Sahel; phone: +221 33 869 36 41 or +221 77 332 56 72; email: [momodoulamin.fye@ifrc.org](mailto:momodoulamin.fye@ifrc.org)
- **IFRC Zone:** Daniel Bolaños Gonzalez, Disaster Management Coordinator, Phone:+254 20 2835213; email: [daniel.bolanos@ifrc.org](mailto:daniel.bolanos@ifrc.org)
- **In Geneva:** Cristina Estrada, Operations Support, Phone: +41 22 730 4260, email: [cristina.estrada@ifrc.org](mailto:cristina.estrada@ifrc.org)
- **Zone Logistics Unit:** Rishi Ramrakha; Phone +254 20 283 5142, email: [rishi.ramrakha@ifrc.org](mailto:rishi.ramrakha@ifrc.org)

### For Resource Mobilization and Pledges:

- **IFRC Africa Zone:** Martine Zoethoutmaar, Resource Mobilization Coordinator for Africa; Addis Ababa; phone: +251 93 003 4013; email: [martine.zoethoutmaar@ifrc.org](mailto:martine.zoethoutmaar@ifrc.org)

### For Performance and Accountability (planning, monitoring, evaluation and reporting):

- **IFRC Zone:** Robert Ondrusek, PMER Coordinator; phone: +254 731 067 277; email: [Robert.ondrusek@ifrc.org](mailto:Robert.ondrusek@ifrc.org)

---

## How we work

All IFRC assistance seeks to adhere to the Code of Conduct for the International Red Cross and Red

Movement and Non-Governmental Organizations (NGOs) in Disaster Relief and the Humanitarian Charter and Minimum Standards in Disaster Response (Sphere) in delivering assistance to the most vulnerable.

The IFRC's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

[www.ifrc.org](http://www.ifrc.org)  
Saving lives, changing minds.



The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:

1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
2. Enable healthy and safe living.
3. Promote social inclusion and a culture of non-violence and peace.

# EMERGENCY APPEAL

30/12/2014

MDRNE014

Budget Group	Multilateral Response	Inter-Agency Shelter Coord.	Bilateral Response	Appeal Budget CHF
Shelter - Relief	0			0
Shelter - Transitional	0			0
Construction - Housing	0			0
Construction - Facilities	0			0
Construction - Materials	0			0
Clothing & Textiles	0			0
Food	0			0
Seeds & Plants	0			0
Water, Sanitation & Hygiene	142,839			142,839
Medical & First Aid	0			0
Teaching Materials	13,060			13,060
Ustensils & Tools	1,700			1,700
Other Supplies & Services	3,000			3,000
Emergency Response Units	0			0
Cash Disbursements	0			0
<b>Total RELIEF ITEMS, CONSTRUCTION AND SUPPLIES</b>	<b>160,599</b>	<b>0</b>	<b>0</b>	<b>160,599</b>
Land & Buildings	0			0
Vehicles Purchase	0			0
Computer & Telecom Equipment	0			0
Office/Household Furniture & Equipment	0			0
Medical Equipment	0			0
Other Machinery & Equipment	0			0
<b>Total LAND, VEHICLES AND EQUIPMENT</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
Storage, Warehousing	0			0
Distribution & Monitoring	0			0
Transport & Vehicle Costs	5,220			5,220
Logistics Services	0			0
<b>Total LOGISTICS, TRANSPORT AND STORAGE</b>	<b>5,220</b>	<b>0</b>	<b>0</b>	<b>5,220</b>
International Staff	8,000			8,000
National Staff	0			0
National Society Staff	7,200			7,200
Volunteers	40,950			40,950
<b>Total PERSONNEL</b>	<b>56,150</b>	<b>0</b>	<b>0</b>	<b>56,150</b>
Consultants	0			0
Professional Fees	0			0
<b>Total CONSULTANTS &amp; PROFESSIONAL FEES</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
Workshops & Training	8,400			8,400
<b>Total WORKSHOP &amp; TRAINING</b>	<b>8,400</b>	<b>0</b>	<b>0</b>	<b>8,400</b>
Travel	4,000			4,000
Information & Public Relations	0			0
Office Costs	1,500			1,500
Communications	4,800			4,800
Financial Charges	5,000			5,000
Other General Expenses	0			0
Shared Support Services				
<b>Total GENERAL EXPENDITURES</b>	<b>15,300</b>	<b>0</b>	<b>0</b>	<b>15,300</b>
Programme and Supplementary Services Recovery	15,968	0	0	15,968
<b>Total INDIRECT COSTS</b>	<b>15,968</b>	<b>0</b>	<b>0</b>	<b>15,968</b>
<b>TOTAL BUDGET</b>	<b>261,637</b>	<b>0</b>	<b>0</b>	<b>261,637</b>
<b>Available Resources</b>				
Multilateral Contributions				0
Bilateral Contributions				0
<b>TOTAL AVAILABLE RESOURCES</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>NET EMERGENCY APPEAL NEEDS</b>	<b>261,637</b>	<b>0</b>	<b>0</b>	<b>261,637</b>