

# PROGRAMME UPDATE



International Federation of Red Cross and Red Crescent Societies  
Fédération Internationale des Sociétés de la Croix-Rouge et du Croissant-Rouge  
Federación Internacional de Sociedades de la Cruz Roja y de la Media Luna Roja  
الاتحاد الدولي لجمعيات الصليب الأحمر والهلال الأحمر

## NIGER

11 July 2004

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### In Brief

**Appeal No. 01.37/2004; Programme Update no. 1; Period covered: January to May 2004;  
Appeal coverage: 44.9%; Outstanding needs: CHF 169,716 (USD 134,200 or EUR 111,000).**  
[\(Click here to go directly to the attached Contributions List \(also available on the website\).](#)

**Appeal target: CHF 308,153 (USD 231,433 or EUR 198,360).**

#### Related Emergency or Annual Appeals:

- [Sahel sub-regional programmes Appeal 01.39/2004](#)
- [Burkina Faso, Mali, Mauritania, Niger, Senegal: Heavy Rains and Flood, Emergency Appeal 20/2003](#)

#### Programme summary:

Anxious to move ahead on its “professionalization” process, the [Red Cross Society of Niger](#) has begun recruitment for its first ever National Director, which will enable it embark on a strategic planning process. Meanwhile, the national society has continued to respond to needs created following last year's flood-induced crop and goods' losses, to participate in curbing the polio spread through social mobilization in National Vaccination Days, to further develop its financial systems as well as address resource mobilization concerns at branch level.

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*This Programme Update reflects activities to be implemented over a one-year period. This forms part of, and is based on, longer-term, multi-year planning (refer below to access the detailed logframe documents).*

*All International Federation assistance seeks to adhere to the [Code of Conduct](#) and is committed to the [Humanitarian Charter and Minimum Standards in Disaster Response](#) in delivering assistance to the most vulnerable. For support to or for further information concerning Federation programmes or operations in this or other countries, or for a full description of the national society profile, please access the Federation's website at <http://www.ifrc.org>*

## **Context and Operational Developments**

The leadership of the Red Cross of Niger, resolute about ensuring the effective transition to a professional national society, has reaffirmed its desire to receive both technical and financial assistance to allow it engage full-time paid managerial staff. See below for details.

The national society distributed blankets and 76 MT of food to the most vulnerable victims of the 2003 floods; 2,108 persons in four villages in the Madaoua region of Tahoua, lost crops from 263 hectares and their livestock, and 510 houses were destroyed during these floods. A detailed report is awaited.

The President and Health Coordinator participated in the West and Central Africa Partners Meeting in Accra 1-3 March.

In February, Niger's Minister for Social Development and Women's Affairs called for a government restraint on Female Genital Mutilation (FGM), widely known as female circumcision. Though declared illegal in the country three years ago, it remains widespread and none has ever been prosecuted for performing the crude operation. A group of 24 villages near the western town of Tillaberry, which previously practiced female circumcision, issued a joint proclamation to abandon the practice. Six ethnic groups, approximating a third of Niger's 11 million population, practice female circumcision. They are the Peulh, Gourmantche, Djerma-Songhai, Kurtey Wogo and Arabs. The Niger government is concerned that besides damaging girls' health, the practice is also fuelling the spread of HIV/AIDS through the use of non-sterilised blades. FGM is widespread in West Africa, where Burkina Faso has led the way in combating the practice over the past 12 years with a considerable degree of success. (Source: UN OCHA IRIN).

According to a Niger government and World Bank joint demographic study released in March, the average woman in Niger now gives birth to eight more children during her lifetime, than her counterparts worldwide. The study shows that family sizes are increasing in Niger with the decrease in the use of modern birth control methods in recent years. The study warned that unless this trend is reversed, the government's over-stretched education and healthcare systems could collapse. The study blamed the baby boom on poverty, early marriage and the widely held belief, encouraged by local Islamic religious leaders, that large families are intrinsically good. It noted that those who practised contraception did so mainly to space out births rather than to restrict the overall family size. The study said Islam itself was not an obstacle to population control, pointing out that several Islamic states, including Iran, Egypt, Morocco and Bangladesh had managed to bring down their birth rates successfully. In response, the Niger government held a series of seminars around the country in early April to publicise the report's conclusions aimed at increasing public awareness on the dangers of uncontrolled population growth. (Source: UN OCHA IRIN).

## **Health and care**

Niger's health profile is alarmingly poor. Life expectancy at birth is estimated at 44.8 years, compared with an average of 48.8 years in Sub-Saharan Africa. Illnesses affecting Niger's population include meningitis, polio, malaria, sickle-cell anaemia and HIV/AIDS which is on the increase. Health provisions are particularly limited in Niger. According to the UNDP, there were only 4 doctors per 100,000 people in the mid-1990s, and given the continued squeeze on public resources, it is unlikely that these rates have improved since then. Only 7 per cent of the rural population have access to health services, compared with 75 per cent of the urban population.

**Goal: To contribute to the reduction of infant and childhood preventable diseases and the HIV/AIDS spread in Niger.**

**Objective: The reduction of HIV/AIDS spread as well as mortality linked to infant/childhood preventable diseases in targeted zones strengthens the National Society's social mobilization, IEC<sup>1</sup> and advocacy activities at the community level.**

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<sup>1</sup> IEC – Information, Education and Communication

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### **Progress/Achievements (activities implemented within this objective)**

#### **1. Increased vaccination coverage of children in urban communities of Niamey and the border zones of Tillabery and Dosso, through door-to-door social mobilization**

- Mothers and caretakers are sensitized about the need to and mobilized to vaccinate their children.
- The rate of vaccination coverage in hard-to-reach areas is increased.
- The Red Cross of Niger actively participates in National Immunization and Mop-Up days.

The Red Cross of Niger once again contributed to the social mobilisation of its population for the National Polio Vaccination Days in February and March. An estimated 422 volunteers and 26 supervisors were deployed across 15 integrated health centres in seven districts reaching **132,975** under fives with polio vaccine within health centres or door to door volunteers (**48,903** children in Maradi, **15,427** children in Dosso, **17,387** children in Tahoua, and **51,258** children in Zinder.

See table of results in appendix.

- **Reinforced operational capacity of the local committees in social mobilization and health promotion.**

As a Sub-Saharan country, Niger faces several epidemics annually, amongst which is cholera. In 2004, this epidemic affected the following areas: Ayorou (154 cases, 4 deaths), Famalé (10 cases, 1 death), Fergoune (1 case), Sanguilé (11 cases), Kandadji (31 cases, 1 death). By May, Niamey, the state capital, had registered five cases of cholera. To curb its spread, the Red Cross of Niger, set up a 15-day operation in Niamey, comprising a health/hygiene Awareness Day by a 20-member volunteer team at the Lazaret hospital-camp. Here, there is limited tent capacity leading to overcrowding, poor rubbish disposal, limited latrines facility (2) and general lack of cleanliness. The team also mobilized a first-aid network to sensitize and inform populations about the cholera epidemic, discussed hygiene and cleanliness at the site and created a reception desk for sick people. Details will be reported on in the next Programme Update.

#### **2. The Red Cross of Niger contributes to reducing the spread of HIV/AIDS and STD among youth in schools and commercial sex workers in three regions (Tahoua, Niamey, and Agadez).**

- Improved knowledge about HIV/AIDS and STD and behaviour change among the target population.
- Strengthened capacity at the local committee level to conduct HIV/AIDS and STD sensitization and awareness activities in the target regions.

No HIV/AIDS activities undertaken during the period due to limited availability of funding.

#### **Impact:**

- See table of results. Experience across the continent has clearly confirmed the impact of social mobilization on improving vaccine coverage.

#### **Constraints:**

- Lack of solid micro-level planning to define priority activities and criteria for monitoring and evaluation as well as an absence of organized teams to reach all villages and hamlets.
- Lack of awareness in several districts where some families still refuse to vaccinate their children, so the main objective "A Niger without Polio" is yet to be realised.
- Lack of security in Gouré District.
- Absence of sufficient staff which makes it difficult to cover all programmes (emergency and on-going) at one time, including attending national coordination meetings at which the NRCS must be represented. The Red Cross of Niger has only one health professional with no assistant.
- Lack of available funds for the HIV/AIDS programme.

## **Disaster Management**

**Goal:** The Federation's "Characteristics of a Well-Prepared National Society" has become a reference working document for Disaster Preparedness and Response of different National Societies.

**Objective:** The Red Cross of Niger branches and headquarters are able to evaluate needs and respond effectively to emergency situations.

### **Progress/Achievements:**

- Technical support is provided to the Red Cross of Niger to update and improve its disaster response capacities.
- A contingency plan is developed and tested.
- National level training is conducted.
- Eight disaster response teams (one in Niamey and seven in regions) are trained using simulation exercises

As part of its contingency planning, the national society is gearing up for local elections in late July and presidential and legislative elections in October and November 2004. Therefore, a training related to contingent plan is planned for July 2004 in Niamey. Regional simulation exercises will be planned for September 2004.

### **Impact:**

It is too early to demonstrate impact as activities are still under organization and will be executed in the coming months.

### **Constraints :**

- There were delays in recruiting a Regional Disaster Management Coordinator at Regional delegation level to support the national society in its efforts.
- Capacity is weak at national society level.

## **Organizational Development**

**Goal:** To decrease the Niger population's vulnerability through improved Red Cross service delivery.

**Objective:** The Red Cross of Niger has completed a comprehensive Strategic Development Plan which will allow it to progressively increase its programme and financial capacity to better meet the needs of the vulnerable.

**Progress/achievements:** Financial management systems and procedures continue to improve and revenues from resource development activities are increased and diversified.

**Led by a paid executive director, the Red Cross of Niger has completed the Co-operation Agreement Strategy process.**

- **Development of a three to five-year Strategic Development Plan (based on national society capacity assessment) in co-ordination with other stakeholders.**  
A strategic planning process framework was sent to the national society together with the terms of reference for an evaluation of the last four years activities which the national society agreed to commence once it has recruited its very first Executive Director. The sub-regional office provided support in developing the job description and identifying one year's financial support for the position to enhance the national society's "professionalization" process.

## **Niger; Appeal no. 01.37/2004; Programme Update no. 1**

- **The Red Cross of Niger convenes a partners meeting to formally present and confirm the Co-operation Agreement Strategy (CAS).**  
In the spirit of the CAS process, liaison with ICRC and the French Red Cross representatives in country is continuing. Efforts will be made to identify other partners interested in the national society.
- **The Red Cross of Niger continues to benefit from professional accounting and budgeting systems at headquarters level.**
  - The Red Cross of Niger accountant is now participating actively in Executive Committee meetings and attended the Governing Board meeting for the first time in Maradi, in January. A special focus on financial reporting has been underlined while the regional finance/resource development delegate supported a resource development seminar organised on February 7-9 where headquarters and branch staff agreed on three resolutions:
    - 1 All program budgets should be developed in collaboration with the national society's accountant, which will strengthen the financial management and reporting profile of the national society.
    - 2 All the receipts will meet a list of minimum criteria which has been disseminated to Red Cross of Niger, Burkinabe Red Cross and Senegalese Red Cross to improve their financial reporting documentation.
    - 3 All branch representatives committed themselves to either implement or improve their accounts books since all regional branches are managing income-generating projects, and financial accounting records are maintained using a manual system.
- **The Red Cross of Niger undergoes external audits of its accounts which will improve its resource management, identify its weaknesses and address them**  
Terms of reference for the audit bid process have been drafted.
- **Finance personnel continue to re-enforce their capacities through training.**  
Training sessions related to the software package installation started in February with a monthly assistance visit for the closure of the accounts. Since March, the accountant is using SAGE SAARI systems for the management of current programmes.

### **The Red Cross of Niger co-ordinates resource generation activities in line with the National Resource Development Committee plan.**

- Activities related to resource development were slightly delayed due to the November 2003 statutory meetings in Geneva and the absence of some personnel. A Cooperation Agreement was signed, which led to the organisation of a resource mobilization seminar (7-8 February). Regional branch governance and management staff as well as different resource persons (Head of ACAVIE – a local NGO, CARITAS Niger representative, and ICRC local representative) attended the seminar which focused on two themes: the interrelation between sound financial management and resource development activity implementation and ways to improve the involvement of the branches in planning/coordinating resource development activities.
- A new organisation of national resource development committee was endorsed during the seminar; instead of the previous structure, originally managed by all Headquarters Board members, new Terms of Reference to blend management staff and external resource persons are being designed. Thus, the recruitment of a resource development officer is crucial to help the national society produce a strategic resource development planning and convert its guidelines into operational activities. Since 1999, about 18 income-generating projects were implemented at branch level which provided the national society with a CHF 50,400 financial turnover.

## **Niger; Appeal no. 01.37/2004; Programme Update no. 1**

- The Red Cross of Niger programme coordinator who attended the project planning process (PPP) workshop held last May in Kiribi, Cameroon, shared her knowledge with resource mobilisation seminar participants. Each fundraising project is now required to develop proposals according to the logical framework method.
- Since the implementation of local income-generating projects, regional branch staff has been requested to work on feasibility studies with the Ministry of Planning which has considerably improved their skills in planning and budgeting projects. Different concerns were however highlighted during the resource development seminar in which branch representatives raised the issue of financial training for local management staff to overcome poor management and governance-management training for branch staff to clarify roles and responsibilities during project implementation. A second concern raised concerned resource mobilisation plan which should actually fit into the national society's strategic plan. Lack of human resources, especially the Executive Director position, has hampered the implementation the plan. Thus, the national society has defined as a priority the hiring of an Executive Director to get this process underway with regional development officer support and assistance.

### **The Red Cross of Niger develops and strengthens its image and has an effective public relations and marketing strategy.**

- This activity is pending the recruitment of a resource development officer.

### **The Red Cross of Niger diversifies its revenue sources as part of achieving greater financial independence.**

- This activity is pending to the recruitment of a resource development officer. Resource development officer position job description is ready to be advertised

### **Impact:**

- To improve the national society's ability to manage working advances, a check list/memorandum has been sent to the national society to be used as a reference to check strengths, weaknesses, and progress in financial reporting.
- The active participation of the accountant in national society statutory meetings is realised.
- Project planning process information has been spread out at branch level which staff will henceforth use log frame formats to submit their project proposals.

### **Constraints**

- The major constraint is likely to be related to time for the national society to run the strategic planning process if it is to meet the deadline for the Federation's 2005 appeal.
- Resource development officer planning activities is contingent upon the pending the recruitment of a National Director.
- Financial and procedural manual has been designed and is yet to be endorsed by the Executive Committee.

**Tables 1a and 1b are presented on the following two pages, followed by the Contributions List.**

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**TABLE 1A: CHILDREN VACCINATED BY AGE AND BY CSI  
CALCULATED ACCORDING TO REGISTERED POPULATIONS  
JNV POLIO FEBRUARY 2004 RED CROSS OF NIGER SUPPORT**

REG.	DISTRICT	CSI	0 - 11 Months						12 - 59 Months				
			Estimated Target	Pop. Target	VACC	0 dose	Total	%	Pop. Targ	Target	Vac	0dose	Total
<b>ZARZAR</b>	GUIDAN ROUMDJI	SOULOLOU	1320		1081	299	1380		4845		5187	0	
		GUINDAN SORI	2120		1849	442	2291		7785		9971	0	9971
		GABBI	0	0	0	0	0	0	0	0	0	0	0
	MADAROUNFA	MARAKA	0	0	0	0	0	0	0	0	0	0	0
		DAN ISSA	0	0	0	0	0	0	0	0	0	0	0
<b>BOUSSO</b>	Gaya	Bengou	0	0	1102	200	1302		0	0	3580	11	3591
		Bana	0	0	965	168	1133	0	0	0	2995	0	2995
		Tounouga	0	0	1294	184	1478	0	0	0	4920	8	4928
<b>HAIOU</b>	Madaoua	Sabon Guida	0	0	2695	166	2861	0	0	0	8848	0	8848
		Bangui	0	0	1432	173	1605	0	0	0	4073	0	4073
<b>N-ZAR</b>	MATAMEY	DAN BARTO	0	0	0	0	0	0	0	0	0	0	0
		YAOURI	0	0	0	0	0	0	0	0	0	0	0
	GOURE	GOURE	2476	2450	2334	114	2448	0	8748	8640	8540	0	8540
		MAGARIA	2299	2429	1916	511	2427	0	8323	8105	8035	0	8035
			S BROUM	2592	2892	2644	248	2892	0	9384	9752	9752	0

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**TABLE 1B: CHILDREN VACCINATED BY AGE AND BY CSI  
CALCULATED ACCORDING TO REGISTERED POPULATIONS  
JNV POLIO FEBRUARY 2004 RED CROSS OF NIGER SUPPORT**

REG.	DISTRICT	CSI	0 – 59 Months				
			Pop. Target	Registered Pop.	Vacc	0 DOSE	Total
<b>ARL</b>	GUIDAN ROUMDI	SOULOLOU	6165		6268	299	6567
		GUINDAN SORI	9905		11820	422	12242
	MADAROUNFA	GABBI	5488	6157	5994	160	6154
		MARAKA	5453	6960	6742	169	6911
		DAN ISSA	13371	17029	16443	586	17029
		TOTAL					48 903
<b>BOU</b>	Gaya	Bengou	4478	4895	4682	211	4893
		Bana	3931	4128	3960	168	4128
		Tounouga	5321	6406	6214	192	6406
	TOTAL					15 527	
<b>HA</b>	Madaoua	Sabon Guida	0	0	10543	166	11709
		Bangui	0	0	5505	173	5678
	TOTAL					17387	
<b>N-ZAR</b>	MATAMEY	DAN BARTO	8112	8482	8143	339	8482
		YAOURI	7622	8736	8264	418	8682
	GOURE	11224	10990	10874	114	10988	
	MAGARIA	YEKOUA	10622	10534	9951	511	10462
		S BROUM	12644	12396	12396	248	12644
	TOTAL					51 258	

[Contributions list below; click here to return to the title page and contact information.](#)

APPEAL No. 01.37/2004

## PLEDGES RECEIVED

14/07/2004

DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
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## CASH

					TOTAL COVERAGE	
REQUESTED IN APPEAL CHF ----->				308,153		44.9%
CASH CARRIED FORWARD				36,234		
BRITISH - GOVT/DFID GRANT 2004				30,000	29.01.04	DISASTER PREPAREDNESS
BRITISH - GOVT/DFID GRANT 2004				40,000	29.01.04	FINANCE DEVELOPMENT
BRITISH - GOVT/DFID GRANT 2004				32,203	29.01.04	ORGANISATIONAL DEVELOPMENT
SUB/TOTAL RECEIVED IN CASH				138,437	CHF	44.9%

## KIND AND SERVICES (INCLUDING PERSONNEL)

DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
Note: due to systems upgrades in process, contributions in kind and services may be incomplete.						
SUB/TOTAL RECEIVED IN KIND/SERVICES				0	CHF	0.0%

## ADDITIONAL TO APPEAL BUDGET

DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
SUB/TOTAL RECEIVED				0	CHF	