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Revised Emergency Appeal Niger: Complex Emergency (formerly Food Insecurity)

 International Federation
of Red Cross and Red Crescent Societies

Emergency appeal n° MDRNE010 28 August 2012

This Revised Emergency Appeal seeks CHF 3,375,048 in cash, kind, or services to support the of the Red Cross Society of Niger (RCSN) in delivering assistance to 32,000 households (224,000 beneficiaries of which includes 17,000 Malian refugees). The timeframe will also be extended to 12 months, and the operation will be completed by the end of February 2013. A final report will be made available by the end of May 2013 (three months after completion).

Appeal target (current): CHF 3,375,048 [<click here to view the attached Revised Emergency Appeal Budget>](#)

Appeal coverage: 40%; [<click here to go directly to the updated donor response report, or here to link to contact details>](#)

Appeal history:

- An Emergency Appeal was launched on the 30 January 2012 for, CHF 3,756,836 for nine months to assist 50,000 households (350,000 beneficiaries).
- CHF 126,768 was allocated from IFRC's Disaster Relief Emergency Fund (DREF) on 21 December, 2011 to support RCSN in needs assessments and initial response for 6,500 households.

Summary:

Since the Emergency Appeal was launched, a refugee influx from Mali has worsened the already precarious food security situation for the affected communities in the border regions and called for adjustments in the RCSN response to the emergency. This revised appeal reflects the activities of the National Society to integrate this new vulnerable population into its ongoing efforts against food insecurity.

The DREF allocation in December 2011, allowed the National Society to prioritize Tillabéry and Tahoua regions with cash-for-work activities to help restore drylands, supply animal feed to small farmers and distribute cash to vulnerable heads of households unfit for field work. Overall, 1,625 families received assistance for a period of two months.

The January emergency appeal expanded these activities to more households in 6 regions: Diffa, Tahoua, Dosso, Tillabéry, Maradi and Zinder. However, delayed funding put plans on hold, while the situation and responses of other humanitarian actors continued to evolve. In Diffa region, the National Society, together with the government's regional technical services have identified eight sites where the fixation of sand dunes through cash-for-work started at the end of June. Some cash for work programmes were not carried out because participants returned to their fields once the rainy season began. The nutrition activities aimed at children from six to 59 months and pregnant or lactating mothers have continued in Dosso region and are now being expanded to Niamey and Diffa regions. The team are currently monitoring the food security situation as the



RCSN cash for work activities: Making benches for land recovery in Tillabéry region of Niger (photo Tidjani).

incidence of moderate and severe malnutrition experienced an overall increase at the end of July compared to the same period in 2011. Zinder, Maradi and Tahoua regions were the most affected and Zinder, Tahoua and Niamey reported the highest number of deaths from severe acute malnutrition with 32, 5 and 4 deaths respectively in week 30.

The arrival of refugees fleeing the violence in Mali complicated the plight of the communities affected by food shortages and rendered obsolete some planned food security interventions, particularly in the northwest border region of Tillabéry. Three of its departments are affected, including Tillabéry, Filingué, and Ouallam, where food insecurity is highest in the country. As depicted in the table below, by 16 June, 44,007 people had been registered by the UNHCR in Niger (94% Malian nationals). These refugees and returnees, whether accommodated by the host populations or living in improvised sites, create an additional strain on an already precarious food security situation. All the villages that have hosted displaced so far are facing a food shortage rates between 80 and 100%¹. With some villages of Tillabéry region seeing their population increased fourfold (e.g. 7,755 refugees for 1,500 inhabitants), traditional coping mechanisms have been overwhelmed. ICRC is assisting refugees at the border of Niger-Mali waiting to be transferred to UNHCR-supported refugee camps.

In addition to food insecurity and population movements, a cholera outbreak in Tillabéry has added another dimension to the complex emergency. As of the end of July (Week 30), Niger was still experiencing the effects of a major cholera epidemic. While the situation in some regions (Dosso, Maradi and Niamey) have fallen off, Tillabéry region continued to register new cases, with 133 cases / 1 death registered in week 30. To date, Niger has experienced some 3, 424 cases / 71 deaths with a mortality of 2.1% (Tillabéry has had 3,403 cases / 66 deaths) – this against 902 cases / 25 deaths in the same period in 2011. Overall the level of cases has been falling since week 25, however, with the current flooding the country team are monitoring the situation to see if it has an impact on the cholera situation.²

Finally, severe floods have hit all regions of the country, affecting up to 400.000 people. According to government figures, 17,148 houses have collapsed and roads and other infrastructure have been significantly damaged. Cultivated land has been flooded and livestock has been lost, which will impact the food security situation. A separate response to these floods will be launched as distinct from this Emergency Appeal and a DREF is being discussed.

In light of these developments, the revised emergency appeal is now focusing on the regions of Tillabéry, Diffa and Tahoua for food security and WASH activities, and regions of Dosso, Diffa and Niamey for nutrition related activities. Activities addressing cholera and other water-borne diseases are planned for Tillabéry region. Finally, community-based psycho-social interventions are also planned.

The delayed funding of the emergency appeal activities led to a prioritization on the urgent needs and scaling down of food security activities that are no longer appropriate as the planting season is ending. The revised emergency appeal is concentrating post-planting season food security activities in the regions of Tillabéry, Diffa and Tahoua while adding new interventions in WASH, support to refugees from Mali and cholera prevention.

The situation

Food Crisis

The food security situation in Niger is a complex one, and as within the rest of the Sahel region, there are a number of issues, which combined, are causing increased vulnerability of a population already living in harsh conditions of poverty.

The nutritional status of children under five years remains a concern in Niger even during “normal” years, with global acute malnutrition (GAM) levels ranging from 10 to 12 per cent since 2005. According to the results of an earlier assessment of the nutritional state of children between 6 and 59 months conducted in May and June 2011, already at that stage all regions recorded a rate of between 10 and 14 per cent GAM, with the exception of the urban centre of Agade. There were chronic malnutrition rates recorded across the country (between 40

¹ Preliminary evaluation report of 2011 harvest and from the 2011/2012 agricultural campaign (cereal deficit in urban Tillabéry was established at 98.9% and at 73% in Ouallam Commune).

² OCHA Humanitarian Bulletin, No.32 16 August 2012

and 50 percent), with the exception of urban centres such as Tillabéry, Niamey, and Agade. The rates of acute and chronic malnutrition among children under five in Niger are structurally high, even in areas with previously good crop production, due to improper feeding practices of adults and children, quality of childcare, inadequate access to health care, poor hygiene practices, and social constraints such as the socio-economic status of women.

According to the National Department of Nutrition, at week 8 of this year, 12,335 severely malnourished children were referred to Integrated Health Centres. From week 1 to week 18, a total of 232,925 cases of acute malnutrition in which 93,308 cases were severely malnourished children were treated in CRENI and CRENAS (nutritional recovery centre for severe malnutrition). As of 8 July, the total was 393,150 cases, including 161,492 cases of *severely* malnourished children reported by the national health authorities.

In 2011-2012, the food situation deteriorated. The combination of repeated dry weather and the onslaught of pests (grasshoppers, caterpillars, etc.) have meant that several villages in the most affected regions of Niger have experienced significant declines in cereal production. The reduction in cereal production has had a knock-on effect on market prices, and according to the Food and Agricultural Organisation (FAO), there was a 15% increase in the retail price of millet in Niamey between October and November 2011. After a short price decrease in January 2012, cereal prices were again increasing in February, March, and April and current projections are they will continue their ascension until August 2012.

In June, the SIMA (*Système d'information des marchés agricoles*), reported that cereal prices in general had stabilized on the month while going up over the year. According to SIMA, millet is 43% more expensive compared to the average price over the last 5 years from 2007.

The situation further worsened in 2012, where vulnerable households used their reserve stocks earlier than usual. The poorest households therefore had to start buying food items from the markets earlier, which extended the normal lean season by two to three months and forced the poorest households to find means to purchase food for over six months. To cope with this, the poorest households in the most affected areas destocked animals (Diffa region) in order to buy cereals. Children left school to find work to support their families (southern department of Tessaoua in Maradi region and both Tanout and Gouré departments in the Zinder region) including leaving villages to find temporary work in the cities or migrating further.

The incidence of moderate and severe malnutrition was experiencing an overall increase at week 30 compared to the same period in 2011. Zinder, Maradi and Tahoua regions are the most affected. Zinder, Tahoua and Niamey reported the highest number of deaths from severe acute malnutrition with 32, 5 and 4 deaths respectively during the week 30 of the year 2012.

Refugees

Since February 2012, the security situation in Northern Mali has deteriorated due to conflicts between Mali armed forces and rebel groups, causing population movements within the country and to the neighbouring countries of Mauritania, Algeria, Niger and Burkina Faso. According to the UN, over 372,000 people have fled fighting in Northern Mali and moved to other areas within and outside the country³. The refugees are dispersed in six of Niger's eight regions, living in makeshift sites and receiving occasional assistance from humanitarian agencies. Returnees and refugees in Chingodiar have finally been installed in Abala department where the UNHCR opened a camp. Most of these refugees are nomads. Some of them have crossed over with their cattle and cannot remain in the same sites as the host communities because of the additional stress the livestock would have put on already short water supplies. Although the UNHCR has opened an office in Niamey with a branch in Ouallam, the needs of the refugees are still poorly covered. The host population was already facing hardship from drought and previous insufficient harvests before the Malian refugees crossed to find safe haven in Niger. There have been emerging difficulties for host communities and refugees to live together and share resources and these tensions are likely to increase significantly over the lean season (from July to October) to, as access to food becomes a challenge.

Cholera

In addition to the food insecurity and refugee influx, cholera appeared again in the area south-west of Tillabéry region. . As of the end of July (Week 30), Niger was still experiencing the effects of a major cholera epidemic.

³ OCHA, Special Humanitarian bulletin, Sahel Food Security and Nutrition Crisis, June 15th.

While the situation in some regions (Dosso, Maradi and Niamey) have fallen off, Tillabery region continued to register new cases, with 133 cases / 1 death registered in week 30. To date, Niger has experienced some 3,424 cases / 71 deaths with a mortality of 2.1% (Tillabéry has had 3,403 cases / 66 deaths) – this against 902 cases / 25 deaths in the same period in 2011. Overall the level of cases has been falling since week 25, however, with the current flooding the country team are monitoring the situation to see if it has an impact on the cholera situation.⁴

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Flooding

In recent days, seasonal flooding has also hit all regions of Niger with a total affected population of up to 400,000 people. A number of joint evaluation missions have gone out to the various affected regions and have highlighted the need for food, shelter, blankets, medicines and mosquito nets. The Niger Government has highlighted that 17,148 houses have collapsed, roads and other infrastructure have been damaged, cultivated areas been flooded and livestock been lost. These floods will impact the food security situation as well as operational activities, and the situation is being monitored by the country team. An operation in response to the floods will be launched separately from this appeal, supported by the IFRC DREF.

Coordination and partnerships

The Government of Niger, working through its crisis committee led by the Prime Minister and coordinated by OCHA, is monitoring the situation and having regular meetings, in which the RCSN and Red Cross Movement partners have participated, alongside UN agencies (WFP, UNICEF, WHO, UNFPA, FAO) and national and international humanitarian agencies. The RCSN has cooperated with both WFP and FAO around food provision and seeds, and there will be opportunities for further partnerships at field level during the operation. Discussions that took place between the National Society and UNICEF for a potential partnership in nutrition activities in Niamey Region were successful and the programme started mid-June. The agreement covers support to 44 health facilities (“*Centres de santé intégrés*”) in the Niamey area with volunteers supporting community actions, such as monitoring children at risk of malnutrition and referring suspected cases to the nutritional health centres.

Agreements were signed in late 2011 and early 2012 between RCSN and WFP for food distribution in Mangaizé, Chingodiar /Abala (Tillabéry region), and Tillia (Tahoua region). 383 tons of food was distributed to 3,109 households including to refugees, returnees, and the host population. The quantity handed out to each beneficiary consisted of 15 kg of rice, 3 kg of beans, and 0.6 kg of oil for one month. In Tillia department (Tahoua region): 99.948 tons of rice, 20 tons of beans, and 4 tons of oil were distributed to 787 households. In Tillabéry region, 258.76 tons of food were handed out to 13,913 people: 147.87 tons to 7,950 people in Mangaizé and 1,108,932 tons to 5,962 people in Abala.

In addition to the IFRC appeal, the RC National Societies of Spain, France, Ireland, Qatar and Iran are working in a coordinated manner in support of the RCSN. A RC Movement coordination meeting takes place every month with all PNS including the RCSN and ICRC to ensure a flow of communication and good coordination for related operations

Areas of PNS intervention in Niger:

	Agadez	Maradi	Tahoua	Zinder	Niamey	Tillabery
Nutrition	French RC	Spanish RC		French RC		
Food Security	Qatar RC	Spanish RC	Spanish RC Qatar RC	French RC Irish RC Qatar RC		Qatar RC
Livelihoods			Spanish RC			
Child		Spanish	Spanish		Spanish	

⁴ OCHA Humanitarian Bulletin, No.32 16 August 2012

Protection		RC	RC		RC	
Water and Sanitation				French RC Irish RC		
Livestock feeding			Qatar RC	Qatar RC		Qatar RC

Since the first arrivals of refugees and returnees the Government of Niger, through its early warning system coordination unit, convened a meeting with all international humanitarian actors in the country to share field information and the results of the rapid fact finding mission carried out. This initiative has been commended by all partners. The Government has been coordinating humanitarian actions through the organization of weekly meetings held at the Prime Minister's office.

As there was no permanent presence of the UNHCR at the beginning of the population movement, OCHA coordinated the mobilization of humanitarian response initiatives with the authorities. According to their respective mandates, UN agencies (WFP, UNHCR, UNICEF, and WHO) conducted emergency activities in the area of water, health care, and food in partnership with international humanitarian agencies such as OXFAM, MSF, ACTED, and Islamic Relief. Following the arrival of UNHCR and IOM, there is joint collaboration to support both the Malian refugees and Nigeriens returnees from Mali.

Several humanitarian agencies such as CADEV (working in areas of logistics, transport, warehousing, and registration), MSF (working in WASH activities), and Islamic Relief (working in environment and wood distribution activities.) were also active in the refugee arrival areas. The following activities are ongoing in the various sites:

- In the sites of Ayorou department, Oxfam is conducting WASH activities. CADEV with the support of UNHCR is distributing food and non-food, whereas the RCSN is registering beneficiaries, conducting camp orientation, and hygiene awareness campaigns.
- In Ouallam department, Islamic Relief is managing the WASH component; MSF in health; and RCSN is in charge of the registration, orientation, sensitization and food distribution.
- In Filingué department, Catholic Relief Services (CRS) manages water and latrines; Tougzéfane, ACTED and UNHCR are responsible for census and management of the camp in Abala; Islamic Relief distributes hot meals; MSF provides health assistance and the RCSN manages the registration of beneficiaries, orientation and hygiene awareness raising, as well as food distribution.
- The IOM, in collaboration with the RCSN, is transporting refugees from one site to another for their security and their wellbeing, as staying in border areas of Mali could be unsafe.

With facilitation by the IFRC Representation in Niamey, WFP signed a sub-agreement with the RCSN for the distribution of food for one month to the displaced people and the host populations - 2,000 households in Chinegodar, Mangaizé (Region of Tillabéry) and 1,109 households in Tchintabaraden (Tahoua Region). Similarly, negotiations are underway for a sub-agreement between UNHCR and the RCSN for psycho-social support management in three camp sites (Abala, Mangaizé, and Tchintabaraden). The main objective of this component is to help improving the living conditions of refugees, their integration and social cohesion.

Red Cross and Red Crescent action

The RCSN is working closely with the IFRC through its Country Representation based in Niamey, with additional support provided by IFRC's Sahel Regional Representation, Zone Office and Geneva Secretariat. An Operations Manager supported by the Norwegian Red Cross was deployed in early May to oversee the complex emergency on behalf of the Federation. The reception of funds from the Norwegian and Swedish Red Cross Societies helped kick-start most of emergency appeal's activities with priority given to the most in need populations in Tillabéry, Diffa and Dosso.

To finalise their plan of action to respond to the crisis, the RCSN has worked with the PNS and the IFRC; implementation of food security and nutrition activities planned in this appeal are well underway. Certain activities that were planned bilaterally with PNS are also underway. For example, the National Society has been implementing food security and nutrition activities in a few villages in Maradi and Tahoua regions with the Spanish Red Cross, in Tanout Department of Zinder region with the Irish Red Cross, in Tillabéry, Tahoua and Maradi, Dosso and Zinder regions with the Qatari Red Crescent, and with French Red Cross in Agadez and Zinder regions.

Response actions undertaken for the refugees and returnees from Mali by the Red Cross Movement started with the distribution of NFIs (mats, insecticide treated mosquito nets, soap, and buckets) to 1,500 families by the ICRC supported by Niger Red Cross volunteers. With support from ICRC and the Federation, the Niger Red Cross conducted a situation analysis and needs assessment mission in the Tillabéry Region. During this mission, 50 volunteers were trained or re-trained. These volunteers assist with the screening, orientation, awareness-raising on tolerance and peace, as well as support for those exhausted or injured through referral to health centres. IEC (Information, Education and Communication) sessions were also organized on hygiene promotion and disease prevention along with psycho-social activities. Eight sites (RCSN centres, supported by IFRC) for counselling and orientation were put in place on various refugee and returnee sites to serve as the Movement's base, "chatting" rooms and office, and help conduct activities and to protect against the heat.

The ICRC also continues supporting the RCSN in the region of Tillabéry (department of Oualam and Fillingue) and has already distributed 383 tons of food to some 27,823 people (20,652 Malian refugees and 7,171 Nigeriens returnees from Mali). NFI distributions included 1,500 tarpaulins, 9,000 mats, 4,500 blankets, 3,000 mosquito nets and 1,500 kitchen sets.

With the support of the DREF, the National Society extended its existing cash-for-work and cash transfer programme in seven villages (Illéla and Konni departments of Tahoua region) for some 800 families. The programme previously targeted 500 households in 12 villages in Tera and Kollo (Tillabéry) and was focused on the stabilisation of sand dunes. It is now being extended to include 15 new villages in Tera and two further departments of Tahoua. Moreover, 120 heads of vulnerable households in Tahoua region (Illéla and Konni) unfit for fieldwork have been identified for a one-off cash transfer for one month. One thousand bags of fodder for livestock have also been procured and were distributed to 500 small farmers associations in four villages of the department of Kollo of Tillabéry region.

Nutrition activities were extended to 12 new villages in the region of Dosso, and 29 villages around seven Integrated Health Centres have been selected in Diffa region for the same type of activities.

The Needs

The original emergency appeal and supporting plan of action aimed to respond to the needs of 50,000 households in 434 villages in the most affected areas of the regions of Diffa, Tahoua, Dosso, Tillabéry, Maradi and Zinder. These areas were selected by the RCSN through Government and National Society assessments as the most vulnerable areas of the country and have traditionally experienced some of the worst levels of malnutrition and food insecurity.

The delayed funding of the appeal has led to the scaling down of the food security activities, as there was a gap of over four months between the time the appeal was launched and the implementation of the planned activities. The rainy season has started in most parts of the country, making some of the cash-for-work activities outdated, as many Nigeriens are busy planting. The revised emergency appeal is now focusing on the regions of Tillabéry, Diffa and Tahoua for food security and WASH activities, and regions of Dosso, Diffa and Niamey for nutrition related activities.

It is also focusing on incorporating the needs of refugees and returnees from Mali and needs related to the spread of cholera in the affected areas, as outlined below.

The immediate needs and corresponding responses identified in the assessments were:

- Food provision to those with limited access to food supplies and markets, as well as for Malian refugees and host communities;
- Screening and referral of children under five and pregnant and lactating mothers in need of urgent care

- and supplementary feeding;
- Access to cash (through cash-for-work or direct cash transfer) to support the most vulnerable who have already exhausted the food supplies and other coping mechanisms. Direct cash transfer have been focused on the most vulnerable who are unable to work, such as the physically disabled, elderly, chronically ill, and pregnant women and extended to households having a grain deficit;
- Food for livestock for small farmers to maintain their animals and avoid sale or destocking;
- Access to nutrition or health centres to improve levels of preventive or restorative nutritional and basic health care;
- Provision of clean water and basic sanitation, as well as promotion of good hygiene;

The longer-term needs are:

- Access to improved, drought resistant seed and tools to plant and irrigate;
- Strengthening of cereal banks to ensure their sustainability and effectiveness over the coming months;
- Improved longer-term access to basic health care, hygiene and nutrition;
- Coordination and clear linkages into longer-term disaster risk reduction programming;
- National Society capacity to deliver at community, regional and national levels.

Malian refugees

Food assistance has been provided by humanitarian organizations to support the entire refugee and returnee populations, and support has been provided in other sectors to parts of the refugee or returnee population. Basic needs of refugees and returnees from Mali (food, health, shelter) have already been reasonably met thanks to the joint actions of UNHCR, IOM, WHO, WFP, UNICEF, authorities, and humanitarian agencies; and such actions will continue. However, the capacities of the host communities in terms of health, water and school infrastructures are either non-existent or already insufficient to meet their own needs. Current assistance has hardly taken into account the needs of host communities, whose meagre resources cannot support the influx of refugees.

The rapid assessment conducted in June by the National Society and other humanitarian agencies showed that immediate needs include food, temporary accommodation, drinking water, animal water points, latrines, adequate sanitation facilities (water treatment points), blankets, sleeping mats, mosquito nets, soap, buckets, kitchen sets, jerry cans, tarpaulins, hygiene kits, pasture or animal feed, schools and school stationery for children, medication and nurses for health centres.. NFI needs are also only partially met as indicated in the figures below provided by the UNHCR office in Niger.

The proposed operation

Though reduced in the revised appeal, the RCSN continues to address food insecurity through a twin-track approach, combining simultaneous implementation of short-term and longer-term interventions. The twin track approach provides relevant relief assistance that at the same time increases the resilience of affected populations in the longer-term and discourages them from harmful short term coping strategies, such as migration to seek food and grazing, consumption of seed stock and decapitalization of livestock wealth. Short-term interventions include the provision of food to the most vulnerable without access to food or markets, direct cash transfer for vulnerable groups with access to food or markets, and cash-for-work for those able to work and with access to markets. Longer-term needs are addressed through creation and rehabilitation of cereal banks and seed diversification projects in the targeted villages.

Supplementing these interventions, an emergency nutritional programme targeting Dosso, Diffa and Niamey regions has been prepared. The programme involves screening and referral of acutely malnourished children from six months to five years and pregnant and lactating women. The activities also include support to health centres and health promotion. These activities are being complemented by health and nutritional education sessions to improve infant and young child feeding practices in targeted communities, an issue that was identified as an ongoing, chronic problem in Niger.

Addressing the risk of cholera and other water-borne diseases, access to safe drinking water and sanitation and hygiene promotion activities are being carried out in targeted communities in Tillabéry region.

Additional stresses caused by the refugee situation are being tackled through a number of community-based psycho-social interventions addressing gender based violence, needs of vulnerable groups and social tensions.

Additional activities for refugees and host families

In addition to continuing with the implementation of the activities outlined above, the RCSN will address the specific needs of the refugee population and host communities by targeting an additional 1,500 families, mostly nomad, living around the villages in very precarious conditions, and/or households seeking refuge among their relatives.

The activities will be implemented in places where the RCSN conducts monthly food distributions in partnership with WFP. Food distribution activities by the RCSN are not done on refugee camps. The RCSN will conduct monthly food distributions for three months to over 17,000 beneficiaries in three sites: Abala, Mangaizé both in Tillabéry region, and Tillia located in Tahoua region. WFP will transport food to the distribution point. The lists of beneficiaries are provided by the authorities in collaboration with UNHCR. The National Society will be in charge of the distribution.

In cooperation with UNHCR, the RCSN will take care of the psycho-social aspect of refugees on the camp sites and in the host population, and will provide some 1,500 households with basic household water and sanitation items. Refugees and host communities will benefit as well from awareness campaigns on water-borne diseases.

Revised objectives

The following section presents the revised appeal objectives and details the progress accomplished so far in reaching the related objectives as laid out in the original appeal:

Relief distributions (food and basic non-food items) – modified from Emergency Appeal	
Outcome 1 (emergency): Enable access to food and other livelihoods to 5,000 households in Diffa, Tahoua and Tillabéry regions.	
Outputs (expected results): <ul style="list-style-type: none"> The rate of exodus and seasonal migration is reduced in the targeted areas. 5,000 households can meet their food needs for 2 months (cash transfer, cash-for-work and food distributions). 	Activities planned: <ul style="list-style-type: none"> Mobilize and retrain 30 volunteers / supervisors (with training on communication, distribution, and screening techniques) Distribute cash to 2,000 heads of families suffering from cereal deficit and unfit for field work (e.g. disabled, elderly, female or child headed households) Cash-for-work programme (CFW) to fix dunes, barriers and set-up anti-erosion infrastructure (around 2,700 households)
Outputs (expected results): Over 17,000 refugees and host families receive food for at least 3 months (in Ayorou, Ouallam, Abala, and Tillia)	Activities planned: <ul style="list-style-type: none"> Negotiate and sign two agreements with WFP and distribute food provided by WFP for 3 months; Conduct quick training of 20 volunteers on distribution techniques; Rent 3 warehouses in 3 locations; Purchase distribution equipment; Monitor, evaluate and report on distribution activities; Prepare specific reports for WFP/ UNHCR.
Outcome 2 (emergency): 1,500 families in Ayorou, Ouallam, Abala, and Tillia receive NFI to improve their living conditions.	
Outputs (expected results): <ul style="list-style-type: none"> 1500 households are well equipped to face rainy season. 1500 mothers received mosquito nets in IHC 	Activities planned: <ul style="list-style-type: none"> 3,000 mosquito nets, 1,500 buckets, 3,000 jerry cans and 800 kitchen kits; Identify mothers with children released from CRENI and provide with mosquito nets Register beneficiaries (host families and refugees); Bring the relief items to the distribution places; Distribute NFI during awareness-raising sessions;

	<ul style="list-style-type: none"> • Monitor, evaluate and report on distribution activities.
Outcome 3 (recovery): Ensure medium and long-term access, availability and utilisation of food by the target population	
Outputs (expected results): <ul style="list-style-type: none"> • 30 villages have benefited from strengthening their cereal banks (in partnership with WFP) – leading to them having cereals to sell at village level and to fill their cereal bank account (10 tons for the new ones and 5 tons for existing banks). • 15 villages have benefited from the building of cereal banks and donations of cereal. 	Activities planned: <ul style="list-style-type: none"> • Identify and select 30 villages with cereal banks that need to be reinforced in the zone of intervention • Identify and select 15 villages with chronic cereal deficit in order to assist in the creation of cereal banks • Elaborate and finalize the agreement with WFP to provide cereals for all 45 banks • Organize training/refresher sessions for the management committees of the cereal banks • Carry out monitoring and evaluation activities of the cereal management by the cereal banks • Document the process and use for learning to improve future interventions
Outputs (expected results): 2,500 most vulnerable households in 12 villages have received improved seeds (15kg) for the forthcoming season.	Activities planned: <ul style="list-style-type: none"> • Develop a suppliers list based on approved “improved” seed producers in coordination with regional agricultural authorities and FAO/INRAD • Identify the 2,500 most vulnerable households in 12 villages • Monitor and evaluate the distribution and storage activities with a view to ensuring sustainability
Outputs (expected results): 100 households or farmers’ association set up vegetable gardens including drop-irrigated counter-season cultures.	Activities planned: <ul style="list-style-type: none"> • Identify households and areas with cropping potential • Support communities to set up vegetable gardens, including drop-irrigation systems • Support communities to initiate “cultures de contre-saison” • Provide seeds, fertilizer, and agricultural tools • Support repair or improvement of the water infrastructure • Assist the most vulnerable villages with the highest potential in agricultural production with long-term food security interventions
Outputs (expected results): The targeted communities have anti-erosion and other infrastructures.	Activities planned: <ul style="list-style-type: none"> • Work with the communities in 50 villages on anti-erosion and water harvesting measures according to the communal development plan to improve agricultural production • Equip the above villages with soil working tools and the most appropriate species to plant (e.g. herbaceous plants, fruit trees, trees for firewood or fodder etc.)

Progress:

In Tillabéry region, 500 farmers received one-bag of fodder each, and in Tahoua region 500 bags were distributed to approximately 39 farmer associations. Information sessions on fodder conservation in times of abundant harvest were provided in view of the lean season. 325 families were able to implement soil rehabilitation measures through CFW activities (229 families digging “half-moons” and 96 making sand barriers) in 12 villages of Tillabéry and Tahoua regions in order to assist the targeted families in buying the necessary cereals to cover three months of food needs. Due to the CFW activities, 144 acres of dry land were recuperated and 39,030 herbaceous plants will soon be planted in that same area to complete the land rehabilitation.

300 vulnerable heads of households unfit for fieldwork have been assisted through the cash distribution in the same 12 villages of Tillabéry and Tahoua regions where CFW activities were implemented. Some 950 tons of food received through WFP was distributed from February to April to approximately 17,000 beneficiaries including Malian refugees, returnees and vulnerable populations in cereal deficit areas of the regions Tillabéry and Tahoua (Tillia Department). According to an agreement signed between RCSN and WFP, the distribution will continue until September to help people get through the lean period until the next harvest.

Contacts with FAO / INRAD (regional authorities) were established and the lists of registered improved seed providers were made available; this has allowed the procurement of approximately 37.5 tons of improved seeds to 2,500 families in 14 villages of Tillabéry region. All regional authorities met to date have mentioned the government's preoccupation with mismanagement of cereal banks and they are waiting for the feedback from a recent survey to give proper orientation and advice to partners engaged in this specific type of support.

Red Cross field staff were recruited for Tillabéry, Dosso and Diffa regions and these technical focal points for food security and nutrition, finance assistants and drivers are now carrying out planned activities in their respective regions.

Emergency health – new outcomes on cholera and psycho-social support	
Outcome 4 : Contribute to reducing malnutrition rates among children from six months to five years, as well as pregnant and lactating women, in 230 villages in Dosso, Diffa and Niamey regions	
Outputs (expected results): <ul style="list-style-type: none"> • All children from 6 to 59 months in the targeted villages are screened by trained community volunteers in their own communities and the malnourished children and mother are referred to some 82 Integrated Health Centres (IHC) • Women of childbearing age, pregnant and lactating know the importance of breastfeeding • The IHCs in the targeted areas receive and care of all referred malnourished cases • The rate of acutely malnourished children is held below the national average 	Activities planned: <ul style="list-style-type: none"> • Based on its successful experience of this approach in Dosso last year, recruit/train or retrain 460 community-based volunteers at a rate of 2 per targeted village (training in screening of children and mother); and 50 supervisors on anthropometric measurement, bilateral oedema detection and interpretation of nutritional index • Organize IEC sessions on good nutritional practices and breastfeeding • Organize demonstrations on food preparation for children • Strengthen the screening, baseline and follow-up on the malnourished in the community • NS Health Coordinators to visit the IHC: CRENAM, CRENI, CRENAS in targeted areas with local / regional health authorities and assess their capacities of centres to receive and manage acute malnourished cases (screening will not be recommended until capacity is build, with support of the authorities and WFP/UNICEF) • Conduct monthly screening of children from six months to five years • Refer moderate acute malnourished children to CRENAM • Provide support and training to CRENAM according to needs and provide ready to use therapeutic food / food supplies (from WFP/UNICEF) • Refer severe acute malnourished children without/with complication to CRENAS/CRENI • Organize weekly distribution of ready-to-use therapeutic food for severe acute malnourished cases without complications, if CRENAS is not accessible. • Provide transport for referral of severe acute malnourished cases to CRENI if there are difficulties with the access • Distribute cash grants to families of 400 discharged children from CRENAS/CRENI to provide follow up nutrition • Support the rehabilitation of some 20 IHCs
Outputs (expected results): Infant and young child feeding practices are improved through nutrition and health education sessions	Activities planned: <ul style="list-style-type: none"> • Organize workshops for peer educators • Conduct weekly cooking demonstrations • Train 80 volunteers on infant and young child feeding practices and balanced diets (peer-to-peer education) • Train the targeted groups on ORS use and hygiene promotion • Raise awareness activities on health promotion • Organize cleaning up campaigns at community level
Outputs (expected results): Pregnant and lactating women have access to quality health services	Activities planned: <ul style="list-style-type: none"> • Strengthen the capacity of "maternity units" and equip 20 units with beds, linen and mosquito nets, as well as medicine • Train community-based volunteers to support around 90 IHCs • Organize IEC sessions in the community to encourage mothers and pregnant women to visit the IHCs for prenatal consultation and to vaccinate their children

	<ul style="list-style-type: none"> • Train or recycle birth attendants • Negotiate cooperation with UNFPA and UNICEF and MoH • Produce IEC materials on family planning • Meet with district chiefs, traditional and religious leaders to educate them about the benefits of family planning and the difficulties related to early marriage
Outcome 5: To prevent further spread of cholera amongst 17,000 refugees and host population over three months.	
Outputs (expected results): <ul style="list-style-type: none"> • 90% of the population living in cholera affected area are using Aquatabs; • Refugees are aware of cholera and the prevention and contaminations canal. 	Activities planned: <ul style="list-style-type: none"> • Conduct refreshers for 60 volunteers on use of Aquatabs • Provide 6,000 tablets of Aquatabs for water purification, train and promote their use among the population • Provide 9,000 ORS tablets and 1,500 bars of soap • Provide Doxycyclin tablets (antibiotic treatment) as needed • IEC on cholera and distribution of Aquatabs • Conduct door-to-door visits and refer suspect case to health centres • Organize sensitizing campaign for the populations living in areas at risk • Monitor, evaluate and report on activities
Outcome 6: Improve the psycho-social status of the refugees including their integration and social cohesion.	
Output (expected results): Refugees and the host populations in Abala, Mangaizé, and Tchintabaraden feel secure and are living in harmony.	Activities planned: <ul style="list-style-type: none"> • Set up committees of representative for refugees and mobilization mechanisms; • Prevent gender based violence, set up community awareness-raising committees; • Organize awareness-raising sessions for refugees (in agreement with the health sector) on HIV/AIDS prevention, on feeding and malnutrition prevention; • Set up orientation, counselling, and listening centres; • Establish and lead four educational chatting spaces for the refugees; • Identify and regularly monitor people presenting specific needs (pregnant and nursing women, unaccompanied children, the sick, the elderly people, SGBV victims, etc.); • Monitor support refugee committees in planning, holding meetings and decision making; • Organize refugees and host communities around community activities in various areas; • Train refugees and representatives of host communities in community-based first aid; • Support games and activities initiated during official celebrations (African refugee day, woman's day, etc.); • Organize refugee and local cultural days (dances, sports, cuisines, etc.)

Progress:

The National Society is conducting these nutritional actions specifically in 230 villages (of the overall 434 in the revised appeal), targeting 51,500 beneficiaries as follows:

- Moderate acute malnourished cases are being referred for nutritional recovery to moderate malnutrition centres (CRENAM);
- Severe acute malnourished cases are being referred to nutritional recovery centres for Severe Acute Malnutrition (CRENAS);
- Those with severe acute malnutrition and health complications are being referred to Intensive Nutritional Recovery centres (CRENI);
- Ready-to-use therapeutic food, vaccinations and essential drugs received from UNICEF are being provided to severe acute malnourished children living in villages located further than 10 km from the Integrated Health Centre of reference.

Malnourished children are being identified by the mid-upper arm circumference (MUAC) method and the diagnoses are confirmed by their weight-for-height (WFH) at the local health facility (*Case de Santé*). After discharge, children normally receive supplemental food rations for three to four months (typically corn soy blend and vegetable oil). In addition to these activities, the National Society has also been implementing a cash programme where markets permit, to give more flexibility to mothers / caregivers to meet dietary requirements with local foods.

In Dosso region, 2,525 moderately malnourished children and 1,461 malnourished pregnant women received 18 tons of therapeutic food in the 29 health centres supported by the RCSN from January to May. Some 390 community based volunteers are carrying out home visits in the targeted 145 villages. The nutrition activities are being extended to 12 villages around three new health centres in Douchi and Loga Departments where 24 additional Red Cross volunteers will soon be trained and equipped to scaling up screening and sensitizing activities in the villages. The actual implementation of health and nutrition activities in Diffa region started in mid June after the arrival of the nutrition focal point. A mission including RCSN's technical services and humanitarian agencies had taken place earlier in March to decide upon the villages and health centres to support; in the Diffa region, 38 villages and 9 health centres were identified, and contact was made with the regional authorities, WFP and UNICEF and an agreement to cooperate was put in place. In the Tillabéry region, some 45 villages and 12 Integrated Health Centres were targeted, but no commitments with authorities and partners involved in nutrition were made due to inadequate funding. As a result, it was decided not to start new nutrition activities in Tillabéry region but rather concentrate efforts in areas where RCSN is already active and focus on integrating water and sanitation actions.

In addition, following UNICEF discussions with RCSN to see how to include Niamey Region in its nutritional program, an assessment was done to present a plan of action to UNICEF. An agreement was subsequently signed at the end of May 2012 to support 44 IHC in the Niamey area and activities began in June.

Water, sanitation, and hygiene promotion - unchanged

Outcome 7: To increase access to clean safe water, improve sanitation facilities and promote hygiene among the 20 most vulnerable villages in the targeted areas of Zinder, Diffa, Tahoua and Dosso	
Outputs (expected results): <ul style="list-style-type: none"> • At least 5,000 of the most vulnerable beneficiaries have access to safe drinking water; • 8,000 beneficiaries have access to improved sanitation; • 15,000 beneficiaries reached through hygiene promotion. 	Activities planned: <ul style="list-style-type: none"> • Construct 5 new wells and rehabilitate 15 existing water points • Train communities in operation and maintenance of water points to ensure they are used in a sustainable way, Train communities on use of household water treatment and safe storage • Construct improved sanitation facilities (20 latrines in IHCs, schools and public buildings for public use) • Conduct hygiene promotion activities in targeted areas • Train volunteers on PHAST and hygiene promotion • Print and distribute 10,000 hygiene promotion leaflets

Progress: The water & sanitation assessment was completed in March, however limited progress was made due to the prioritization of limited resources to the much needed food security activities. Analysis of the information gathered during the March rapid assessment enabled RCSN to identify preliminary water and sanitation needs in Zinder and Tahoua regions for eventual attention. However, due to limited funds, the focus has so far not been in this outcome.

Challenges: The baseline level of access to safe drinking water and adequate sanitation is low in most parts of the country and therefore difficult to determine acute water and sanitation needs. Priorities so far have been put on food security and nutrition activities, as funding is still not sufficient to include activities in water and sanitation. Nonetheless, continual monitoring of the needs in regions where RCSN is working will ensure that any acute needs will be addressed either directly by the RCSN or referred to the WASH cluster for action.

Disaster Preparedness and Risk Reduction – unchanged

Outcome 8: To improve the community, branch and national capacities of the NS to prepare for, reduce risks and respond to future food crisis and build resilience.	
Output (expected results):	Activities planned:
<ul style="list-style-type: none"> All recovery activities incorporate Disaster Risk Reduction (DRR) approach. Branches and National staff have knowledge in FS and develop skill to strengthen livelihoods. Enhanced preparedness for food insecurity through increased awareness and analysis of hazard risks. 	<ul style="list-style-type: none"> Mobilize and recycle 60 volunteers / supervisors (with training on communication, distribution, and screening techniques). Train the National Society's staff and volunteers (at community, branch and national levels) in food security assessment, planning and project implementation. Support RCSN logistics capacity in food security and other operations. Set up community awareness campaign in DP and DRR including contingency plans at the branch and community level. Provide technical training for volunteers to help affected families to reconstruct livelihoods including drip irrigation system, and vegetable gardens. Set up Branch disaster response teams in four targeted regions and improve their skills in DRR Rehabilitate radio stations in five targeted regions and procure IT equipment

Logistics

Professional logistical support to the operation is being provided in accordance with IFRC standards: the RCSN is utilizing the existing warehousing facilities and vehicles in the regional and local branches for storage and efficient dispatch of ready to use therapeutic food to the IHC. Similar arrangements are in place for storage and distribution of food items received from WFP.

The procurement of animal feed and agricultural tools as well as the ongoing procurement of improved seeds and herbaceous plant seeds is in line with IFRC procurement standards and procedures.

IFRC provided access to five 4x4 vehicles (two coming from stocks in-country and two from Dakar and Chad). One truck from the country stock is also available for the operation.

To ensure the availability of adequate field operation facilities, the RCSN local committee offices in Ouallam, Abala and Tilla will be rehabilitated.

The Country Representation and RCSN are still negotiating with the “*Agence Nationale de Régulation de Télécommunication*” to get the necessary radio VHF and HF frequency free of charge (according to the status agreement) to support the operation. A rehabilitation of the radio stations in Tillabéry and Tahpua is planned.

Security

The security situation in Niger remains volatile, particularly in the border regions. Rebel groups have conducted sporadic attacks on security forces and mining operations, mainly in the northern Agadez region, in central Tahoua and Maradi regions, and in Zinder in the southeast. There have also been extremist threats towards international personnel, who are at risk of kidnapping by militant groups, as seen with the abduction of the two French Nationals last year. The government has recently expressed a concern regarding the passage of weapons across its borders. Demonstrations over socio-economic grievances are also common in the main cities and they occasionally descend into violence.

Due to the security incidents mentioned above (kidnappings of expatriates, potential for spill over from neighbouring countries, etc.), the IFRC has planned an operation that is focusing on building on the National Society capacity and regional support, and will mobilize expatriate deployments only as required. The Security Unit and Zonal Security manager will continue to monitor the situation and provide advice as necessary. As insecurity is present in some parts of the country, UN organisations and some NGO are using military escort for their field trips to Tillabéry Region for instance. The IFRC operation is adapting to changing circumstances, and key information is obtained through ongoing participation of the Red Cross in task force meetings, led by the Prime Minister Office and OCHA.

Communications – Advocacy, Public Information and Coordination

In the scope of the DREF supported response to the food insecurity, the RCSN launched its activities in favour of vulnerable populations of Tillabéry early January through National television and radio stations in French, Hausa and Zarma, to ensure good visibility of the Red Cross. Cash-for-work activities were also covered by the National media in Tahoua in the presence of all stakeholders and authorities.

From 6 to 7 February, a film was produced in the Tillabéry region (Sansané Haoussa) on how the women who had received RCSN support were benefiting from it. The movie shows them at work, also giving them space to express themselves on their situation. The film is a first step to a documentary that RCSN communication is working on to be presented at the end of implementation of activities in relation to the food insecurity Red Cross response.

Early March, the National Society and IFRC Niger Representation hosted a Norwegian/Swedish Red Cross team with the mandate to assess the food situation in Niger and potential support to the IFRC appeal in favour of RCSN activities. The mission, which included visits to Tillabéry and Dosso regions, was reported in the Niger Red Cross “*Solidarité*” magazine to also portray all activities carried out in the scope of the food insecurity response. Following their field mission in Niger, Norwegian and Swedish Red Cross Societies posted short movies on their respective websites; also, a few television spots on the food security situation in Niger were broadcasted on the National televisions of Norway and Sweden.

Capacity of the National Society

RCSN is active in all eight administrative regions of the country and the major cities of the nation. Currently, it has approximately 37 staff at the national headquarters and regional branches, and approximately 10,000 volunteers and supporters, some 1,000 of them active volunteers. Apart from government, RCSN is the only organization, which has a wide network, presence and mandate, ranging from the capital, Niamey, to the grassroots level. The RCSN has extensive experience working on food security and other disaster response, both at headquarters and branch levels.

In addition to the support from the IFRC, the RCSN is working in partnership with a number of National Societies present in Niger: the Irish Red Cross, Spanish Red Cross, French Red Cross, Qatari Red Crescent and Iranian Red Crescent. The NRCS also works closely with the ICRC.

Capacity of the IFRC

The IFRC maintains a country office in Niger, hosted at the National Society headquarters. The office is headed by a Country Representative and has five local staff supporting the ongoing operations. The coordination capacity of the Niger country office was strengthened by the deployment of an RDRT member with food security experience on a period of 4 months. The Niger IFRC Representation benefits from Africa Zone Office technical and operational support in communication, resource mobilization, planning, monitoring and evaluation, reporting, and finance.

The Sahel Regional Food Security Coordinator visited the country to launch the activities early in the year; the Niger representation has also received support from the Regional Finance Officer in May who also worked with the RCSN finance staff to build their capacity. A Food Security Operation Manager, fully funded by the Norwegian Red Cross, was appointed in May and is supporting the NS scale up its action. In addition, a Relief Delegate will be recruited to support in the additional duties of food and non-food item distributions.

Budget summary

See attached budget (Annex 1) for details.

Jagan Chapagain
Acting Under Secretary General
Programme Services Division

Bekele Geleta
Secretary General

Contact information

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Click here

1. Emergency Appeal budget [below](#)
 2. Click [here](#) to return to the title page
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How we work

All IFRC assistance seeks to adhere to the Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGOs) in Disaster Relief and the Humanitarian Charter and Minimum Standards in Humanitarian 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.



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

28-08-12

NIGER: Complex Emergency (formerly Food Insecurity MDRNE010)

Budget Group	Multilateral Response	Inter-Agency Shelter Coord.	Bilateral Response	Appeal Budget CHF
Shelter - Relief	2,667			2,667
Shelter - Transitional				0
Construction - Housing				0
Construction - Facilities	140,196			140,196
Construction - Materials				0
Clothing & Textiles	21,078			21,078
Food	293,137			293,137
Seeds & Plants	242,157			242,157
Water, Sanitation & Hygiene	100,490			100,490
Medical & First Aid	83,216			83,216
Teaching Materials	30,809			30,809
Utensils & Tools	82,765			82,765
Other Supplies & Services	288,868			288,868
Emergency Response Units				0
Cash Disbursements	468,627			468,627
Total RELIEF ITEMS, CONSTRUCTION AND SUPPLIES	1,754,010	0	0	1,754,010
Land & Buildings				0
Vehicles	176,471			176,471
Computer & Telecom Equipment	20,000			20,000
Office/Household Furniture & Equipment				0
Medical Equipment				0
Other Machinery & Equipment	4,412			4,412
Total LAND, VEHICLES AND EQUIPMENT	200,882	0	0	200,882
Storage, Warehousing	3,922			3,922
Distribution & Monitoring	12,745			12,745
Transport & Vehicle Costs	163,373			163,373
Logistics Services				0
Total LOGISTICS, TRANSPORT AND STORAGE	180,039	0	0	180,039
International Staff	333,529			333,529
National Staff	84,392			84,392
National Society Staff	169,520			169,520
Volunteers	164,578			164,578
Total PERSONNEL	752,020	0	0	752,020
Consultants	7,843			7,843
Professional Fees	23,137			23,137
Total CONSULTANTS & PROFESSIONAL FEES	30,980	0	0	30,980
Workshops & Training	18,157			18,157
Total WORKSHOP & TRAINING	18,157	0	0	18,157
Travel	35,098			35,098
Information & Public Relations	43,431			43,431
Office Costs	79,588			79,588
Communications	65,147			65,147
Financial Charges	9,706			9,706
Other General Expenses				0
Shared Office and Services Costs				0
Total GENERAL EXPENDITURES	232,971	0	0	232,971
Partner National Societies				0
Other Partners (NGOs, UN, other)				0
Total TRANSFER TO PARTNERS	0	0	0	0
Programme and Services Support Recovery	205,989	0		205,989
Total INDIRECT COSTS	205,989	0	0	205,989
Pledge Earmarking & Reporting Fees				0
Total PLEDGE SPECIFIC COSTS	0	0	0	0
TOTAL BUDGET	3,375,048	0	0	3,375,048
Available Resources				
Multilateral Contributions	1,437,405			1,437,405
Bilateral Contributions				0
TOTAL AVAILABLE RESOURCES	1,437,405	0	0	1,437,405
NET EMERGENCY APPEAL NEEDS	1,937,643	0	0	1,937,643