

Niger

Overview of Humanitartian Needs and Planned Response, 2022



3.7 M

People in need



2.3 M

People targeted



552.6 M

Requirements (US\$)



US\$ 55.5 M

Funding received (HRP)

HEALTH



In Need of Health Assistance



937.9 K

Targeted for Health Assistance



US\$ 27.2 M

Requirements



US\$ 3.527 M

Carried over (2021)



US\$ 703.9 K Polio funding (2021)



US\$ 6.343 M

New funding (2022)

WHO Graded Events

Global: COVID-19 Grade 3

Poliomyelitis (cVDPV2), Africa, 2019 Grade 2

Lake Chad Basin Yellow Fever, 2021 Grade 2

Sahel Region Humanitarian Crisis, 2022 Grade 2

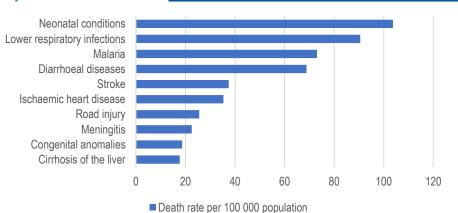
OVERVIEW

The crisis in Niger is protracted. It began in 2014 with the arrival of refugees from neighboring Burkina Faso, Mali and Nigeria, following non-state armed group attacks in the region. Niger's political, security and humanitarian context continues to be characterized by shocks related to climate change, population growth and armed conflict, resulting to persistent poverty and recurrent humanitarian crises. Niger experiences recurrent epidemics, including COVID-19, measles, meningitis, cholera, malaria. In 2022, the humanitarian community estimates that around 3.7 million people will need humanitarian assistance. The number of people on the move in 2022 is estimated at around 280,000 IDPs and 249,000 refugees. Vulnerable groups include 65,831 pregnant and breastfeeding women, 265,387 women of childbearing age, 42,918 children under 5 years old and 17,338 elderly people.

KEY HEALTH RISKS

COVID-19: A cumulative total of **8,924** cases; **309** deaths, from 19 Mar 2020- 7 April 2022 (https://covid19.who.int/region/afro/country/ne). Vaccination: total doses administered 2,689,995. % of targeted population (>18) fully vaccinated: 14.**48%** (25 April 2022).

Top ten causes of death (WHO Global Health Observatory, 2000-2019)



HUMANITARIAN ACCESS

The security situation remains precarious and volatile around the border areas of Burkina Faso, Mali and Nigeria, mainly in the regions Agadez, Diffa, and large parts of Tahoua and Tillabéry, where UNDSS classifies the risk as substantial (Level 4). The recurrent establishment of roadblocks, and the destruction of road infrastructure, as in the case of the bridge connecting Dogofry commune and Farabougou village, block the delivery of humanitarian aid. Some NGOs are unable to run GBV and child protection-related activities due to conditions imposed by armed groups in the areas under their influence.

WHAT IF THE WORLD FAILS TO RESPOND?

Over 1.2 million vulnerable people will not have access to the much-needed health care, including 418,550 children, 17,338 elderly people and 48,584 persons with disabilities, according to the provisional figures for 2022. The country will experience an increase in overall and specific morbidity and mortality, in particular infant mortality, maternal mortality as well as the mortality of people with specific needs including unaccompanied children, the elderly and people with disabilities who are often marginalized. These populations have food deficits that are reflected in high rates of acute malnutrition, or are marginally able to meet their needs, thereby depleting their livelihood assets or employing harmful coping strategies. Lack of access to basic social services, including health care could further fuel violence.