



European Union
Humanitarian Aid



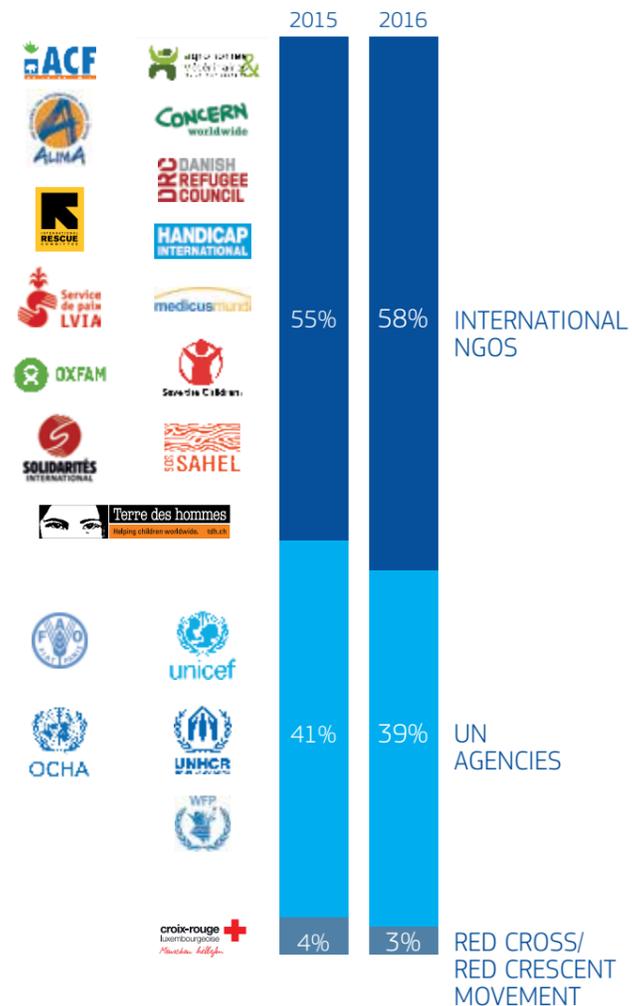
PHASE PROVIDING HUMANITARIAN ASSISTANCE TO SAHEL EMERGENCIES

THE DG ECHO - DFID SHARED PROGRAMME

WHO IS IMPLEMENTING PHASE

Worldwide, DG ECHO channels its funds through organisations that have the requisite management and operational capacity and respect the humanitarian principles of impartiality, neutrality, independence and humanity. PHASE humanitarian projects are implemented by organisations that have signed a partnership agreement with DG ECHO, creating a stable and long-term cooperation mechanism.

The following partners are supported in the Sahel



European Union
Humanitarian Aid

DG ECHO



UKaid
from the British people

DFID

CONTACTS

Tel. + 32 22954400
E-mail: echo-info@ec.europa.eu

Tel. +44 2070230000
E-mail: enquiry@dfid.gov.uk

HEADQUARTERS AND FIELD PRESENCE

1 headquarter in Brussels
2 regional offices
(Dakar and Yaoundé)
5 country offices
(Mali, Niger, Burkina Faso, Chad, Cameroon)
1 antenna
(Mauritania)

1 headquarter in London
2 humanitarian advisers
(Dakar and Yaoundé)



FOR FURTHER INFORMATION

More information can be found on DG ECHO website, including West and Central Africa HIP and technical annexes as well as AGIR.
http://ec.europa.eu/echo/index_en

More information can be found on DFID website.
<https://www.gov.uk/government/organisations/department-for-international-development>



WHY

In the Sahel, **food and nutrition crises** and their aftershocks affect millions of vulnerable people every year. People's access to basic social services is restricted and their livelihoods have been eroded, limiting their ability to be resilient to shocks. The situation results in a **prolonged state of emergency**, with alarming numbers of people undernourished or food insecure.

Violence and conflict in Mali and across the Lake Chad Basin (Nigeria, Niger, Cameroon, Chad) have led to the displacement of millions of people, within their countries or across borders. The region is also prone to **epidemics** and to **natural hazards** such as floods and droughts, which are likely to increase due to climate change. This further exacerbates existing vulnerabilities and mechanisms to cope remain very limited.

WHAT

DG ECHO and DFID have been responding to humanitarian needs in the Sahel for over a decade. In view of our **complementary approaches**, we decided in 2015 to enter into a strategic partnership.

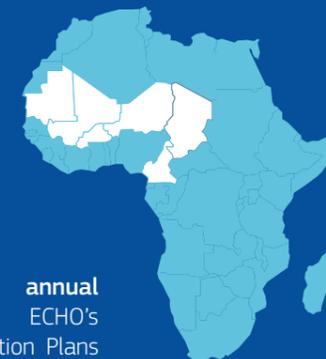
Our joint programme PHASE aims to:

- provide **assistance** to meet the most urgent humanitarian needs while the resilience of the population is built;
- increase the **coordination and complementarities** between two key donors to maximise the impact of our action; and
- jointly relay key **humanitarian messages**.

WHEN, WHERE AND HOW

PHASE is a **three-year programme**, from 2015 to 2017 and it focuses on Mauritania, Mali, Burkina Faso, Niger, Chad and Cameroon. If need be, Senegal and Gambia could be considered.

DFID channels an **annual contribution** into DG ECHO's Humanitarian Implementation Plans (HIP) for the West and Central Africa regions. **Additional funds** can be provided, if the evolving needs require so. The contribution is managed by DG ECHO and implemented through partner organisations.



WHO

The UK Department for International Development - **DFID** leads the UK's work to end extreme poverty, deliver the Global Goals, and tackle global challenges in line with the government's UK Aid Strategy.

The European Commission's Directorate-General for European Civil Protection and Humanitarian Aid Operations - **DG ECHO** manages an aid budget of around €1 billion a year (less than 1% of the total EU budget), bringing assistance to over 120 million people every year.

INCREASING NEEDS IN THE SAHEL

Senegal, Gambia, Mauritania, Mali, Burkina Faso, Niger, Cameroun, Chad and Nigeria

+36%

CHILDREN UNDER FIVE SUFFERING FROM SEVERE ACUTE UNDER NUTRITION

1 900 000 children in 2016
1 400 000 children in 2015

5 900 000 of children under five suffering from global acute under nutrition in 2016

+8%

PEOPLE IN NEED OF EMERGENCY FOOD ASSISTANCE

8 100 000 people in 2016
7 500 000 people in 2015

+80%

ESTIMATED DISPLACED PEOPLE REFUGEES, INTERNALLY DISPLACED POPULATION (IDPs) AND RETURNEES

4 500 000 people in 2016
2 500 000 people in 2015

Sources: CILSS/WFP/OCHA/FAO/Cadre Harmonisé/FEWSNET

PHASE PRIORITIES

1. WE AIM TO CONTRIBUTE TO THE REDUCTION OF MORBIDITY AND MORTALITY RELATED TO ACUTE UNDER-NUTRITION: THE SAHEL PLAN

We aim to **respond to emergency nutrition and food insecurity needs** while supporting advocacy work with national governments and development actors in order to ultimately elicit structural responses. The objectives of the Global Alliance for the Resilience Initiative (AGIR) are the overarching goal of our joint strategy.

The Global Alliance for Resilience Initiative - AGIR aims to achieve 'Zero Hunger' in the Sahel region by 2032 by focusing on four strategic pillars:

- 1) Restore, strengthen and secure livelihoods and improve social protection for the most vulnerable communities and households.
- 2) Strengthen health and nutrition of vulnerable households.
- 3) Sustainably strengthen agricultural and food productivity, incomes of vulnerable households and improve their access to food.
- 4) Strengthen governance for food and nutritional security including gender and population aspects.



1.1. We support treatment of severe acute under nutrition at scale and its integration into the health system

Children under five are actively screened for acute under-nutrition and those suffering from the severe form are treated according to national protocols. The strategy focuses on the **coverage and quality of healthcare** and the integration of severe acute under nutrition detection and treatment into the paediatric health package of the existing system, from the community up to the national policy level.

Activities funded

- > active screening
- > nutrition products and essential drugs
- > equipping health centres
- > human resources
- > training and supervision
- > capacity building
- > WASH
- > nutrition surveys
- > upgrading of information systems and coordination

1.2. We contribute to prevent acute under-nutrition and to strengthen the resilience of populations at risk

Prevention activities focus primarily on pregnant and lactating women and children in the '1 000 day' window from the conception to 24 months of age. **Specific nutrition preventive measures** are complemented by action in the fields of health, Water Sanitation and Hygiene (WASH) and food assistance during the lean season to ensure that people at risk are better protected.

Activities funded

- > pre/postnatal care
- > primary healthcare
- > seasonal safety nets
- > supplementary feeding
- > vaccinations
- > infants and young children feeding
- > community volunteers
- > screening at community level
- > WASH in nutrition kits

2. WE AIM TO PROVIDE THE MOST APPROPRIATE ASSISTANCE TO PEOPLE AFFECTED BY CONFLICT AND VIOLENCE

Communities affected by conflict and violence, the host populations, the internally displaced and the refugees are protected and given equal, safe access to basic services while their resilience is strengthened. Respect for humanitarian principles, the 'do no harm' principle and a gender- and age- sensitive approach are core features of the projects. Humanitarian access is protected.

Activities funded

- > food assistance
- > livelihoods
- > WASH
- > shelter
- > nutrition
- > healthcare
- > protection
- > humanitarian logistics
- > rapid assessments
- > coordination



Across the different sectors of intervention, the projects are tailored taking into account gender, age and specific needs of the people. Moreover, innovations, operational research and capitalisation of information are promoted.

3. WE AIM TO PREPARE FOR AND RESPOND TO EPIDEMICS AND DISASTERS AND BUILD RESILIENCE

When a disaster or an epidemic strikes and local/national capacity is overwhelmed, we provide adequate humanitarian assistance to the affected population. In addition, **early warning systems and national response mechanisms are reinforced**. Given the structural nature of crises in the Sahel, we promote the integration of resilience, nutrition and food security affecting the poorest into development priorities, so as to strengthen the link between relief, rehabilitation and development.

Activities funded

- > emergency response and preparedness
- > data management
- > surveillance
- > contingency plans
- > capacity building
- > study and operational research
- > food assistance
- > advocacy

PEOPLE WHO BENEFITTED FROM PHASE IN 2015 BY CRISIS

475 000

CHILDREN UNDER FIVE SUFFERING FROM SEVERE ACUTE UNDERNUTRITION TREATED

Partners work with health ministries to promote sustainable strengthening of health systems so that they can gradually integrate the treatment of acute under nutrition into their routine basic services and less external support is needed.

336 000

PEOPLE SUFFERING FROM SEVERE FOOD INSECURITY SUPPORTED DURING THE LEAN SEASON

In most of the countries, humanitarian food security responses are now included in the national response plans.

720 000

PEOPLE AFFECTED BY CONFLICTS SUPPORTED WITH BASIC SERVICES

