SAHEL
Overview of humanitarian needs and requirements
DECEMBER 2016
SAHEL: A REGION STRUGGLING WITH CRISES

$2.66 BILLION
TOTAL REQUIREMENT

8 COUNTRIES

24 MILLION
PEOPLE IN NEED

15 MILLION
PEOPLE TARGETED

74.5 MILLION
REQUIREMENT

15.8 MILLION
REQUIREMENT

293.1 MILLION
REQUIREMENT

588.8 MILLION
REQUIREMENT

271.3 MILLION
REQUIREMENT

309.6 MILLION
REQUIREMENT

24 COUNTRIES
224 MILLION
PEOPLE IN NEED

150 million
people live in
the Sahel region

30 million
people face food insecurity

12 million
people expected to need
food assistance

4.7 million
children under five are
acutely malnourished

4.9 million
refugees, internally
displaced and returnees

(*) In this document, the Sahel comprises Burkina Faso, Chad, Mali, Mauritania, Niger, Cameroon, Adamawa, Borno, and Yobe States in Nigeria, and Senegal.
(**) All requirement figures in this document as of 01 December, recorded on the real-time Online Project System (OPS) inside the country humanitarian response plans (HRPs) and in the Humanitarian Work Plans.
Immense challenges face 150 million people across the Sahel. These include violent extremism, climate change and abject poverty, and a fourth – the demographic explosion that will see the region’s population double in the next twenty years – exacerbates the situation still further. Concerted action in terms of peace and security, trade, development, human rights and humanitarian action are required to help the region’s communities and their governments avert greater insecurity, poverty and migration, and instead reach a more stable and prosperous future. This paper focusses on one of these key aspects, humanitarian action.

Across the Sahel more than 30 million people struggle with food insecurity; one in five children under the age of five suffers from acute malnutrition; 4.9 million people have fled from their homes.

Thanks to donor support and engagement the assistance provided by aid agencies has saved lives and helped reduce need within the most vulnerable communities. Yet challenges still lie ahead.

Between 2014 and 2016, humanitarian action in the Sahel was guided by a regional Humanitarian Response Plan which aimed to address acute need and its drivers. For 2017 the regional approach has been divided along two lines, with an emphasis on shifting from delivering aid to ending need wherever possible.

In countries that are not affected by active conflict, the absence of violence coincided with two relatively good rainy seasons. This has allowed communities to recover from previous shocks and become more resilient. Burkina Faso, Mauritania and Senegal have therefore aligned the 2017 humanitarian response with resilience and development frameworks. In The Gambia, humanitarian action has been fully integrated into the UN’s development assistance framework.

On the other hand, ongoing instability and violence in Cameroon, Chad, Mali, Niger and Nigeria exacerbate existing vulnerabilities and continue to displace people. In these countries, Humanitarian Response Plans (HRPs) will continue to be the framework for humanitarian action.

In Mali, where a fragile political agreement is in place, the humanitarian situation is stable but remains extremely preoccupying. Some 3.7 million people in Mali, and 135,000 who have sought refuge in Burkina Faso, Mauritania and Niger, still need humanitarian assistance.

In the Lake Chad Basin Boko Haram attacks continue and the scale of suffering is extremely high. Around 11 million people will require emergency relief in 2017. Seven million people – one in three families - and almost half a million children are acutely malnourished and require food.

For 2017 the humanitarian community will require US$ 2.66 billion to help 15 million people, across 8 countries. This paper outlines the situation, need and financial requirements and I look forward to working with the donor community to ensure that aid agencies can provide the best available assistance to the people who need it most, on time.

Toby Lanzer
Regional Humanitarian Coordinator for the Sahel
In the Sahel, extreme poverty, climate change, armed conflict and insecurity continue to threaten the lives of millions already living on the brink.

These interdependent drivers are behind the staggering levels of structural, chronic and acute vulnerability present in the region. Where the chronic seasonal cycle is broken, progress and success can be seen. Where conflict hits, hard-won gains are quickly lost and new challenges appear.

**EXTREME POVERTY**

Poverty affects one in every two people, making the Sahel region one of the poorest in the world. All eight countries covered in this document are below the Sub-Sahara African poverty average. Four of the countries count among the bottom ten of the Human Development Index.

The lack of economic opportunities, particularly for youth, combined with weak basic service provision and limited social safety nets compound the vulnerability of communities to persistent food insecurity, malnutrition and disease.

**CLIMATE CHANGE HITS THE MOST VULNERABLE**

The region is one of the world’s climate change hotspots. Increasingly unpredictable weather patterns, more frequent droughts and floods and land degradation threaten the livelihoods of a population in which the majority relies on agriculture for survival.

Although their region has contributed the least to global carbon emissions, it is paying a steep price for the consequences of human-induced climate change. Experts identify Chad, Niger and Nigeria amongst countries at “extreme climate risk”, and all other Sahel countries at “high risk”. Over the past two decades, the start of the rainy season has become increasingly erratic and annual precipitation amounts variable, with longer drought periods. Extreme weather events such as floods are more frequent and severe. Overall average temperatures have risen. With climate shocks coming at a higher rate, vulnerable households are less able to cope with crises and struggle to recover in time before they are hit again.

If not addressed, climate change will continue to threaten the food security, health and nutritional status of millions. According to experts, if the trends do not change, Africa will only be able to meet 13 per cent of its food needs by 2050.

**INSTABILITY AND RADICALISATION**

Increasing violence, conflict and insecurity over the past years have devastated livelihoods and driven millions of people from their homes. Turmoil in Libya, profound instability in northern Mali, and the escalation of violence by Boko Haram have had a devastating impact. Across the Sahel, almost 5 million internally displaced people, refugees and returnees are affected by displacement, exacerbating an already fragile

A more unpredictable weather: Projections show that while average rainfall will remain fairly constant, current climate variability will be exacerbated, with alternating episodes of extreme droughts and rains.

© “A global perspective on African climate” in Climatic Change
humanitarian situation. Around the Lake Chad Basin in particular, needs have dramatically spiked.

The Sahel’s vast thoroughfare across the continent is increasingly exploited by criminal and trafficking networks. Ancestral trade and migration routes are now often being used for smuggling drugs, migrants or illicit products filling the space left by conflict, weak governance and lack of cross-border cooperation.

With 60 per cent of its population under 25 years, lack of education, unemployment, poverty and exclusion make fertile ground for disenfranchisement, grievance and radicalization. Many risk their lives crossing the desert and sea to Europe. Frustration due to lack of life opportunities and the perception of neglect can draw youths into extremist groups. In Nigeria, more than ten million children are out of school, 70 per cent of whom in the poorest, violence-hit northern regions.

In many instances, radical groups fill an existing vacuum, proposing alternatives to the classic governance and security model, including provision of essential services. Sometimes they succeed in doing so. Faced with serious threats, governments risk channelling more resources to address security challenges at the expense of social development. Past gains and future development prospects are at stake.

**RUNAWAY POPULATION GROWTH**

The population of the Sahel grows at a rate of an average 3 per cent every year, doubling within every three decades. Countries in the region are recording the highest birth rates in the world. Niger has a birth rate of 7 children per woman, reaching over 8 in the most vulnerable Lake Chad Basin area.

Experts fear that available food resources will not be sufficient to sustain a growing population. Projections estimate that twice more cereals will need to be available to sustain the needs of the population by 2050. Water for the region’s agriculture - which is 98 per cent rainfed - is getting scarcer. Water availability per inhabitant has dropped by over 40 per cent in the past 20 years due to population growth and decreasing resources.

Governments in the region are conscious of the challenge and looking at demographic dividends and ways to make use of a young workforce. However, until policies can bear fruit, with around three quarters of the population being under 35 years old and a dependency rate of 87 per cent, youth unemployment and social tensions are expected to continue rising, encouraging many to be looking for alternatives.

**MIGRATION HUB**

The region exhibits dynamic migratory patterns and has had a long history of migration flows. The Sahel also is both the departure point and a key corridor for the migration routes to Europe. The proportion of West African migrants to Europe has continuously increased over the past years. Amongst migrants landing on the Mediterranean shores, Nigeria is now the top source country, with other Sahelian migrants mostly originating from the Gambia, Mali, Niger and Senegal.

On the so-called ‘backway’ to Europe, almost all other West and Central African migrants also pass through the Sahel to cross the desert into Libya and Algeria. Some 300,000 people have transited through Niger in 2016 alone. Migration has become an important economic driver. Smuggling networks are making hundreds of millions of dollars. Diaspora remittances have become a significant pillar of economies. The Central Mediterranean route used by these mixed migration flows also is the most dangerous. In 2016, over 4,000 people lost their lives on this route, more than half of them from West Africa.

**CONCERTED ACTION**

If the interconnected root causes of the crises in the Sahel are not addressed, challenges will grow in depth and in numbers. Alongside humanitarian action, reinforced and more joined-up action by political, development and security actors is required to stabilize the region, and create conditions for people to survive and prosper in their home countries.

**INTERNALLY DISPLACED PEOPLE (IDPs) AND RETURNEES**

**REFUGEES**

**MIGRANTS ARRIVING IN EUROPE FROM SAHEL COUNTRIES**
CHRONIC FOOD INSECURITY

Communities across the region remain highly vulnerable. In 2017, around 30 million people are expected to face food insecurity, and almost 12 million of them at crisis and emergency levels. Pockets of pasture deficits have been observed in certain areas of Chad, Mali, Mauritania and Niger, and risks of locusts have been identified in Mauritania and neighboring areas. The situation of people living in the conflict-affected regions of Mali and the Lake Chad Basin, is particularly critical.

HIGH MALNUTRITION RATES

Malnutrition remains at critical levels in many communities throughout the region. Some improvement has been observed in Burkina Faso, Niger and Mali. However, in certain zones of Chad and north-east Nigeria the global acute malnutrition prevalence rate is as high as 30 per cent, double the emergency threshold. In 2017, it is estimated that 6 million children under five and pregnant and nursing women will be in need of assistance across the region. Around 1.4 million children will require treatment for severe acute malnutrition, and 3.3 million are projected to suffer from moderate acute malnutrition.

POPULATION DISPLACEMENT

Violence across the region has led to large-scale displacement, affecting a total of 4.9 million people. Ongoing conflict in Mali and the Lake Chad Basin, as well as in neighbouring Sudan and the Central African Republic, has forced families to find refuge far from their homes. The prolonged displacement also increases the pressure on the limited resources of their hosts, many of whom count among the world’s poorest communities.

HIGH EXPOSURE TO EPIDEMICS

Lack of water and sanitation facilities and poor hygiene conditions, exacerbated by limited capacity of health
systems to ensure proper surveillance and treatment, make communities extremely vulnerable to disease and epidemics. Cholera outbreaks continue to be recurrent across the region, although less severe than in precedent years. Meningitis, measles, Lassa fever and Polio remain serious risks, with recent outbreaks in the region, and a Rift Valley Fever outbreak was confirmed in north-west Niger. The risk of a new pandemic, such as Ebola, continues to loom large and threaten health systems across the region.

ADDRESSING PERSISTING VULNERABILITY

The 2016 - 2017 farming season in the Sahel is expected to be better than average, following well distributed and abundant rainfall in 2016. Livestock production prospects are satisfactory due to availability of water points, abundant pasture and disease control. A relatively good season would help re-build livelihoods and reduce dependence on aid. But across the region, communities also remain highly exposed to risks. Climate-related disasters, natural hazards, insecurity and political instability continue to threaten the resources of millions. Any new shock will see communities quickly slide back into crisis.

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ADAPTING THE RESPONSE

Across the Sahel, hundreds of thousands of households live in unacceptably precarious conditions. Food insecurity, acute malnutrition, disease and disasters are a reality for millions. Conflict has uprooted hundreds of thousands of families from their homes and livelihoods and forced them into aid dependency. With some 24 million people in need of assistance in 2017, the region will require one of the world’s biggest humanitarian response operations.

At the same time, where chronic vulnerabilities drive needs, humanitarians are collaborating with development actors to “shift from delivering aid to ending needs”. Between 2014 and 2016, humanitarian action in the region was guided by the regional Sahel Humanitarian Response Plan. With the aim of reversing the pattern of growing humanitarian needs, the triennial strategy integrated life-saving assistance with improved risk and vulnerability analysis and the livelihood support to vulnerable populations to better cope with shocks and build resilience.

In 2017, in the more stable regions of the Sahel such as Burkina Faso, Mauritania and Senegal, where needs are driven by chronic vulnerability, humanitarian action has been fully aligned with resilience and development frameworks.
The lingering legacy of the 2012 political crisis continues to weigh heavily on civilians. Incidents of violence have persisted despite the 2015 peace deal between the Government and the main armed movement in the country’s north. Armed attacks, banditry and insecurity in the central and northern regions have caused new population displacements and stifled farming and transhumance.

Needs remain high with more than 3.5 million people being food insecure and some 852,000 people in need of nutrition assistance. More than 37,000 people remain internally displaced. The majority of those in need of assistance are in Mali’s northern region.

Due to insecurity, many civilians are exposed to rights violations and abuse. More than 790 cases of sexual and gender-based violence were reported in 2016 and many survivors do not receive assistance. Children are also at risk of injuries or death due to UXOs. The persistent insecurity and climatic shocks are increasingly worsening the adversity faced by many communities.

Humanitarian operations are hampered by attacks and looting of equipment by armed bandits, especially in the northern Gao, Timbuktu, Menaka, Taouadeni and Kidal regions.

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LAKE CHAD BASSIN

In the wake of years-long violence and insecurity related to Boko Haram, countless villages and homes have been deserted, swaths of farmland abandoned, annihilating lives and livelihoods across the Lake Chad Basin. Military operations by the armies of the four Lake Chad Basin countries have reduced raids and killings by the armed group, but suicide bombings and attacks persist. Ongoing attacks and insecurity are still limiting humanitarian access to several localities.

More than 2.4 million people have fled their homes. Food shortages are acute: 7 million people are in need of food assistance—one in three families—and more than 480,000 children are severely acutely malnourished. Many civilians, notably children and women, have suffered horrific abuse and remain exposed to violations in places of refuge. Over the past year, humanitarian organizations have strived to step-up assistance to the millions of people in need across the region. But as of December, only 41 per cent of the $739 million required in 2016 had been provided.

The scale of suffering remains huge and is expected to grow: around 11 million people will require assistance in 2017. Humanitarian partners have requested US$1.5 billion to provide aid to 8.2 million people. While the response strategy focuses us on providing emergency, life-saving assistance, humanitarian actors are also calling for a collaborative approach to help address the deeper causes of the Lake Chad Basin crisis that include abject poverty, the impact of climate change, rapid population growth and underinvestment in social services.

MALI

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REGIONAL DASHBOARD

**FOOD INSECURITY**

- **BURKINA FASO**: 1.1 million food insecure people, 153,262 targeted for assistance
- **CAMEROON**: 2.8 million food insecure people, 839,260 targeted for assistance
- **CHAD**: 4.3 million food insecure people, 2.3 million targeted for assistance
- **MALI**: 3.5 million food insecure people, 700,000 targeted for assistance
- **MAURITANIA**: 1.3 million food insecure people, 370,000 targeted for assistance

**MALNUTRITION**

- **BURKINA FASO**: 621,582 malnourished children, 358,073 targeted
- **CAMEROON**: 272,565 malnourished children, 154,671 targeted
- **CHAD**: 558,450 malnourished children, 401,551 targeted
- **MALI**: 622,368 malnourished children, 442,000 targeted
- **MAURITANIA**: 119,999 malnourished children, 78,477 targeted

**DISPLACEMENT**

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**POLIO**

- After more than two years without the detection of polio in Nigeria, three new infections were diagnosed in the north-eastern Borno state in August 2016, prompting the neighbouring Lake Chad Basin countries and the Central African Republic to declare a public health emergency. A large-scale vaccination campaign was launched to immunize millions of children and curb contagion in a region where people are fleeing across borders and to other localities within their country due to the ongoing Boko Haram-linked conflict. However, insecurity in some areas poses a challenge to the polio response operations.

**MENINGITIS**

- No case
- < 20 cases
- 21 - 60 cases
- > 60 cases

**CHOLERA**

- No case
- < 15 cases
- 16 - 30 cases
- > 30 cases

**SUDAN**

- 100,000
- 10,000
- 1,000

**LIBYA**

- 50k - 150k
- > 150k

**EGYPT**

- < 5k
- 5k - 25k
- 25k - 50k

**NIGERIA**

- Number of IDPs
  - < 5k
  - 5k - 25k
  - 25k - 50k
  - 50k - 150k
  - > 150k

**MALI**

- Number of refugees
  - 1,000
  - 10,000
  - 100,000

Sources: Draft HNO 2017
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* 2017 malnutrition figures for Nigeria are for the 3 states targeted by the HRP (Adamawa, Borno, Yobe), figures for 2016 for 4 states, and previous years for all northern states.
SAHEl COUNTRIES WITH HUMANITARIAN RESPONSE PLANS (HRPs)
Some 2.9 million people are in need of humanitarian assistance due to the effects of conflicts in neighbouring Central African Republic and Nigeria as well as high levels of food insecurity and malnutrition. The number of people displaced by violence has been on the rise since 2015, with more than 500,000 people currently uprooted from their homes in parts of Cameroon and from the two neighbouring countries. Insecurity and violence have increased the risks of abuse and rights violations. Around 2.8 million people are at crisis and emergency levels of food insecurity and malnutrition remains high, with some 273,000 under 5 children suffering moderate or severe acute malnutrition.

Among the more than 500,000 people forced from their homes by violence are some 259,000 Central African and 86,000 Nigerian refugees. Within Cameroon, 199,000 people have fled their homes for safety elsewhere in 2016, an increase of 114 per cent over the previous year. Around 450,000 people in the host populations are vulnerable and need assistance.

Food insecurity is affecting nearly 2.8 million people in Adamawa, East, North and Far North regions of the country. Around 80 per cent of them are in North and Far North regions. Some 290,000 of those facing acute food shortages are in need of urgent assistance. Insecurity and violence have catalysed food insecurity by forcing many families to flee their homes and curtailing daily life sustaining activities. Adamawa, North and Far North regions have the highest levels of global acute malnutrition. In some areas of the Far North region, severe acute malnutrition has reached emergency levels.

Rampant insecurity and the ongoing violence have left women, men, girls and boys at a greater risk of separation, forced recruitment, arbitrary detention, indoctrination and sexual and economic exploitation. Many civilians who managed to flee attacks recount horrific tales of brutality, and suffer deep trauma. In addition, some have been subjected to involuntary returns and faced violations of the right to asylum.

The majority of residents of the four affected regions have lost their means of survival. Trade, markets and other commercial activities have taken a major hit, especially in the Far North region where Boko Haram attacks are persistent. Access to basic services has been severely or severely constrained. Health centres, whose access and quality of services were already limited, are overwhelmed and 36,000 girls and boys are without education or forced to attend school outside their communities. The North and Far North regions are Cameroon’s poorest and their populations struggle with the effects of harsh climate and underdevelopment.

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To consult and contribute to the 2017 Cameroon Humanitarian Needs Overview & Response Plan, visit: www.humanitarianresponse.info/en/operations/cameroon
Chad struggles with recurrent humanitarian emergencies stemming from chronic poverty and underdevelopment, environmental degradation, climate change and poor access to basic services among others. As a result, 4.7 million people are in need of humanitarian assistance as they frequently suffer food insecurity, malnutrition and health emergencies. More than 1 million people are faced with severe food shortages that threaten to wipe out their livelihoods. Global acute malnutrition has surpassed the emergency threshold in six of the country’s 23 regions and severe acute malnutrition in 11 regions. The weak health system is unable to cope with recurrent epidemics. Conflicts and insecurity have uprooted some 580,000 people internally and from neighbouring countries.

Some 4.3 million people, one third of the population in Chad, are struck by food insecurity. More than 1 million among them face severe shortages, an increase of more than 110,000 people compared to last year. More than 438,000 children are expected to be suffering from acute malnutrition in 2017 - both moderate and severe. Better harvests in the 2016 - 2017 season are expected to improve household food security. However, many families in the country’s Sahel regions and in areas hosting the displaced will continue to face scarcity, particularly during the lean season.

Climatic factors, poor agricultural investment, market forces, difficult access to arable land and lack of technical support to farmers are some of the cause of food scarcity in Chad. Still, malnutrition remains endemic in the country. For instance, 56 per cent of the population has suffered stunting in childhood and 26.2 per cent of under 5 children are chronically malnourished.

Chad currently hosts around 389,000 people uprooted by conflicts and insecurity in neighbouring Central African Republic, Nigeria and Sudan. More than 100,000 are displaced within the country. While return to their areas of origin is unlikely in a foreseeable future, durable solutions fostering socio-economic reinsertion are necessary. Some 734,000 people in the communities hosting the displaced have been affected by the population influx, as pressure on livelihood, local resources and public infrastructure has risen.

Human suffering is also aggravated by the weak health system as well as poor hygiene practices and difficult access to clean water and sanitation services. Outbreaks of cholera and measles are frequent, while malaria is the leading cause of infant mortality and is prevalent in many of the country’s regions. Maternal mortality is among the world’s highest, with 860 deaths in 100,000 live births. Lack of sufficient health facilities and WASH infrastructure and poverty are obstacles to proper healthcare. Access to primary healthcare is impeded by structural weaknesses such as lack of personnel, equipment and coordination. Greater attention is needed to prepare for and control disease outbreaks in regions at risk of suffering epidemics.

Source: Cadre harmonisé analysis projected situation Jun-Aug 2017

To consult and contribute to the 2017 Chad Humanitarian Needs Overview & Response Plan, visit: [www.humanitarianresponse.info/en/operations/chad](http://www.humanitarianresponse.info/en/operations/chad)
Some 3.7 million people are in need of humanitarian assistance, including more than 3 million people who are food insecure. Around 18 per cent of those faced with serious food shortages live in the northern Gao, Kidal and Timbuktu regions where insecurity has debilitated agriculture and transhumance. Despite a promising season in 2016, market dysfunction, insufficient technical support and disruption of the supply of inputs are likely to deprive rural farmers of sufficient harvest. Global and severe acute malnutrition now stands at 11.5 per cent and 2.3 per cent respectively. Food insecurity, poor access to clean water and healthcare are exacerbating malnutrition. Around 681,000 children, pregnant or lactating women require assistance to prevent and treat malnutrition.

Humanitarian partners estimate that around 1.2 million people will need water, sanitation and hygiene services. Insufficient water supply is particularly critical in Kidal region where the state-run water company last operated in 2014 and the proliferation of illegal connections is depriving many of sufficient supply. The drying up of many wells in Timbuktu region has left several communities without adequate water for domestic use and for cattle.

Given the ongoing attacks and lingering insecurity, civilians face greater threats to violence, abuse and rights violations. Since the beginning of 2016, 791 cases of gender-based violence and 861 rape cases have been reported. More than half of the victims lack support services and 45 per cent of survivors need legal assistance. Children especially need particular assistance, as more than 60 per cent of victims of unexploded ordnance are children.

Annual flooding and overflow from River Niger affects thousands of people. In 2016, more than 18,000 people were affected and swaths of farms destroyed. Learning in flood-risk areas is also often disrupted as schools either damaged or used as refuge by those forced from their homes by floods. Humanitarian partners estimate that some 60,000 across the country face flooding risks.

To consult and contribute to the 2017 Mali Humanitarian Needs Overview & Response Plan, visit: www.humanitarianresponse.info/en/operations/mali
Food insecurity, malnutrition, epidemics, floods and population displacement are the main causes of humanitarian needs in Niger, where 1.9 million people require assistance in 2017. They include 340,000 people in the south-eastern Diffa region which is facing unprecedented security crisis and humanitarian emergency due to the Boko Haram-related conflict. The recurrent humanitarian emergencies are linked to extreme poverty, limited basic services and fast-growing population. Around 1.3 million people are food insecure and some 1.1 million children need nutrition assistance. High unemployment, economic slowdown since 2015 and deep poverty (48 per cent of the population lives in abject poverty) are driving up the number of Europe-bound migrants.

Even under favourable conditions, Niger is unable to attain sufficient agricultural production. A high fertility rate and an increase in life expectancy are exerting huge pressure on available resources. Food insecurity is particularly acute in Diffa, Maradi, Tahoua and Zinder regions due to drought, flooding or production constraints. Malnutrition rates are also high in these regions. Across the country, 1.4 million people – half of whom are women – require nutrition assistance. Among them 247,500 children are severely acutely malnourished.

Heavy flooding and long spells of drought associated with climate change devastate tens of thousands of people. Around 500,000 people were affected by widespread flooding in 2012. Humanitarian partners estimate that some 106,000 people could be affected by floods in 2017. Floods often increase the risk of cholera and malaria outbreaks. Niger’s weak health system also aggravates the risks of epidemics. Around a third of children younger than one year countrywide are not vaccinated against measles and 15 per cent are not vaccinated against diphtheria, polio and tetanus. Some 766,000 people are likely to need healthcare in 2017 due to outbreaks of cholera, measles, and meningitis.

The ongoing Boko Haram-linked conflict and insecurity continue to cause population displacements in Diffa, which currently hosts more than 300,000 internally displaced people, refugees and returnees. The humanitarian emergency in Diffa is projected to worsen in the coming months, with 340,000 people expected to face food insecurity, 12,000 children will be at risk of severe acute malnutrition and more than 100,000 will need protection.

The conflict has claimed several lives and traumatized survivors many among whom have suffered sexual and gender based violence and other rights violations. Lack of identification documents for most of the displaced people exposes them to the risk of statelessness and lack of legal assistance among other threats. Around 780 unaccompanied children require protection, psychosocial support and recreational activities.

To consult and contribute to the 2017 Niger Humanitarian Needs Overview & Response Plan, visit: www.humanitarianresponse.info/en/operations/niger
Humanitarian assistance is required by 8.5 million people in the north-eastern Adamawa, Borno and Yobe states. Food insecurity across the three states has nearly doubled since March 2016, with an estimated 5.1 million people facing significant and extreme food deficits resulting in high acute malnutrition. In the worst-affected and least accessible areas of Borno and Yobe, there are severe forms of food insecurity and acute malnutrition. Access to clean water remains limited and an already weak health system has been greatly impaired.

The conflict-affected states are reliant on agriculture. For the third consecutive year farmers were unable to cultivate due to insecurity and the threat of attacks, the danger of land mines, the proliferation of improvised explosive devices and lack of agricultural inputs.

The violence has displaced some 1.8 million people in the north-east, and forced more than 190,000 others to seek refuge in neighbouring countries. Around 1 million people have returned towards their areas of origin and try to rebuild their lives with little or no support.

Many are moving closer to home, but still remain displaced in larger towns. Given the persistent insecurity, many communities in Borno will host the displaced also in the coming year. Displaced families and host communities will continue to face tough living conditions, deprived of livelihood sources and dependent on humanitarian assistance.

Threats to civilian safety and rights violations have heightened. Women and children and other vulnerable populations have suffered grave violations and human abuses, including death, injuries, sexual and gender based violence, arbitrary detention, disappearances, forced displacement, attacks on civilian sites and forced recruitment.

Reaching people in need remains a challenge due to high levels of insecurity. Over 80 per cent of Borno is considered high or very high risk for international humanitarian actors. In accessible areas, humanitarian partners in coordination with the Government and the military are working to increase assistance.

The long-running Boko Haram-linked conflict has caused deep devastation among communities of Nigeria’s north-east, which alongside other northern states have a long history of neglect and underdevelopment. Violent attacks by the armed group, military counter-offensives and pervasive insecurity have uprooted almost 2 million people and decimated their means of survival. Women and children have especially suffered grave violations; girls and women were sexually exploited, raped and subjected to violence. Boys and girls were forcibly recruited by Boko Haram and used as suicide bombers or forced to kill. The prolonged conflict has also sparked acute food insecurity and malnutrition.

5.1 million people need food assistance
450,000 children are severely malnourished
1.8 million people are internally displaced
80% of Borno State is high or very high risk zone for humanitarians

To consult and contribute to the 2017 Nigeria Humanitarian Needs Overview & Response Plan, visit: www.humanitarianresponse.info/en/operations/nigeria
SAHEL COUNTRIES WITH HUMANITARIAN WORK PLANS
Humanitarian needs in Burkina Faso are chronic and seasonal by nature. They are mainly a result of low agricultural production, limited access to basic services, inadequate provision of water and sanitation services as well as inappropriate feeding and hygiene practices. Many communities also suffer the depredations of droughts, floods, epidemics and inter-community conflicts. The country also hosts 32,227 Malian refugees who fled the 2012 political crisis. They are heavily dependent on humanitarian assistance for protection, education, health, water and sanitation. The Government and its humanitarian partners in 2017, will mainly focus on addressing food insecurity, malnutrition, population displacement and strengthening emergency preparedness.

Around 213,000 people will face serious food insecurity during the lean season in 2017. In the rural areas, agriculture is the principal source of income and sustains around 80 per cent of the population. In 8 of the country's 13 regions, severe acute malnutrition has exceeded the two per cent emergency threshold. Some 620,000 children are projected to suffer from malnutrition, among them 188,000 from its severe form. Humanitarian organizations plan to provide food and cash assistance to some 153,000 vulnerable households who are likely to adopt strategies detrimental to food security during the lean season. They will also provide therapeutic feeds and medical supplies to assist around 478,000 children, pregnant or lactating women threatened by malnutrition.

With insecurity prevailing in much of northern Mali, the 32,000 Malians who sought refuge mainly in Burkina Faso’s northern Sahel region are unlikely to return home and will continue to depend on humanitarian assistance. The local community will also require assistance to boost their economic stability through, for instance, cash disbursement to the most vulnerable families. Supporting local agricultural activities and trade is aimed at building resilience and promoting peaceful coexistence between the refugees and the host population.

Humanitarian assistance will focus on addressing emergency needs and assisting the most vulnerable families as the government and its development partners implement measures to break the cycle of chronic crises. In 2017, humanitarian partners project that more than 430,000 people could be affected by drought, floods and epidemics, or inter-community violence.

To address the structural causes of humanitarian needs and build resilience of the most vulnerable populations, the government and its humanitarian and development partners have adopted a new strategy integrating humanitarian and development planning as a first step towards longer-term response.

To consult and contribute to the 2017 Burkina Faso Humanitarian Needs Overview & Response Plan, visit: www.humanitarianresponse.info/en/operations/burkina-faso
Good rainfall in 2016 improved harvests and pasture availability. However, harvests are expected to last three to four months, and will be depleted well before the end of the lean season in 2017. Malnutrition rates remain high. In seven of the country’s 13 regions, global acute and severe acute malnutrition rates have surpassed the emergency threshold. Around 49,000 under 5 children die each year of whom 54 per cent due to malnutrition and related diseases. It is estimated that around 493,000 people will need food assistance in 2017 and some 165,000 children and pregnant or lactating women will require nutrition assistance.

Food insecurity and malnutrition and other socio-economic factors heighten the risk of exposure to human rights abuses, sexual and gender based violence, abuse and exploitation of women and children in particular. Humanitarian organizations plan to provide protection assistance to around 80,000 people, including 30,000 children in 2017.

Response to health emergency is hamstrung by limited health personnel and facilities. Vaccination rates remain low despite Government’s efforts and some improvements. Access to improved water sources is difficult, especially in rural areas where nearly half the population lacks access, and poor hygiene practices that accentuate vulnerability to diseases are rampant.

Mauritania hosts some 46,000 Malian refugees who also brought along their livestock. This has heightened pressure on the meagre local resources. It is unlikely that the refugees will return home in the coming months owing to ongoing insecurity in northern Mali. In addition, 8,000 Mauritanians have been deregistered from the south-eastern Mbera refugee camp and returned to their villages, increasing pressure on resources.

The chronic nature of most of the humanitarian needs requires an integrated approach linking humanitarian and development measures. Humanitarian operations will from 2017 stem from an integrated plan that includes development initiatives to facilitate the shift from delivering aid to ending needs.

Adverse climate, poverty, food insecurity and malnutrition, as well as insufficient basic service provision among other factors have left around 539,000 people requiring humanitarian assistance. Among those in need of assistance are 46,000 Malian refugees settled in the south-east of the country. Their return is unlikely in the coming year given the persistent insecurity back home. Rainfall deficits in certain areas and seasonal flooding in others often devastate farming and livestock production upon which many communities depend for sustenance. This is compounded by lack of alternative means of income to compensate for losses. Poor access to healthcare, potable water and hygiene services worsens vulnerability to malnutrition and diseases.

Senegal’s humanitarian needs are mainly driven by seasonal climatic shocks and chronic vulnerabilities, especially in the eastern and northern regions where levels of food insecurity and malnutrition are often high. Epidemics, droughts and floods also cause human suffering. Around 881,000 people will require humanitarian assistance in 2017. More than 880,000 people are projected to face “emergency” levels of food insecurity and over 90,000 under 5 children are likely to suffer severe acute malnutrition. Tens of thousands of people are at risk of floods and the effects of drought in the coming months, while more than 21,000 people are threatened by epidemics.

Food shortages and nutrition crises in the country’s Sahel region are increasingly recurrent due to the effects of climate change. Rainfall deficits and worsening food security have forced communities to resort to survival measures such as selling assets, incurring debts or cutting down the size of meals. These strategies further erode their means to withstand cyclic food deficits and malnutrition that are aggravated by scarcity and difficult access to potable water, weaknesses in the health system and poverty.

Humanitarian partners plan to assist 250,000 food insecure people through the distribution of food and cash disbursements, boosting livelihood activities as well as supporting the national food security monitoring and analysis system among other measures. Some 345,000 malnourished children will receive assistance. Other activities include supporting 25 health districts and undertaking preventive measures to reduce the rate of malnutrition.

Support to the national monitoring and early warning system is aimed at bolstering preparedness to epidemics and natural disasters. Community-based measures are also envisaged to help populations cope with climatic adversity. Humanitarian partners will also work with the government to develop a preparedness package for refugee emergencies given that the region is regularly struck by crises that cause major population displacements.

Structural deficiencies such as poor access to basic services and lack of coping capacities to withstand shocks associated with climate change effects are mainly responsible for human suffering in Senegal. To address the causes of vulnerability and build resilience, the country is shifting from a purely humanitarian emergency response to an integrated approach reinforcing collaboration with development actors by promoting joint programming and vulnerability and risk analysis.

Food insecurity phases
- Not analyzed
- Minimal
- Under pressure
- Crisis

XX Children suffering from severe acute malnutrition

Source: Cadre harmonisé analysis projected situation Jun-Aug 2017

To consult and contribute to the 2017 Senegal Humanitarian Needs Overview & Response Plan, visit: www.humanitarianresponse.info/en/operations/senegal

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CONTRIBUTING TO INDIVIDUAL EMERGENCIES AND STRATEGIC RESPONSE PLANS

To consult and contribute to the 2017 Humanitarian Needs Overview and Response Plans for the eight Sahel countries, please visit:

wca.humanitarianresponse.info

This website includes information on organisations participating in the 2017 Humanitarian Response as well as people to contact concerning donations. We count on donors to provide financial support, at the outset of 2017, directly to UN agencies and non-governmental organisations in each appeal.

DONATING THROUGH THE CENTRAL EMERGENCY RESPONSE FUND (CERF)

CERF is one of the fastest and most effective ways to support rapid humanitarian response. The Fund is for life-saving humanitarian action at the onset of emergencies and for crises that have not attracted sufficient financing. Contributions are received year-round, mainly from governments, but also from private companies, foundations, charities and individuals. More information about CERF and how to contribute can be found at:

www.unocha.org/cerf/donate

IN-KIND RELIEF AID

The United Nations urges donors to make cash rather than in-kind donations, for maximum speed and flexibility, and to ensure the aid materials that are most needed are the ones delivered. If only in-kind contributions in response to disasters and emergencies are available, please contact:

logik@un.org.

REGISTERING AND RECOGNIZING YOUR CONTRIBUTIONS

OCHA manages the Financial Tracking Service (FTS), which curates, validates and publishes all reported humanitarian contributions (cash, in-kind, multilateral and bilateral), including to humanitarian and regional response plans. Many donor, recipient and implementing agencies regularly report their contributions through designated reporting focal points. For further details, please visit FTS Beta: ftsbeta.unocha.org.

ADAPTING DONATIONS TO THE SAHEL’S CHRONIC AND ACUTE EMERGENCIES

A resilience approach requires donors to operate differently in supporting humanitarian efforts.

- Multi-year humanitarian financing is critical to sustain and increase the impact of assistance through predictable funding in situations such as the Sahel;
- Equitable funding of all key sectors across the response plan is essential to deliver an integrated and sustainable response to chronic and acute challenges such as malnutrition, epidemics, displacement or food insecurity;
- Early financing is necessary to anticipate the inherently seasonal nature of the Sahel’s humanitarian challenges and respond on time to cyclical peaks of acute needs.
WHAT IF?

... WE FAIL TO RESPOND

If humanitarians are not able to raise funds and deliver aid for the Sahel crisis...

1. **1.4 million children with severe acute malnutrition (SAM) will not get the treatment they need.** Many may die, others will suffer permanent damage to their mental and physical wellbeing, undermining their capacity to learn and develop in their adult life.

2. **The absence of critical WASH services will increase the risk of epidemics and, given the link between malnutrition, diarrhoea and malaria, also lead to a considerable increase in malnutrition and double the length of the SAM treatment required.**

3. **People in insecure areas will be left without access to drinking water.** Lack of safe and secure access to drinking water and appropriate toilets or washing facilities will increase the risk of sexual and gender-based violence in IDP/refugee camps and conflict areas, notably against women and children, and heighten the risk of epidemics spreading.

4. **More than 1 million children will not be able to access education.** Children will be left vulnerable to harmful labour conditions, recruitment, trafficking and abuse. Social and human capital development indicators in the region will likely plummet, thus perpetuating poverty cycles, vulnerability and risks.

5. **People displaced across the Sahel will continue to face violence, displacement, abuse and exploitation.** Without psycho-social care and safe space to play and learn, we risk losing an entire generation of children in the most affected countries of Cameroon, Chad, Mali, Niger and Nigeria.

6. **Millions of people across the Sahel will lose out on crucial livelihood support that helps get them back on their feet.** Livelihood activities aimed at reducing dependency on assistance will discontinue. Miss this opportunity to protect and restore livelihoods will result in an increase in food and nutrition insecurity as well as in vulnerability to forthcoming shocks.

7. **The number of people facing acute food insecurity will further increase.** Early warning systems will not provide timely alerts to enable coordinated early response and the severity of a possible food crisis may be increased. Vital food aid pipelines may be depleted and agriculture and livelihood programmes may be scaled down.

8. **The risk of cholera outbreaks spreading will increase, and the risk of other epidemics and waterborne diseases will remain high.**

9. **Close to 1 million refugees and 3.9 million IDPs and returnees across the region may lack protection and assistance to meet their most basic needs.**

www.unocha.org/sahel