

HUMANITARIAN IMPLEMENTATION PLAN (HIP)

WEST AND CENTRAL AFRICA¹

The full implementation of this version of the HIP is conditional upon the payment of the Member State's contribution.

AMOUNT: 281 609 746.29

The present Humanitarian Implementation Plan (HIP) was prepared on the basis of financing decision ECHO/WWD/BUD/2022/01000 (Worldwide Decision) and the related General Guidelines for Operational Priorities on Humanitarian Aid (Operational Priorities). The purpose of the HIP and its annexes² is to serve as a communication tool for DG ECHO³'s partners and to assist in the preparation of their proposals. The provisions of the Worldwide Decision and the General Conditions of the Agreement with the European Commission shall take precedence over the provisions in this document.

0. MAJOR CHANGES SINCE PREVIOUS VERSION OF THE HIP

Fifth modification as of 02/12/2022

This modification is intended to increase the HIP by a total amount of EUR 8 000 000 from the Operational Reserve for Cameroon (EUR 2 000 000), Central African Republic (EUR 4 000 000), and Chad (EUR 2 000 000)⁴. These funds will contribute to addressing newly identified needs and critical gaps in the humanitarian response arising from growing food insecurity and from the aggravation of conflict-related crises, particularly but not exclusively in the Lake Province of Chad, in the Far North of Cameroon and in areas hosting forcibly displaced populations in the Central African Republic. The amounts will support multi-sectoral assistance covering in particular food security, health/nutrition, protection, Education and Wash, shelter/NFIs, with specific attention to reinforcement of Rapid Response Mechanisms and support to operations, in order to scale up the assistance as necessary.

Fourth modification as of 10/11/2022

This modification is intended to increase the HIP by a total amount of EUR 13 507 592.56, of which EUR 12 547 592.56 from the mobilization of the reserves for West and Central Africa. These funds will contribute to addressing critical gaps in the humanitarian response to the prevailing food crisis by supporting multi-sectoral

¹ This HIP covers eight countries, for which budget allocations are foreseen: Mali, Burkina Faso, Mauritania, Nigeria, Niger, Cameroon, Chad, Central African Republic. It may also respond to sudden or slow-onset new emergencies in Benin, Cabo Verde, Equatorial Guinea, Ivory Coast, Gabon, the Gambia, Ghana, Guinea, Guinea Bissau, Liberia, Sao Tomé and Príncipe, Senegal, Sierra Leone, Togo, if humanitarian needs arise.

² Technical annex and Thematic Policies annex

³ Directorate-General for European Civil Protection and Humanitarian Aid Operations (ECHO)

⁴ A previous technical modification of the HIP was carried out to include funds recovered from a contract implemented in Mali (EUR 35 478.73). These funds are added to the allocation for Mali.

assistance including rapid response. EUR 960 000 are a contribution in Externally Assigned Revenues from the ministry of Foreign and European Affairs of the Grand Duchy of Luxembourg under the title of “Emergency response to food insecurity in conflict-affected regions, Burkina Faso”. This amount will be used in line with the overall objectives agreed with the Ministry, to primarily focus on strengthening humanitarian assistance to the most vulnerable populations at risk of severe food insecurity.

Third modification as of 05/08/2022

This modification is intended to transfer⁵ EUR 16 146 675 to be allocated to the IFRC pilot Programmatic Partnership action ‘Accelerating local action in humanitarian and health crises’.

Second modification as of 03/06/2022

An additional amount of EUR 1 920 000 will be made available as a contribution in Externally Assigned Revenues from the Italian Ministry of Foreign Affairs and International Cooperation under the title of “Emergency Initiative to strengthen the humanitarian assistance to vulnerable populations in Mali”. This amount will be used in line with the overall objectives agreed with the Italian Ministry, to reinforce the Rapid Response Mechanism (RRM), support education in emergencies and scale up the protection response.

First modification as of 11/03/2022

The food security analyses and projections for 2022 under the *Cadre Harmonisé*⁶ are alarming. In Burkina Faso, 2.6 million people are anticipated to be in need of emergency food assistance during the 2022 lean season, including almost half a million in pre-famine (IPC4). This is a 222% increase in IPC3+ people compared to the 2015-2020 average. In Mali, 1.8 million will be in food crisis during the lean season, which represents a 159% increase compared to the 2015-2020 average. Figures for Niger project a 59% increase in IPC3+ people in 2022 compared to 2021 and +81% compared to 2020, with 3.61 million people expected to be in IPC3+ this year. This represents a 192% increase compared to the 2015-2020 average, which is unprecedented. In Chad, the number of people in food crisis is also at an alarming level, with 1.737 million people in IPC3+ during the 2022 lean season. This is almost double the average of the period 2015-2021 (983 000 people). In Nigeria, 18 million people are projected to be in food crisis during the upcoming lean season, compared to 12.8 million people over the same period in 2021. This staggering figure represents a 238% increase compared to the average recorded in 2015-2021. In conflict-affected Borno, Adamawa and Yobe (BAY States), between June and August 2022, the number of people facing critical food insecurity is estimated to reach 3.5 million, with pockets over 13 000 projected to be in IPC phase 5

⁵ The final amount included in this HIP was marginally corrected at the occasion of the fourth modification to reflect the actual value of the contract signed with IFRC

⁶ Regional Food Crisis Prevention Network.

(famine). In Cameroon, the number of people expected to be in food crisis as of June will total 2.4 million, with a share of the overall population set to increase from 16% to 20% in the Far North of the country (+180 000 people).

A deterioration of the nutritional situation is also emerging from the latest SMART surveys, linked to insecurity, disruption of health services and food crisis, combined with major funding gaps reported on the nutritional pipelines. Conflict, insecurity, and forced displacement are the main drivers of food insecurity and other acute needs in the region. Conflict has caused a sharp increase in population displacements, with over 7.5 million forcibly displaced people in the six countries at present and a negative outlook for 2022. The most vulnerable populations are those dependent on food assistance (IDPs, refugees, people living in conflict areas, including returnees and relocated populations), along with those in food insecurity due to prevented access to livelihoods (conflict related) and unaffordable food on the markets (due to climatic shocks and persisting socio-economic consequences of COVID-19, causing food price increases up to 26% on the five-year average).

To respond to the newly identified needs, an amount of EUR 47 000 000 is added to the present HIP from the Operational Reserve for Burkina Faso, Mali, Niger and Chad, and EUR 20 000 000 for Nigeria and Cameroon. These funds will contribute to addressing critical gaps in the humanitarian response by supporting multi-sectoral assistance covering in particular food security, health/nutrition, as well as reinforcement of Rapid Response Mechanisms and support to operations, in order to scale up the assistance as necessary.

Through the present amendment, the HIP is increased by EUR 67 000 000 in total.

1. CONTEXT

The West and Central Africa (WCA) region, one of the poorest and most fragile regions in the world, is affected by a combination of major protracted and recurrent humanitarian crises driven by conflicts and exacerbated by food insecurity, chronic undernutrition, natural hazards, epidemics and climate change. In 2021, more than 54.3 million West and Central Africans require emergency assistance⁷. The main conflicts and violence across the region affect Central Sahel (Mali, Burkina Faso and Niger), the Lake Chad Basin (Nigeria, Niger, Cameroon and Chad), the Central African Republic (CAR) and neighbouring countries hosting CAR refugees, the Northwest/Southwest (NW/SW) provinces of Cameroon, and North Central and North Western Nigeria (with displacements into Niger)⁸. The armed conflict in Central Sahel is rapidly intensifying, showing clear signs of expanding further South (Benin, Togo, Ghana and Côte d'Ivoire).

Two of these crises are considered forgotten by DG ECHO 2021-2022 Forgotten Crises Assessment (CAR regional crisis, NW/SW Cameroon), owing to an insufficient

⁷ <https://reports.unocha.org/en/country/west-central-africa/>

⁸ Since 2019, there is growing instability in Northwest Nigeria fuelled by a combination of herders-farmers clashes, banditry, violence and cross-border criminality. This situation causes forced displacements including into Niger. There is a risk that the violence can become a new insurgency and that the humanitarian needs will increase further in this region already recording some of the worst health and nutritional indicators in Nigeria.

international response to humanitarian needs, weak political commitment to solve the crisis, and fleeting media attention. Recent political developments in 2021 (coup in Mali, political transition in Chad outside the constitutional order, election-related violence in CAR) have only added to the instability and uncertainty affecting the region.

Conflict, insecurity, and forced displacement are the main drivers of acute food insecurity and other important humanitarian needs in the region. Compared to the previous year, two of the nine national or local conflicts ongoing in West and Central Africa have deteriorated in 2021, namely Cameroon (NW/SW) and Burkina Faso.⁹ Five of the 10 countries most vulnerable to climate change worldwide are in West and Central Africa.¹⁰ COVID-19 has reportedly had a limited health impact thus far in the region. However, the socio-economic repercussions of the pandemic on vulnerable populations are evident¹¹, as restrictions and containment measures put in place disrupted supply chains as well as local markets, thus reducing access to food and other essential items and driving up the price of basic goods. A significant deterioration of the food security situation¹² is observed in the Mano River countries (Sierra Leone, Liberia and Guinea Conakry), linked to the economic situation faced by the most vulnerable populations.

The outlook for the region is bleak with no substantial improvement in the short to medium term (see also chapter 2). Eight countries where DG ECHO is supporting operations are classified as “high” or “very high risk” of humanitarian crises and disasters that could overwhelm the national response capacity, according to the overall INFORM risk index.¹³ The intensity of the humanitarian crises, as measured by the INFORM severity index,¹⁴ is considered to be “high” or “very high” in 7 of these countries in the region. The breakdown by indicator is provided in the table below:

Main risks & vulnerabilities	Nigeria	Chad	Cameroon	CAR	Niger	Mali	Burkina Faso	Mauritania
INFORM Risk Index 2021	6.5	7.9	6.6	7.8	7.5	7.0	6.5	5.6
Vulnerability Index	5.8	7.7	6.6	9.1	7.4	7.1	7.6	6.2
Hazard and Exposure	7.2	7.3	5.6	6.1	7.4	7.3	5.6	4.3
Lack of Coping	6.5	8.9	6.0	8.6	7.7	6.6	6.5	6.5

⁹ International Crisis Group (ICG) Crisis Watch, June 2021: <https://www.crisisgroup.org/crisiswatch>

¹⁰ Chad, CAR, Guinea-Bissau, Niger, Liberia (with Chad the world’s most vulnerable country, followed by CAR). Cf. OECD States of Fragility 2020: <https://gain-new.crc.nd.edu/ranking>

¹¹ <https://www.undp.org/coronavirus/socio-economic-impact-covid-19>

¹² Based on Cadre Harmonise data, people in phase 3-5 of food insecurity increased by 281% in 2021 versus the average of 2015-2020 in coastal countries of West Africa (cf. footnote 14)

¹³ INFORM Risk Index (June 2021): <https://drmhc.jrc.ec.europa.eu/inform-index/INFORM-Risk>

¹⁴ INFORM severity index (July 2021): <https://drmhc.jrc.ec.europa.eu/inform-index/INFORM-Severity/Results-and-data>

Main risks & vulnerabilities	Nigeria	Chad	Cameroon	CAR	Niger	Mali	Burkina Faso	Mauritania
Capacity								
Global Crisis Severity Index	4.2	4.2	4.2	4.3	3.9	4.4	4.1	2.9
Projected conflict risk	10.0	10.0	9.3	8.2	9.2	10.0	10.0	3.7
Uprooted People Index	9.0	9.0	7.0	8.0	9.0	9.0	7.0	0.0
Humanitarian Conditions	4.0	4.4	4.2	4.1	3.7	4.3	4.3	2.9
Natural Disaster Index	4.0	4.2	3.6	3.1	4.5	4.4	3.7	5.6
HDI Ranking (Value) ¹⁵	161 (0.539)	187 (0.398)	153 (0.563)	188 (0.397)	189 (0.394)	184 (0.434)	182 (0.452)	157 (0.546)
Total Population (in millions) – source WORLD BANK 2020 ¹⁶	206.14	16.42	26.45	4.83	24.2	20.25	20.90	4.65

2. HUMANITARIAN NEEDS

2.1. People in need of humanitarian assistance

The total number of persons in need of humanitarian assistance in the eight target countries has increased by 20% between 2020 and 2021¹⁷ (29.2 million people in 2020 versus 35.1 million people in 2021). The number of severely food insecure people (IPC 3+)¹⁸ is estimated to have risen to 25.7 million during the 2021 lean season (June to August), an unprecedented figure which represents a 37.5% increase compared to the same period in 2020 (18.7 million people).¹⁹ Needs are on the rise in all sectors.

¹⁵ UNDP Humanitarian Development Index (HDI) 2019

¹⁶ <https://data.worldbank.org/country>

¹⁷ 2020 figures provided are pre COVID19 revision to illustrate the evolution of the humanitarian situation over a 12-month period

¹⁸ Cadre Harmonisé (CH) and Integrated Food Security Phase Classification (IPC): Level 3 = Acute Food and Livelihood Crisis; Level 4 = Humanitarian Emergency; Level 5 = Famine/Humanitarian Catastrophe

¹⁹ Food Crisis Prevention Network – RPCA (<https://www.food-security.net/en/>) and WFP, Food Security Highlight, West Africa, May 2021 - <https://reliefweb.int/sites/reliefweb.int/files/resources/WFP-0000129012.pdf>

The countries with the largest caseload of severely food insecure people (Nigeria with 12.8 million people in 2021, Burkina Faso with 2.9 million, CAR with 2.3 million, Niger with 2.3 million, Sierra Leone with 1.75 million and Chad with 1.78 million) are also affected by a combination of negative or sluggish growth in 2020, mainly owing to the economic slowdown caused by COVID-19, soaring food prices and inflation, and a high concentration of IDPs and refugees.²⁰

The number of countries in need of humanitarian assistance is also increasing, and includes now countries on the Coast of West Africa that were not significant recipients of such aid until recently. 15% of the population in Liberia and 23% in Sierra Leone is estimated to be severely food insecure in summer 2021, versus 1-2% in 2019. Guinea Conakry has more than twice as many food insecure people this year (683 000 in 2021 vs 267 170 in 2020). Figures and trends related to people in need are summarised in the tables below.

	People in need (HRP ²¹)			IDPs ²² + refugees		
Pays	2020	2021	2021 vs 2020	September 2020	September 2021	2021 vs 2020
Cameroon	4,400,000	4,400,000	0%	1,419,902	1,482,044	4%
CAR	2,600,000	2,800,000	8%	659,000	691,000	5%
Chad	4,800,000	5,500,000	15%	773,586	921,629	19%
Nigeria	7,700,000	8,700,000	13%	2,727,461	2,958,472	8%
Burkina Faso	2,200,000	3,500,000	59%	1,054,525	1,446,155	37%
Mali	3,600,000	5,900,000	64%	328,401	422,675	29%
Mauritania	728,854	566,613	-22%	65,481	72,632	11%
Niger	3,200,000	3,800,000	19%	483,969	551,354	14%
Total	29,228,854	35,166,613	20%	7,502,155	8,545,961	14%

²⁰ WFP Food Security Highlight West Africa, May 2021 - <https://reliefweb.int/sites/reliefweb.int/files/resources/WFP-0000129012.pdf>

²¹ Humanitarian Response Plan

²² Internally Displaced People

	Food insecurity (phase 3-5 ²³)			Caseload SAM ²⁴ (children 6-59 months)		
Pays	2020 lean season	2021 lean season	2021 vs 2020	2020	2021	2021 vs 2020
Cameroon	2,126,114	1,920,802	-10%	73,450	90,176	+23%
CAR	2,362,737	2,289,736	-3%	57,992	80,000	+38%
Chad	1,017,358	1,778,630	+75%	480,593	401,222	-17%
Nigeria	7,087,102	12,816,622	+81%	1,065,498	1,134,982	+7%
Burkina Faso	2,151,966	2,867,061	+33%	156,457	151,215	-3%
Mali	1,340,741	1,307,073	-3%	166,532	161,206	-3%
Mauritania	609,180	457 329	-25%	26,775	36,652	+37%
Niger	2,012,367	2,282,532	+13%	396,533	457,201	+15%
Total	18,707,565	25,719,605	+37%	2,423,830	2,512,634	+4%

NB: 2020 values taken from HRP or CH before COVID adaptations

2.2. Description of the most acute humanitarian needs

2.2.1. Humanitarian protection

The vulnerability of children, women and men affected by the crises in West and Central Africa remains critical. Their exposure to risks, including serious violations of Human Rights and International Humanitarian Law (IHL), has significantly escalated. Grave violations against children, gender-based violence, abductions and assaults, arbitrary arrests and extrajudicial executions are now systematic occurrences. The protection of civilians affected by violence and armed conflicts remains thus a priority. The sharp increase in violence and insecurity, combined with rising social and political tensions, has led to unprecedented levels of forced displacement, which has further reduced the already limited access to basic services (including to civil documentation), impacted on the coexistence of populations, and multiplied the threats. The lack of rule of law in many areas in the region perpetuates impunity and fuels intra and inter-community violence, weakening traditional social structures and local protection networks. The mental health and psychosocial wellbeing of all population groups have been severely affected. Humanitarian crises are not gender/age neutral and have a different impact on women, girls, boys and men. Children are increasingly exposed to family separation, killing and maiming. The recruitment and use of children for war purposes is perpetuated by armed groups and armed forces.

²³ Cf. footnote 14

²⁴ Severe Acute Malnutrition

2.2.2. *Food assistance*

An unprecedented caseload of more than 25.7 million people (+37.5% versus 2020) is estimated in need of emergency food assistance during the 2021 lean season in the eight target countries of this HIP. While armed conflicts are largely considered as the main driver of acute food insecurity, the socio-economic impact of COVID-19 continues to affect the most vulnerable. Most countries are facing a food price crisis that limits the poorest households' purchasing power and food access. The price of the three main cereals, for instance, is + 27% above the five-year average.

2.2.3. *Nutrition*

West and Central African countries have made some advances in reducing acute and chronic undernutrition over the last decade but their population growth is outpacing the progress made. Under-5 death rates are among the highest in the world and 45% of infant mortality is associated with undernutrition. Across the region 2.5 million children in the age group 6-59 months are estimated to be suffering from severe acute malnutrition.

The traditional determinants of undernutrition in this region - extreme poverty, poor infant feeding practices, infectious diseases and lack of access to healthcare - have been compounded in the last few years by acute food insecurity, conflict and the socio-economic impact of COVID-19. As a consequence, critical levels of acute undernutrition are found in several areas, particularly northern Burkina Faso, central Mali, northeast and northwest Nigeria, eastern and central Niger, Chad and CAR.

The local response capacity by health authorities has been improving and nowadays the CMAM (Community-based Management of Acute Malnutrition) programme is widely integrated into health centres and hospitals. However, the actual coverage remains very low even in the most stable areas, mostly limited by the cost and logistics needed for procurement and distribution of ready-to-use therapeutic food. Conflict and insecurity are increasing the number of children in need of treatment, and at the same time hampering their access to these life-saving services.

2.2.4. *Health*

Health systems in West and Central Africa are generally weak and fragile, as a result of structural problems (underfinancing, competing priorities, chronic shortage of skilled health workers...), aggravated by the direct and indirect effects of conflict (looting of health facilities, disruption of preventive programmes, population displacement...). The region has the lowest life expectancy at birth, and the highest infant and under-5 mortality rates in the world, well above averages in Sub-Saharan Africa. On top of this, the region is frequently affected by epidemics, notably Malaria, Measles, Cholera, Meningitis, Lassa fever and Yellow fever, and since 2014 by the Ebola virus disease. None of the health systems are adequately prepared to respond. West and Central Africa countries are also among the least prepared to face the COVID-19 pandemic.

2.2.5. *Water, Sanitation and Hygiene (WASH), shelters and settlements*

Regular and reliable access to safe drinking water, sanitation and shelters is a major challenge across the region, particularly for the populations affected by conflicts and forced displacement, but also in IDP and refugee camps and settlements. These humanitarian settings are congested and overburdened by a growing demand for WASH. An estimated 15.7 million people are in urgent need of access to WASH services and

facilities, and 8.9 million people (1.5 million more than in 2020) are in urgent need of shelter and essential items in the countries covered by this HIP.²⁵

2.2.6. *Education in emergencies*

Over 10 600 schools are currently closed due to insecurity²⁶ (not accounting for COVID-19 related closures) in 7 of the 8 countries covered by this HIP - Cameroon, Burkina Faso and Mali being the hardest hit. Kidnappings from schools are increasing in Nigeria, where over 1 000 girls and boys have been reportedly abducted by armed groups in the first months of 2021. Teachers, students and facilities are all under attack. The number of out-of-school children is increasing, linked to insecurity and exacerbated by the pandemic. Due to COVID-19 schools were closed for periods ranging from 2 to 7 months, leaving out-of-school over 15 million children.²⁷ As the pandemic progresses, further school closures cannot be ruled out, causing children, for whom school enrolment and attendance was not to be taken for granted,²⁸ to drop out due to loss of motivation, lack of means or unavailability of the educational services. Children with little or no schooling are more exposed to protection risks - sexual violence, early marriage, early pregnancy, child labour and forced recruitment - and are less likely to break the vicious cycle of poverty.

2.2.7. *Disaster preparedness (DP)*

The severity of the crises in the region is stable or aggravating and countries are classified with high (1 country) to very high (6 countries) severity indexes.²⁹ Armed conflicts and forced displacement, weak local capacities and increased vulnerabilities linked to climate change, environmental degradation and rapid urbanisation, contribute to erode livelihoods and incomes, making local communities less resilient to shocks and more reliant on assistance. All the countries covered by this HIP are classified by the ND GAIN Country Index³⁰ with the highest vulnerability to climate impacts affecting life-supporting sectors, such as food, water and infrastructure, and the lowest capacities to implement adaptation solutions. From 2017 to 2021, more than 26.4 million people³¹ have been directly impacted by natural hazards. In order to save the lives of vulnerable populations and protect their livelihoods, early warnings, anticipatory actions, preparedness and rapid response mechanisms need to be strengthened. This includes strengthening local and community prevention, preparedness and response.

²⁵ Source: OCHA

²⁶ This number fluctuates on a monthly basis due to volatile security situations.

²⁷ UNESCO Institute of Statistics 2018-2019 data

²⁸ There are no reliable figures yet on the impact of COVID-19 on school drop-outs

²⁹ INFORM severity index (July 2021): <https://drmhc.jrc.ec.europa.eu/inform-index/INFORM-Severity/Results-and-data>

³⁰ <https://gain.nd.edu/our-work/country-index/rankings/>

³¹ EM-DAT, CRED / UC Louvain, Brussels, Belgium – 2017 to 2021 in the WCA region included hydrological, climatological, and meteorological

3. HUMANITARIAN RESPONSE AND COORDINATION

3.1. National / local response and involvement

In **Cameroon**, government-led Humanitarian Coordination Centres (HCC) were set up to coordinate the humanitarian response to the complex crisis unfolding in the NW/SW regions. HCC form a part of the in-country humanitarian coordination arrangements, along with the traditional UN-INGOs-NGO humanitarian coordination system in place in all crisis-affected regions through dedicated fora (UNCT, HCT, clusters, working groups, and the Ministry of Health-led *Centre d'Organisation des Urgences de Santé Publique* - COUSP), particularly so with the advent of COVID-19. The 29 June 2019 Tripartite Agreement started UNHCR's coordinated and comprehensive cross-border programming on the voluntary repatriation of CAR refugees. A similar agreement had been signed on 2 March 2017 between the governments of Cameroon, Nigeria and UNHCR regarding Nigerian Refugees in Cameroon. While Cameroon might not currently possess a fully-fledged disaster risk management (DRM) strategy, this policy area is a key component of the Cameroon 2021 - 2030 National Development Strategy (NSD 2030), which is the key document for longer-term development planning. Cameroon's ND GAIN index ranks 143 on 182 countries.

The government of **CAR** requested support from the European Union, the UN and the World Bank Group (World Bank) to carry out the Needs Assessment for Recovery and Peacebuilding (RCPCA - *Plan National de Relèvement et de Consolidation de la Paix en Centrafrique* 2017 - 2021). The evaluation identified priorities for the first five years of the post-election period, with three specific objectives (for a total cost of US\$ 3,161 million) as follow: (i) to assist the government of CAR in identifying recovery and peacebuilding needs and priorities; (ii) to identify the operational, institutional and financial modalities that will facilitate the achievement of the identified priorities; and (iii) to create a platform to monitor progress in implementation, including major reforms. However, the prevailing insecurity and limited control over the country by the national authorities affect the implementation of the plan and the capacities for public services to deliver. Dialogue with the line Ministry for humanitarian affairs on the preservation of principled humanitarian aid remains challenging. The country does not have a national alert system to prevent disasters caused by natural hazards and national capacities in disaster management are very limited. The country ND GAIN index is 181/182. A strategy has been developed but still awaits adoption by the government.

In **Chad**, the government's capacity to prevent, anticipate and respond to shocks is very limited. The division of tasks and responsibilities is not clearly defined between the Ministry of Health and National Solidarity and the Ministry of the Economy and Development Planning. The financial resources dedicated to crisis management are scarce and the capacities of the State are very weak at the decentralised level. Furthermore, the politico-military transition following the death of President Idriss Déby in 2021 mainly prioritises security and stability agendas. The CNARR (*Commission Nationale pour l'Accueil et la Réinsertion des Réfugiés et des Rapatriés*) is the main government partner for the management of refugees but also plays a growing role in the management of internal displacement. In food security, SISAAP (*Projet d'appui à la mise en place d'un Système d'Information durable sur la Sécurité alimentaire et d'Alerte précoce*) by FAO and ONASA (*Office National de Sécurité Alimentaire*) contribute to crisis alert and response. The SPONGAH (*Permanent Secretariat for Non-Governmental Organisations and Humanitarian Affairs*) plays an important role in coordination with

humanitarian and development organisations but its scarce resources and capacity represent a challenge. The State's response capacity is strengthened by access to shock responsive mechanisms (e.g. through the World Bank project 'PARCA' - Refugees and Host Communities Support). Decentralised state services have very limited resources, but partnerships with humanitarian organisations give them better access to vulnerable groups. The Chadian Red Cross also provides local response given its presence throughout the country.

Despite the weak State capacity to implement disaster risk reduction and prevention approaches, Chad has over the years acquired a multi-layered policy framework with a National Strategy for Disaster Risk Reduction and its action plan (December 2020) at its apex and provincial multi-risk contingency plans (Lake, Logone Oriental) as well as a Flood Contingency Plan for the capital Ndjamena at the local level. Chad's ND GAIN Index is the lowest (182/182).

In **Mali**, national capacity to respond to the needs of crisis-affected people is generally weak, due to limited State presence on the ground, as well as credibility and legitimacy issues of government authorities towards the population. The Ministry for Social Welfare is responsible for coordinating the emergency response. The Malian Strategic Framework for Economic Recovery and Sustainable Development (2019-2023), which includes five strategic axes, all relevant to address the existing development and humanitarian challenges, is not implemented so far. The action plan defined for the transition (2020-2022), following the August 2020 coup, sets six national priorities (security, good governance, reform of the education system, political and institutional reforms, social stability pact, and the organisation of general elections) but does not include any timeline or budget and its implementation is lagging behind. Preparedness strategies and contingency plans exist at central and decentralised levels but are not adequately resourced. Vulnerability to climate impacts affecting life-supporting sectors, such as food, water and infrastructure, remains a challenge (Mali ND GAIN Index is 170/182). However, the still centralised Civil Protection (CP) services – limitedly to small scale events (i.e. floods) - seem well trained and equipped with an adequate response capacity.

Mauritania has made political, economic, and social reforms (in poverty reduction) that show the government's willingness to take charge, but the preparedness and response capacities of national and local authorities remain limited. The establishment of Taazour³² in 2020, the introduction of health insurances for the poorest households and the extension of the government's regular safety net programme Tekavoul to cover some refugee households in Mberra camp in 2021 are positive developments. National support to nutrition remains insufficient and is unevenly spread over the country. However, a tripartite agreement has just been signed between Taazour, UNICEF and the Ministry of Health to support the procurement of nutritional inputs, giving good reason to hope for an incremental contribution from the government. There are also positive signs that the government's adaptive shock-responsive social protection programme will increase its coverage for the lean season response. The national legislation on asylum and the legal framework concerning access to employment, financial inclusion and education are beneficial to the refugees, though pledges made at the Global Refugee Forum are not yet fully implemented.

³² *Délégation Générale à la Solidarité Nationale et à la Lutte contre l'Exclusion*

In **Nigeria**, the main national actors at federal level are the Ministry of Finance, Budget and National Planning, in charge of coordinating development investment and of INGO registration, and the Ministry for Humanitarian Affairs, Disaster Management and Social Development (FMHDS), created in 2019. The Nigerian Centre for Disease Control (NCDC) leads the response to COVID-19. The national response to the crisis in Northeast Nigeria is based on the Buhari Plan of rebuilding the Northeast, which covers emergency assistance, social stabilisation, protection and early recovery, and on the National Economic Recovery and Growth Plan (ERGP), which represents the government's vision of sustained and inclusive growth for the period 2017-2020. The creation of the FMHDS and the recent constitution of different coordination platforms demonstrate the national willingness to take the lead in relief response in the country. This willingness exists also at the sub-federal level. In Borno State, a recent law (2019) established the Agency for Sustainable Development and Humanitarian Response to coordinate and support the provision of aid. While demonstrating increased ownership of the response, this law might ultimately delay the delivery of assistance and undermine the humanitarian principles, due to some of its provisions.

In **Niger**, the main national actor in charge of humanitarian affairs is the Ministry of Humanitarian Action and Crisis Management (MAH/GC)), which leads the coordination of humanitarian action throughout the country. The *Dispositif National de Prévention et Gestion des Crises Alimentaires* (DNP-GCA), under the direct authority of the Prime Minister, is tasked to elaborate a yearly Support Plan to cover the needs of people in nutritional and food insecurity and ensure its implementation in coordination with the international humanitarian community.

The humanitarian strategy and its implementation plan are based both on the Support Plan of DNP-GCA and on the UN-led Humanitarian Response Plan, jointly presented and signed off by the government. As a result, in particular, of EU support over the last years, national institutions have increased their capacity to manage food and nutrition shocks - to an extent that allowed DG ECHO to downsize its response to food and nutrition insecurity in stable areas and focus on emergency response to the humanitarian impact of conflicts. However, the capacity of the State to provide basic social services, including education, health, nutrition, social safety nets and seasonal food assistance, remains low, particularly in areas affected by conflict dynamics. At the same time, insecurity and some incidents involving humanitarian actors have led the government to take unilateral administrative measures – notably the imposition of armed escorts unanimously refused by humanitarian actors.

In **Burkina Faso**, the *Conseil National de Secours d'Urgence et Rehabilitation* (CONASUR) remains in charge of the government-led system for emergency response to humanitarian crises in the country, headed by the Minister for Women, National Solidarity, Family and Humanitarian Action. CONASUR has taken responsibility for the registration process for displaced persons, a process that is crucial for the protection of people on the move and for facilitating their access to State social services. However, due to a cumbersome and untraceable methodology combined with low capacity, the process is slow and still needs improvement. As displacements become protracted, the “IDP and Host Population Recovery Strategy” for which UNDP is supporting CONASUR is still awaited. In the meantime, the government is due to elaborate a national strategy for IDPs inclusion as committed in the framework of the Prevention and Resilience Allocation granted by the World Bank in late 2020 (USD 700 million of which USD 350 million IDA grant and a USD 350 million IDA credit over the next three years) to support the country's initiatives to mitigate risks and address the escalation of violence. In terms of disaster preparedness,

the "National Plan for the Organisation and Coordination of Emergency Relief and Rehabilitation (PNOCSUR)" adopted in May 2012 does not reflect the current crisis and its consequences. A National Disaster Preparedness and Response Plan is also available, as well as sectoral plans, but they are not well articulated.

3.2. International Humanitarian Response

In **Cameroon** international humanitarian assistance plays a vital role in the response to the unfolding crises. The lack of humanitarian and development financing for Cameroon limits joint planning and programming opportunities on a larger scale. As at 15 September 2021, only 27.3% (USD 98.8 million) of the 2021 HRP was funded. The bulk of humanitarian financing is provided by the US government followed by the EU.

In **CAR** 54% (USD 241.8 million) of the 2021 HRP (USD 444.8 million) is funded. An additional USD 85.5 million funded outside of the plan contributes to humanitarian action. The main humanitarian donors are the US, Germany, Sweden, Canada, the EU and the UN Central Emergency Response Fund (CERF). Coordination by OCHA remains essential for aid effectiveness. The humanitarian architecture is made up of 11 clusters and the food security cluster requires 37.8% of the total appeal.

The HRP for **Chad** requires USD 617.5 million to respond to humanitarian needs in 2021. To date only 19% has been collected, making Chad one of the least funded crises in Africa. The US and the EU are by far the 2 main contributors. Other usual donors including Germany, Canada, Sweden and UK are also critical, albeit with less funding. CERF funds are also regularly allocated.

To date, USD 122.2 million have been allocated to the **Mali** HRP, corresponding to 22% of the USD 563.2 million required by the plan. The main humanitarian donors besides the EU are the US, with a focus on Food security / nutrition and RRM (Rapid Response Mechanism)³³; Canada, with a focus on health and food security; the UK and Germany, with a focus on food security and nutrition. Japan, Sweden, Switzerland, Denmark and France are also relevant donors. Mali hosts the UN integrated mission MINUSMA. The humanitarian architecture is under the lead of the recently appointed Deputy Special Representative of the Secretary-General / Humanitarian Coordinator and Resident Coordinator in Mali (DSRSG /HC/RC) seconded by a Deputy Humanitarian Coordinator. Civil-Military Coordination is effective at regional and central level but needs to be reinforced. DG ECHO is part of the Good Humanitarian Donorship group with US, UK, Switzerland, Germany, Sweden, The Netherlands, Spain and Denmark. This group coordinates with the GEC (*Groupe Exécutif de Coordination*, gathering all technical and financial partners in Mali) which is hosting all thematic and dialogue groups with the government of Mali, as well as the commission leading the work on the nexus approaches.

Mauritania has been covered by humanitarian response plans since 2018. Humanitarian food and nutrition needs are however regularly monitored and responded to by a range of partners (UN agencies, NGOs and Red Cross movement). According to OCHA, humanitarian funding has significantly decreased, from USD 75.5 million in 2020 to USD 27.5 million in 2021 (although the latter figure refers to 9 months). Food and nutrition as

³³ Rapid Response Mechanisms provide multi-sector basic assistance to people affected by armed conflict, natural disasters or epidemics through prepositioning of relief inputs, agreed processes and procedures, and dedicated capabilities.

well as of COVID-19 support constitute the main priorities of key humanitarian donors in the country (US, United Arab Emirates, EU, UK). In 2019, Mauritania took various commitments³⁴ in favour of local solutions for all refugees, including a bill on the right of asylum; registering all refugees with the civil status services; ensuring the inclusion of refugees in health services on the same basis as nationals; and ensuring that refugees have the same conditions of access to the labour market as nationals.

In **Nigeria** the crisis in the Northeast is underfunded with only 42.6% of the HRP (USD 1.01 billion) covered in mid-September 2021. The main bilateral humanitarian donors are the US with a focus on food security, health and WASH; the EU and Germany, with a regional approach on the Lake Chad Basin, as well as the UK. Sweden, The Netherlands, Switzerland, Canada, Norway, Belgium and the Country Pool Fund are other key humanitarian donors. The OCHA office in Maiduguri is central to ensuring coordination in the North-East, including civil-military coordination. A robust civil-military and humanitarian access coordination is required to better protect and assist vulnerable populations.

In **Niger** by the end of August 2021, USD 95.6 million has been allocated, which corresponds to 18.3% of the 2021 HRP (USD 523.2 million). Besides DG ECHO, the main humanitarian donors and their respective priorities are the US (food, nutrition, RRM, multi-sector assistance to refugees), UK (food, nutrition, coordination) and Germany (food, nutrition, displaced population). Niger has also been selected for the Humanitarian Regional Fund managed by OCHA (USD 15 millions). An informal humanitarian donor coordination group meets on average every two months. At national level, the standard humanitarian architecture, led by the HCT, is in place with clusters and inter-cluster coordination as well as a humanitarian Civil-Military Coordination mechanism, an Access Working Group and an RRM Strategic Group. The same architecture is being decentralised at regional level.

An increasing number of humanitarian organisations have deployed in **Burkina Faso** throughout 2020 in order to respond to the rapid spread of the humanitarian crisis. Several steps have been taken in that perspective, including (i) the establishment of a Humanitarian Coordination architecture, with the appointment of a Humanitarian Coordinator, the activation of eight Clusters and several working groups; (ii) the establishment of a Civil-Military Coordination Platform; (iii) the deployment of humanitarian air transport operations in order to deliver assistance in hard-to-reach locations. The 2021 HRP funding request (USD 607 million) represents a 1.6-fold increase compared to 2020. It is funded at 23% with major gaps in Shelter/Non Food Items and Site Management, WASH and Education). Although needs are continuously increasing, several donors have decreased their funding, except DG ECHO.

3.3. Operational constraints

3.3.1. Access/humanitarian space

Security threats by Armed Non-State Actors (ANSAs) and criminal groups, non-respect of humanitarian principles, and misperception of humanitarian action, are the main constraints to humanitarian space and access in West and Central Africa.

³⁴ In December 2019, at the 1st World Forum on Refugees

Security threats

Conflict affected-areas are characterised by a multiplication of armed groups, a volatile security situation and an overall limited knowledge and respect of International Humanitarian Law (IHL). Humanitarian organisations are also increasingly subject to criminality in areas with low or no State presence.

Non respect of humanitarian principles

Conflicts in West and Central Africa involve a multitude of ANSAs. Engaging with them is key to ensure that vulnerable communities in conflict-affected areas living under their control are not left behind. Ensuring that ANSAs understand the specificity of humanitarian action is also essential for the safety and security of humanitarian workers. As part of their counter terrorism measures, several governments (such as Burkina Faso, Mali, Cameroon, Nigeria) in the region are either formally prohibiting or not clearly authorising the dialogue with ANSAs thus obstructing the delivery of assistance in areas under the control of these actors. Where required, to build their acceptance and ultimately to access populations in need of assistance in hard-to-reach areas, humanitarian actors should be granted humanitarian exemptions and unequivocal authorisation to dialogue and negotiate with all parties, including ANSAs. Private security groups are playing an increasing role, which only adds to the complexity of civil-military coordination and other efforts to promote the space for principled humanitarian action.

Misperception of humanitarian action

Humanitarian access in the region is directly linked to the capacity of humanitarian action to be perceived and recognised as neutral, impartial, and independent. Any misperception of the humanitarian objective puts humanitarian workers in danger and results in lack of access to people in need. It is crucial to adopt measures that prevent the blurring of lines between humanitarian and military, security, stabilisation or political agendas.

A functional CMCOORD is an essential framework to enhance mutual understanding of roles and mandates, to maintain a clear distinction between humanitarian and military actors and to safeguard humanitarian space. The use of armed escorts by humanitarian actors and humanitarian suppliers should only be a last resort option, defined according to precise criteria by the humanitarian country teams. When governments unilaterally impose armed escorts, the humanitarian community should remain cohesive to ensure that the CMCOORD guidelines are well adhered to. Quick Impact Projects (QIPs) implemented by national and international armed forces to "win the hearts and minds" of populations, create a risk of confusion between humanitarian and military activities. This is the case in particular when the QIPs are of the same nature as traditional humanitarian activities (provision of food, water, health, education). When confusion occurs, humanitarians are at risk of being associated to the militaries and of being considered legitimate targets by ANSAs.

Clarity on the operationalisation of the triple nexus agenda is necessary to avoid blurring the lines between humanitarian and other objectives. In this respect, reference is to be made to the OECD DAC Recommendation on the Humanitarian-Development-Peace

Nexus.³⁵ DG ECHO supports and engages in the humanitarian-development-peace nexus, in a context-specific way, respectful of the different mandates and governing principles. Humanitarian aid contributes – but only indirectly – to conflict prevention and peacebuilding activities. It is provided solely on the basis of the needs of the affected populations. An effective do-no-harm approach should be based on a solid conflict sensitivity analysis involving the different actors of the triple nexus.

3.3.2. *Partners (presence, capacity), including absorption capacity on the ground*

Partners' implementation capacity is stretched, in particular in areas newly affected by insecurity. Options for international actors to work with local implementing partners exist but are limited. COVID-19 related restrictions, while slowing down some activities, have not brought humanitarian partners to a standstill. Partners have adapted their delivery modalities and governments have granted permissions for humanitarian activities to continue with adapted protocols.

In Chad, the Government is planning a review of the decrees adopted in 2018³⁶ and meant to regulate NGO funding and activities. The planned review might lead to a clearer and more predictable regulatory framework, allowing further principled humanitarian action through NGOs in Chad. This review process and its potential impact will be closely monitored, in coordination with DG INTPA and EEAS.

4. HUMANITARIAN – DEVELOPMENT – PEACE NEXUS (HDP)

The HDP nexus is a central element of the new Communication on EU's Humanitarian Action, the objective being to “*ensure that humanitarian, development, peacebuilding and other policies all work together to better link urgent relief and longer-term solutions, aiming at reducing needs and tackling the root causes of conflicts and crises*”.³⁷

The appropriate nexus approach to be adopted differs by context, and a sound preliminary analysis and the definition of context-specific nexus objectives is therefore required. Whereas in acute conflict settings humanitarian assistance will focus on the protection of civilians and on humanitarian access, in stable contexts the priority is to develop synergies among HDP actors at programme-level and to adopt a risk-informed approach.

4.1. Cameroon

Ongoing nexus initiatives in **Cameroon** pursue better coordination as advocated by the OECD Development Assistance Committee (DAC). Coherence, coordination and work in complementarity amongst humanitarian, development, peacebuilding and government planning frameworks have been strengthened since the endorsement of the Nexus Task Force's collective outcome by the United Nations Country Team (UNCT) and Humanitarian Country Team (HCT) in October 2019. So far, the Humanitarian-

³⁵ <https://legalinstruments.oecd.org/public/doc/643/643.en.pdf>

³⁶ Decrees 1917 and 1918

³⁷ COMMUNICATION FROM THE COMMISSION TO THE EUROPEAN PARLIAMENT AND THE COUNCIL on the EU's humanitarian action: new challenges, same principles. Brussels, 10.3.2021 COM (2021) 110 final. <https://ec.europa.eu/echo/files/aid/hacommunication2021.pdf> and [Council conclusions on EU's humanitarian action](https://data.consilium.europa.eu/doc/document/ST-8966-2021-INIT/en/pdf), 20 May 2021: <https://data.consilium.europa.eu/doc/document/ST-8966-2021-INIT/en/pdf>

Development-Peace (HDP) Nexus approach has been integrated into the 2020 Humanitarian Needs Overview, the 2021 Humanitarian Response Plan, the United Nations Development Assistance Framework (UNDAF) mid-term review, the Common Country Assessment and the United Nations Sustainable Development Cooperation Framework (UNSDCF) 2022-2026. The HDP collective outcome is also linked to the World Bank Country Partnership Framework (CPF), the World Bank Lake Chad Region Recovery and Development Project, and the World Bank IDA18 RSW (Refugee Sub-Window) for refugees and host communities. UN agencies and other partners have started integrating the HDP nexus into their country strategic approach.

On the EU side specifically, two of the three priority areas of the Neighbourhood Development and International Cooperation Instrument (NDICI) national programme offer scope for advancement in the nexus approach: democratisation, peace, governance and stabilisation (on the promotion of IHL and the delivery of social services in conflict affected areas), and the Green Deal (on disaster preparedness and food security). Additionally, a NDICI regional programme under preparation on durable solutions for refugees will include the East of Cameroon and CAR refugees as one of its focal areas. In the education sector, especially in the NW/SW where the issue of school closures has become increasingly salient, DG ECHO will need to seek nexus opportunities with other development partners, given that EU development funding under NDICI will concentrate on vocational training.

4.2. CAR

In **CAR** cooperation between the different stakeholders (EU, UN) is fluid and productive regarding the triple nexus approach. The nexus is operationalised via the Bêkou Fund,³⁸ with ongoing programmes in the areas of health, rural and economic recovery as well as reconciliation. In the sector of education, improved coherence and complementarity could be achieved with the Global Partnership for Education, Education Cannot Wait and the World Bank. Some local initiatives have been implemented through the Working Group “*solution durable*”. The aim of this group is to have humanitarian and development donors provide simultaneous funding in a number of geographical areas based on agreed criteria. The opportunity to link with some development actors (World Bank, *Agence Française de Développement* (AFD)) for social protection and safety net programming will be pursued.

As part of NDICI programming at national level, three priorities have been identified: peace building and security, governance and social contract, sustainable development and the green economy. Against this backdrop the nexus could translate into synergies in a number of areas including training of parent-teachers, disaster preparedness and response, local production of seeds for food security purposes, and provision of social services such as health and education by the national authorities to the benefit of long-established refugees and displaced persons. Finally, NDICI-funded EU programmes could also be active in justice and governance to provide a protective environment to the most vulnerable population, bearing in mind that humanitarian principles apply at all times.

³⁸ The Bêkou Fund was established in 2014 to provide immediate support after the 2013-2014 political crisis and conflict in CAR and was meant to bridge the gap between humanitarian and development funding. The fund will cease to exist as of 2022, but projects already approved and launched will continue until completion.

4.3. Chad

In **Chad**, which is one of the six EU nexus pilot countries, the priorities are concentrated in the southern and eastern border areas (refugee reception areas), the provinces of Bahr-El-Ghazal and Kanem (food and nutrition), and the Lake Province (all sectors). The triple nexus approach involves other donors such as the World Bank (social safety nets), the AFD, etc.

In terms of coordination, the donors (EU Member States, Switzerland, United Kingdom, World Bank) are organised within the Triple Nexus Task Force chaired by the EU. They have adopted a common framework to which the main UN agencies also adhere, namely the DAC/OECD recommendations on the link between humanitarian action, development and the search for peace. The Task Force has already adopted a draft action plan endorsed by all members. It will be reinforced by technical assistance in the next three years.

4.4. Mali

In **Mali**, since 2017, humanitarian actors and main donors have undertaken an impressive analytical work to (i) adapt the nexus concept to a complex crisis setting – putting people at the centre of all efforts, and (ii) define collective outcomes for 5 key sectors/ thematic areas, accompanied by sectorial/ thematic nexus roadmaps. In 2021 all partners agreed to pragmatically include the peace component on top of the humanitarian-development nexus, recognising its importance but also the need to define it more clearly and consensually. The CRZPC (*Commission rehabilitation des zones post-conflit*) is mandated by the GEC (*Groupe Executif de Coordination/Financial and Technical Partners in Mali*) to lead the “Task Force Nexus”.

In addition, EU joint programming in Mali is effective and active (action plan 2020-2024). The EU Member State Heads of Cooperation group agreed to work on 3 Team Europe Initiatives (TEIs): (i) Youth; (ii) environment / climate, and (iii) “stabilisation”; DG ECHO is an active member of the third TEI group to promote support to the reestablishment of basic social services as part of the approach.

At programmatic level, the EU supports an integrated geo-localised approach at municipality level, which aims at implementing security, State return, and population resilience, in coordination with humanitarian actions funded by DG ECHO. Complementarity is also expected between food assistance and longer-term programmes in the Central Sahel in support of food security and nutrition through WFP (CRIALCES) as well as with a new resilience programme under development.

4.5. Mauritania

Mauritania presents one of the most conducive contexts to operationalise the nexus. The main opportunities to ensure longer term sustainable development and social protection support are to: i) increase the resilience of the most vulnerable households prone to food insecurity, malnutrition and climate change impacts, ii) extend both predictable seasonal and shock responsive social safety nets for the most vulnerable. Overall, strengthening the preparedness and response system through early warning and social protection systems is key to reduce the humanitarian burden. This holds true also for reinforcement in health and nutrition. Particular attention must be sought to advocate for increased shared responsibility with development actors in providing support to build the self-reliance of Malian refugees living in Mauritania since 2012, including by extending

investments in clean and renewable energy. While overall coordination with development technical and financial partners is ongoing (AFD, World Bank, EU, UNDP and GIZ), further collaboration will be sought on issues related to climate change, support to protracted refugees, and human development progress, involving inter alia the Alliance Sahel³⁹.

4.6. Nigeria

The EU has been operationalising the Joint Humanitarian-Development Framework in **Nigeria** since 2015 and the country is now one of the six EU nexus pilot countries. On top of yearly humanitarian support, and since 2017, the EU has invested close to EUR 350 million in the Northeast through several instruments (the EU Trust Fund for Africa, the European Development Fund, the IcSP⁴⁰; and thematic lines) in close coordination with other nexus actors such as FCDO, GIZ and the World Bank. DG ECHO is seeking programming synergies in the Northeast, with extensions of the Borno Package programming. However, an effective HDP nexus approach in a context where the security situation has consistently deteriorated is extremely complex at an operational level, in particular as the blurring of humanitarian, development, and peace actions has undermined the ability to deploy principled humanitarian assistance. Rather, HDP nexus opportunities in the Northeast should primarily be explored regarding humanitarian advocacy, where a combined voice of the humanitarian and development actors, supported by the diplomatic and donor community, can be effective.

4.7. Niger

In **Niger** progress has been made over the last year and the national institutional framework is now more conducive to a nexus approach. An institutional nexus framework led by the Ministry of Humanitarian Action and Crisis Management (*Comité Technique Tripartite Nexus Urgence Développement*) has started shaping up and a 3-year roadmap recently designed aims at strengthening capacity at decentralised level to ensure coherence and coordination between short-term emergency actions and longer-term programmes. The commitments made by the government of Niger during the Sahel Ministerial Round Table in October 2020 to roll out the nexus roadmap is another illustration of the momentum existing in Niger on nexus initiatives.

The DG ECHO Disaster Preparedness approach in Niger seeks to contribute to increasing the capacity of national and local actors to anticipate, prepare and rapidly respond to major risks, with a focus on conflicts and sudden outbreaks/shocks. In particular, articulation between ECHO DP approach and more structural EU support aiming at strengthening crisis management governance mechanisms at national and decentralised level will be sought.

It will be equally important to maintain past gains related to food security and nutrition, and to take the best possible advantage of the Nutrition Transition Roadmap still to be

³⁹ The Sahel Alliance is an international cooperation platform launched in 2017 by France, Germany and the EU, along with the African Development Bank, the WORLD BANK and UNDP, to coordinate and step up efforts in the Sahel region. Spain, UK, Luxembourg, Netherlands, Denmark, the European Investment Bank and Norway have joined the initiative.

⁴⁰ Instrument contributing to Stability and Peace (IcSP)

supported by the EU Delegation until end of 2022. The role of the EU Delegation as SUN⁴¹ (Scaling Up Nutrition) convenor is another opportunity to mobilise all interested partners in strengthening their support towards nutrition-sensitive and nutrition-specific activities.

4.8. Burkina Faso

In **Burkina Faso** previous gains of the nexus (particularly in the area of structural food and nutrition security) are now being challenged due to the recently changed context in the country. In order to boost the operationalisation of a HDP nexus, several steps have been taken by the international community. Under the UNDP lead, a mapping of ‘Resilience and Peace consolidation capacities’ was produced. The Development partner coordination platform – known as the Troika – has also recognised the operationalisation of the nexus as a main objective. In the meantime, humanitarian actors have included this agenda in each sector of the HRP. Despite these ongoing initiatives, few concrete opportunities have materialised, with good examples only in the WASH sector. Funding for livelihoods support is particularly low while targeting issues confirm to be an obstacle to better linking of humanitarian actions with social safety nets programs.

DG ECHO has built on the following opportunities: the Instrument contributing to Stability and Peace has included urban planning, employment and vocational training in communes affected by IDP presence in the *Centre Nord* Region while aiming at pacific coexistence; IOM is due to implement a Displacement Tracking Matrix (‘DTM’) focused on Durable solutions under EUTF-funded migration/return/integration action.

5. ENVISAGED DG ECHO RESPONSE AND EXPECTED RESULTS OF HUMANITARIAN AID INTERVENTIONS

General consideration for all interventions

The humanitarian response shall be compliant with EU thematic policies and guidelines that are described in the HIP Thematic Policies annex.

5.1. Envisaged DG ECHO response

The response will be conflict-sensitive, placing protection at the centre of the humanitarian action and supporting Humanitarian Country Teams’ protection strategies.

Accountability towards affected populations, communication with communities and protection from sexual exploitation and abuse will be promoted in all actions.

In order to enhance access and effectiveness of humanitarian action, DG ECHO will keep supporting humanitarian coordination, humanitarian air services, humanitarian security management, and effective CM-COORD.

⁴¹ Scaling Up Nutrition is a movement, led by countries, committed to promote good nutrition as the best investment of the future. The political leaders of SUN countries agree to engage all sectors of central and local governments in efforts to improve nutrition.

DG ECHO will remain committed to ensuring compliance with IHL and humanitarian principles, including through high level advocacy. Partners' actions to support these advocacy efforts at country or regional level will be considered.

A permanent field presence and efficient communication/reporting lines (within the organisation and with DG ECHO) are required from partners to deliver more effective assistance respecting quality standards; to enhance protection through field presence and negotiations on access; to increase accountability and protection from sexual exploitation and abuse; to minimise fiduciary risks; and to strengthen security management.

In some countries covered by this HIP, DG ECHO response will increasingly take the shape of Rapid Response Mechanisms (RRM).

5.1.1. Humanitarian protection

Prevention and response to violence remains a priority. This concerns in particular holistic case management for gender-based violence survivors and victims of human rights violations. The inclusion of mental health and psychosocial support components is expected, also in Rapid Response Mechanisms through psychological first aid activities. Comprehensive protection pathways and referral systems based on data protection protocols should be reinforced, in tight coordination with other sectoral actors. Interventions are expected to support children associated with armed forces and armed groups or at risk of forced recruitment, and victims of grave violations. Assistance to separated/unaccompanied minors, tracing and family reunification activities are also a priority. Particular importance is given to the promotion of and compliance with IHL, Human Rights and Refugee Law by all parties, as well as to the protection of civilians, including humanitarian workers, education and health personnel and infrastructures. Protection responses will be based on a comprehensive risks analysis. Interventions are expected in all three Central Sahel countries as well as in the Malian refugee camp of M'Bera in Mauritania. For Mali, the North and Centre regions are priority areas; for Niger: Diffa, Tahoua, Tillabery and Maradi; for Burkina Faso, the Sahel region, the *Nord*, *Boucle du Mouhoun*, *Est*, and *Centre-Nord*. The Lake Chad Basin region will be prioritised in Nigeria, in Cameroon and in Chad. Additionally, in Cameroon the North West and South West regions of Cameroon will be considered, as well as the East and the South regions of Chad.

5.1.2. Food assistance

The most acute food needs of conflict-affected communities, irrespective of their status (forcibly displaced, hosts and locals) will be addressed. The response will be delivered in administrative areas with the highest prevalence of IPC 3+ and where food gaps not captured by IPC are identified. Targeting processes will be justified based on the severity of food insecurity among the poorest⁴² not yet assisted otherwise (national safety net included). While the household targeting process might contribute to the establishment of national social registries, these should not necessarily be used as the main entry points for targeting.⁴³

⁴² Through the HEA : Household Economy Approach

⁴³ Exceptions can be considered if sound verification processes are established to eliminate inclusion errors and if partners can identify people in acute needs who are excluded from national registries.

The response will support food assistance based on a sound risk analysis including protection and conflict sensitivity and will, whenever possible, promote anticipatory actions. It will adopt the most appropriate modalities (cash, vouchers, in-kind) and delivery mechanisms (preferably electronics ones) to respond to the identified gaps in the food diet. The analysis of food gaps at household level will be considered to determine the size of the food basket, so as to enable households to reach 2 100 Kcal/p/day for at least three consecutive months with an acceptable diet in quality and quantity, and according to their level of vulnerability. It will be adapted to the household size with a maximum size and solid verification mechanisms. It will also consider energy needs for cooking, taking into account the environmental (energy) impact of different food options. In Nigeria, the Northeast and Northwest regions are priority intervention areas. In Mauritania, the Malian refugee camp in M'Bera is a priority, along with the regions bordering Mali and Senegal in the South of the country. For Mali, the North and Centre are priority areas. For Niger, the priority areas are Diffa, Tahoua, Tillabery and Maradi. In Chad, the Lake province and the worst affected provinces in the Sahel during the lean season (mainly Hadjer Lamis, Lac, Barh El Gazal, Kanem, Batha, Guéra, Wadi Fira Ouaddaï, Sila) will be prioritised. In Cameroon, priority areas for food assistance are NWSW and Far North. In CAR, the priority areas will be determined based on IPC results and conflict analysis, depending on the type of food assistance considered.

5.1.3. Nutrition

DG ECHO will focus on addressing the most acute nutrition needs of children under 5 in areas where the Global Acute Malnutrition (GAM) emergency threshold of 15% has been exceeded, where national capacities are insufficient, and/or in high-risk or shock-affected areas. Conflict-affected populations (internally displaced, refugees, returnees, host and local communities) are therefore expected to be the main target population for nutrition assistance as they face high malnutrition rates and poor access to public services.

Acute undernutrition treatment (both for children and for pregnant and lactating women) must be integrated as much as possible into the national healthcare systems (facility, staff, supplies, etc.) while ensuring adequate performance and free treatment for the beneficiaries. Exceptions are possible, e.g. where the functionality of services is disrupted and significant gaps have been identified: in this case partners are expected to develop appropriate strategies to maintain access to services (i.e. external human resources, mobile setup, etc.), and to submit a realistic exit strategy.

While responding to nutrition humanitarian needs, DG ECHO partners are expected to empower local actors (community health workers, qualified healthcare staff, district officials, etc.) to become effective and independent in screening undernutrition, monitor the nutrition situation and the CMAM (Community-based Management of Acute Malnutrition) performance, anticipate and address peaks, manage supplies, treat children, and counsel caretakers (e.g. for IYCF⁴⁴ promotion). The nutrition response can be integrated into Rapid Response Mechanisms to provide quick and short-term⁴⁵ assistance in case of sudden onset crises involving a limited number of people. One-off nutrition

⁴⁴ Infant and young child feeding

⁴⁵ The duration should take account of the fact that the average length of stay in the outpatient exceeds 30 days

assessments, including SMART (Standardises Monitoring and Assessment of Relief and Transitions) surveys, can be supported to quickly measure the undernutrition prevalence and other indicators of humanitarian relevance in areas likely to face an acute crisis and in view of a possible scaling up of the response. Coordination mechanisms for enhanced preparedness and response, contributing to strengthening local capacities with a clear humanitarian focus, can be considered for funding.

5.1.4. Health

Priority will be given to activities with the highest potential to save lives, prioritising support to health systems already in place and ensuring accessible primary healthcare and referral for conflict-affected populations whether they are displaced, refugees, returnees or host populations. Health interventions will systematically include appropriate links with the protection sector as well as care for victims of gender-based violence. Operations should take a patient-centred approach and respond to identified humanitarian needs for all population groups, ages and gender. Acute undernutrition should be handled by the health care system (see section 5.1.3). Stand-alone interventions and facilities should be avoided. Operations shall respond to the needs of women and girls by offering comprehensive sexual and reproductive health care services, as well as mental health services. Given the high occurrence of epidemics in the region, a timely response to epidemics remains a regional priority. Measures to strengthen existing Early Warning Systems (EWS) can be proposed. Partners must also indicate their capacity to intervene in the event of an epidemic. The significant disruption of health services provoked by the COVID-19 pandemic needs to be mitigated by urgently adapting operations and by developing new practices in response to COVID-19, but also by including Infection Prevention and Control (IPC), WASH and waste management standards in health services.

5.1.5. WASH, shelters and settlements

There is a need to increase and improve access to safe water and adequate sanitation, and to upgrade WASH facilities/services, their management and sustainability, including environmental sustainability, notably by promoting self-reliance while ensuring access to the most vulnerable ones. Depending on the magnitude of the needs, standalone WASH and Shelter projects can be considered where relevant. Priority in all interventions will be given to IDP sites, communities hosting important caseloads of forcibly displaced population, with high human concentrations rendering them prone to the spread of epidemics. In a fragile environmental context such as the Sahel region, the realisation of new water supply facilities shall integrate their possible negative impact on the local environment in line with existing good practices and assessment tools. Support to short term water solutions such as water trucking can be foreseen only on the condition of a reasonable exit strategy. Safer and more environment friendly shelters are also elements to be considered, including for returnee households. Camp/site coordination and management (CCCM) needs to be reinforced and better covered to comply with humanitarian targets and guidelines.

In Nigeria, the Northeast and Northwest regions are priority intervention areas. In Chad, the priorities are geographically concentrated in the Lake Province but other areas can be considered in case of unanticipated needs. In Cameroon, the crises in the Lake Chad Basin and the North West-South West regions of the country should constitute the focus of DG ECHO interventions. In Burkina Faso priority areas are the Sahel region, the

Nord, Boucle du Mouhoun, Est, Centre-nord, particularly in areas with high concentration of IDPs. For Niger, Diffa, Tahoua, Tillabery and Maradi regions are considered as a priority. For Mali, the Centre and North regions. In CAR, the priority areas will be defined following the latest needs assessments of the sector.

5.1.6. *Education in emergencies (EiE)*

The primary target for EiE projects are hard-to-reach, forcibly displaced, out-of-school children (IDPs, refugees, returnees) in camps and in host communities. Greater attention needs to be paid to understanding the reasons for children not being in formal or non-formal education (socio, cultural, economic, gender, linguistic, statute...), so that EiE actions can be incorporated into multi-sectoral responses which address the root causes for non-enrolment and poor retention. Geographic, age and gender differentiated responses, paying particular attention to girls⁴⁶, should be proposed beyond classical academic curriculum to encompass Social and Emotional Learning (SEL), all within a conflict sensitive framework. All actions must integrate a child protection component with a minimum of psycho-social support (PSS) and case referrals, on the understanding that EiE is one of the best protective tools and that better futures can only be imagined with education. EiE projects should have a minimum duration of 24 months.

The deteriorating security situation and increased forced displacement is putting non-absorbable pressure on the already flailing education structures in communities. Thus those children who are in school (non-formal or formal) find themselves in environments which are not conducive to learning. While not intended to repair structural deficiencies of education systems, DG ECHO's funding can act as a catalyst to work in complementarity with development donors in a nexus approach, notably with the Global Partnership for Education (GPE), Education Cannot Wait (ECW), the World Bank and AFD, which have greater political anchoring to support infrastructure, curriculum reform/establishment, training, recruitment and deployment of teachers as well as working on early childhood and youth initiatives. In countries where EiE Rapid Response Mechanisms have made progress, DG ECHO will encourage them further.

In 2021, distance learning and innovative non-formal education initiatives have emerged and there have been advances on accelerated education programmes which have taken shape in response to the dire situation caused by COVID-19 closures and attacks on schools and the need to have more adaptive and adapted solutions. In 2022, DG ECHO will promote the capitalisation and upscaling of these initiatives and the piloting of new ones, as highlighted in the Humanitarian Action Communication. There is need to continue working on ensuring solid transition options from non-formal to formal education.

In Nigeria, the Northeast and Northwest regions are the priority intervention areas. In Cameroon, the crises in the Lake Chad Basin (Far North) and the North West-South West regions of the country should constitute the focus of ECHO interventions. Priority areas for Burkina Faso are the Sahel region, the *Nord, Boucle du Mouhoun, Est, Centre-nord*. For Mali, the Centre and North regions. For Niger, Diffa, Tahoua, Tillabery and Maradi.

⁴⁶ Cf. European Court of Auditors EiE Audit report - <https://op.europa.eu/webpub/eca/special-reports/education-02-2021/en/> and Humanitarian Action Communication- HAC (cit.)

For Mauritania, the M’Bera Malian refugee camp is a priority. In Chad and CAR, the priority areas will be defined following the latest needs assessments of the sector.

5.1.7. Disaster Preparedness

Targeted stand-alone DP actions will be supported under the dedicated DP budget line in all countries under this HIP except Mali (which will be considered in the next phase). Where possible, support to Disaster Risk Management authorities will be included in addition to community-based interventions. Strengthened collaboration with development actors will be encouraged. Four priorities are identified:⁴⁷ (i) risk-based and anticipatory actions such as risk assessments, EWS, contingency plans, as well as forecast-based anticipatory actions and financing including on epidemics; (ii) preparedness in conflict and fragile settings to build capacity for surveillance, warning, and protection as well as for integrating conflict sensitivity into disaster response; (iii) climate and environmental resilience to address specific climate-related challenges (e.g. displacement) and greening of humanitarian operations through environmentally friendly solutions; and (iv) urban preparedness to target specific challenges of crises in urban contexts.

In addition, and as part of preparedness within the humanitarian response, support to RRM will be provided if there is added value in terms of efficiency, effectiveness, and timeliness of the response. This approach should integrate early measures to address access in hard-to-reach areas. These mechanisms should seek complementarity with existing coordination structures, while progressively handing over to national or local mechanisms when possible.

DG ECHO’s support will focus on local, regional, and national systems in order to increase their capacity in term of early warnings and early actions (anticipatory actions), with strategies promoting multi-annual approaches where appropriate,⁴⁸ hence building further on approaches launched in past years. The focus will also be on issues linked to the humanitarian priorities, such as food or nutrition crisis, enhanced capacities to react to forced displacement or preparedness to conflicts and increasingly recurrent climatic events and addressing identified gaps from recent disaster management crisis.

5.2. Other DG ECHO interventions

The Emergency Toolbox HIP may be drawn upon for the prevention of, and response to, outbreaks of Epidemics. Under the Emergency Toolbox HIP, the Small-Scale Response, Acute Large Emergency Response Tool (ALERT) and Disaster Relief Emergency Fund (DREF) instruments may also provide funding options.

⁴⁷ For the 2021-2024 cycle, four global priorities have been defined for targeted preparedness actions funded by the DG ECHO dedicated budget for DP. All priorities are inter-connected and mutually reinforcing as activities implemented under one priority will benefit the other priorities.

⁴⁸ Refer to the HIP Technical Annex section 3.2.2 for further technical and administrative details