

ENDING THE EVERYDAY EMERGENCY

Resilience and children in the Sahel



July 2012

Commissioned by World Vision and Save the Children,
members of the Sahel Working Group

Authored by Peter Gubbels of Groundswell International

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The Sahel Working Group (SWG) is a UK based inter-agency network working with the countries of this region, which include Niger, Mali and Burkina Faso: three countries at the epicentre of the current crisis and the focus of the report. It was formed to identify and implement solutions to the chronic vulnerability and hunger of communities, in order to break the hunger cycle.

World Vision and Save the Children are the participating agencies of the SWG who have jointly commissioned this report. The other members are Christian Aid, CARE International UK, Concern Worldwide, Oxfam GB, CAFOD, Plan UK and Tearfund. While the report has been prepared in close collaboration with the two commissioning agencies, its contents do not necessarily reflect all the policy of all SWG members.

Peter Gubbels



Front Cover image: Mariama holds her baby sister at a World Vision supported health center in Niger.
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Back Cover image: Yacouba, 3, held by his Aunt Mourza in a Niger health centre. ©2010 Ann Birch/World Vision

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World Vision

World Vision House, Opal Drive,
Fox Milne, Milton Keynes, MK15 0ZR
www.worldvision.org.uk

World Vision – London office

11 Belgrave Road,
London, SW1V 1RB

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Save the Children

1 St John's Lane
London EC1M 4AR
Telephone +44(0)20 7012 6400
Fax +44 (0)20 7012 6963
www.savethechildren.org.uk

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LIST OF ABBREVIATIONS

3N	3N Initiative: Nigeriens Nourishing Nigeriens
ACF	Action Against Hunger
CAADP	Comprehensive Africa Agriculture Development Program
CERF	Central Emergency Response Fund (of the UN)
CFA	Communauté Financière Africaine (Currency in francs for Francophone West Africa)
DRR	Disaster Risk Reduction
EC	European Commission
ECHO	European Community Humanitarian Office
ECOWAP	Economic Community of West Africa Agricultural Policy
ECOWAS	Economic Community of West African States
EU	European Union
EWS	Early Warning System
CILSS	Permanent Inter-State Committee for the Fight against Drought in the Sahel
CRS	Catholic Relief Services
DFID	Department for International Development (United Kingdom)
ECB	Emergency Capacity Building: Network
ECHO	European Commission for Humanitarian Aid department
ECOWAP	ECOWAS Agricultural Policy
FAO	Food and Agriculture Organisation
FEWS NET	Famine Early Warning Systems Network
FMNR	Farmer Managed Natural Regeneration
GAM	Global Acute Malnutrition
GDP	Gross Domestic Product
HEA	Household Economy Analysis
MAM	Moderate Acute Malnutrition
MAS	Severe Acute Malnutrition
MSF	Doctors Without Borders
NGO	Non Governmental Organization
OCHA	Office for the Coordination of Humanitarian Affairs
ODI	Overseas Development Institute
OFDA	Office of U.S. Foreign Disaster Assistance
RPCA	Food Crisis Prevention Network (West Africa)
SAM	Severe Acute Malnutrition
SUN	UN Scaling Up Nutrition
UN	United Nations
UNDP	United Nations Development Program
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
WAEMU	West Africa Economic and Monetary Union
WFP	World Food Programme
WHO	World Health Organization

EXECUTIVE SUMMARY

More than 18 million people are currently struggling through a crisis in the Sahel region of West Africa. The overarching driver of this crisis is not drought, nor a food deficit. The most vulnerable families are in crisis because they have no protection against shocks like grain prices doubling. This is the “resilience deficit”^{*}, rooted in structural causes, neglected for too long, and exacerbated by exceptionally high food prices.

Current estimates suggest that over one million children will face severe and life-threatening malnutrition during this crisis. Even in a “non-crisis” year, an estimated 645,000 children die in the Sahel of largely preventable and treatable causes, with 226,000 of these deaths being directly linked to malnutrition. Acute malnutrition affects 10%-14% of children in Senegal, Mali, Mauritania, Niger and Burkina Faso, and more than 15% of children in Chad. These rates demonstrate that traditional development policies are failing to save children in the Sahel from a permanent, large-scale nutrition crisis.

This report, a joint initiative by Save the Children and World Vision, aims to assess progress, lessons learned, and challenges in promoting “resilience” in the Sahel, with a particular focus on the well-being of children. The study demonstrates the need for a massive response by governments and partners in order to tackle child malnutrition – chronic and acute, together. It offers evidence-based, tangible recommendations for a comprehensive, child-focused approach to resilience in the Sahel.

People's access to food at prices they can afford, and their capacity to absorb or adapt to new shocks have been severely undermined by the Sahel crises in 2005, 2008 and 2010. The vast majority of the most vulnerable households in the region have had neither the time, nor the necessary support, to get out of debt, or restore their normal means of making a living.

In the Sahel, shocks like drought often push a chronic livelihood and nutrition crisis into an acute crisis. The structural factors beneath both the chronic and the acute are often overlooked. These include: inadequate support for

^{*}There are many different definitions of resilience, but all agree it has to do with the capacity to resist, recover from, or adapt to shocks

small scale agriculture; low levels of education; lack of access to basic health services; poor governance; and declining per-capita food production. Chronic child malnutrition itself is not only a consequence of the “resilience deficit”, but also undermines resilience. These elements have combined with less recovery time between crises, so that even moderate shocks have major impacts on the most vulnerable members of the population. The result is persistent and appallingly high levels of chronic and acute child malnutrition.

Whilst there is strong consensus for action among all actors – governments, communities, donors, and aid agencies – to better integrate humanitarian and development efforts to “strengthen resilience” and break the hunger cycle, progress is still very limited. Actors differ in the dimension of resilience they focus on, the people and geographic areas they target, and their favoured solutions, creating a critical lack of comprehensive, coherent leadership and agreement around resilience. Currently, the approach to resilience in the Sahel is highly fragmented, dysfunctional and ineffective.

A systemic, collective approach by institutions of government, the UN, donors, international NGOs and civil society work is needed to bring about significant institutional changes within and between organisations. The challenge is reaching agreement about what the ‘system’ for achieving resilience is, who is in it, what each actor’s role is, and what the system is supposed to do and how to do it.

The current development approach is mostly based on a supply-driven approach to hunger reduction that concentrates on expanding agricultural production, assuming this will eventually lead to reduced food prices and improved nutrition. The current Sahel crisis highlights the major limitations of only adopting a supply-driven approach. The poorest 25% of small scale farm families in the Sahel are being left behind. To address this, an effective approach to resilience must be comprehensive and include a number of additional elements. One is adequate social protection - public actions taken to provide predictable support for targeted individuals, households or communities to reduce, prevent and manage risks and vulnerabilities which are deemed socially unacceptable within a given society.

In the Sahel, the main types of social protection have been short-term social transfers, or “safety-nets”, that provide food during emergencies. Although such measures ensure households’ immediate access to food during crises, they fail to ensure the recovery of households most affected by recurrent shocks. Longer-term social transfers in most Sahelian countries are either non-existent, or piecemeal and uncoordinated. They have uncertain financing and very limited coverage. A more long-term social transfer programme, targeting chronically poor households and vulnerable groups - including children under five - could support people through short-term crises. At the same time it should comprehensively reduce their long-term vulnerability.

In addition, evidence from Niger, Burkina Faso and Mali indicates that new, low-cost agricultural techniques can dramatically improve small-scale farming, enabling poorer families to increase production of food crops and income. If the increased demand for food generated by a long-term social transfer programme is used to buy food from local small-scale farmers using such

improved techniques, the most vulnerable 25% would be able to access food, protect their livelihoods, strengthen production capacity, and overcome chronic malnutrition.

The Sahel crisis of 2012 is likely to dramatically increase the “resilience deficit” and the extent of vulnerability. Addressing this deficit calls for a major paradigm shift in how chronic hunger crises are addressed. In the Sahel, there are few examples of communities in high risk-prone areas that have managed to protect and increase resilience of the most vulnerable households, in terms of reducing chronic hunger and shocking levels of child malnutrition.

The existing system for promoting resilience has to change. Business as usual will continue to fail the people of the Sahel. A different approach, one that includes social transfers designed to directly help the poorest and most vulnerable families with food programmes sourced from local small-scale farmers and other steps, is essential.

The specific needs of the chronically food insecure populations, and chronically malnourished children, must become a long-term priority within integrated humanitarian and development action, not just during crises. In light of this, the report presents recommendations for national governments, regional structures, UN agencies, donors, international organisations, and civil society, to overcome the resilience deficit. These include:

- **Make reduction of child under-nutrition central to resilience**, through coordinated national plans especially prioritising children under two and pregnant women
- **Harness small-scale agriculture for resilience and improved nutrition**, ensuring sustainability and resilience and not just an increase in production
- **Invest in social protection and services for the poorest households**, particularly for households that are chronically food-insecure as distinct from those periodically suffering from shocks.
- **Develop a new plan for how the national governments, international donors, and agencies should work together to prevent hunger crises**, breaking down the barriers between development and humanitarian approaches, between ‘normal’ and ‘crisis’ responses.

II INTRODUCTION

1.1 Background to the study

In late 2011, as a food and nutrition crisis loomed in the West Africa region known as the Sahel, World Vision and Save the Children each initiated a multi-country regional humanitarian response. This included advocating for policy change to address not just the acute dimension of the crisis but also the long-term, chronic problems. Failure over years to comprehensively address the underlying structural causes of food and nutrition insecurity have left the population vulnerable, and lacking resilience¹ to deal with shocks.

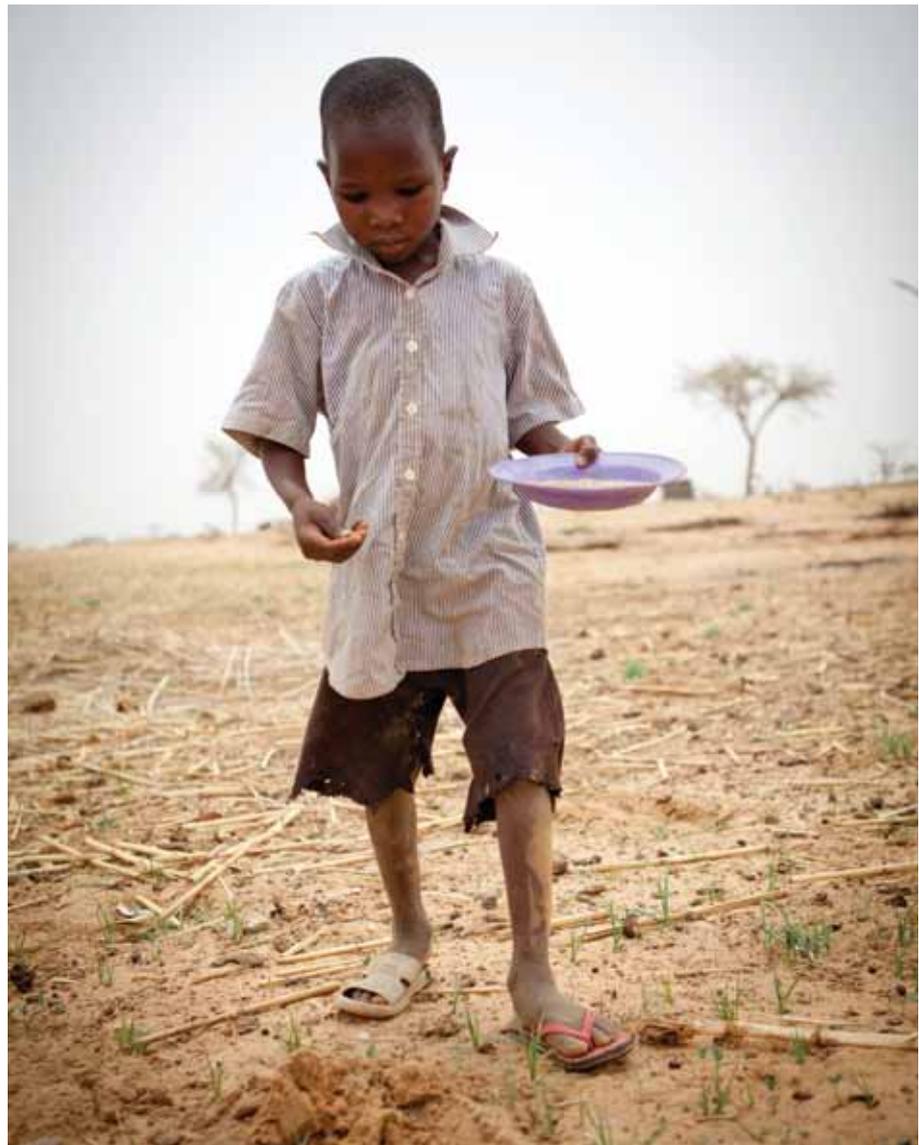
As child-focused organisations, World Vision and Save the Children are particularly interested in the impact of the evolving crisis on children: how efforts to strengthen resilience are contributing to child wellbeing, including their nutrition and protection, and how to better integrate humanitarian and development work in addressing chronic crises. In order to sharpen and inform their advocacy, World Vision and Save the Children seek to build on the *'Escaping the Hunger Cycle'* report commissioned by the Sahel Working Group, of which both agencies are members.

The focus of this follow-up report is to assess progress, lessons learned, and challenges in promoting "resilience" in the Sahel, with a particular focus on the effects on child well-being. The study's outcomes are evidence-based, tangible recommendations advocating a comprehensive, child-focused approach to resilience in the Sahel.

1.2 Methodology

This study took place in April 2012. This report is based on over 30 interviews, mainly conducted in Ouagadougou (Burkina Faso), and Niamey (Niger), with international NGO humanitarian and development practitioners, researchers, donor representatives of the European Commission and US Agency for International Development (USAID), government officials, and staff of United Nations agencies².

A workshop of joint analysis on progress and challenges for resilience, convened in Niamey, Niger, also informs this report as does documentation provided during interviews, or collected during the desk review: academic



Right: A young boy helps his father plant millet outside their home in Niger.
© Jonathan Hyams/
Save the Children

analyses, assessments, reports, strategic documents, policy briefs, programme reviews, media reports, articles, and press releases. Finally, the report also draws from the voices of children, and their families affected by the crisis.

1.3 Structure of the report

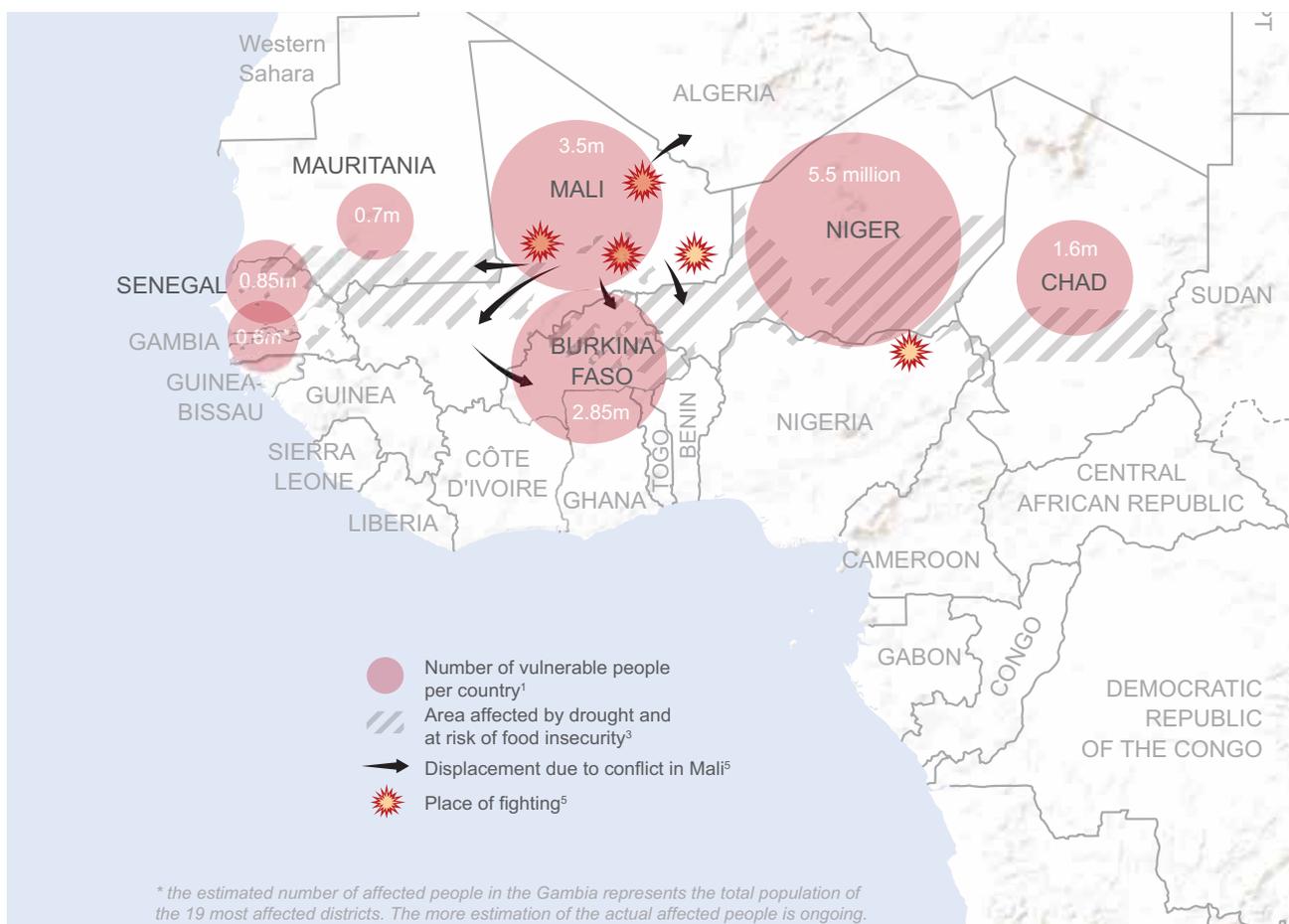
There are six sections to this report. This first section provides the background, objective, and methodology for the study. The second is a brief overview of the 2012 Sahel crisis, outlining how it differs significantly from earlier crises in 2005 and 2010, and how media reports are misleading. The third section assesses the reasons why efforts to promote resilience in the Sahel have not yet proven effective. The fourth section is the body of the report. It analyses the positive changes and strategic opportunities for each of the major “pathways” for strengthening resilience in the Sahel, and for breaking the hunger cycle. Particular attention is given in each instance to how the chronic crisis of child malnutrition can more effectively be addressed. Section 5 deepens the analysis of the institutional challenges to be overcome for a more comprehensive and systematic approach to resilience. The final section offers recommendations for the way forward.

2 | OVERVIEW OF THE 2012 SAHEL CRISIS

2.1 The Sahel again on the Brink of Catastrophe

A bleak narrative of an estimated 18.4 million people afflicted yet again in another calamitous food crisis, in the wake of drought in West Africa's Sahel region, is starting to capture some media attention. There is a growing drumbeat of calls for more humanitarian funding from many agencies.

Below: Snapshot of the humanitarian crisis as of April 2012



Source: Ocha. The Sahel: Humanitarian Snapshot. (April 2012)

Agricultural production in the Sahel fell due to late and irregular rains and prolonged dry spells in 2011. The Food Crisis Prevention Network (RPCA) meeting of April 12-13 confirmed that Sahel cereal production in 2011 was 26 percent lower than in 2010³. However 2010 was a record harvest. If compared to the average of the past five years, total cereal production in the Sahel was only 3 percent lower⁴. Despite what seems like a modest overall food deficit, we are witnessing a severe food and nutrition crisis. Why?

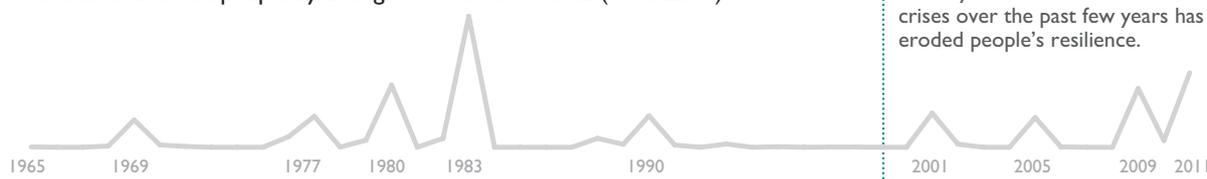
2.2 Drivers of the 2012 Sahel Crisis

In the Sahel, drought often triggers a shift from a chronic livelihood and nutrition crisis into an acute phase. The structural factors behind the deepening vulnerability and poverty are often overlooked. These include: ecological degradation of soils, trees and pasture; inadequate support for small-scale agriculture; climate change; low levels of education; lack of access to basic health services; poor governance; dependence on international markets; inequitable economic growth, and high population growth rates that have significantly reduced the average farm size in many rural areas, as well as per capita food production.

Although rooted in these structural factors, each new acute phase of the Sahel crisis has its own distinct features. The 2012 Sahel crisis differs significantly from those of 2010 and 2005. While triggered by drought, other particular circumstances include high food prices, the conflict in Mali and reduced international remittances. See Annex A for a more detailed analysis.

The overarching driver of the 2012 Sahel crisis, however, is eroded resilience⁵.

Number of affected people by drought in Western Africa (1965-2011)



Above: Timeline of drought in the region.

Source: OCHA: Ocha. The Sahel: Humanitarian Snapshot. (April 2012)

There are many different definitions of resilience, but all agree it has to do with the capacity to resist, recover from, or adapt to shocks. Annex A provides an overview of how the concept of resilience is often used, often as the inverse of vulnerability.

Since the last Sahel crisis in 2010, the vast majority of the most vulnerable households have not yet been able to get out of debt, or restore their normal livelihoods and productive assets such as seeds and animals⁶. This has greatly undermined people's purchasing power to access food, and their capacity to absorb a new shock, triggered by drought, less than two years later.

The driver of the Sahel crisis is not the much scrutinized national and regional food deficits. It is the more complex, multi-dimensional "**resilience deficit**" that has widened poverty and vulnerability over the years.

2.3 A Misleading Narrative about the Sahel Crisis

The available data demonstrates that child malnutrition rates are not strongly related to general food availability. Nor is child malnutrition limited to the most

food insecure areas of the Sahel. During the 2010 Sahel crisis the case load of Severe Acute Malnutrition⁷ (or SAM) in Niger, the epicentre, was 320,000 children. A year later, in 2011, Niger had exceptional rains and a record agricultural harvest. However, the case load of SAM fell just 13,000 to 307,000 children⁸ in 2011. Addressing the food deficit is important. But it is only part of the real crisis in the Sahel. More important is the worsening resilience deficit, characterised by persistently high chronic and acute malnutrition rates. In raising public awareness and mobilising a response, media accounts over-emphasise food aid. The headlines often fail to identify the core causes of food insecurity and child malnutrition in the Sahel. While targeted food aid and nutritional supplements are necessary, short-term emergency food assistance cannot address the underlying resilience deficit.

A trenchant example is the intolerable level of chronic malnutrition in children under five in the Sahel. In Niger 51% of children are stunted⁹. The average height of a two-and-a-half-year-old girl in Niger is 82.2cm, which is 8.5cm (or 9%) shorter than what the average height should be for this age¹⁰. Lack of nutritious food, combined with infection and illness prevent stunted children from fulfilling their physical, intellectual, or economic, potential.

Stunting sets children back for life. Many stunted children never regain the height or weight lost. When the window of early childhood is closed, the associated cognitive damage is often irreversible. Stunting can also have an intergenerational effect. Poorly nourished or stunted mothers are more likely to have low birth weight babies and malnourished children. Thus, the cycle of hunger, poverty, and malnutrition continues.

Chronic child malnutrition is not only a consequence, but also a cause of the resilience deficit - resilience requires strengthening human capacity to adapt livelihood strategies to shocks. Even though resilience is conceptualized differently by actors¹¹, there can be no doubt that, in the context of the Sahel, reducing chronic child malnutrition and achieving nutrition security must be central in assessing to what extent resilience has been strengthened.

Hannatou and her grandmother belong to the Felani tribe who are pastoralists. Owning cattle is very important to them. The family's animals died in 2010 during the food crisis and they have been struggling to find food ever since. Hannatou told World Vision: 'We used to have 3 cows, 6 goats and 5 sheep but they all died two years ago. After they died we were forced to work in the mine as we don't have enough food to eat. I always feel hungry, my stomach hurts and I have a headache.'

People are being forced underground to work in order to earn money to eat. The boys and men will risk their lives going deep underground to mine. The mine shafts and tunnels are not secured and often collapse. The women and girls work around the edge of the mine sifting the silt.

Hannatou has never been to school. Her Grandmother Amsata Issa, 65, says: 'How can she go to school when we have no food.' Hannatou says: 'I'm very tired after spending the day working and often my arms ache. I wish that I didn't have to come here and I would prefer to stay at home and be able to go to school.'

'After work if I'm not too tired I like to play babysitting with my friends. We'll wrap up a flip flop and pretend it is a baby. We also really like to climb the trees. When we had animals the cows were my favourite, I used to really like drinking the milk. When I grow up I would like to get married to somebody who has animals. I would like to have ten cows and walk with them to the pasture.'

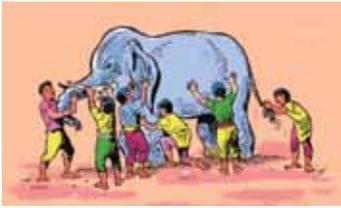
World Vision Case Study in Niger (Liz Scarff, 20th May 2012)

3 | TOWARDS A COMPREHENSIVE AND SYSTEMATIC APPROACH TO PROMOTING RESILIENCE

3.1 Resilience, the New Buzz Word

Over the past two years, there has been a surge in the use of the concept of “resilience” by major humanitarian, disaster risk reduction, climate change adaptation and development actors working in the Sahel. This concept reflects a consensus that in order to break the cycle of the hunger crisis humanitarian and development efforts need to be better integrated “to strengthen resilience” of vulnerable population groups. UN agencies including OCHA¹², UNICEF¹³, FAO¹⁴, UNDP¹⁵ and the WFP¹⁶ have made strong public pronouncements, organised workshops, and prepared strategies, conceptual frameworks and planning documents on resilience. Some donors, particularly DFID¹⁷, have adopted a resilience agenda. The World Resources Institute¹⁸ and the influential Montpellier Panel¹⁹ have published reports on the role of agriculture in resilience. In the United Kingdom, ten international organisations have formed an inter-agency group to develop a common understanding and framework for resilience²⁰. The list of agencies embracing resilience continues to grow.

In summary, UN agencies, donors, international NGOs and certain governments now agree on the need to integrate shorter-term emergency response efforts with longer-term, comprehensive and integrated strategies in order to overcome the structural causes of the food nutrition crisis. The embrace of this agenda is positive. However, the unfolding Sahel crisis of 2012 indicates limited practical progress in strengthening the resilience of communities and vulnerable populations since 2010. Why?



Above: The Blind Men and the Elephant. Source: Wordinfo.info

3.2 Resilience in Silos

The limited progress in strengthening resilience is in part simply because it takes time. It requires a comprehensive, multi-sectoral, coordinated and long-term approach that combines different pathways to overcome the structural causes (See Annex B for a schematic diagram). However, the deeper reason is that these elements of resilience are interdependent. They need to work in mutually reinforcing ways. But individual agencies are not set up to focus on resilience. They are either one-mandated (operating only in relief or in development), or two-mandated, (doing both humanitarian and development work) but not effectively integrating the two. Within government, resilience requires actions that cut across different institutional mandates. The same applies across the UN agencies, and within donors and international NGOs. As noted by OCHA, resilience “*require(s) integrated strategies by governments and between governments in the region, with the active participation of civil society, development partners and the private sector*”²³.

This is not happening. A review of the resilience frameworks cited above suggests a strong tendency for actors to “repackage” most of what they already do within the new discourse and conceptual framework of “resilience”²⁴. Beyond the rhetoric, many actors are mostly carrying on “business as usual”. Few have yet made institutional changes or developed new ways of working for resilience.

One is reminded of the ancient fable, in which six blind men each touch an elephant. Although each man touches the same animal, his determination of the nature of the elephant is based only on the one part he is able to touch. Accordingly, the blind men describe the elephant as like a snake, a spear; a wall, a fan, a tree, and as a rope. Although each blind man is partly right, all have a wrong understanding of the true nature of the elephant.

Like the blind men, most agencies are correct that what they do can contribute to resilience. However, their effectiveness is limited, because they are not engaged in a *systematic*, comprehensive approach. Instead, resilience is still being promoted largely through “siloes interventions” within technical sectors or institutional mandates. Humanitarian and development actors are not yet engaged in a comprehensive approach developed for specific livelihood and geographic contexts, in which synergies between different levels and sectors are achieved, within an integrated system.

Because of its nature, strengthening resilience to break the hunger and malnutrition cycle requires creating an effective *system* involving all the dimensions for resilience.²⁵ This involves improving how different actors ‘who are parts of such a system’ work and learn together to achieve the goals that they are collectively seeking to achieve. No matter how well individual agencies perform, as elements of a wider system they cannot achieve lasting results in strengthening resilience on their own. Fundamental change in how the overall system works is essential. Individual agencies need to change, but more critically, the system needs to change – and this requires strong leadership.

4 | STRATEGIC OPPORTUNITIES FOR STRENGTHENED RESILIENCE

The need for – and the absence of – a ‘joined-up’ approach to resilience in the Sahel is clear. This section reviews the major components of a systemic approach to resilience in the Sahel in light of the current 2012 crisis. Each is assessed in terms of the progress, challenges, and opportunities for improving synergies within a *system* for promoting resilience. Particular attention is given to how a more comprehensive approach improves child nutrition and well-being.

4.1 Preventing Malnutrition²⁶

The 2012 Sahel crisis exposes to public view the most glaring dimension of the resilience deficit: appalling levels of child malnutrition. Even in a “non-crisis” year, an estimated 645,000 children die in the Sahel, with 226,000 of these deaths being directly linked to malnutrition²⁷. Acute malnutrition affects 10%-14% of children in Senegal, Mali, Mauritania, Niger and Burkina Faso, and more than 15% of children in Chad²⁸. **These rates indicate a permanent, large-scale nutrition crisis in the Sahel.**

The term malnutrition can technically refer to an individual is both over-nourished (overweight/obese) or under-nourished. For this report, in the context of the Sahel, we take it to mean under-nourished. In this report we focus on three types of malnutrition:

- Stunting
- Wasting
- Micronutrient Deficiency

Resilience and Malnutrition: Malnourished children are not resilient because they have weakened body systems that cannot resist, fight and recover from common disease like malaria, diarrhoea, and respiratory infections. According to research from the Lancet in 2008, undernutrition is an underlying factor in 35% of child deaths and could contribute to 20% of maternal deaths in developing countries.

Table 1: Admissions and anticipated cases of Severe Acute Malnutrition in the Sahel (2011-2012)

During the first half of 2012, there has been great fear that the nutritional status of children in the Sahel is trending to disastrous. The multiple drivers of high vulnerability mean that even moderate external shocks are having major impacts. A massive response by governments and partners is needed to prevent child malnutrition from becoming catastrophic.

Country	2011 Actual SAM admissions	2011 Estimated SAM Caseloads	2012 Expected SAM Caseloads	Worst case scenario
Niger	307,000	310,000	331,000	413,000
Mali	25,000	219,000	175,000	219,000
Burkina Faso	50,000	97,000	99,200	125,000
Senegal (north)	10,000	87,000	20,000	21,400
Mauritania	9,000	100,000	12,600	15,700
Cameroon (north)	20,000	35,000	55,100	69,000
Nigeria (north)	70,000	13,000	207,700	260,000
Chad	65,000	11,000	127,300	159,000
Total Sahel	556,000	872,000	1,027,900	1,282,100

In 2012, early warnings signalled the urgency for national governments and their partners to develop such responses in most countries²⁹. However, most key actors admit implementation has not been easy. Full financing has not yet been obtained. Accessing the region's most remote areas is a continuing challenge. Insecurity and violence in Mali are complicating operations. Institutional capacities, policies, and access to health services vary widely within and across countries.

Even with early responses, UNICEF projects a worsening of nutritional status in 2012. The estimate is that over one million children in the Sahel region may face "severe and life-threatening malnutrition", over one third of them in Niger³⁰. Acute malnutrition is directly or indirectly responsible for 50–60% of deaths of children under five³¹.

The tragic consequence of the resilience deficit is that even with a costly emergency response, the already unacceptably high number of children suffering from SAM is projected to increase significantly. This will cause many additional child deaths in 2012. For children in the Sahel, there is no buffer to cushion the shock. This is unacceptable. This must change.

In the media, the nutrition crisis in the Sahel is often presented only through the food dimension. Government and regional Early Warning Systems also focus strongly on the "food deficits" caused by drought. Long-term solutions proposed for the Sahel crisis strongly emphasise increased food production through agriculture, and irrigation. However, food, and particularly food aid, is a blunt tool to address malnutrition. Even unlimited amounts of food assistance would not be able to solve the problem alone.

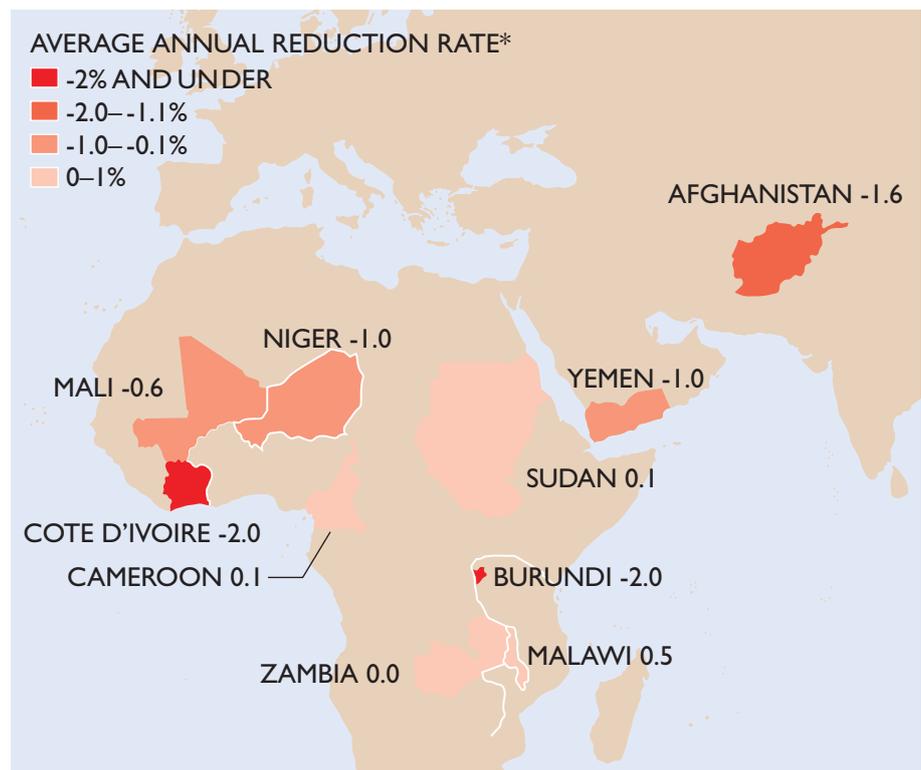
Availability of food to households is only one of many determining factors of a child's nutrition status. Other factors include: lack of access to quality health services to treat childhood diseases³², lack of drinking water, poor hygiene and sanitation, improper feeding and care-giving practices, and lack of access to an adequate social protection programme for households caught in the hunger trap.

To eradicate the present, intolerable levels of child malnutrition in the Sahel, actors must take into account not only the seasonal, but also the structural causes. Short-term humanitarian responses cannot overcome these causes of child malnutrition. To break the hunger cycle requires a long-term, integrated rehabilitation and prevention programme addressing nutrition, health, water, hygiene, sanitation, and behavioural changes. A country-led programme of this type would need to be undertaken throughout the year, and reinforced by specific responses in the lean season³³. It would need to be carefully targeted and adapted to specific livelihood, cultural, and geographic contexts.³⁴ This is a complex but necessary approach.

Key actors are taking up this challenge. The European Commission (EC) has produced a reference document about how to address malnutrition through an integrated approach through sectors in both humanitarian and development aid modalities³⁵. It analyses how various thematic areas can contribute to improving malnutrition – including agriculture and social protection. International NGOs working in the Sahel, including ACF³⁶, CARE³⁷, and Save the Children³⁸ have developed practical field guides on nutrition. Others, such as World Vision, have adopted improved strategies including cash for work, applied supplementary feeding in crisis response, and non emergency Community based Management of Acute Malnutrition³⁹. Concern Worldwide⁴⁰, MSF⁴¹ and Save the Children⁴², often supported by the European Community Humanitarian Office (ECHO), have undertaken pilot projects with operational research components in the Sahel to identify and document effective practices such as cash transfers and ready-to-use supplementary food, for specific contexts.

These initiatives represent considerable progress since 2010. Overcoming chronic malnutrition, in particular, will take time. However, the unpalatable reality is that these efforts have not yet produced significant, lasting results. Severe Acute Malnutrition throughout the Sahel remained near emergency

Below: Rate of Reduction in Stunting 1990-2010
Source: Save the Children 'A Life Free From Hunger' Report



levels in 2011, in a year of record harvests. Figure 1 shows that since 1990, Mali and Niger had the 6th and 4th slowest rate of reduction of stunting in the world⁴³. The rate of stunting did not decrease but actually increased by 0.6% and 1% respectively. In 2010, the rate of stunting in Mali was 38.5% and in Niger, over 51%⁴⁴.

There are many reasons for this lack of progress. One factor is the lack of high level political champions for multi-sector nutrition initiatives within governments. There are many international institutions that have nutrition, food and hunger as part of their mandate but there is no clear leader or coordination. The main institutional bodies that hold the key to overcoming under-nutrition are the four large agencies at the UN – the Food and Agriculture Organization (FAO), UNICEF, the World Health Organization (WHO) and the World Food Programme (WFP)⁴⁵. Although the overarching aim of each of the UN institutions and committees is to reduce malnutrition in some way, they differ in the type of malnutrition they focus on, and their approach.

Despite the UN cluster system, this number of institutions working on nutrition tends to create co-ordination problem as mandates overlap and organisations each seek scarce resources or to influence governments. The causes of malnutrition are multi-sectoral and multi-layered. To make a significant improvement, all those working in the arena of food and nutrition, including civil society and NGOs, must recognise that there are many different factors that can lead to a child being malnourished, and they must work together in a co-ordinated way⁴⁶. These problems were highlighted in a 2008 article in The Lancet series on Maternal and Child malnutrition, where analysts described the international nutrition system as “fragmented and dysfunctional”⁴⁷.

Since then, the “Scaling Up Nutrition (SUN) movement, launched in September 2010, including Senegal, Burkina Faso, Mali, and Niger⁴⁸, has started to improve coordination and effectiveness. In Niger, the European Commission (EC) is the focal organisation for the SUN initiative. Efforts are being made to achieve greater synergy between all development partners within a multi-sectoral approach to nutrition led by government. This is encouraging. The challenge to achieve significant results in reducing acute and chronic malnutrition, and ending the everyday emergency affecting children in the Sahel remains.

4.2 Harnessing Small-Scale Agriculture for Resilience and Improved Child Nutrition

The second component of a new system for resilience is small-scale agriculture linked to improving nutrition. Evidence from Niger, Burkina Faso, and Mali, indicates that low cost agro-ecological techniques, particularly agro-forestry⁴⁹ and soil and water conservation⁵⁰, have improved small-scale farmer resilience, and improved food security⁵¹. World Vision’s pioneering work in promoting Farmer Managed Natural Regeneration (FMNR) of trees in Niger has produced dramatic results⁵², increasing crop harvests in many areas, and sparking a regional, farmer-led re-greening movement⁵³. In some villages, the annual “hungry period” when food supplies are nearly exhausted has been significantly shortened.⁵⁴ Many rural producers have doubled or tripled their incomes through the sale of wood, seed pods, and edible leaves⁵⁵. Large areas

**Grain surplus Kantché Department (Zinder/Niger).
350,000 inhabitants; high on-farm tree density**

2007	+ 21,230 ton
2008	+36,838 ton
2009	+28,122 ton
2010	+64,208 ton
2011	+13,818 ton

Source: National Committee for the Prevention and Management of Food Crisis and FEWS.

of countryside that a few years ago faced constant shortages of fuel wood and fodder now produce surpluses for sale in nearby markets⁵⁶.

One indicator of resilience is community capacity to absorb shocks. When drought and accompanying food shortages hit the regions of Maradi, Tahoua, Tillabéri, and Zinder in 2004–05, villages with high levels of adoption of FMNR fared much better than those devoid of trees. For example, villages in Aguié District were able to harvest regenerated trees for food, fodder, and firewood to sell in exchange for grain. The inhabitants did not rely on emergency relief and did not have a single death of a malnourished child⁵⁷. Farmers practicing FMNR and other agro-ecological techniques have been able to stockpile grains during good years, harvest trees for food and income in bad years, and sustain productivity by improving fertility and water holding capacity of soils, reducing erosion, and preventing ill effects of sun and wind on young crops. All this has strengthened farmer resilience in the face of cyclical droughts⁵⁸. Such impact goes beyond the village level. Evidence from the Kantché department of Niger, where adoption of FMNR is widespread, shows overall grain surpluses both in the drought of 2009, and again in the most recent drought of 2011⁵⁹.

Recognising these results, the Government of Niger has included FMNR and soil and water conservation techniques into its new “3N Initiative: Nigeriens Nourishing Nigeriens”. Determined to break the cycle of permanent food and nutrition insecurity, the new government of Niger recently outlined the 3N strategic framework of 4 strategic axes of action⁶⁰. A major theme is to expand various forms of irrigated agriculture. Within the Sahel, the high profile 3N initiative, which reports directly to the Presidency, is an example of the role of strong national leadership and political will in undertaking a multi-sectoral approach to break the food and nutrition cycle. This is an example of determined leadership bringing about system change.

Despite its impressive results of enabling poorer families to increase self-production of food crops and to increase income, agro-ecological agriculture *alone* cannot overcome the structural causes of food and nutrition insecurity in the Sahel. Very high rates of population growth in the region⁶¹, and fast reducing land per capita, hinder the ability of Niger—and other Sahelian countries—to stay ahead of the food and livelihood needs of their people, particularly in the face of climate change⁶². Even in years of national food surpluses, six out of ten households are still unable to meet their food needs for more than three months⁶³.

More critically, over half of Niger's children are chronically malnourished (stunted). This rate is not declining, but increasing⁶⁴.

Improving Child Nutrition through Small-Scale Agriculture

In light of persistent emergency levels of child malnutrition, a vital policy question for governments in the Sahel is: should increased investment in agriculture remain focused solely on productivity and yields, or be designed to also contribute to improved nutrition outcomes?

The limitations of production-focused agriculture interventions to deliver improved nutrition have been well documented⁶⁵. The continuing assumption is that agriculture tackles poverty and malnutrition by increasing food production, lowering food prices, and increasing household income. However, even where household food availability, income and, in many cases, diet quality increased, childhood malnutrition persisted. The evidence is clear that while increased agricultural production and income are often necessary, they are clearly not *sufficient* to reduce child undernutrition. Far more substantial impacts were achieved when agricultural interventions incorporated non-agricultural components or were combined with complementary non-agricultural interventions that addressed other determinants of child nutrition⁶⁶.

While the potential of nutrition-sensitive agriculture is clear, there are serious gaps in the evidence of what works. The question of what can be done to improve the synergies between agriculture and nutrition has yet to be fully explored or prioritised⁶⁷. A systematic review of agricultural interventions that aim to improve the nutritional status of children found that, of 307 studies on interventions that aimed at such an impact, only 23 met the criteria for impact assessment using nutrition-relevant indicators⁶⁸. Agricultural interventions often fail to implement nutrition components. The assessment indicates that agricultural programmes to tackle malnutrition often do not reach the poorest and the vulnerable children most at risk of chronic hunger⁶⁹. Interventions are often not designed with complementary actions to address other root causes of malnutrition, like chronic poverty, maternal health and poor nutrition practices⁷⁰.

Uncovering agriculture's true potential to reach poor communities where malnutrition is chronic, to increase family incomes and to diversify their diets, requires investment in broad-ranging, rigorous research. The institutional challenge is to formulate a more comprehensive approach to agriculture, which embraces nutrition as a development objective, and identifies potential "win-win" agricultural interventions that help to reduce child malnutrition⁷¹. Some of the key lessons⁷² about how such programmes should be designed are:

- **Take into account the specific agricultural and cultural contexts:** to benefit nutrition, there is a need to understand the major determinants of malnutrition;
- **Develop and implement agricultural programmes that enable and empower women.** Women have consistently been shown to be more likely than men to invest in their children's health, nutrition, and education. Agricultural interventions that increase women's income and their control over resources can dramatically increase the potential for positive child nutrition outcomes and health outcomes, and the results are most pronounced among the lowest income groups;

- Design agricultural programmes that integrate nutrition outreach and behaviour change;
- Monitor and evaluate results using nutrition-relevant indicators to adjust strategies.

A recent global review by Save the Children highlights additional ways of integrating agriculture and nutrition to achieve reduced child malnutrition⁷³.

4.3 Social Protection: Key to Overcoming Chronic Hunger and Malnutrition

The 2012 Sahel crisis starkly demonstrates the inadequacy of the current dichotomy between humanitarian relief and development for overcoming the structural causes of food insecurity and malnutrition. Social protection is one way to bridge this often lethal divide. Social protection refers to public actions taken to provide predictable and support for targeted individuals, households or communities to reduce, prevent and manage risks and vulnerabilities which are deemed socially unacceptable within a given society.

There are different types of social protection, including transfers, services, or insurance. Social transfers are “predictable transfers to households or individuals, both in-kind and cash, including public works programmes”⁷⁴. They entail distributing cash, food or assets – to targeted households, sometimes on the condition that recipients participate in employment or other activities – in order to protect them from poverty and promote productive livelihoods.

In the Sahel, social protection has conventionally been dominated by *social transfers*, usually in the form of short-term humanitarian relief, particularly food aid. However, there is increasing interest in social transfers as a longer-term mechanism to assist *chronically* poor households to increase their resilience to shocks, promote livelihoods, ensure access to health and education services, and to avoid harmful coping strategies. This is relevant because the increasingly frequent crises in the Sahel do not allow poor households time to restore their livelihoods before the next shock. Many of the poorest households are in a debt trap. They have extremely low levels of productive assets. Almost half of the rural population in the Sahel face structural food and nutrition insecurity with no realistic hope of escape on their own⁷⁵.

Countries in the Sahel are experiencing the paradox of strong economic growth even as food and nutrition security decreases. Since 2007, (excepting only Niger in 2009) real growth rates in most of the Sahel ranged between 3.5 and 9%. In 2011, the rates of real GNP growth in Mali, Niger and Burkina were 5.3%, 5.5% and 4.9% respectively⁷⁶. This is significant, even accounting for population increase. However, this growth is not producing commensurate progress in reducing poverty, or improving child nutrition. The Sahel remains plagued by persistent, intolerable levels of malnutrition. In West Africa, the average level of chronic malnutrition is estimated to have remained unchanged at 38.2% since 1990⁷⁷. In Niger, the high prevalence of severe acute malnutrition exceeded 12% since 2009 with a peak of 15% in 2010⁷⁸.

The Sahel crisis of 2012 is likely to dramatically increase the “resilience deficit” and the extent of vulnerability. Addressing this deficit calls for a *major paradigm shift in development aid*. Current development policies are leaving poorer households and malnourished children behind. Business as usual, or more and faster growth alone, will not succeed. A different development approach,

that includes social transfers designed to directly help the poorest families, is essential. Evidence indicates that if integrated into long-term, multi-sector development programmes led by national governments, social transfers can improve food and nutrition security⁷⁹, and generate pro-poor economic growth⁸⁰.

Part of this paradigm shift requires policy makers and donors to address chronic poverty and malnutrition as an integral part of development, and to treat drought as a predictable and manageable (rather than an exogenous, uncontrollable) event when designing development interventions. It also requires shifting resources for development, particularly moving from increasing overall agricultural production (i.e., availability of food) to initiatives for resilience (to improve access to food by the poorest households). This would involve using targeted social transfers to directly enable the poorest households to access food, protect their livelihoods, strengthen productive capacity, and overcome chronic malnutrition.

The current development strategy is based mostly on a *supply-driven* approach to hunger reduction concentrating on expanding agricultural production assuming this will eventually lead to reduced food prices. The current Sahel crisis highlights the major limitations of only adopting a supply-driven approach. Clearly, the poorest 25% of small-scale farm families in the Sahel are being left behind. To end chronic hunger, the strategy should also focus on translating unmet food needs into incremental *demand* and to use this to stimulate agricultural growth, focused on local nutritious food. A social transfer programme, targeted on chronically poor households and vulnerable groups, including children under five, could achieve this by enabling them to access the food they need for a healthy and productive life. If the incremental demand for food generated by such a programme is deliberately sourced mainly from local small-scale farmers, it can also become an important driver of broad-based rural development.

The lack of a comprehensive, targeted social protection programme addressing chronic hunger and malnutrition, adapted to specific geographic and livelihood contexts within the Sahel, allows the resilience deficit to grow. There is increasing interest in exploring public interventions that can achieve positive synergy between social transfers, pro-poor rural economic growth, and improved nutrition by supporting people through short-term crises while at the same time reducing their long-term vulnerability in a comprehensive way.

In the Sahel, the main type of social transfers for addressing hunger are short-term “safety nets”⁸¹ that provide food during emergencies. A study conducted in 2010 by the WFP⁸² in Niger revealed that such measures ensure households’ immediate access to food, but fail to ensure the recovery of the households most affected by recurrent shocks. Long-term social transfers are needed. However, in most Sahelian countries, longer-term social transfers are either nonexistent, or piece-meal and uncoordinated. They have uncertain financing and very limited coverage⁸³.

With the exception of Niger, governments in the Sahel remain sceptical about long-term social protection mechanisms, fearing their cost, the administrative complexity of delivery, and possible negative impacts on beneficiaries (dependency on grants rather than self-reliance, and the erosion of informal

Selected Lessons from Experience in Social Safety Nets

Safety nets must be available on a continuous basis to help build vulnerable people's resilience to individual shocks: People facing deprivation and poverty on a chronic basis far outnumber those who are affected by the type of crises that make news headlines.

Develop the crisis readiness of safety nets: Effective crisis response requires the ability to scale up programmes rapidly and to design conditions under which scaled-up programmes are rolled back when the acute crisis abates.

Effective safety nets should have pre-established crisis response procedures in place: This includes well defined triggers for returning (once temporary shocks have passed) to normal benefits, coverage and rules.

Safety net programmes should be placed within the context of broader social protection programmes. They need to be established for coherence and synergy with other policies and be supported by complementary measures aimed at improving productive work and "graduation" of beneficiaries.

Targeting for Safety Nets using Household Economy Assessment (HEA): To maximise effectiveness, safety nets should be targeted at the most vulnerable families. One of the best available tools for this is the HEA analysis. It is designed to capture how families are likely to respond to shocks, including: the extent of reliance on food purchases rather than own food production, how families' income is generated, and how the market is functioning. In 2011, Burkina Faso used HEA across the country to identify who has the greatest need and who should be prioritised in the emergency response programmes. Save the Children's experience in working with governments in Mali and Niger has demonstrated that the HEA can be invaluable in helping target social transfer programmes.

support mechanisms)⁸⁴. There is even a trend to reduce spending on social protection. For example, Senegal reduced its spending on social protection from 11.73 billion CFA francs in 2008 to 6.15 billion in 2012. This halved social protection spending from 0.18% to 0.09% of GDP⁸⁵.

Regional Process to Adapt Social Transfers for Resilience Led by the European Commission

To help overcome such reservations, in April 2012 the European Commission initiated a regional strategic reflection conference, including national and regional level actors, which addressed how social transfer systems could overcome both cyclical and structural crises in the Sahel. The EC drafted a reference document for the event, presenting basic concepts and field experiences in establishing a permanent social transfer system⁸⁶. The seminar concluded with recommendations for establishing national level social transfer programmes on a multi-annual basis, and the directions for the EC's future support⁸⁷. The box below lists some of the key lessons for policy makers.

Addressing concerns about sustainable financing of social protection, one of the documents reviewed at the seminar noted that certain broad social benefits, such as food or fuel subsidies often consume large resources that benefit mostly the better-off. These resources could be used more equitably and efficiently with more targeted social transfers. For example in Burkina Faso, total spending on safety net programmes was almost one percent of GDP by 2010. But Burkina Faso's resources for social transfers were thinly spread across many different programmes, including fuel subsidies that benefited almost exclusively the well-off⁸⁸.

How Social Protection can Protect Child Well-Being during a Crisis

Demographically, children make up a very high percentage of the population (an average of 50%). The chronic crisis in the Sahel negatively affects children in numerous ways. West Africa, including the Sahel has the highest under-five mortality rate in the world⁸⁹, lags far behind in universal primary education⁸⁸ and has a high child stunting (38%) rate. In Mali about half of all children perform hazardous labour. Many children start working as young as the age of five in agriculture, domestic labour, small-scale gold mining, commerce and fishing. Such work severely impedes children's access to education. Some children are trafficked into exploitative work situations⁹¹.

Children and their care-givers face multiple and often intersecting vulnerabilities and risks that worsen during a crisis⁹² (Annex C provides an overview of these). For example, according to the Niger Ministry of Education, 47,000 children have been obliged to abandon school in 2012 because of the current food crisis. In Tillaberi alone, one of the most affected regions, over 22,000 children have left school. This is either a result of being too weakened by hunger to attend class, or because they have to move away with their families, who are seeking work in the cities⁹³. This suggests that child labour, rooted as it often is in household poverty, would worsen as household food security decreases⁹⁴.

Existing child-related social protection initiatives in the Sahel include cash transfer programmes, health insurance schemes and various fee exemptions aimed at facilitating access to essential health services and basic education⁹⁵.

Oumar's Story

Just 4 months ago, Oumar Soumana, 12 years old, was living happily with his family in Damana, in the southwest of Niger. However, because his family ran out of food, Oumar had to leave school and look for work in Niamey, the capital of Niger. He now spends his days walking, in the oppressive heat, up and down the dusty streets, with a cold box on his shoulders. He is selling small sachets filled with cold fruit juice. For this work, Oumar earns about 20 US dollar a month, plus his meals. Two of Oumar's sisters are also in Niamey, working as domestics.

“It is tiring work. I spend the whole day walking. I cannot really rest because I have to make sales and bring back enough money. Otherwise my salary will be reduced. I wish to do everything possible to earn enough” says Oumar. He and his sisters send their money to relatives back to their village to help them buy food.

Every evening, after work, Oumar walks to a temporary squatter camp on the outskirts of the city, where many rural migrant families also live. The camp has no running water or sanitation facilities. Oumar knows what he is losing by giving up school. He had dreams of becoming a teacher. Oumar states that: or, *“Thanks to education, one can get good work and have a better life”* In June, when the rains begin, Oumar plans to return to the village to help his father in the fields. *“It will be better than trying to earn money by selling in the streets. Here I am suffering”* says Oumar.

Source: UNICEF: Laura Huyghe et Shushan Mebrahtu Niger, les enfants sont obligés de quitter l'école pour aider leur famille (available at <http://reliefweb.int/node/494187>).

Most of these remain small pilot initiatives funded by donors but with limited government resources. The current Sahel crisis underscores the urgency of a *more comprehensive, child-sensitive approach to social protection* to address the resilience deficit.

Early marriage is another major problem affecting child well-being. Upon seeing girls as young as eight being treated almost as items to be bought and sold for marriage while on a recent trip to Niger, Justin Byworth, Chief Executive of World Vision UK, noted that when an economic crisis or food shortage occurs, children can all too easily become commodities.⁹⁶ Research is needed to determine the possible link between growing food insecurity and increased early marriages in the Sahel.

A Save the Children report in Niger argues that the scale-up of emergency programming in response to the current food crisis offers an opportunity to strengthen child protection mechanisms within a more comprehensive social protection system, particularly at the community and district levels. This would involve support for health, water sanitation and hygiene facilities, and nutrition services in order to ensure that children's protection and welfare needs are better met during and beyond the emergency phase⁹⁷.

According to an Overseas Development Institute (ODI) report, there are a number of opportunities and entry points for strengthening linkages to address children's vulnerabilities in a more integrated way. One is to make eligibility for social transfers, such as cash transfers to poor households, conditional on child protection-related behaviours. This includes registration of children's births as well as requirements such as vaccinations, health check-ups and school attendance. A child-sensitive social protection programme could also help households avoid resorting to negative coping strategies harmful to children such as pulling them out of school and involving them in child labour⁹⁸. Another suggested conditionality is delayed early marriage for girls.

There should be caution, however, in using conditionality as a default option for social transfers, as highlighted in Save the Children's recent report "*A Chance to Grow*"⁹⁹. The report highlights their greater cost to monitor; lack of capacity to administer; creating undue burdens on beneficiaries; feasibility of meeting conditions in difficult contexts; risks that conditions may prevent participation. It also highlights the uncertainty as to whether observed positive effects were due to the conditions or just to the transfer alone.

Using Social Transfers to Tackle Chronic and Acute Malnutrition in a Context of Growing Poverty

Given the emergency levels of child malnutrition even in good years, it is essential that a more comprehensive social transfer programme be *both* "poverty and nutrition-focused". Evidence from the Sahel clearly shows that, in most contexts, levels of child malnutrition are higher in very poor households, who simply cannot afford proper feeding practices (i.e. providing young children with nutritious food, particularly meat and dairy products) necessary to grow and thrive¹⁰⁰. Child nutrition can be enhanced by using social transfers that both promote improved nutrition behaviours and also provide the poorest families with the resources needed to apply them.

Cash transfers as part of a humanitarian response

Harira and Chaibou have five children, two of whom are old enough to go to school. Their family is one of the poorest in the village, their income coming from the sale of sticks and straw, on average about seven hundred francs CFA (around \$1.50) each week.

In a normal year the family produces 30-35 bundles of millet (weighing 15 kilos each) but this has recently been drastically worse: "It has been the worst year I have seen since my marriage," Chaibou, the father, explained. "This year I harvested only seven bundles of ten kilos each. This is what pushed me to leave the village in January and go to Nigeria for work."

Although he leaves the village to find work almost every year, this year's exceptionally poor harvest meant he was forced to leave far earlier than normal so that his family wouldn't go hungry. Thanks to the Save the Children emergency cash transfer scheme Chaibou has also been able to return from Nigeria, where the security situation is particularly insecure, and Harira has been able to buy enough food so that both her and her children will have something to eat during the critical lean season.

"This support allowed our children to enjoy three meals a day which are more nutritious than before, when they only got two meals a day," said Harira.

Source: Save the Children

An evaluation of Save the Children's programme in Niger found that households used cash transfers to buy staple food, millet, but also locally available food such as cow's milk, meat, groundnut oil, cowpeas and pancakes. Spending on nutritious foods increased considerably after distribution of the transfer. A synthesis report on World Vision's cash transfers in emergencies also found evidence that cash was spent on more diverse food¹⁰¹.

Finally, in a global study¹⁰², Save the Children uses wider evidence to define five key design characteristics of social transfer programmes that can maximise positive nutrition outcomes. This evidence indicates that well targeted long-term social transfers reflecting the cost of a nutritious diet can have a sustained impact on nutrition, if linked with wider nutrition packages and if delivered in a predictable and convenient way. Another important step was to ensure that the transfer enhanced women's control over family resources and diets¹⁰³.

Summary of the Role of Social Protection for Resilience

Social transfers can mitigate crises before they happen and promote communities' resilience to future shocks, to not just protect but strengthen the livelihoods of the poorest households. Social transfers can help reduce the need for male migration during the growing season in search of income to buy food, a practice that leaves women with greater workloads and responsibilities. Reduced migration could facilitate poorer families making greater investment in their own land, rather than hiring themselves out for food, and to invest in improved farming practices such as soil and water conservation, or FMNR. Social transfers are not the whole solution to building resilience. But by protecting people from the worst effects of the chronic hunger crisis, they can provide a solid platform upon which longer-term, transformative livelihoods, and improved child nutrition work can be built.

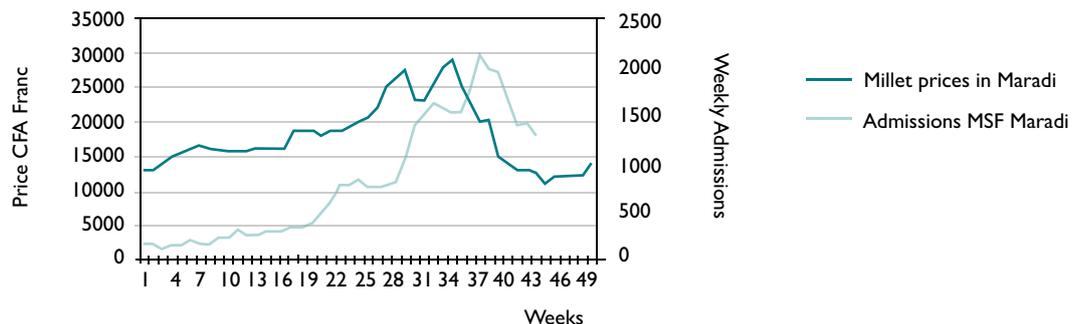
4.4 Tackling the Problem of Rising and Volatile Food Prices

As described above, sharply rising food prices can dramatically expose the deep resilience deficit in the Sahel. The exceptionally high prices of basic foods in Mali, Burkina Faso, Niger and Chad have become one of the most alarming features of the current Sahel crisis. For example, in Burkina Faso's capital, Ouagadougou, local millet has risen to 85 percent above the five-year average. In Mali's capital, Bamako, it is more than double. Prices are expected to keep rising during the lean season, which ends in August. The size of the price hikes in April has surprised both governments and humanitarian agencies. Household Economy Studies across the Sahel indicate that such high food prices push more of the poorer rural households, who buy more than 60% of their food on the market, into hunger. This is part of a much wider trend. In 2011, global food prices reached a record peak.

Effects of High Food Prices on Child Malnutrition Rates

Evidence shows that high food prices are strongly correlated with increased child malnutrition. Data from MSF from Niger in 2006 show a startling correlation between millet prices and number of admissions of children with acute malnutrition. Since wages rarely rise quickly, high food prices clearly reduce people's access to food, and in the absence of adequate preventive targeted measures, directly trigger malnutrition, and in turn the death of children¹⁰⁷.

Below: Millet prices and Admissions of Malnourished Children, Maradi



Source: MSF France in Humanitarian Exchange, Number 33, March 2006, page 21

Children of poorer households have much higher levels of malnutrition compared to better off households¹⁰⁸. One likely contributing factor is that poorer households buy 60-80% or more of their food on the market to supplement their own produced food.

Policy Initiatives to Prevent the Impact of Rising and Volatile Food Prices on Vulnerable Groups

Conscious of the devastating impact of high food prices in the absence of rising wages, governments across the Sahel in 2012 have undertaken temporary policy measures such as subsidies or reduced taxes on cereals to reduce prices, particularly making subsidised grain available¹⁰⁹. Such general measures to control high food prices are expensive because better off households also benefit. They can be counter-productive because blocking borders may increase prices as traders try harder and pay more to get around them. Finally, they are ineffective because the poorest households, who often cannot afford even subsidised food, do not benefit¹¹⁰.

Failure to Control Prices in Chad:

"Women and children are the most vulnerable layer of society. A situation like this, where food shortages lead to prices rising between 100 and 200 percent, has devastating effects and a negative impact on the weakest," said Marcel Ouattara, of UNICEF in Chad. When Chad formally declared a food crisis early in 2012, the price of a 100-kilo sack of grain (maize, millet, sorghum) was around 80 dollars. The Chad national office for food security, ONASA, began selling its grain at the heavily subsidised price of 20 dollars per bag. However, most vulnerable people simply don't have the money to buy food, even at the sharply reduced price. Also wholesalers seized the opportunity to buy so they can resell at the market price and triple their profits. The government has not acted against the traders who are gaming the system.

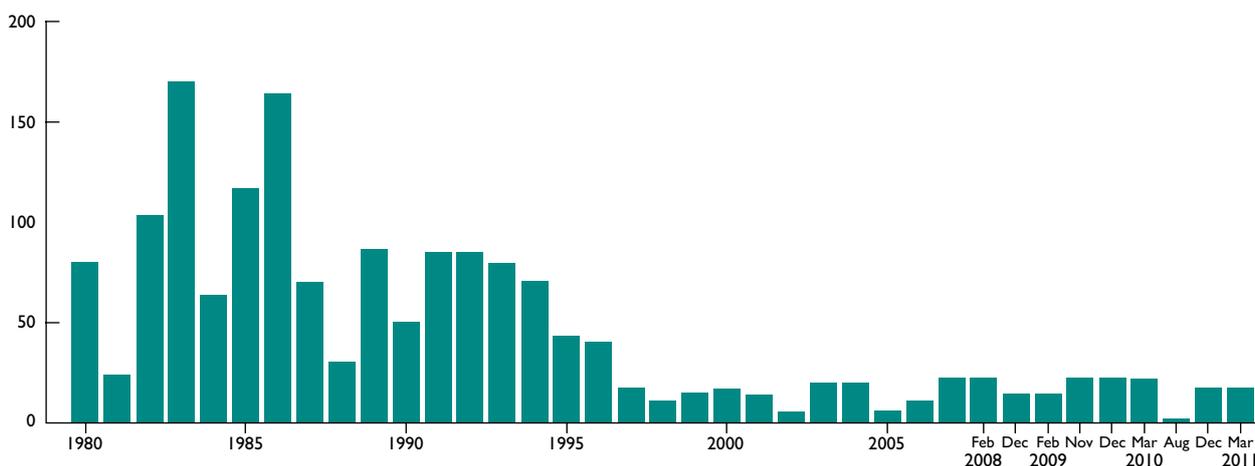
Source: François Djekombé Mothers Breaking Apart Anthills in Search of Food <http://www.ips.org/africa/2012/03/chad-famine-8211-mothers-breaking-apart-anthills-in-search-of-food/>

For these reasons, humanitarian agencies prefer more specifically targeted safety net interventions to support consumption at the community level. If food is available on local markets, such programmes provide cash or cash vouchers to households identified as being most vulnerable. Rapidly rising food prices, however, decrease the purchasing power of targeted households in receipt of cash transfers or cash vouchers. As it is not often feasible to index the cash transfers to the volatile prices, and especially food price spikes, the effectiveness of social transfer programmes are undermined.

Progress towards the Use of Public Reserves to Stabilise Food Prices

There is an urgent need for policy solutions to address the high and rising food prices that reduce access of poor households, who are net buyers, when wages for labour don't keep pace. It is increasingly recognized that this must be part of a comprehensive approach to resilience in the Sahel. At the G20 in 2011, high food prices and volatility was acknowledged as a major issue¹¹.

Below: Niger's food reserves all but disappeared after structural adjustment in the late 1980s and early 1990s



Source: Cornia, Deotti, and Sassi 2012.

The alarming food price increases in the Sahel in 2012 call for urgent action. One reason why it has been difficult to moderate prices in the Sahel is that governments' own national food reserves are currently so low¹². Figure 2 shows how Niger's food reserves have dwindled since the 1990s¹³. Governments are by far the biggest grain buyers in West Africa. As such, often the announcement of a food crisis is by itself sufficient for major grain traders to hold stocks, speculating that governments and aid agencies will be buying large quantities of cereals.

After the devastating food crisis of 2005, actors in the Sahel, including governments, started to reconsider how public reserves could be used¹¹⁴: first, as domestic price stabilisation tools; second, as a source of emergency food for humanitarian aid during crises; and third, as sources for food distribution programmes. For example, the ECOWAS Agricultural Policy of 2009 (ECOWAP) includes a reference to outlining a regulatory framework that will encourage the development of the establishment of a regional system of “buffer stocks” and “food security stocks.” Similarly, the Charter for the Prevention and Management of Food Crises, signed by the Economic Community of West African States (ECOWAS), the West African Economic and Monetary Union (WAEMU) and the Permanent Inter-state Committee to Fight Drought in the Sahel (CILSS), also provides a mandate for using food reserves as a way to manage food crises.

The G20 deliberations in 2012 opened up a window of opportunity for small regional pilot projects to test targeted increased humanitarian national and regional food reserves systems. This was proposed as an additional risk management tool in response to the expressed needs by affected countries¹¹⁵. Subsequently, the G20 agreed to support West Africa as one of the pilot projects. Unfortunately, the final proposal did not include provisions to meet the specific nutritional needs of pregnant and breastfeeding women and children less than two years of age in emergencies¹¹⁶.

This has given impetus to ECOWAS to move forward with developing a *mechanism of regional buffer food stocks to manage the risk of food insecurity and volatile prices*. In March 2012, delegates of 15 countries within ECOWAS signed a regional Framework of Cooperation for a regional food reserve. This agreement outlines the principles and mechanisms, and assigns the technical coordination and management of the regional food reserve to CILSS.

This is progress towards using public food reserves to stabilise food prices. However, at this stage it is a very modest initiative. Seven countries (including Niger, Mali, Senegal and Nigeria) have agreed to put aside 5% of their existing national food reserves for regional use. There is an urgent need for the participation of other coastal countries, such as Ghana, who normally supply the structural deficits of the Sahel.

While a positive step forward, the regional capacity to control food prices and overcome market failures will require significant increases in the available food reserves. The current situation of extreme price spikes, almost 100% greater than the five year average in Mali, strongly indicates the need for a much more robust public mechanism using food reserves. Without such a mechanism, all other elements in a comprehensive and systematic approach to resilience will be greatly undermined.

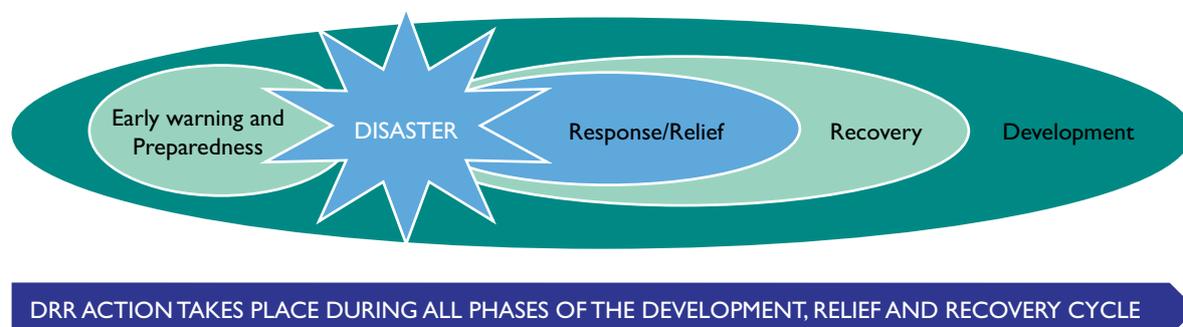
4.5 Disaster Risk Reduction for Resilience

Disaster Risk Reduction (DRR) is a systematic approach to minimising vulnerability and disaster risks to individuals and communities through a broad range of actions that include preparedness, early warning, mitigation, and prevention. DRR actions and processes are very closely associated with achieving “resilience”, and therefore should be examined for their contribution to ending the everyday emergency in the Sahel. A key focus of DRR is strengthening the capacities of communities themselves to do more in reducing their risks to shocks¹¹⁷. In the context of the Sahel, in which drought

is seen as the major risk, DRR and Climate Change Adaptation interventions are focused mostly on *ensuring food security* while protecting lives and livelihoods of vulnerable communities¹¹⁸.

Many actors have developed specific DRR strategies for the Sahel. In Niger, the FAO has developed an Action Plan for Disaster Risk Management 2012-14 to reduce vulnerability, and improve crisis response. This plan includes agricultural, livestock and nutrition interventions, and assistance with quick rehabilitation and recovery¹¹⁹. At the regional level, the FAO has prepared a flexible, iterative, and long-term “before, during and after” response programme. This consists of a “dual track” approach, which combines increased food production/protection of livelihoods with social protection measures for the most vulnerable¹²⁰. However, FAO’s tendency to focus mostly on inputs (seeds and fertiliser) does little to reverse degradation of agricultural soils, loss of protective woody vegetation, and deterioration of grasslands/pastoral ecosystems, which are critical to increasing resilience to environmental shocks.

Below: WFP Disaster Risk Reduction and Management Diagram. Source: WFP (Sept 2011) *Policy on Disaster Risk Reduction and Management: Building Food Security and Resilience*



The WFP also considers the delivery of disaster risk reduction services and outcomes as important to its mandate¹²¹. In both emergency and development contexts, the overall aim of WFP assistance is to build the resilience and self-reliance of the most food-insecure populations¹²². Instead of treating disaster preparedness, mitigation, response, recovery, and development, as separate elements in a cycle, WFP asserts that its DRR approach integrates these elements within a continuum (see Figure above). However, this approach still assumes even progression towards development: the outmoded ‘relief to development’ paradigm.

Signs of Progress

For the 2012 Sahel crisis, it is too early to assess if DRR related activities aimed at protecting livelihoods and assets contributed to increased resilience before the crisis, or the prevention of further erosion of resilience. However there are signs of progress:

- **Early warning systems** across the Sahel functioned relatively well (although there was difficulty harmonising with the FEWS Net analysis). Most governments in the region raised the alarm quickly.
- **Safety nets are increasingly seen as an important policy option for managing natural disasters and for pro-poor climate change adaptation in situations of entrenched poverty.** During crises, safety nets are targeted at the most vulnerable, and are seen as the way to make the transition to the rehabilitation and recovery phases¹²³.

- **DRR is starting to be integrated into both long-term development work and humanitarian response** through long-term, flexible programmes to reduce the risks to livelihoods and address nutrition security. Examples include the FAO, the 3N Initiative of Niger and European Commission initiatives in Nutrition and Social Protection
- **Systematic assessment of programmes' impact on resilience:** e.g., Catholic Relief Service undertook a study in April/May 2012 in Niger to assess the resiliency of selected households that benefitted from their Multi-Year Assistance Programmes (MYAP) in the Sahel, as compared with households who were not supported in this way. In a drought situation, the study assesses to what extent MYAP participant households retained livestock and maintained food security without depleting assets, as well as whether they retained dietary diversity and reduced dependence on food aid compared to non participants¹²⁴.

Reasons why DRR has Limited Impact on Strengthening Resilience

While encouraging, the effects of such changes within DRR to address the resilience deficit are modest. The DRR thinking about drought adopted by many actors in the Sahel often does not:

- **target the distinct livelihood needs of the most vulnerable households** or tailor activities to address equity through “twin track” interventions, with one track directly strengthening the productive capacity and livelihoods of households deeply trapped in the hunger cycle;
- **develop capacity for contingency planning and effective action** particularly at the community and district government levels;
- **adequately address the structural causes of vulnerability** including degraded agro-ecosystems, soil and water erosion, and high population growth rates;
- **resolve the underlying dynamics that can easily erupt into conflict** with devastating impacts on community resilience. Mali is the most recent, high profile example. However, investment in peace-building is needed to prevent more localised conflicts between nomadic and pastoralist communities, ethnic groups and the spill over effects from Mali, Chad and Nigeria;
- **transcend** the outmoded “relief to development paradigm”. Most initiatives still seek to manage the *crisis*, rather than the *risks*¹²⁵.
- **treat drought as a recurrent and natural event affecting production and livelihoods.** Instead it is still considered an unplanned interruption to development. Across the Sahel, development work is not designed to expect, prepare for, and mitigate the risk of a drought triggered disaster.
- **receive agile and flexible funding that allows for the inclusion of crisis modifiers** and costs for recurring crisis response in multi-year development grants and programming;
- **systematically assess development impact in terms of risk reduction or strengthened resilience** (i.e. change in livelihoods, diets and assets of the poorest households – CRS, study is an exception).

In summary, DRR thinking has not yet been adapted to the conditions of the chronic, increasingly complex emergency in the Sahel. At best, DRR seems only to be slowing the accelerating erosion of resilience.

The Silent Risk within the Resilience Deficit: Child Malnutrition

There is growing awareness of the need to put children at the heart of disaster risk reduction (DRR) and climate change adaptation, because the impacts of shocks are often most severe on children. Children are especially vulnerable during disasters, particularly those caused by conflicts. They have specific needs for protection during and after crises. Efforts to link children, climate change and disasters have mainly focused on ensuring a child's basic right to survival and development in disaster preparedness and ensuring child protection during relief and rehabilitation efforts¹²⁶. The "Children's Charter: An Action Plan for Disaster Risk Reduction for Children by Children" promoted by World Vision, Plan, Save the Children and UNICEF strongly advocates that governments, donors and agencies take steps to protect children and engage them in DRR and Climate Change Adaptation initiatives¹²⁷.

In the Sahel, however, chronic and acute malnutrition are the greatest risks for children. According to *The Lancet*, moderate acute malnutrition (MAM) increases the risk of infantile deaths by a factor of 2.5. Severe acute malnutrition (SAM) increases this risk by 9.7 times¹²⁸.

Not integrating nutrition activities to help reduce these risks of child death, and of physical and cognitive impairment by malnutrition, is a major failing of DRR/Climate Change adaptation in the Sahel.

There are many reasons for this failure. DRR response to drought in the Sahel, while considering nutrition, is still largely driven by structures operating in a food security paradigm¹²⁹ i.e. to cover food deficits¹³⁰. The reality is that achieving food security is a necessary but not *sufficient* condition to improve nutrition. Assessing the effects on nutrition is not yet adequately considered when evaluating DRR or food security initiatives.¹³¹ However, drought presents multiple threats to lives and livelihoods – it does not exclusively affect food security¹³².

Reducing the risks to children from malnutrition must become better integrated into preparedness and prevention efforts of both DRR and Climate Adaptation policy and strategies.

4.6 The Role of Early Response for Resilience

Early response is a critical component for achieving resilience and breaking the cycle of hunger. If the response saves lives, but leaves people destitute, erodes their livelihoods and ability to cope with future shocks, then all other investments in a comprehensive system for resilience are undermined.

Unfortunately, earlier crises in the Sahel have been characterised by a lack of early action to prevent massive loss of livelihoods in rural and pastoral zones. In 2010, a slow response resulted in unnecessary suffering, a loss of assets by poor households in both agricultural and pastoral areas, a huge increase in the level of need and a significant rise in costs¹³³.

Severe Coping Strategies in Niger

It's a Saturday afternoon and 13-year-old Lajoie has just returned home. She has been walking around the bush and climbing trees after roaming the countryside of Niger's Dosso region. She unfurls an apron-like cloth tied to reveal a clump of small green leaves that she has gathered. Called Danya leaves, the plant will help feed Lajoie and the rest of her family who have little else to sustain themselves. The leaves, which are said to have an acidic taste, will be mixed with cassava to bolster a meagre meal.

'We are eating them just to fill the gap,' explains Leatou, Lajoie's mother, who says they have been consuming these particular leaves for two weeks but have eaten other types since December. Leatou and her five children are eating just once a day. The lack of nutrition is clear from their demeanour and languid body movements. Leatou's husband went to Nigeria 5 months before, but has not been able to send much money. Wracked with hunger, Leatou says: *'I feel weak and tired but if someone asks me to go and work for them I will do so but it's hard.'*

Source: ReliefWeb May 2012. Tear Fund. Drought-hit family forced to eat wild leaves

In 2012, the response in the Sahel has been faster and better than in 2010. UN agencies, including OCHA, UNDP and national early warning systems, have collaborated in developing regional and national level contingency plans and simulation exercises. Most governments in the region raised the alarm and mobilised their response plans quickly. The most dramatic improvement has been in the attitude and thinking of the new government in Niger. Already in September 2011, in response to early signs of a poor harvest, the Prime Minister convened a meeting of donors, ambassadors and the UN missions, to advocate for preparedness. At the end of September the President of Niger, in a speech to the United Nations in New York, requested international assistance.

This contrasted sharply with Burkina Faso. Although it developed its internal response plan in November, the Burkina government, possibly because of political concerns, hesitated to make an official international appeal. It was only later in March, when large numbers of refugees from Mali started crossing the border, that the Burkina Faso government declared an emergency¹³⁴. However, a major sign of progress in Burkina Faso was the systematic use of the Household Economy Assessment (HEA) across the entire country for predictive livelihood analysis. This generated a much more accurate assessment of vulnerability for agencies to use for targeting and planning the response.

Building on their own assessments and lessons learned in the Horn of Africa response, and perhaps also influenced by criticism of late action in the Horn of Africa, particularly that made in the *'Dangerous Delay'* report¹³⁵, key humanitarian donors including the UN Central Emergency Response Fund (CERF) the US Office of Foreign Development Assistance (OFDA), European Community Humanitarian Office (ECHO), and the British Department for International Development (DFID) provided funding rapidly¹³⁶. However, several informants indicated that donor response was initially delayed by problems in harmonising the analysis of FEWS Net with that of other early warning agencies¹³⁷.

Despite the early and good start, by June 2012, as the affected populations in the Sahel enter into the most critical period (the lean season, when the rains and farm work begins) there remain huge gaps to fill and areas to

strengthen quickly if the humanitarian response is to effectively meet the needs of the most vulnerable households. In early June 2012, the sum of all the consolidated appeals (CAP) for the Sahel in 2012 totalled 1.5 billion dollars¹³⁸. Of this, only 39% had been funded by June. Niger's CAP of 450 million was 34% funded. Mali's CAP of 118 million (to be revised in June because of the security situation) was 44% funded. Burkina's CAP of 126 million was the most underfunded at 27%.

A continuing major weakness of early response in the Sahel is that the amount and speed of funding is highly influenced by media reports, rather than by technical assessment of need.

As this report is being written, it is too early to determine whether this response will be effective to protect livelihoods, avoid severe coping mechanisms, prevent an irreversible loss of assets and also prevent an anticipated huge spike in Acute Malnutrition. However, as the poignant story of 13 year old Lajoie of Niger reveals, (see side-bar) poor harvests and severely high food prices are already forcing some vulnerable Sahelians into distress responses and hunger.

A study in Niger conducted by the Assessment Capacities Project (ACAPS) and the Emergency Capacity Building Project¹³⁹ found that many families haven't recovered from the 2005 and 2010 crises. A full 100 percent of families surveyed said they have already reduced the amount of food consumed each day because they do not have enough to eat. Key findings included:

- Nearly one-third of the population were still in debt from the last crop failure in 2009.
- Approximately 80 per cent of people did not have enough seed stored to plant for the next season, putting people at risk of hunger next year.
- Many households were being forced to sell their animals to buy food, which is flooding the market and causing livestock prices to plummet.
- Communities said instability in neighbouring countries is making things worse. Wages have plummeted because people cannot move freely for work

The findings of the ACAPS study in Niger highlights the growing resilience deficit generated by increasingly frequent crises, which gave no time for vulnerable households to recover. In such a situation, *even a much more rapid, well resourced, and effective "response system" cannot prevent further erosion of livelihoods and assets.* The current deep level of vulnerability in the Sahel highlighted in this study cannot be overcome through humanitarian aid alone, even with rapid response. There needs to be an on-going, long-term response addressing root causes.

5 | CHALLENGES TO OVERCOMING THE RESILIENCE DEFICIT

No single organisation can address all aspects of resilience. Small-scale initiatives by single donors or government departments or NGOs will never be adequate to achieve resilience. No one actor is fully in charge of managing the system required to achieve resilience, or can break the hunger cycle. Individual agencies may not even see themselves as part of such a system. There is no clear agreement about what the 'system' for resilience is, who is in it, and what it is supposed to do¹⁴⁰. The current approach to resilience in the Sahel is highly fragmented and ineffective. There is no consensus on what resilience would look like if achieved, and how to monitor or assess it. Actors differ in the dimension of resilience they focus on, the beneficiaries and geographic areas they target, and their favoured solutions.

Resilience has become everyone's concern, but nobody's full responsibility.

Strengthening resilience will require a coordinated and consensual shift in the way different actors work with each other at different levels¹⁴¹. Significant, lasting results require all organisations working to strengthen resilience to recognise that there are many different factors to address. In each context, there is a need for integrated analysis to improve ways of working across multiple disciplines, and the development of systems that can adapt to complex changes in local circumstances. The first step is for actors to meet to reach consensus on what a comprehensive and systemic approach to resilience entails, where and how each organisation can add value and generate synergy.

The workshop organised to obtain "on the ground" perspectives about resilience in Niger is a very modest, but relevant, example of bringing together different actors. This half day workshop was attended by 12 international NGOs in Niamey on May 15. The process of group work generated many important insights which informed the writing of this report. Although there was insufficient time to forge a consensus, this workshop generated broad

agreements about the way forward. Annex D contains a summary of the participants' critical assessment of progress, opportunities and major challenges of promoting resilience in the context of Niger.

A relevant model of how to reach such a consensus is outlined in the April 2012 Inter-agency document "*The Characteristics of Resilience Building A discussion paper*". Composed of more than 10 organisations¹⁴², this inter-agency working group has developed a common understanding of resilience-building. They have also identified some of the urgent and fundamental changes needed in their approaches to deal with complexity, based on better cross-sectoral collaboration in analysis, planning and implementation for resilience-building.

In the Sahel, meeting this challenge would be more complex because of the multiplicity of actors who need to work together to break the cycle of food and nutrition crises (i.e. ensure the system's ability to deliver resilience). In practical terms, the best way forward would be for a country-led programme involving major actors to agree on the parameters of a system to achieve resilience, collectively undertaking what Simon Levine calls "systems thinking"¹⁴³ and developing innovative cross-institutional initiatives in specific geographical areas where vulnerability is greatest.

Below: In between visits to the nearest World Vision health centre, which is 10km away, Rashida finds sustenance in the locusts collected by her 11-year-old brother Salissou.
©2011 Chris Sisarich/World Vision



6 | RECOMMENDATIONS

As the 2012 Sahel crisis enters its most critical stage, the main actors are giving urgent attention to determining how to break the cycle of chronic hunger and malnutrition. At the high-level inter-ministerial meeting on the regional food crises in Lome on Tuesday, 5th June 2012, co-financed by the ECOWAS and UEMOA Commissions, there was a strong appeal for concerted measures to address the root causes of recurrent food and nutritional deficiencies in the Sahel and West Africa and for coordinated mobilisation of resources to ensure the consistency and efficiency of sustainable development¹⁴⁴. **There appears to be growing political will that is creating a window of opportunity for change.**

There are two basic ways forward. One is “business as usual” perhaps with more funding, in which governments, the UN agencies and donors largely maintain their existing current institutional strategies and ways of working. The second way forward is to undertake a fundamental review and overhaul of the existing system and to identify and action the major changes required for a comprehensive, coordinated and multi-institutional approach to resilience. The UN in particular needs to take a thorough review of the way in which the international system approaches resilience and chronic food and nutrition insecurity in the Sahel. The outcome would be recommendations for radical reforms in how the UN system works in the Sahel, as well as how other donors like the World Bank contribute to resilience.

In the Sahel, there are few examples of communities in high-risk prone areas that have stopped, and then reversed the erosion of resilience of the most vulnerable households, particularly in reducing chronic hunger and appallingly high levels of child malnutrition.

The system has to change. More of the same will not end the everyday emergency, overcome the growing resilience deficit nor reduce chronic hunger and malnutrition.

One major system change is that national governments, with support from international organisations, must address the **needs of the chronically insecure**

populations, and the **chronically malnourished children** as a long-term priority within integrated humanitarian and development action, **not just during crises**.

The relationship between the government and its development partners is the starting point for change. The way forward entails all the key actors, including civil society, coming together; reaching consensus on what strengthened resilience would “look like” at the community and district level, analysing the strengths and weaknesses of the existing “system” to deliver resilience, agreeing on “system solutions” and testing their feasibility by piloting the agreed system changes in a major geographical and livelihood area.

There are precedents for such initiatives. One is the Scaling Up Nutrition movement, already noted above, which works to better coordinate action on nutrition. Also, within the Sahel region, the United Nations system has taken steps to mobilize key stakeholders to develop a longer-term strategy based on a greater synergy of actions, and a better alignment of resources and capacities towards resilience¹⁴⁵. Within Niger, the WFP helped convene a similar process of reflection on resilience, focused on how to address long-term structural problems, by integrating humanitarian and development action and seeking complementarities between actors, in selected geographic zones.

Despite these initial steps, and high level representation, the specific changes within the UN that will occur are still vague. There is little evidence yet of tangible, significant changes in the system to achieve strengthened resilience.

Below are seven recommendations outlining mutually reinforcing actions to be considered by actors at all levels for improving the existing, fragmented system for overcoming the resilience deficit and in doing so ending the everyday emergencies that threaten child well-being in the region.

I Make Reduction of Child Under-Nutrition Central to Resilience

Governments should:

- 1.1 Set national targets for reducing stunting and acute malnutrition (wasting) and national plans to achieve these**, in line with WHO's Comprehensive Implementation Plan¹⁴⁶ for Maternal, Infant & Young Child Nutrition that sets out six global nutrition targets to be met by 2025. These indicators should be included for assessing comprehensive initiatives to promote resilience.

Governments, Communities and their UN and NGO partners should:

- 1.2 Prioritise action to improve nutrition, particularly for children under the age of two and pregnant women.** National multi-sectoral nutrition plans should be developed or reviewed in line with the proven evidence-based solutions of the Scaling Up Nutrition framework to significantly improve child nutrition within the 1,000 day window of opportunity. Donors should provide increased and harmonised funding behind these costed national nutrition plans.
- 1.3 Make reduction of child malnutrition a priority for programmes in agriculture, food security and new funds for scaling up social protection.**

These initiatives and funds must translate into effective, coordinated action at country level and be assessed also in terms of their contribution to reducing child malnutrition.

2 Harness Small-Scale Agriculture for Resilience and Improved Nutrition

Governments, Communities, and their UN, donor, and NGO partners should:

2.1 Ensure that improved sustainability and longer-term resilience, not just productivity, are explicit objectives of agricultural programmes.

Investment should be scaled up in low cost sustainable agriculture “re-greening” technologies, particularly Farmer Managed Natural Regeneration and complementary soil and water conservation techniques, that are proven to increase the own food production and income of poor households while regenerating the natural resource base.

2.2 Ensure agricultural programmes have a “dual track” that specifically targets the needs and opportunities of poorer rural households. Ensure they also benefit by monitoring their increased food production and income.

2.3 Ensure that women farmers also benefit from agricultural programmes. Identify and overcome barriers for women farmers created by gender inequalities in the design of agricultural programmes (e.g. access to land, credit, extension services and inputs).

2.4 Adapt and apply key lessons to develop a more comprehensive nutrition-focused approach to agricultural development:

- Ensure improved nutrition is an explicit objective of agricultural programmes;
- Monitor and assess outcomes using nutrition-relevant indicators to help adjust strategies;
- Take into account the specific agricultural and cultural contexts: analyse the major issues and problems that need tackling in order to improve nutrition;
- Integrate nutrition education and communication for behaviour change within agricultural extension. Ensure that care-givers, families and communities learn about the value of producing and preparing nutritious food and to use the income they have generated to purchase the right kinds of food for a healthy, diverse diet;
- Integrate agriculture with complementary and proven nutrition activities that focus on healthcare, care-giving practices, nutritional supplements and access to water, sanitation and hygiene facilities;
- Prioritize involvement of women in agricultural initiatives that include improved nutrition.

3 Invest in Social Protection and Services for the Poorest Households

National governments should:

3.1 Recognise that the chronically food-insecure and malnourished people, who are trapped in the hunger cycle, have specific needs that are different from those people periodically hit by shocks or those people in developmental stages (i.e. not yet in the hunger cycle).

3.2 Provide strong leadership to produce a national vision to establish an inclusive, broad-based, social protection system that protects the poorest households and children from extreme deprivation, and provide opportunities for the promotion of livelihoods and productive activities. Countries can gradually build financial and administrative capacity by progressively rolling out programmes to reach more vulnerable groups, geographically or by age.

National governments, donors, UN agencies and NGOs should, in each country context:

3.3 Ensure child nutrition is central to a comprehensive social protection scheme by enhancing and complementing existing nutrition policies to produce mutually reinforcing outcomes:

- Include a nutrition education component to reach children under two, adolescent girls, pregnant women and breastfeeding mothers;
- Improve the availability and quality of healthcare by removing user fees for essential healthcare services; increase birth registration; improve water, sanitation and hygiene services;
- Link cash transfers to the cost of a nutritious diet and provide flexibility to respond to fluctuating food prices.

Regional organisations (ECOWAS, CILSS and WAEMU) with mandates from member governments should:

3.4 Strengthen their role in advocacy in favour of effective and adapted use of social transfers in the fight against hunger and malnutrition (notably through policy dialogue with member states).

Technical and financial partners should:

3.5 Increase their investment in social protection programmes:

- Give particular attention to areas with emergency levels of acute and chronic malnutrition; Provide better alignment of and greater flexibility in development aid to foster the establishment of predictable, multi-annual social transfer programmes that can be scaled up when crises occur;
- Strengthen the capacity of many government institutions (and where necessary NGOs) to oversee operational research for best practices and policy guidelines for social protection and develop effective monitoring, evaluation and learning mechanisms to track progress.

International and national NGOs and Civil Society should:

3.6 Conduct operational research, adapted to each country context, of best practices and policy guidelines for how social transfer programmes can improve resilience and strong nutrition outcomes:

- Build a stronger evidence base to compare alternative designs with different types of complementary programmes, particularly for child nutrition, against their cost;
- Identify knowledge gaps by systematic national stock-taking and experimental work on productive social protection;
- Promote knowledge sharing about ongoing social protection initiatives.

4 Prevent the Devastating Impact of Rising Volatile Prices on Poor Households

Regional structures, governments and UN partners should:

4.1 Scale up and support strategic and emergency food reserves (EFR) at the regional and national levels, as provided for in the Regional Compact for Implementation of ECOWAP/CAADP.

- Build on the agreed Framework of Cooperation of March 2012 to help stabilise food prices and overcome excessive prices caused by market failures;
- Ensure that the Emergency Food Reserves (EFRs) programme in West Africa includes strategies to also meet the specific nutritional needs of pregnant and breastfeeding women and children less than two years of age in emergencies.

4.2 Develop and apply a comprehensive set of policy measures to tackle the causes of high and volatile food prices, particularly limiting the use of government export bans.

Governments, UN partners, donors and International NGOs should:

4.3 Index cash transfers of safety nets and social transfers to food price inflation particularly in contexts of rising food prices, or introduce alternative modalities such as a combination of cash and food.

5 Increase Funding and Support for a Regional and National DRR Strategy in the Sahel

Governments, regional bodies and the international aid community should:

5.1 Improve systems to better integrate risk reduction in all its work (development cooperation, humanitarian response and recovery programming) through:

- investing significantly in people and partner organisations and reviewing organisational structures, policies and systems;
- including a preventative focus in humanitarian work on the basis of forecasts (including livelihood protection and 'no-regrets options');
- assisting communities and local government to prevent, mitigate, prepare and respond to crises.

5.2 Integrate conflict sensitivity into all DRR policies and programming.

- Base all work on a solid understanding of the underlying tensions and potential conflict cleavages, and as a minimum, avoid making those tensions worse;
- Where possible actively seek to address these underlying tensions, and build bridges between communities to build peace.

National governments and their partners should:

5.3 Develop a DRR capacity in all relevant ministries and systematically include contingency planning in the development of medium to long-term programmes to reduce both the risk of a disaster occurring and its effects if it does occur.

Opposite: Danaya with her daughter, Jael are growing and selling vegetables from a World Vision vegetable garden. ©2012 Justin Douglass/World Vision

5.4 Adapt DRR to the conditions of the chronic, complex emergencies in the Sahel by strengthening the equity of DRR and Climate Change interventions. Ensure a “twin track” approach, with one track providing specialised support to enable poorest households trapped in the hunger cycle (even in good years) to re-build their productive assets and self-reliance.

5.5 Make the risks of chronic and acute malnutrition (for child mortality and irreversible physical and cognitive impairment) central to preparedness and prevention strategies and policies for DRR and Climate Change Adaptation. Manage the risk, not the crisis.

6 Improve the Early Response System

Governments and their technical and financial partners should commit to:

6.1 Link non-political, needs-based early warning signs of disasters to agreed triggers for a timely and appropriate response.

6.2 Support national and community preparedness plans, capacity and activities in line with humanitarian principles to avert disasters' worst effects, including acute malnutrition.

All actors at the Regional and National level involved in early warning systems must:

6.3 Develop a common approach to triggers for early action, to be used by both humanitarian and development actors.

Donors must commit to:

6.4 Provide more agile and flexible funding for earlier drought response: by

- including crisis modifiers in multi-year development grants to build recurring crisis response costs into development programming;
- ensuring that humanitarian funding can be readily available to support pre-emptive or early response.

7 Undertake Pilot Programmes to Test Systems Solutions for Resilience

National governments, UN Agencies, donors, international NGOs, civil society and communities should:

7.1 Undertake operational research in long-term pilot systematic “resilience” programmes in selected geographic areas where high levels of vulnerability currently exist.

- Identify “system solutions” including mechanisms for improved co-ordination to support resilience in a more comprehensive and systematic way in selected livelihood/geographic areas before the acute phase of the crisis ends;
- Contribute to the resilience initiative by building political energy and by putting financial and technical resources behind the mutually agreed priorities.

The UN should commence a global process of:

7.2 Developing a new plan for how national governments, international donors, and agencies should work together to prevent hunger crises, breaking down the barriers between development and humanitarian approaches, between normal and crisis responses.



7 | ANNEXES

Annex A: Pathways to Resilience: A Comprehensive Approach for the Sahel

This review indicates positive changes and continuing challenges in the Sahel for overcoming chronic food and nutrition insecurity by overcoming the “resilience deficit”.

However, as noted, most agencies are conceptualising resilience in their own terms, without considering the entire system of what needs to be collectively accomplished for lasting results. A key initial challenge, therefore, is for the main actors in the Sahel to reach consensus on a conceptual framework for strengthened resilience at the community, national and regional levels, defining roles and responsibilities, and how to collectively *monitor progress*, and *assess results* in overcoming the root causes of vulnerability, rather than limiting the process to individual projects.

Most actors agree that resilience has to do with resisting or coming back from harm. There is also a growing view that resilience indicates the potential of successfully adapting to changed circumstances by developing a *new state*. Thus, the emerging, more robust and comprehensive concept of resilience, when applied to social and economic systems in the Sahel, includes resistance to a shock, recovery, . It should also include but also an element of adaptation and transformational change.

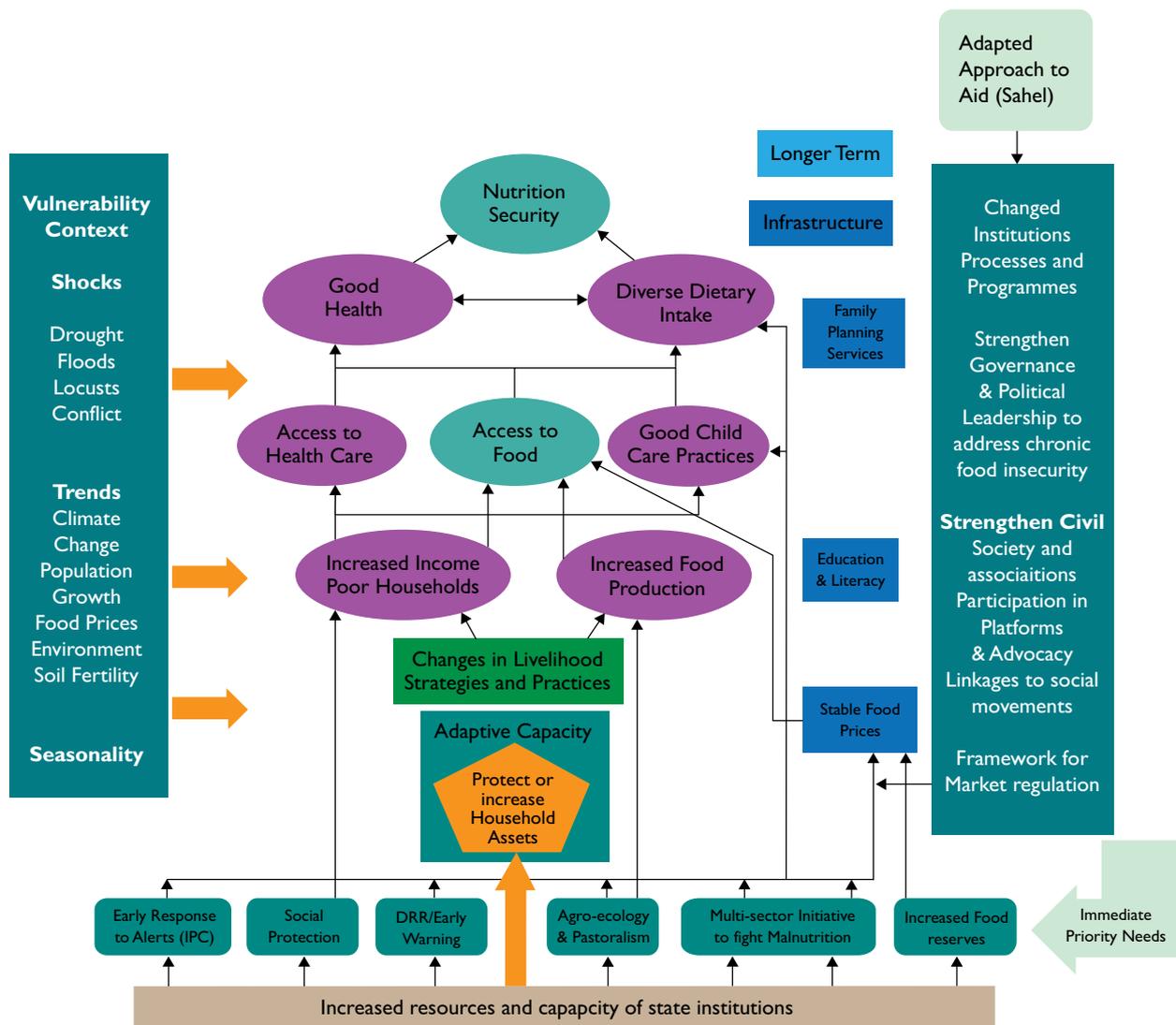
There also seems to be broad agreement that strengthening resilience can be generally assessed in terms of “adaptive capacity” particularly of the most vulnerable groups across households and communities. *Resilience is decreased* when an individual’s or household’s “entitlements” are diminished. This can occur in several ways: a) reduction in what is owned (i.e. crops fail, livestock die) b) an adverse shift in terms of exchange (food prices increase, wages fall, asset prices fall) c) a reduction in transfer of resources (remittances, gifts, social transfers). As resilience declines, a progressively smaller external event can cause a crisis. Low resilience households may seem to maintain an ability to generate resources required for food and nutrition security. However, a very minor shock will often cause the livelihood system to exceed a critical threshold and fall into food and nutrition insecurity.

Resilience can be increased by adaptive livelihood strategies that strengthen or diversify “entitlements” through expansion of the range of productive assets, or by improving the terms of exchange, or by increasing the transfer of resources. To address food and nutrition security, resilience helps illuminate key issues such as how to improve access to food (i.e. purchasing power) by poorer households, how to reduce risk, and the role of transfer of resources (including humanitarian aid, social protection transfers) in an integrated system.

Strengthening resilience requires assessing the capacity and mechanisms that vulnerable households use to adapt to the new conditions generated by a crisis, in order to maintain their food and nutrition security. Assessing resilience and adaptive capacity provides guidance on how to direct resources to build on existing strengths, (or open new areas of support), to prevent and mitigate shocks, and to sustain improved well-being. Resilience, therefore, makes safety net/social protection programming both developmental *and* humanitarian.

Below: A conceptual framework: Pathways to Household Resiliency in the Sahel. Developed from the author’s framework in ‘Escaping the Hunger Cycle: Pathways to Resilience in the Sahel

As noted above, there is a need for main actors in the Sahel to collectively develop and agree on a resilience framework, rather than each considering their own. To contribute to this, this report proposes, in the graphic below, what a more comprehensive framework for promoting resilience should consider for the Sahel. In this framework, the focus is on the household level



and on the various assets (physical, natural resources, social, financial, human) used in developing livelihoods strategies. *The pathways* to resilience include providing direct support through social protection measures to ensure adequate income to meet basic needs, while also providing support for DRR, the development of the productive sectors such as agriculture and pastoralism for livelihood promotion, and for the poorest rural households, strengthening production as well as off-farm diversification of livelihoods. As indicated in the graphic, the more diversified and greater the assets, the stronger becomes the adaptive capacity (and resilience) of the household.

This framework places “nutrition security” at the apex of the pathways to resilience because reducing chronic malnutrition and improving the well-being of children requires positive changes in livelihoods, assets, production, income, and also women’s access to productive resources, health services, social protection, reduction of risk and water/sanitation /hygiene.

Certainly, *other indicators of resilience* at the community and household level will also need to be determined, for different livelihood zones, particularly for pastoral areas.

As indicated in the graphic, to achieve resilience, *longer-term actions* are also required, particularly to find ways to address population growth/birth spacing, to control food prices rising much more rapidly than wages, to improve education, and address security (resolving or preventing conflict). All of these initiatives have major implications for the architecture of aid, funding mechanisms, institutional capacity, policies, governance and the role of civil society.

What this graphic does not adequately address are the linkages and synergies that are to be achieved through a systems approach, and how the different actors can work together.

Annex B: Drivers of the Acute Phase of the 2012 Sahel Food and Nutrition Crisis

Reduced Grain Harvests and Fodder in 2011/12 due to Drought

The immediate trigger of the food and nutrition crisis was widespread drought which reduced harvests in Africa's Sahel region for the 2011/12 season by 26% compared with the previous year. However, overall production in the Sahel was only 3% lower than the five year average. Sahelian countries have a structural grain deficit and are usually supplied by coastal countries. This year, the markets have not been working adequately to supply the deficit areas with adequate quantities or at affordable prices. The unusual spread of the deficit areas across the Sahel, from Senegal to Chad, has further complicated grain supplies.

Table: Overview of production estimates for the 2011/12 season and changes compared to previous years (based on various sources).
Source: OXFAM et al. (May 2012) Sahel Markets Under Pressure Inter-agency briefing note (including ROPPA, RBM, APESS, POSCAO and WILDAF)

Zones/countries	Estimates for 2011/12 in tonnes	Gross deficit/excess for 2011/12	Comparison with 2010/11 in %	Five year average in %
West Africa	54 780 000 (1)		-9% (1)	+5% (1)
Sahel (CILSS)	16 424 000		-26% (1)	-3% (1)
Chad	1 600 000 (3)	-595 091 (3)	-49% (1)	-23% (4)
Niger	3 628 000 (3)	-624 959 (2)	-31% (1)	-14% (2)
Mauritania	124 000 (3)	-465 000 (3)	-34% (1)	-38% (4)
Mali	5 138 000 (3)	+555 631 (2)	-20% (3)	+13% (2)
Burkina Faso	3 666 405 (3)	-154 462 (3)	-19.61% (1)	-5.09% (2)

In terms of the pastoral situation, the drought has also caused a significant fodder deficit in the Sahel belt, exacerbated by poor water availability. The situation seems especially difficult for the third year running in Niger, northern Mali and Burkina Faso. This is made worse by the crisis in northern Mali which is disrupting traditional transhumance corridors. To escape the conflict, pastoral families with close to 100,000 heads of livestock from Mali have travelled to Mauritania, Niger and Burkina Faso, far exceeding these countries capacities. The current weak state of some herds has diminished the animals' market value and thus pastoralists' purchasing power. This also triggers conflicts over the use of scarce pasture and water and illustrate the close connection between the ongoing drought and crisis and the potential for conflict in the region¹⁴⁷.

High Prices: On average, the people of the Sahel only produce half of their food needs and must buy the rest on local markets on which they trade their produce or their labour. However, between October and December 2011 (the harvest period), cereal prices throughout the Sahel increased significantly instead of the declining as is typical, while wages increased only a little. Prices for preferred local cereal staples in December and January 2011 were 20-40 percent above the 5 year average in Niger, Chad, and Mauritania and 60-80 percent (occasionally 100 percent) above average in parts of Burkina and Mali.

In April, there were alarming and unexpectedly sharp price rises for local cereals like millet, rice and maize in parts of Mali, Burkina Faso, Niger and Chad. For example, in Ouagadougou a 100kg bag of millet cost 26,000 cfa (US\$49) in May 2012, compared to 15,000 cfa (\$28) in May 2011, while in Bamako a 100kg bag of millet cost 28,500 cfa (\$53) this year but only 14,000 cfa (\$26) a

year ago, according to UN Food and Agriculture Organization (FAO) monthly reports. An analysis of the likely causes of these price increases is presented in IRIN's article of May 28, 2012 "*Sharp Price Hikes Cause Alarm*".¹⁴⁸

Trade restrictions imposed by Mali and Burkina Faso, the high price levels of maize and millet in several coastal countries and the increased fuel prices in part of the region has tended to reduce the movement of grain to deficit areas of the Sahel and to push food prices up.

Return of Migrant Workers: Over 200,000 registered economic migrants returned to already vulnerable areas in the Sahel in the wake of the crises in Cote d'Ivoire and Libya. (IOM Oct 2011). This increased pressure on communities' scarce resources and caused tension over access to public services, such as water, health, and education.

Reduced Remittances: The global economic downturn and return of migrant workers greatly reduced income from international remittances. The IOM estimates that the monetary transfers made by every migrant worker previously supported about seven people in their country of origin

Conflict in Mali: The conflict in northern Mali has resulted in the displacement of at least 340,000 people, including more than 180,000 refugees in the neighbouring countries, food supply disruption, and the large-scale looting in the main cities of the Timbuktu and Gao regions.

Growing regional insecurity: The dissemination of Libyan weapons and the influence of a proliferation of armed groups in Mali and northern states of Nigeria have jeopardized traditional coping mechanisms that depend on migration, as well as development and humanitarian interventions. The closure of the border between Niger and Nigeria increased food and fuel prices.

In summary, as detailed in the food security briefing of April 2012 by the Food Crisis Prevention Network, 'the accumulation of aggravating factors (drop in agricultural production, high grain prices, poor pastoral situation, drop in prices for certain off-season products such as onions, reduced resilience among vulnerable households, population movements, etc.) is not sufficiently compensated for by favourable factors (increased prices for some cash crops, coping mechanisms, etc.).

Annex C: Child Protection Issues in the Sahel

A review by ODI indicates that children in the Sahel are exposed to the risks of exploitation, including child labour, which can be particularly exacerbated in the context of violence and conflict. Girls grow up vulnerable to male violence, ill-health, and early marriage, face limited work opportunities and persistent poverty due to lack of education. Domestic violence is also believed to be widespread and a number of harmful gendered traditional practices persist in the region. The most widespread is Female Genital Cutting (FGC). Prevalence varies widely between countries, from less than 10% in Niger to over 90% in Mali. Other practices include various forms of indentured labour and exploitation, ranging from the tradition of talibe (a form of indentured labour of boys and girls to local mosques) in countries such as Mali, Niger, Burkina Faso and Senegal. Attitudes towards children and children's rights are also highly conservative in the region.

Decisions about what types of social protection instruments to invest in should be informed by a systematic vulnerability assessment. Moreover, there are very few explicit linkages between targeted child protection services and national social protection strategies. There needs to be a stronger systems-approach to child protection in the region.

Annex D Outcomes of Reflection Workshop on Resilience by International NGOs in Niamey

Workshop Report

Review of Initiatives to Promote Resilience in Niger

Place: Niamey, Niger

Date: May 15, 2012

Participants: Participants included delegates from OXFAM, Save the Children, World Vision, Lutheran World Relief, Counterpart International, CARE, Concern Worldwide, Islamic Relief, ACTED, VALPRO, HELP-Niger, and AFRICARE.

Themes Addressed:

- 1 How to promote resilience in order to break the hunger cycle and prevent acute food and nutrition crises in Niger: Lessons from experience?
- 2 How to promote resilience in a way that contributes more effectively to the nutrition and well being of children?

Summary of Group Discussions

Work Groups 1 and 2:

Task: How has the response to the early warning of the food and nutrition crisis in Niger affected resilience (What worked well? What are the challenges and things to improve?)

Questions to consider

- 1 What is the “evidence” that investment in resilience since 2010 has helped mitigate the effects of this food crisis on vulnerable populations and children?
- 2 To what extent will the crisis response succeed in preventing or reducing severe coping strategies, irreversible loss of assets and livelihoods?
- 3 What is the likelihood that the response will prevent a spike in the rate of Severe Acute Malnutrition?

Participants asked to take into account the following:

- Situation of food insecurity in urban, agricultural and pastoralist areas
- Speed and size of resources of the response
- Adequacy of the Response plan, targeting process, coordination

Group 1&2 Positive contributions to Resilience within the Response to the 2012 Crisis

ISSUE	Review Statements
Role of the CCA in Niger	The Niger government developed an early “Support Plan” can potentially coordinate and plan in a way to effectively anticipate and address the crisis. CCA provided good coordination
Child Nutrition	Use of nutritional supplement “PEC” for treating of Moderate Acute Malnutrition (MAM) to prevent spike in child malnutrition
Early Warning System (EWS)	Information gathered by the EWS is “OK” (it was effective in providing an early warning). Government undertook Vulnerability study early, in November 2011
Political Leadership by Niger	Government of Niger, in a dramatic change to the last crisis, took strong measures very early in calling for international emergency assistance, developing a Support Plan
Existence of the Niger government “3N initiative”	It is a government institution that addresses the need for a long-term effort to promote sustainable solutions for rural development and food security in Niger

Existence and engagement of Actors on the ground that have a long term presence	An effective long-term response is greatly facilitated by actors who are already well established in the affected areas, who are well placed to act over both the short and long term and whose presence enables good contribution to the analysis of resilience
Multi-disciplinarity of NGOs	NGOs become more multidisciplinary in their capabilities and programmes.; This is a “plus-plus” asset in relation to several UN agencies (who tend to work in siloed, single mandate interventions
Response in Pastoralist Zones	Animal feed was available earlier than in the previous crisis. Provision was made for prepare animal forage/mineral blocks, incentives to encourage strategic destocking, and for veterinary service support
Diversity of Response mechanisms, including Cash	The use of cash was OK. Efforts were better to strengthen the production capacity, and link immediate response to medium term recovery. Use of Cash for Work to mitigate the effects of the food crisis
Inclusion of Behaviour change with Information, Education and Communication (IEC) strategies by the response	Efforts to change behavior for feeding and care of children using Positive Deviance and an IEC approach, supported by social transfers was a positive aspect of the emergency response

Groups 1 &2 Aspects to Improve for Resilience in the response to the 2012 Crisis:

ISSUE	Review statements
Response Coordination	Coordination poor between the national, regional, and local levels
Early Warning System (EWS) and Monitoring : Urban	Response system not identifying and supporting people migrating much earlier than usual. This is an adaptation strategy. Many highly vulnerable people (and children) are now in urban centers without support
EWS and Pastoralists	EWS is weak in assessing the needs of the pastoralists, Efforts must be made to strengthen the EWS system data collection which is rooted in the reality of the pastoralist livelihood system
Donor Funding	There are agencies who receive donor funding who are have no prior presence on the ground, or long term commitment to the area. They will not play a role, after the emergency, to ensure the sustainability. Such actors undermine long term efforts to promote resilience. Their lack of knowledge reduces quality and effective targeting.
Donor Funding	Activities to be financed is too “directed” by the donors
Use of Cash	Use of cash is not necessarily “resilience friendly” compared to in-kind assistance “in kind”. It depends on local opportunities, and habits in households how cash is managed
Subsidized Food Sales	The poorest households, particularly in remote areas, are not able to afford or access these sales
Operation of the United Nations system	United Nations United Nations agencies tend to work in “silos.” They do not operate in an integrated, coordinated and multi-sectoral way, or with continuous long term support. The role of UNDP is not all clear in terms of contributing to resilience
Targeting	Inefficiency of general distribution
Support for the Pastoral Zone	For the 2012 crisis, the response in Niger has largely neglected the pastoral zone. The response was not in time considering that the peak of need in pastoralist zones is earlier (February and May) compared to the agricultural zone. When the rain starts, it’s already too late for the pastoral zone
Support to facilitate mobility for Pastoralists in the response strategy	To support adaptation strategy of mobility by pastoralists, the response must take into account: ensure sufficient water points, provision of veterinary care, and animal feed, and other measures to enable transhumance.
Support for Vulnerable in Urban Zones	Drought has an impact by increasing the numbers of young migrants who come to urban centers. The crisis response is not addressing the needs of this important group within the urban areas. There is no assistance.

Work Groups 2 and 3:

Task: Review and assess the medium and long term initiatives that have been undertaken to promote resilience in Niger. What has worked well? What are the challenges and things to improve?

Questions to consider

- 1 How effective have efforts been to develop/promote the livelihoods of highly vulnerable households?
- 2 How effective are program designed to reduce disaster risk (DRR) and promote climate change adaptation been in strengthening resilience?
- 3 To what extent has support for agricultural and livestock production improved resilience, particularly for the poorest, most vulnerable households
- 4 To what extent have programmes been successful in reduction of rate of acute and chronic malnutrition in children?

Groups 3 and 4: Effective Longer-term Pathways for Resilience

ISSUE	Review statements: Effective ways to promote Resilience
Agricultural development through irrigation and improved seeds	<ul style="list-style-type: none"> ● Promotion of irrigated sorghum ● Improved system of providing inputs through group purchases (lower cost) ● Introduction of improved seeds better adapted to dry land
Improved Agricultural storage and marketing	<ul style="list-style-type: none"> ● Development of storage and marketing of agricultural production has enable producers to get higher profits ● Promotion of value chains have given communities a better position to gain profit from their production
Processing of agricultural products	<ul style="list-style-type: none"> ● Resilience will be improved through investment in conservation, drying and processing of agricultural products (vegetables, fruits) and animal products (milk, meat and skins)
Promote Agroecology especially using trees	<ul style="list-style-type: none"> ● Diversification of production using tree species (for fuel wood, fruit etc) ● Promotion of Moringa trees for nutrition and income
Community based Agricultural Extension methods	<ul style="list-style-type: none"> ● Farmer field Schools are an effective method to improve food production
Community based Natural Resource Management to stop land degradation and better use water	<ul style="list-style-type: none"> ● Promotion of various management techniques by communities by CARE has improve natural resource management for sustainable use has given good results and benefited women ● Examples of improved and holistic management of pasture lands by pastoralist communities have improved their resilience ● Tree planting, dune stabilisation and other environmental protection techniques contribute to long term resilience ● Development and protection of micro-water basins can improve family production and incomes
Water Harvesting techniques	<ul style="list-style-type: none"> ● Use of techniques to harvest and retain runoff rain by sub surface dams has increased resilience ● Some good examples of channelling and managing water resources have taking into account « cc » has increased resilience
Re-stocking (Pastoralists)	<ul style="list-style-type: none"> ● CARE and LWR have made use of the traditional system called Habanayé to help pastoralists re-stock their herds
Promotion of Savings and Credit	<ul style="list-style-type: none"> ● Promotion of savings and credit groups and accounts has improved resilience
Integration of DRR	<ul style="list-style-type: none"> ● There has been better integration of RRC in the project cycle
Village Grain Storage (Warrantage)	<ul style="list-style-type: none"> ● The credit system based on warrantage (of grain) promoted by LWR has increased resilience
Integrated, multi-sectoral approaches to reduce child malnutrition	<ul style="list-style-type: none"> ● CARE's integrated approach of promoting community grain banks, savings and credit facility, and "FARRI" has reduced the rate of child malnutrition ● There is good experience in behaviour change techniques to promote improved feeding practices and more diverse nutritious diets ● Positive Deviance has proven a good way to integrate action to reduce malnutrition by valorising local resources and knowledge

	<ul style="list-style-type: none"> ● A comprehensive, multi-sectoral approach of practical action to reduce malnutrition, (through prevention (improved practices, health care, education, food security/ livelihoods, and water, sanitation and hygiene) is effective
Making Use of Community knowledge and capacities	<ul style="list-style-type: none"> ● Success in building local resilience is based on making effective use of the capacities and knowledge of local communities
Promotion of Family Planning	<ul style="list-style-type: none"> ● CARE experience is that focus on raising awareness of men and organising women's savings groups can be used to change behaviours relating to Family planning and access to reproductive health services
Social Transfers for Improved economic production	<ul style="list-style-type: none"> ● Long term social transfers must be considered, including provision of inputs and equipment, to help the poorest households to become resilient
Social Transfers for reducing chronic malnutrition	<ul style="list-style-type: none"> ● Counterpart International experience by shows that providing food supplement assistance to pregnant and lactating women during 6 to 9 months has reduced low birth weights, and chronic malnutrition by 30 to 50%
Social Transfers for supporting changes in health and nutrition behaviours	<ul style="list-style-type: none"> ● Experience shows that transfer of cash to most vulnerable households coupled with education sessions on practices for preventive health and improved nutrition has had an impact on reducing rate of malnutrition

Groups 3 and 4: Aspects to Improve for Strengthened Resilience

Issue	Review Statements: Improve ways to Strengthen Resilience
Transhumance corridors	Importance work required at the sub-regional level to develop transhumance corridors to provide access to pastoral resources
Processing of agricultural products	Lack of innovation for processing agricultural products
Flexible funding for multi-sectoral interventions	Difficult to obtain flexible funding to address the needs in an integrated and holistic way for resilience
Linkages between natural resource management, population increase and hunger	Lack of integrated interventions to address the links between population growth, environment and food security
National food security reserves	Lack of a sustainable national and regional food security stocks (public food reserves to help stabilize prices)
Climate Change Adaptation	Inadequate funding and program work to promote climate change adaptation
Community based Analysis and Communication of Early Warning information	Data obtained by Community based early warning systems (SCAP) and the Observatories of Vulnerability (OSV) is not being communicated and used at the national level. Commune , regional levels are not analyzing this data to decide on early action
Equitable access and sustainability of DRR activities	It is questionable whether DRR activities, particularly Village Cereal Banks are accessible to the poorest households, and are sustainable without outside support. Such strategies need review
Preventing Volatile and High Food Prices	Government interventions to regulate market prices of food and prevent price spikes are not effective
Education and Literacy	A challenge in promoting resilience is the poor quality of education in rural environments, and low literacy rates
Water, Sanitation and Hygiene WASH	There is too little finance to support access to potable water, and to integrate water, sanitation and hygiene (WASH) into development
Evidence base for impact on Resilience	Assessment of resilience, and the current evidence base demonstrating the impact of interventions on resilience is weak
Documentation of Success in promoting Resilience	Weak systematization and documentation of successful case studies in promoting resilience
Short term funding for DRR and Resilience	The duration of most funding is too short for promoting resilience and DRR
International NGO collaboration	Collaboration among International NGOs for learning about and promoting resilience is weak
Training and Information	Need to improve access to information, training and advisory support for promoting resilience
Food Aid and Resilience	Resilience and overcoming chronic hunger cannot be achieved through food aid. What will happen after the end of food assistance?



ENDNOTES

¹ Most actors agree that resilience has to do with resisting or coming back from harm. There is also a growing view that resilience indicates the potential of adapting to changed circumstances by developing a new state. Thus, the emerging, more robust and comprehensive concept of resilience, includes a capacity of resistance to and recovery from shocks, but also a capacity for adaptation and transformational change. See Sahel Working Group (October 2011) *Breaking the Hunger Cycle: Pathways to Resilience in the Sahel* pp. 55-56 and Annex D. <http://www.odi.org.uk/events/details.asp?id=2750&title=escaping-hunger-cycle-pathways-resilience-sahel>

² Office for Coordination of Humanitarian Affairs (OCHA), United Nations Children's Fund (UNICEF) World Food Programme (WFP), and the Food and Agriculture Organisation (FAO)

³ The most seriously affected countries included Chad (decline of 49% in relation to 2010-2011 and 22% in relation to 2006-2010), Senegal (36%/21%), Niger (31%/14%), Mauritania (34%/10%) and Burkina Faso (20%/5%). The pastoral situation also became very difficult in many regions because of poor pastures and low water filling rates, causing overgrazing and severe shortage of fodder. FAO (27 April 2012) *Executive Brief: The Sahel Crisis*

⁴ OXFAM et al. (May 2012) *Sahel Markets Under Pressure* Inter-agency briefing note, p.3

⁵ See the article Garvelink, William J., Tahir, Farha (May 2012) *Misunderstood: Getting the Right Response to Food Shortages in the Sahel*. Center for Strategic and International Studies

⁶ It is estimated that it takes a minimum of 3 years to rebuild a herd of goats or sheep and 5 to 8 years for a herd of cattle. However, pastoralists in the Sahel were already seriously affected by the past crises of 2005, 2008 and 2010, and so are especially vulnerable to new shocks. OXFAM et al. (May 2012) *Sahel Markets Under Pressure*. op. cit. p.3

⁷ Severe Acute Malnutrition Severe acute malnutrition is defined by a very low weight for height (70% or less of the median WHO growth standards), by visible severe wasting, or by the presence of nutritional oedema. Where SAM is common, the number of cases can exceed available inpatient capacity, which limits the effect of treatment; case-fatality rates have been 20-30% <http://www.ncbi.nlm.nih.gov/pubmed/17141707>. Innovative new community based treatment of SAM has reduced this.

⁸ Inter Agency Standing Committee (IASC) (Feb 2012) *Strategic Document Version 2 Response plan addressing the food and nutrition crisis in the Sahel* Dakar p.19

⁹ Government of Niger (March 2012) *Initiative 3N pour la Sécurité Alimentaire et le Développement Agricole Durable « Les Nigériens Nourrissent les Nigériens »* Cadre Stratégique Vision 2035 et Plan d'Action 2011 -2015 p.22

¹⁰ Save the Children (2012) *A Life Free from Hunger Tackling Child Malnutrition* p.3

Left: Korotimi is selling rice and beans at the market. She received micro loans from RMCR, a non banking institution affiliated to Vision Fund. With the loans she was able to purchase more rice and beans and as a result her income has increased. ©2010 Justin Douglass/World Vision

¹¹ Resilience has become the new buzz word in the discourse. See Brown, Katrina. July 2011. *Lost in Translation: Resilience Ideas in Science, Policy and Practice*. University of East Anglia. http://csid.asu.edu/resilience-2011/program/files/Panels/53_Policy/brown.pdf

¹² IASC (Feb 2012) *Strategic Document Response plan* op. cit. p.28

¹³ UNICEF (March 2011) *Humanitarian Action for Children: Building Resilience*

¹⁴ FAO (Nov 2011) *Resilient Livelihoods: Disaster Risk Reduction for Food and Nutrition Security*

¹⁵ UNDP (May 2012) *Africa Human Development Report 2012: Toward a Food Secure Future*. Chapter 6: Resilience and Social Protection for Stability in Food Systems p.97

¹⁶ WFP June 2011 *Building Resilience through Safety Nets* <http://www.wfp.org/EDs%20Centre/blog/build-resiliency-through-safety-nets>. See also WFP (Sept 2011) *Policy on Disaster Risk Reduction and Management: Building Food Security and Resilience*. <http://documents.wfp.org/stellent/groups/public/documents/resources/wfp239641.pdf>

¹⁷ DFID 2011 *Humanitarian Emergency Response Review: UK Government Response*

¹⁸ World Resources Institute World Resources (2008) *Roots of Resilience - Growing the Wealth of the Poor*, Chapter 3: Turning Back the Desert: How Farmers Have Transformed Niger's Landscape and Livelihoods

¹⁹ The Montpellier Panel. (2012) *Growth with Resilience: Opportunities in African Agriculture*. London: Agriculture for Impact.

²⁰ Interagency Resilience Working Group (April 2012) *The Characteristics of Resilience Building. A discussion paper*. <http://community.eldis.org/DRR> Many International NGOs are taking steps to integrate resilience thinking into their organisational structure and work. World Vision (Great Britain), for example, has created a Resilience Manager position. Others such as CRS support operational research on resilience related issues and assessing resilience.

²¹ IASC Feb 2012. *2012 Strategic Document Response plan* op.cit. pp. 1-2

²² Niger has the strongest initiative in this regard. See Government of Niger (March 2012) *Initiative 3N* op.cit.

²³ IASC (Feb 2012) *Strategic Document Response plan* op.cit. p.2

²⁴ The phrases of "repackaging" and "business as usual" may seem a rather harsh critique, particularly to those within the institutions cited who are working hard for a more effective approach to resilience. However, this is the assessment of quite a number of international NGOs consulted for this report. It is also the perspective of Katrina Brown who undertook a major review of resilience. See Brown, K. (July 2011) *Lost in Translation: Resilience Ideas, in Science, Policy and Practice*. University of East Anglia. http://csid.asu.edu/resilience-2011/program/files/Panels/53_Policy/brown.pdf

However, in also making this critique, I am not suggesting cynical attitudes or a lack of commitment to change, but rather a tendency for agencies to address resilience only within their own institutional mandates. The language used by those promoting resilience does not give the impression of making the systemic or inter-institutional changes needed. Instead, the language suggests

only investing more in resilience oriented activities. For example, the UK's development minister, Stephen O'Brien, said: "Resilience programme support is an important part of humanitarian support and response and provides a more sustainable way to deal with disasters." Among things to be prioritized will be the provision of drought-resistant seeds, water, education, investing in weather forecasting technology, and scaling up nutrition programmes. -- Source: IRIN, 5 April 2012. <http://www.irinnews.org/Report/95247/HORN-OF-AFRICA-Greater-food-insecurity-forecast>

A harsher critique of DFID is given by Tom Mitchell, at ODI. He notes that the UK government's response to the Humanitarian Emergency Response Review (HERR) agreed with the clarion call to make a *fundamental shift* to place anticipation and resilience-building at the heart of DFID's humanitarian policy and wider development programming, to improve the coherence between development and humanitarian action, and to invest in ex-ante disaster reduction to stem the rise in human suffering and humanitarian spending. However, the later section on '*transformational change in DFID*', barely addresses the bold new anticipation and resilience argument. Mitchell says the response almost exclusively consists of commitments to channel more money, more quickly, to trusted organisations when disasters strike. He indicates that it remains to be seen if DFID can find a way a way to incentivise risk-reducing investments at national level rather than shoring up the humanitarian safety net in the absence of established, government led comprehensive resilience-building plans. Mitchell, Tom (June 2011) *Anticipation and resilience? Assessing the Government's response to the Humanitarian Emergency Response Review* http://blogs.odi.org.uk/blogs/main/archive/2011/06/17/58475.aspx?utm_source=newsletter&utm_medium=email&utm_campaign=20110630.

²⁵ ODI Humanitarian Practice Network. (Nov 2011). *System Failure? Revisiting the problems of timely response to crises in the Horn of Africa* Network Paper No 71. Although this paper analyses the failure of early response in the Horn of Africa, the central argument of a systems perspective applies to resilience in the Sahel.

²⁶ Malnutrition refers to both under-nutrition (lack of sufficient amount, quality and diversity of food) and to over-nutrition (too much of the wrong type of foods, leading to obesity). In this report, in the context of the Sahel, malnutrition is meant to refer only to under-nutrition. The two terms are used inter-changeably.

²⁷ IASC (Feb 2012) *Strategic Document Response plan* op.cit p.2

²⁸ IASC op.cit. citing OCHA 07/02

²⁹ IASC op.cit.

³⁰ Moderate acute malnutrition (MAM) more than doubles the risk of infantile deaths. Severe acute malnutrition increases this risk by over nine times. Cited in IASC (Feb 2012) *Strategic Document Response plan*. Op.cit. p9.

³¹ UNICEF Niang, O et al. 2012: *The effects of safety nets on the resilience of vulnerable households in Niger*. Other authors include Guido Cornale, Representative, UNICEF Niger (gcornale@unicef.org); Ousmane Niang, Chief of Social Policy, UNICEF Niger (oniang@unicef.org); Soukeynatou Fall, Monitoring and Evaluation Specialist, UNICEF Niger (sfall@unicef.org); Rocio Berzal, C4D Specialist, UNICEF Niger (rberzal@unicef.org); Véronique Mistycki, Reports officer, UNICEF Niger (vmistycki@unicef.org).

³²The prevalence of infectious diseases such as measles, respiratory conditions and diarrhoea, and epidemics such as cholera, all contribute to the deterioration of child nutrition status

³³ During the lean season when farming causes a heavy workload for households and a deterioration of care-giving practices. Feeding practices deteriorate since children are looked after by older siblings. Water sources become polluted by storm and flood runoffs. Diarrhoea significantly increases at the beginning (and malaria at the end) of the rainy season

³⁴ National global acute malnutrition prevalence data often does not give information on which specific districts are most affected and require the implementation of an immediate or long-term operations. Integrated nutrition responses should first be directed towards areas which data indicates are most at risk.

³⁵ Commission Européenne (Sept 2011) *La lutte contre la sous-nutrition dans l'assistance extérieure: Une approche intégrée par secteurs et modalités de l'aide*. Préparé aussi par l'Allemagne, la France, l'Irlande, la Pologne et le Royaume-Uni

³⁶ ACF International – Décembre 2011 *Optimiser l'impact nutritionnel des interventions sécurité alimentaire et moyens d'existence* Manuel pour les professionnels de terrain.

³⁷ CARE (Août 2011) *Modèle de Prévention et de Prise en Charge Non Médicale de la Malnutrition en Milieu Communautaire: Tomes 1-3* : Inspirée de la Recherche Action Menée par le Projet de Promotion des Initiatives en Faveur de la Nutrition et de la Démographie -PPIND-). See also CARE (Août 2011) *Modèle de Gestion Responsable de la Croissance Démographique en Milieu Communautaire Tomes 1-3* : Inspirée de la Recherche Action Menée par le Projet de Promotion des Initiatives en Faveur de la Nutrition et de la Démographie -PPIND-). See also *Communication de CARE Internationale au Niger sur la Nutrition Préventive* Thème: L'alimentation de complément de qualité à base des produits locaux (Laminou San Coordonnateur du sous programme nutrition)

³⁸ Save the Children (2012) *A life free from hunger: Tackling child malnutrition*. Although more of an advocacy piece than a field guide, this publication provides Sahel data and information to guide strategy and practice. Save the Children (2009) *Hungry for Change: An eight-step, costed plan of action to tackle global child malnutrition*

³⁹ Claire Beck, World Vision Global Rapid Response Team (GRRT) member. Health and Nutrition Specialist. Personal Comm.

⁴⁰ Concern Worldwide (Sept 2011) *Cash Transfers, Mobile Transfers and Emergency Response in Niger 2010 Cash Transfer Emergency Response final report* by Jenny C. Aaker. Tufts University See also Aaker, Jenny C et al. (Sept 2011) *Zap It to Me: The Short-Term Impacts of a Mobile Cash Transfer Program*. Working Paper 268 Center for Global Development -- Concern Worldwide (Oct 2011) *Cash Transfers and Nutritional Status in Niger 2011*. Operations Research Baseline Report by Jenny C. Aaker and Elizabeth Yepsen. Tufts University/Dartmouth University

⁴¹ IRIN (April 2012) *Sahel: As Likely Malnutrition Crisis Looms, MSF Prepares Short- And Long-Term Responses* IRIN (Mars 2012) Réduire la malnutrition grâce à la prévention *Évaluation de l'impact des supplémentaires alimentaires sur la*

santé infantile IRIN (May 2012) *MSF Battles Malnutrition and Disease Across a Swathe of West and Central Africa* <http://reliefweb.int/node/494268>

⁴² Save the Children (2009) *Lasting Benefits: The role of cash transfers in tackling child Mortality*

⁴³ Save the Children (2012) *A life free from hunger: Tackling child malnutrition* p.16

⁴⁴ Save the Children (2012) *A Life Free from Hunger* Op. cit. p.16

⁴⁵ There are also two UN committees – the Standing Committee on Nutrition (SCN), and the Committee for World Food Security (CFS)

⁴⁶ For the various actors to work effectively together, a shared understanding of what nutrition means and how their organisations can add value in tackling the various drivers of malnutrition is required. Official definitions of food security – a broad term that incorporates availability, access, utilisation and stability of the food supply – include reference to nutrition, but the terms are often understood differently by different organisations

⁴⁷ Moriss, S.S., Cogill B., and Uauy, R., for the Maternal and Child Undernutrition Study Group (2008) ‘Effective international action against undernutrition: Why has it proven so difficult and what can be done to accelerate progress?’ The Lancet series on Maternal and Child Undernutrition, article 5, 371, 608–21, cited in Save the Children (2012) Op. cit.

⁴⁸ Niger, Mali, Burkina Faso & Senegal are ‘Early Riser’ SUN countries – having put themselves forward to scale up their own efforts on nutrition –<http://www.scalingupnutrition.org/sun-countries/>

⁴⁹ Simple, low-cost techniques for managing the natural regeneration of trees and shrubs, are known as farmer-managed natural regeneration, or FMNR.

⁵⁰ These include rock bunds along the contour, « Zai” micro-water harvesting planting pits, and half-moon basins

⁵¹ World Resources Institute (March 2012) *Building Climate Smart Agriculture and Resiliency in the Sahel*. This event featured leading global experts who discussed lessons learned from farmer innovations. Web-based presentations describe experiences in Niger, Burkina Faso & Mali in using “Climate Smart Agriculture” to increase productivity and resiliency and pictures of observed landscape transformations. The speakers drew on their experiences in the Sahel to explore how to use Climate Smart Agriculture to increase productivity and resiliency. This event focused on scaling up interventions to address the root causes of chronic food shortages while strengthening household economies. <http://www.wri.org/event/2012/03/building-climate-smart-agriculture-and-resiliency-sahel>

⁵² Rinaudo, T., Yaou, S. (2009) *Agricultural Task Force Report: World Vision Niger Agricultural Development* World Vision p.4;

⁵³ Tougiani et al. (2008:10) cited in World Resources (2008) *Roots of Resilience - Growing the Wealth of the Poor*, Chapter 3: Turning Back the Desert: How Farmers Have Transformed Niger’s Landscape and Livelihoods

⁵⁴ Larwanou et al. (2006:1) World Resources (2008) Op. cit.

⁵⁵ Winterbottom (2008) World Resources (2008) Op. cit.

⁵⁶ Tougiani et al. (2008:13) World Resources (2008) Op. cit.

⁵⁷Tougiani et al. (2008:13) Op. cit. See also Toumieux (2005) cited in World Resources (2008) Op. cit.

⁵⁸Reij (2006:2); IPCC (2007:444, 447–48) Tougiani et al. (2008:16) cited in World Resources (2008) Op. cit.

⁵⁹World Resources Institute (March 2012) Op. cit.

⁶⁰Government of Niger *Initiative 3N* Op. cit. The different axes of work are: increasing and diversifying agricultural production, strengthened processing and marketing of agricultural production, improving resilience by improving prevention and management of food crises and disasters, and improving nutrition. The provisional framework, published in March 2012 contains a realistic analysis of the underlying and linked problems of production, purchasing power of the poor, and child malnutrition

⁶¹In the past 20 years, Niger's population has doubled to 14 million people, and it maintains one of the highest birth rates in the world of about 7.1 children per woman. Similar demographic pressures face Niger's neighbors, including Burkina Faso, Mali, and Chad. (Wentling 2008b:1; INS and Macro International Inc. 2007:xxv) in World Resources (2008) op cit.

⁶²McGahuey (2008) World Resources (2008) Op. cit.

⁶³Government of Niger (March 2012) *Initiative 3N*. Op. Cit. Even in the best harvest years, at least 1 million land-poor Nigeriens need food aid due to localized droughts or pest infestations. Wentling (2008a:5) in World Resources (2008)

⁶⁴Government of Niger (March 2012) *Initiative 3N* Op. cit. p.22

⁶⁵World Bank (2008) *From Agriculture to Nutrition: Pathways, Synergies and Outcomes*

⁶⁶World Bank (2008) Op. cit.

⁶⁷Save the Children (2012) *A LIFE FREE FROM HUNGER* Op. cit. p.56

⁶⁸Masset E, Haddad L, Cornelius A and Isaza-Castro J (May 2011), *A systematic review of agricultural interventions that aim to improve nutritional status of children*. London: EPPI-Centre, Social Science Research Unit, Institute of Education, University of London. p.14

⁶⁹ReliefWeb (Dec 2011) *Zero child hunger: breaking the cycle of malnutrition*. <http://reliefweb.int/node/463777> For full review, see Masset et al. 2011.

⁷⁰ReliefWeb (Dec 2011) *Zero child hunger: breaking the cycle of malnutrition*. <http://reliefweb.int/node/463777>

⁷¹World Bank (2008) Op. Cit.

⁷²World Bank (2008) Op. cit.

⁷³Save the Children (2012) *A LIFE FREE FROM HUNGER Tackling child malnutrition* p.56, and p.59.

⁷⁴Save the Children (June 2012) *A chance to Grow: How social protection can tackle child malnutrition and promote economic opportunities*

⁷⁵European Union (April 2012) *Addressing food and nutrition security through the implementation of national social transfer programmes*. ROSA Newsletter No. 36 http://www.reseau-rosa.eu/IMG/pdf/ROSA_Newsletter_36_EN.pdf

⁷⁶ See World Bank <http://data.worldbank.org/indicator/NY.GDP.MKTP.KD.ZG>. Also CIA Fact Book <https://www.cia.gov/library/publications/the-world-factbook/rankorder/2003rank.html>

⁷⁷ UNDP (May 2012) *Africa Human Development Report 2012*. Op cit. see Chapter 6

⁷⁸ UNICEF Niang, O et al. 2012: *The effects of safety nets on the resilience of vulnerable households in Niger*. Other authors include Guido Cornale, Representative, UNICEF Niger (gcornale@unicef.org); Ousmane Niang, Chief of Social Policy, UNICEF Niger (oniang@unicef.org); Soukeynatou Fall, Monitoring and Evaluation Specialist, UNICEF Niger (sfall@unicef.org); Rocio Berzal, C4D Specialist, UNICEF Niger (rberzal@unicef.org); Véronique Mistycki, Reports officer, UNICEF Niger (vmistycki@unicef.org).

⁷⁹ World Bank (April 2012) *Safety Nets Work: During Crisis and Prosperity* <http://siteresources.worldbank.org/DEVCOMMINT/Documentation/23170403/DC2012-0003%28E%29SafetyNets.pdf> See also Sahel Working Group (October 2011) *Breaking the Hunger Cycle* op cit. pp.37-38 and Annex B10 p 96

⁸⁰ Alderman, H and Ruslan Yemtsov, R. March 2012 *Productive Role of Safety Nets* Discussion Paper No 1203 Background Paper for the World Bank 2012–2022 Social Protection and Labor Strategy. World Bank

⁸¹ Safety nets are one type of social transfer, often short-term, to prevent the negative impacts of transient shocks.

⁸² WFP (October 2010) *Chocs et vulnérabilité au Niger [Shock and Vulnerability in Niger]*

⁸³ Jones, N and Holmes, R. (July 2010) *Tackling child vulnerabilities through social protection: lessons from West and Central Africa* Background Note ODI

⁸⁴ Jones, N and Holmes, R. Op cit. p6

⁸⁵ Save the Children (June 2012) *A Chance to Grow*. Op. Cit. p.26

⁸⁶ The EC document noted progress made in the Sahel in adopting social transfers to strengthen for social protection and food security. It was noted that feasibility studies have also been conducted in several countries for the establishment of national social transfer programmes on a multi-annual basis.

⁸⁷ EU (April 2012) *Addressing food and nutrition security through the implementation of national social transfer programmes*. ROSA Newsletter No. 36 http://www.reseau-rosa.eu/IMG/pdf/ROSA_Newsletter_36_EN.pdf

⁸⁸ World Bank April 2012 *Safety Nets Work: During Crisis and Prosperity* p.9

⁸⁹ Jones, N and Holmes, R. (July 2010) Op. cit. p2

⁹⁰ Save the Children (2012) *A LIFE FREE FROM HUNGER Tackling child malnutrition*. p.13

⁹¹ Human Rights Watch- HWR. (2011) *Mali: Enforce New Plan to Curb Child Labor*. <http://www.hrw.org/news/2011/06/15/mali-enforce-new-plan-curb-child-labor> Mali adopted the National Action Plan for the Elimination of Child Labour on June 12, 2011. The plan aims to eliminate the worst forms of child labour by 2015, and all child labour by 2020 by providing children with access to education, vocational training, and support, and by offering income-

generating activities for concerned families and other provisions to comply with Mali's international commitments.

⁹² Jones, N and Holmes, R. (July 2010) Op. cit.

⁹³ UNICEF: Laura Huyghe et Shushan Mebrahtu *Les enfants sont obligés de quitter l'école pour aider leur famille* <http://reliefweb.int/node/494187>

⁹⁴ Save the Children (2012) *Assessment of the Needs in Child Protection, Education and WASH sectors in the context of the 2012 Food Crisis in Niger*.

⁹⁵ Jones and Holmes (July 2010) ODI op. cit.

⁹⁶ See the recent report World Vision (Feb 2012) *Small World Big Responsibility: The UK's Role in Global Trade in Children* <http://www.worldvision.org.uk/news/headlines/modern-lifestyles-risk-fuelling-child-labour/> where this quote is found

⁹⁷ Save the Children (2012) *Assessment of the Needs in Child Protection Niger*. Op. Cit.

⁹⁸ Jones and Holms (July 2010) ODI op. cit.

⁹⁹ Save the Children (June 2012) *A chance to Grow: How social protection can tackle child malnutrition and promote economic Opportunities* p.15

¹⁰⁰ Sahel Working Group (October 2011) *Breaking the Hunger Cycle: Pathways to Resilience in the Sahel*, p.20

¹⁰¹ Save the Children (June 2012) *A chance to Grow*. Op. cit. p.11

¹⁰² Save the Children (June 2012) *A chance to Grow*. Op. cit.

¹⁰³ Save the Children June 2012 *A Chance to Grow*. Op. cit.

¹⁰⁴ IRIN (May 28 2012) *Sharp Price Hikes cause Alarm* (from Famine Early Warning Systems Network (FEWS NET). <http://www.irinnews.org/Report/95532/SAHEL-Sharp-price-hikes-cause-alarm>

¹⁰⁵ Sahel Working Group (October 2011) Op. Cit. p.42

¹⁰⁶ Save the Children (October 2011) *Costing Lives The devastating impact of rising and volatile food prices* Save the Children estimates that record food prices have put 400,000 more children at risk .

¹⁰⁷ Mousseau, F., Mittal, A., (October 2006) *Sahel: A Prisoner of Starvation? A Case Study of the 2005 Food Crisis in Niger*. The Oakland Institute, www.oaklandinstitute.org p.24

¹⁰⁸ Sahel Working Group (October 2011) *Escaping the Hunger Cycle* Op.cit. p.20

¹⁰⁹ IRIN (May 28 2012) *Sharp Price Hikes cause Alarm* op. cit. The Mali and Burkina Faso governments have banned grain exports. Mali has also lowered taxes on imported rice. Niger, Chad and Mauritania have made subsidized grains available. Senegal has sought to bring down cereal prices through consultations with importers, distributors and consumer groups. In Burkina Faso, after the failure of a programme to fund selected traders to sell staple grains at reduced prices, the government decided to directly open shops in 182 communes, selling rice at \$14 per 25kg bag.

¹¹⁰ IRIN (May 28 2012) *Sharp Price Hikes cause Alarm*. Several people working on the ground in Burkina have confirmed in interviews that often the poorest families do not benefit.

¹¹¹The G8 proposed a variety of market and trade based risk management mechanisms to reduce household vulnerability to high prices. Some sought to improve the functioning of markets, for example, by improving market information and transparency. Other mechanisms were proposed to address the effects of commodity speculation and trade barriers

¹¹²Other factors are ineffective government policies, like closing cross border trade in agricultural products with neighbouring countries) and also rising international food prices.

¹¹³Until the 1980's, governments in the Sahel had maintained strategic grain reserves to stabilize food supplies and prices across seasons and in bad years. These grain reserves were largely phased out, criticized as too expensive, inefficient and prone to political influence. However, this left the population highly vulnerable to volatile prices since government had little capacity to respond to devastating food crises. Buffer stocks were replenished by purchasing grain after harvests at good prices to encourage production. Stocks were released onto the market several months later at purchase plus storage costs

¹¹⁴RESOGEST 29 Février – 01er Mars 2012 *Rencontre des Structures en Charge de la Gestion des Stocks Nationaux de Sécurité Alimentaire au Sahel et en Afrique de l'Ouest*. Cadre de Concertation Ouagadougou/Burkina Faso p.2

¹¹⁵G20 France (22-23 June 2011). *Ministerial Declaration: Action Plan on Food Price Volatility and Agriculture Meeting Of G20 Agriculture Ministers*. Paris. This declaration stated "We request the WFP and other international organizations to conduct a feasibility study and cost-benefit analysis with a view to developing a proposal of a pilot project for such a system, consistent with annex II of the WTO Agreement on Agriculture, focused on regional approaches, ensuring ownership by and partnership with the countries concerned, and providing evidence of added-value in terms of cost effectiveness and optimization... Moreover, we invite the interested international organizations to develop a code of conduct for responsible emergency food reserves management, compiling a set of voluntary principles and good practices"

¹¹⁶The policy response of World Vision to this apparent oversight was a call to "Ensure that the feasibility (or pilot) study for Emergency Food Reserves (EFRs) to be undertaken in West Africa includes strategies to meet the specific nutritional needs of pregnant and lactating women and children under two years of age in emergencies". Personal Communication, World Vision. Currently, the feasibility study on EFR's approved at the G20 Development Ministerial is focused only on grains and does not include specific measures to meeting the nutritional needs of pregnant/lactating women and children under two years of age.

¹¹⁷Twigg, J. et al. (Aug. 2007). *Characteristics of a Disaster-resilient Community A Guidance Note Version 1 DFID Disaster Risk Reduction Interagency Coordination Group*

¹¹⁸Such initiatives are both humanitarian, to help save lives, and developmental in increasing communities' resilience to hazards, as a prerequisite for sustainable development. According to the UN Hyogo Framework of Action (see Twigg et al. Op. cit.) DRR must be an integral part of both emergency response and longer-term development programmes

¹¹⁹ FAO (2012) *Plan d'Action pour la Gestion des Risques de Catastrophes au Niger 2012-14*. For the 2012 crisis in Niger, one of the FAO's contributions has been support to 425,000 households in vulnerable zones for off-season irrigated agriculture for 90,000 hectares. The dry season crops produced the equivalent of 300,000 tonnes of cereals. Personal communication, FAO Niger

¹²⁰ FAO (April 2012) *La Crise Alimentaire et Nutritionnelle du Sahel: L'urgence d'appuyer la résilience des populations vulnérables. Cadre stratégique de réponse régionale* Burkina Faso, Gambie, Mali, Mauritanie, Niger, Tchad, et Sénégal Version 2 p.14

¹²¹ WFP (Sept 2011) *Policy on Disaster Risk Reduction and Management: Building Food Security and Resilience*. WFP co-leads the food security cluster with the FAO and leads the logistics cluster and the emergency telecommunications cluster; where it is responsible for providing support to inter-agency contingency planning, preparedness and early warning, and for coordinating emergency response. WFP co-chairs the IASC sub-working group on preparedness, which aims to strengthen and promote inter-agency preparedness, contingency planning and early warning across the humanitarian community. WFP is also collaborating with partners in the development of innovative approaches that bring together disaster risk reduction, climate change adaptation and mitigation, and food security objectives, for example through "climate-smart agriculture". The WFP uses or supports a focused set of food assistance tools ranging from vulnerability analysis to early warning and from emergency response to capacity building.

¹²² WFP (Sept 2011) Op. cit. Because of the link between food insecurity and natural disasters, preparing for, preventing and mitigating the impact of disasters are central to WFP's mission

¹²³ Pelham, L., Edward Clay, E., Braunholz, T. (February 2011) *Natural Disasters: What is the Role for Social Safety Nets?* SP Discussion Paper No 1102 Social Protection and Labour World Bank. See also World Bank April 2012 Safety Nets Work Op. Cit.

¹²⁴ CRS (March 2012) *Draft Sahel Resiliency Study Terms of Reference*. This study assesses the PROSAN programme led by CRS in partnership with CARE International and Helen Keller International, financed by Food for Peace, USAID, in Tahaou, Zinder and Dosso; The determination of household resilience is based on an index comprising 4 key indicators reflecting the three dimensions of food security (access, availability and use): household hunger and coping strategies; Dietary diversity; Proportion of household expenditures spent on food; Livestock owned (measured in kg)

¹²⁵ OXFAM and Save the Children (January 2012) *A Dangerous Delay: The cost of late response to early warnings in the 2011 drought in the Horn of Africa* Joint Agency Briefing Paper p.5

¹²⁶ IDS (April 2012) *Children, Climate Change and Disasters* IDS Policy Briefing ISSUE 23

¹²⁷ *Children's Charter : An Action Plan for Disaster Relief Reduction for Children, by children*. http://www.childreninachangingclimate.org/database/CCC/Publications/children_charter.pdf

¹²⁸ Cited in World Vision (2010) *Global Health and Nutrition* [http://www.wvi.org/wvi/wviweb.nsf/11FBDA878493AC7A882574CD0074E7FD/\\$file/Nutrition_designed_FINAL.pdf](http://www.wvi.org/wvi/wviweb.nsf/11FBDA878493AC7A882574CD0074E7FD/$file/Nutrition_designed_FINAL.pdf) Also in IASC (Feb 2012). *Strategic Document*

Response plan op. cit. p9. Neither cites the original Lancet source but believed to be an article from 2008 (Maternal and child undernutrition: global and regional exposures and health consequences).

¹²⁹World Food Security Summit (2009) *Declaration Concept of Food Security*: “Food security exists when all people, at all times, have physical, social and economic access to sufficient, safe and nutritious food to meet their dietary needs and food preferences for an active and healthy life. The four pillars of food security are availability, access, utilization and stability. The nutritional dimension is integral to the concept of food security.” While some would argue that adequate nutrition is integral to the concept of food security, in practice, it is not. While food security refers to “utilisation” (i.e. nutrition), this term is often understood differently by different organisations. http://www.fao.org/fileadmin/templates/wsfs/Summit/Docs/Final_Declaration/WSFS09_Declaration.pdf

¹³⁰This is particularly evident in government agencies responsible for managing disaster and by CILSS, but also by WPF, FAO and the UNDP, and international NGOs. Need assessments remain overly focused on crop production and often concentrate disproportionately on food insecurity.

¹³¹An example is CRS and its partners, including the donor, Food For Peace, which are assessing resilience entirely within the Food Security paradigm. “Nutrition” is being assessed only in terms of diet diversity. See CRS above

¹³²ALNAP 2011 Humanitarian Action in Drought-Related Emergencies. <http://www.alnap.org/pool/files/alnap-lessons-drought.pdf>

¹³³Sahel Working Group (2011) *Breaking the Hunger Cycle* op. cit.

¹³⁴The large-scale plan by Burkina to produce 50,000 tonnes of off-season irrigated maize unfortunately largely failed to achieve its goal.

¹³⁵See OXFAM and Save the Children (January 2012) *A Dangerous Delay* op. cit.

¹³⁶For example, in November, the UN Central Emergency Response Fund (CERF) released 6 million dollars for Niger. By December, after the Niger government developed a preliminary response plan, CERF released another 6 million dollars.

¹³⁷Most agencies interviewed were reluctant to criticise FEWS Net, but admitted that the dissenting perspective by such a well respected agency as FEWS Net about the scope and gravity of the crisis was a factor that initially delayed donor response. FEWS Net stated that agencies should be more precise and nuanced about numbers of people affected, because not all people within the affected areas were affected. FEWS Net insisted that the crisis was not engulfing the entire region, but was simply distributed across it. Rather than a blanket response, FEWS Net recommended more targeted, localized interventions. This was only one of the issues of differing views. Others included the role of markets to address food deficits, and whether to take into account the effects of probable responses in the projections. For more detail, see *IRIN (Dec 2011) Getting early warning right in the Sahel* <http://www.irinnews.org/Report/94531/Analysis-Getting-early-warning-right-in-the-Sahel>. See also, the FAO, while not explicitly citing FEWS Net, has a section in its strategic regional response paper on the food and nutrition crisis, that describes the process and actors involved in early warning analysis, and the “challenge to arrive at a consensus about the analysis. FAO (April 2012) *La Crise Alimentaire et Nutritionnelle du Sahel* op. cit p.10

¹³⁸ See <http://fts.unocha.org/pageloader.aspx?page=emerg-emergencies§ion=CE&year=2012>

¹³⁹ Emergency Capacity building Project –ECB Mar 2012 *Joint study finds Niger communities will run out of food before next harvest* by World Vision, Save the Children, CARE, PLAN, OXFAM, Mercy Corps, CRS <http://www.ecbproject.org/resources/library/228-press-release-niger-communities-say-they-will-run-out-of-food-before-next-harvest-joint-study-shows>

¹⁴⁰ Levine, S. et al. (November 2011) *System Failure: Revisiting the problems of timely response to crises in the Horn of Africa* ODI Humanitarian Practice Network, Network Paper Number 71

¹⁴¹ Levine notes that even getting one agency to change actually involved a complex manoeuvring of many different departments (with different perspectives, objectives and working norms), the complexity became even more daunting with multiple, often competing institutions.

¹⁴² Interagency Resilience Working Group April 2012 *The Characteristics of Resilience Building*. Op. cit.

¹⁴³ Levine, S. et al. (Nov. 2011) *System Failure*. Op. cit. According to Levine, systems analysis is useful wherever individual actors within a system cannot on their own achieve the wider objective (i.e. in this case, resilience), however well they perform a system consists of different components. A system perspective can often reveal how behaviour that is competent from the standpoint of each individual actor does not contribute to achieving the overall goal which collectively all the actors in the 'system' say they are working towards, in different ways

¹⁴⁴ *Prime Minister Urges Coordinated Solution To Recurrent Food Crises In West Africa* <http://allafrica.com/stories/201206061206.html>

¹⁴⁵ IASC (Feb 2012) *Strategic Document Response plan* Op. Cit. p.4. See also Section 6. In the elaboration process for the response strategy, the UN consulted with development actors at the regional level to exchange ideas on programmes and initiatives related to strengthening resilience and sustainable development. OCHA admits that "to date, this integration remains fairly incomplete. It will require greater coordination between the governments of concerned countries and partners dealing with various aspects of assistance so as to prioritize the actions that will lead to resilience and sustainable development in the region"

¹⁴⁶ The text of the plan can be found at http://apps.who.int/gb/ebwha/pdf_files/WHA65/A65_11-en.pdf page 9 for the stunting target. The link to the resolution that endorsed the plan is: http://apps.who.int/gb/ebwha/pdf_files/WHA65/A65_R6-en.pdf

¹⁴⁷ UNEP (2011) *Livelihood Security: Climate Change, Migration and Conflict in the Sahel*

¹⁴⁸ IRIN (May 28 2012) *Sharp Price Hikes cause Alarm* Op. cit.



Save the Children

Save the Children

1 St John's Lane
London EC1M 4AR
Telephone +44(0)20 7012 6400
Fax +44 (0)20 7012 6963
www.savethechildren.org.uk

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World Vision®

World Vision

World Vision House, Opal Drive,
Fox Milne, Milton Keynes, MK15 0ZR
www.worldvision.org.uk

World Vision – London office

11 Belgrave Road,
London, SW1V 1RB

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