



UNITED NATIONS POPULATION FUND

SITUATION REPORT

PROTRACTED HUMANITARIAN CRISIS IN NIGER

1 – 31 August 2025

Highlights

- Persistent insecurity and population displacement in Niger has heightened the risk of gender-based violence (GBV) for women and girls. In Diffa, these factors are driving domestic violence, early marriage, and sexual violence, with limited available GBV and sexual and reproductive health (SRH) services. In Tillabéry, recurrent attacks and displacement are restricting survivors' access to critical medical and psychosocial care.
- Insecurity has severely disrupted health services in several areas, including CSI Ngagam, Gueskerou, and Chetimari. This has led to a decrease in assisted deliveries and a corresponding rise in home births. The complete halt of reproductive health services at the Malan Boukardi health centre following an armed incursion on 7 August was particularly concerning. Additionally, a critical shortage of essential maternal health supplies, such as safe delivery kits, has further complicated the situation.
- Severe floods have affected approximately 115,700 people across Niger, resulting in 53 reported deaths. Critical gaps persist in the humanitarian response, including the need for food, shelter, and SRH and GBV services.



2,600,000

Total people affected¹



546,000

Women of reproductive age²



122,842

Estimated pregnant women²



194,576

People targeted w/ SRH services



105,000

People targeted w/ GBV programmes

¹ [Niger Humanitarian Needs and Response Plan 2025](#)

² Estimated figures are based on the Minimum Initial Services Package (MISP) for Sexual and Reproductive Health in Humanitarian Settings calculator.

Situation Overview



Niger is facing a complex, multi-faceted crisis of persistent conflict and insecurity, flooding, and widespread poverty, which has led to population displacement and food insecurity. Women, girls, and young people are disproportionately affected by these factors, which exacerbate vulnerabilities and severely restrict access to essential health and protection services.

The crisis has left 1.6 million women of reproductive age in urgent need of SRH services. This includes approximately 272,750 pregnant women who require

medical care, with 13,640 of them at risk of life-threatening complications.

The crisis has also heightened the risk of GBV, with 923,660 adolescent girls particularly vulnerable to early marriage and sexual violence.

This humanitarian crisis demands an urgent, coordinated response to provide essential SRH services, GBV protection, and targeted support for adolescents and youth.

UNFPA Response

Sexual and Reproductive Health (SRH):

SRH Information and Awareness: A social mobilization campaign and mobile delivery of SRH and family planning services was carried out in the districts of Magaria, Dounouss, and Gouré. The initiative focused on promoting SRH service use; girls' education and school retention; and the prevention of GBV, including child marriage. The mobile services engaged 20 traditional leaders, 20 religious leaders, and local administrative authorities who supported efforts to promote the services to the community.

SRH services: By deploying skilled midwives to fixed and mobile clinics, UNFPA reached **20,557 people** with SRH services. The social mobilization campaign contributed significantly, reaching **3,803 women and girls** and resulting in:

- 2,553 new users of family planning services.
- 173 obstetric complications that were managed.
- 856 antenatal consultations.
- 221 assisted deliveries.



Gender-based violence: UNFPA implementing partner, Promotion du Pastoralisme et Développement (PPD) conducted awareness sessions on GBV prevention and response in Diffa and Maradi, reaching a total of 2,204 women and girls - 1,376 in Diffa and 828 in Maradi. These activities focused on key issues such as the prevention of sexual violence and early marriage, and also included providing essential medical and psychosocial assistance, referrals, and training. In several other areas of Niger, GBV activities by UNFPA partners were affected by insecurity.

Adolescents and youth: UNFPA youth staff, in collaboration with implementing partners Comité pour Un Développement Durable (CDD) and PPD, organized a community clean-up to improve the health centre environment.



Results Snapshot



20,557
People reached with **SRH services**
90% female, 10% male



84
Health facilities supported



10,207
People reached with **GBV prevention, mitigation and response** activities
70% female, 30% male



6
Safe spaces for women and girls supported



1,300 Non-food items (such as dignity kits) distributed to individuals



67 People reached with humanitarian cash and voucher assistance for GBV and SRH

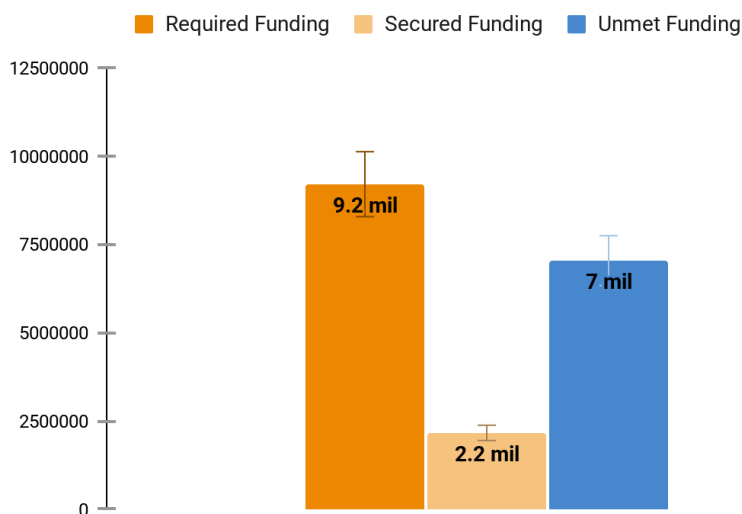


6 Youth spaces supported

Funding Status

Out of the **US \$9,200,000** required for UNFPA's overall humanitarian response in Niger, **US \$2,162,358** (24%) has been successfully mobilized.

However, a significant funding gap of **US \$7,037,642** (76%) remains. Additional funding is urgently required to meet the needs and deliver lifesaving SRH and GBV services.



Disclaimer: Funding available is based on cash received during the current year as well as funding rolled over from previous years, and transfers from/to other UNFPA departments. It does not include funds from agreements that have been signed but not yet received.

“A woman’s empowerment is not only a personal victory. It is a triumph that radiates far beyond, improving her family’s quality of life and extending the life expectancy of her partner.”

– Mr. Saidou Kabore, Resident Representative of UNFPA in Niger.

Current Donors

- UNFPA Emergency Fund
- Global Affairs Canada
- Government of Norway
- Government of Luxembourg
- Government of Denmark

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