

# Country WID Profile

## (Niger)

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Abbreviation  
(Niger)

AFCE	Association des Femmes Commerçantes et Entrepreneurs du Niger/ Association of Female Shopkeeper and Managers in Niger
AFN	Association des Femmes du Niger/ Association of Women in Niger
BCG	Bacillus Calmette-Guérin
CEDAW	Committee for the Elimination of Discrimination against Women
CIDA	Canadian International Development Agency
DED	Service Allemand de Développement/ German Development Service
FAO	Food and Agricultural Organization
GDP	Gross Domestic Product
GNI	Gross National Income
GNP	Gross National Product
HIV/AIDS	Human-Immunodeficiency Virus/ Acquired Immuno-Deficiency Syndrome
MAG/EL	Ministère de l'Agriculture et de l'Elevage/ Ministry of Agriculture and Breeding
MDS/P/PF/ PE	Ministère du Développement Social, de la Population, de la Promotion de la Femme et de la Protection de l'Enfant/ Ministry of Social Development, Population, Female Status Improvement and Child Care
MFP/T/E	Ministère de la Fonction Publique; du Travail et de l'Emploi/ Ministry of Public Affairs and Labor/ Ministry of Civil Service, of Work and of Employment
MSP	Ministère de la Santé Publique/ Ministry of Public Health
NGO	Non Governmental Organization
ORT	Oral Rehydration Therapy
RDFN	Rassemblement Démographique des Femmes du Niger/ Demographic Assembly of Women in Niger
SNA	System of National Accounts
UNDP	United Nations Development Programs
UNICEF	United Nations Children's Fund
WID	Women in Development

# Country WID Profile (Niger)

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## 1. Basic Profile

### 1-1 Socio-Economic Profile

#### Economic indicators source: 1)

GNI/Capita (US\$)	Growth rate of real GDP	GDP Implicit deflator	Gini index	Aid/GNI
190 ('99)	2.4% (90-99)	6.4% (90-99)	50.5 ('95)	9.4% ('99)
230 ('94)	-0.1%(80-90)	1.9% (80-90)	36.1 ('92)	24.6% ('94)

Note: World Development Indicator 2001 replaced GNP with GNI in line with the 1993 SNA.

#### Demographic indicators source: 1), \*2), \*\*3)

Total (millions)	% of female population	% of urban population*	Population growth rate**	Total Fertility Rate**	Life Expectancy*	
					Male	Female
10 ('99)	50.6% ('99)	20.1% ('99)	3.3% (90-99)	6.6 ('99)	44.5 ('99)	45.1 ('99)
8.7 ('94)	NA	18% ('95)	3.3% (80-95)	7.3 ('95)	45.9 ('95)	49.2 ('95)

#### Public sector expenditure to sectors source: 4)

	Health	Education	Social Welfare	Defense	Others
2000	2.3%	2.7%	1.3%	1.3%	NA
1991-5	NA	NA	NA	NA	NA

#### Industry/GDP source: 1)

	Agriculture	Industry	Service
1999	41%	17%	42%
1995	39%	18%	44%

#### Labour indicators source: 1)

total	Total No.	Unemployment Rate	Minimum wage
1999	5 mil	NA (96-98)	NA (95-99)
1995	4 mil	NA	NA

female	% of total	Unemployment Rate	Minimum wage
1999	44.3%('99)	NA(96-98)	NA
1995	44% ('95)	NA	NA

#### Proportion of workers source: 1)

male	Agriculture	Industry	Service
1996-98	NA	NA	NA
1980	7%	69%	25%

female	Agriculture	Industry	Service
1996-98	NA	NA	NA
1980	6%	29%	66%

#### Decision-making source:4)

	Member of parliament	Ministries	Deputy	Managers	Technicians
1999	1.2%	16.6%	8.3%	8.3%	8.0%
1995	NA	NA	NA	NA	NA

#### Law for women

Right to Vote (1948)	Obtainment of the right to vote
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#### Ratification and signature of international law for women

Convention on the Elimination of All forms of Discrimination against Women (CEDAW)	Ratified in 1999
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#### Policy of WID

Policy of Female Status improvement (1996)	1) To plan and implement the action plan on improvement of female status. 2) To establish system to accumulate and manage data on female. 3) To promote democratization and female participation in decision making to deal with political and administrative policies, etc.
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#### Governmental organization of WID

National Machinery	Department of Female Status Improvement, Ministry of Social Development, Population, Female Status Improvement and Child Care/ Government Organization
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#### References

- 1) World Development Report, World Bank, 1996, 1997, 2001
- 2) Human Development Report, UNDP, 1996, 1997, 2001
- 3) The State of the World's Children, UNICEF, 1996, 2001
- 4) Department of Statistics, Ministry of Planning, Niger

## 1-2 Health Profile

### Expansion of health service source: 1), \*2)

No. of physicians (per 1,000 people)	No. of Hospital Beds (per 1,000 people)	Public expenditure on health* (% of GDP)
<0.05 (90-98)	0.1 (90-98)	1.2 ('98)
NA ('80)	NA ('80)	NA ('90)

### Child health source: 3)

	Mortality Rate		% of the vaccinated (1-year-old children)				
	Infant (per1,000)	Under-5 (per1,000)	BCG	DPT	Polio	Measles	
1999	162	275	97-99	36%	21%	21%	25%
1995	191	320	92-95	32%	18%	18%	18%

### Family planning source: 3), \*1),

Contraceptive prevalence rate	Births attendance rate	Maternal mortality rate (per100,000)*	Age at first marriage (years old)	Total fertility rate
8% (95-00)	18% (95-00)	590 (90-99)	15.2('97)	6.6('99)
4% (90-96)	15% (90-96)	593 (89-95)	NA	7.3 ('95)

### HIV/AIDS source: 1)

% age 15-49	Women (No.of age15-49)
1.35% ('99)	34,000('99)
NA ('95)	NA ('95)

### Nutrition source: 3)

% of infants with low birth weight	Oral re-hydration therapy use rate
15% (95-99)x	21% (95-00)
15% (90-94)	20% (90-96)

### Community health service source: 3)

	Access to safe water		Access to adequate sanitation	
	urban	rural	urban	rural
1999	70%	56%	79%	5%
90-96	46%	55%	71%	4%

## 1-3 Education Profile

### Commitment to education source: 2), 4)

Education system* (years)		Public expenditure on education (as % of)	
Compulsory	Primary	GNP	gov. expenditure
NA	6	2.3(95-97)	12.8(95-97)
		NA(85-87)	NA(85-87)

### Adult literacy rate source: 2)

	Total	Male	Female
1999	15.3%	23.0%	7.9%
1995	13.6%	20.9%	6.7%

### Enrollment ratio source: 3), \*2)

	Primary education (Net enrollment ratio)		Secondary education (Gross enrollment ratio)		Higher education (Gross enrollment ratio)*			
	Male	Female	Male	Female	Male	Female		
95-99	30%	19%	95-97	9%	5%	94-97	NA	NA
90-95	32%	18%	90-94	9%	4%	90-95	NA	NA

### Female ratio of higher education

	Education	Humanities	Social Sciences	Natural Sciences, Engineering	Medicine
1999	NA	NA	NA	NA	NA
1995	NA	NA	NA	NA	NA

## References

- 1) World Development Report, World Bank, 1996, 1997, 2001
- 2) Human Development Report, UNDP, 1996, 1997, 2001
- 3) The State of the World's Children, UNICEF, 1996, 2001
- 4) Ministry of National Education, Niger

X: indicates data that refer to years or periods other than those specified in the column heading, differ from the standard definition, or refer to only part of a country

## 2. General Situation of Women and Government Policy on WID/Gender

### 2-1 General Situation of Women in Niger

#### General Situation of Women in Niger

- 1) Out of the total population, 80% of them are involved in the agricultural sector, which occupies only 6% of the land.
- 2) Niger, which is 173<sup>rd</sup> out of 174 countries on the HDR scale, is one of the least developed countries in the world (Human Development Report, UNDP 2000).
- 3) The adult literacy rate is 19.9% for total, 10.6% for female (30.4% for male) (UNICEF, 2000). The low female enrollment rate and high dropout rate are educational issues.
- 4) The Koran has strong impact on the society. In early 1990's, women groups tried to enact family law (Code Familial), but rising Islamic fundamentalism, made its enactment impossible. Research on Code Familial is still being conducted.

#### [General situation]

Niger was independent from France in 1960. The total population in 2000 is 10.2 million (Ministry of Population) and the territory (1,270,000 km<sup>2</sup>) is situated in the south edge of Sahara desert, so called SAHEL area. Though the farmland is only 6% of the land, 80% of the population is involved in the agricultural sector. Because of the progress of desertification caused by successive drought, the more population migrates from the central SAHEL area (13% of the land, the amount of rainfall per year: 200-350mm) to the southern area (12% of the land, the amount of rainfall per year: 350-500mm). Female roles, such as fetching water and gathering wood for fuel are becoming more difficult to carry out, because water sources and forests are retreating from resident areas. Since more men have gone to urban areas to seek employment opportunities, women in the rural areas shoulder a large share of the responsibility on securing foodstuffs for the household.

A slump in agricultural sector caused by draught, and steep fall in international market prices of uranium have led to a continuing economic crisis. GDP growth rate is negative since 1999, foreign debt is 92% of GNP in 2000 (World Bank estimation), GNP per capita is 190 dollars (2001 UNICEF Annual Report). The introduction of structural adjustment programs since 1983 led to large budget cutbacks in the social sector such as education and health, and the reduction of public sector employment. In Human Development Index of 2000, Niger is ranked 173rd out of 174 countries, making it one of the least developed countries in social development (Human Development Report, UNDP 2000).

The total adult literacy rate is 19.9%, 10.6% for female (30.4% for male). Educational issues are females' low enrollment rate (the gross enrollment rate of female for primary education is 25.2%; MICS, 2000 UNICEF), and high dropout rate. Early marriage and prolificacy are severe burdens on women's physical well-being, access to medical services is limited and family planning has not been popular. Women are in charge of most of the housework and nearly half of food production. The ratio of working population in the governmental statistics is 81.4% for male, 6.6% for female. Approximately 69.5% of women contribute to the productive activities (2000, UNDP report).

### **[Cultural and Social Background]**

The state has enacted national law (modern law). Since nearly 98% of the population is Muslim (UNICEF, 2000), the Koran has a strong impact on the society. Three kinds of law, which is Islam, common law, and modern law each have judicial effect. Muslim leaders called 'Marab' act as arbitrators in situations that are difficult to judge. In all of these laws, women are always disadvantaged compared with men in enjoying basic rights such as the right of inheritance, land ownership and parental authority.

Since virginity is regarded as highly valuable, mothers tend to want daughters to stay home. Lack of parents' understanding of education for girls is one of the causes of low enrollment rate for women. Women tend to be regarded only as workforce and dependents. Women in reproductive age have many restrictions, such as no participation in public meetings and no entrance to the mosques, etc.

In early 1990's, women's groups tried to enact family law (Code Familial), which includes the legal age of marriage (more than 16 years old for women, more than 18 years old for men), equal rights of inheritance for both sexes, prohibition on polygamy, etc. Under the expansion of Islamic fundamentalism, political parties launched a movement against the enactment of the Code Familial in 1994. At present, two consultants (female) are continuing their research for a Code Familial that is acceptable to the public, with assistance from international and bilateral aid agencies and NGOs. In 1999, convention on the Elimination of Discrimination Against women was ratified.

## 2-2 Government Policy on WID/Gender

### Government Policy on WID/Gender

- 1) There were no provisions on improving women's status under the Government Development Program of 1987-1991, but the WID/Gender Policy (Politique de Promotion de la Femme) was formulated in March 1996.
- 2) Politique de Promotion de la Femme has 13 main objectives.

#### [WID/Gender Policy and Plans]

There were no provisions on improvement of women's status under the Government Development Program of 1987-1991. The WID/Gender Policy of Niger, Policy of Female Status Improvement (Politique de Promotion de la Femme), was formulated by the Department of Females Status Improvement in the Ministry of Social Development, Population, Female Status Improvement and Child Care, which is the national machinery, in March 1996.

#### [Main objectives on WID/Gender Policy]

- 1) To plan and implement the action plan on improvement of women's status.
- 2) To establish system to accumulate and manage data on women.
- 3) To promote democratization and female participation in decision making to deal with political and administrative policies.
- 4) To set forth institution on promotion of improvement of women's status and to reinforce NGOs and associations.
- 5) To promote ratification CEDAW, and to prepare laws to ensure women's rights.
- 6) To promote female participation in economic and social activities.
- 7) To improve accessibility to productive resources such as land and agricultural facilities.
- 8) To establish channels for distribution of agricultural products.
- 9) To promote children and maternal health.
- 10) To improve accessibility to financial services for women.
- 11) To strengthen education and vocational education for female.
- 12) To improve working conditions and terms of employment for female workers.
- 13) To eliminate customs based on discrimination against women.



## 2-3 National Machinery

### Department of Female Status Improvement

- 1) Department of Female Status Improvement under the Ministry of Social Development, Population, Female Status Improvement and Child Care has been the National Machinery of WID/Gender matters since 1993.
- 2) In 1989, the WID/Gender focal points were established in each ministry to monitor female-related activities. As a result of the major donors meeting, a declaration to solve female matters was issued, but it has not practiced much due to shortage of budget.
- 3) WID/Gender related activities are also operated by other ministries such as the Ministry of Health, the Ministry of National Education, the Ministry of Public affairs and Labor and the Ministry of Planning.

#### [National Machinery]

Name	Department of Female Status Improvement, Ministry of Social Development, Population, Female Status Improvement and Child Care
Number of Staff	Total: 115 for all the Ministry; 22 for the Department of Female Status Improvement (14 female, 8 male)
Budget	Not Available, but very limited
Function	1) policy planning on improvement of female status 2) cooperation with other ministries, donors and partner organizations for promotion on WID/Gender policy 3) technical cooperation for promotion on WID/Gender policy

In 1981, a section dealing with women's issues, was founded for the first time in the Ministry of Youth Sports and Culture. In 1987, the Ministry of Health, Social and Women was founded, the vice minister was female for the first time. In 1991, the Ministry was reorganized into the Ministry of Social Development and Female status Improvement, then the Department of Population (1992) and the Department of Child Care (1993) were added. Since 1993, the Ministry of Social Development, Population, Female status Improvement and Child Care has been in charge of WID/Gender issues.

In 1989, the WID/Gender focal points in ministries and aid organizations were established to monitor gender mainstreaming in their activities. In 1995, as the result of the meeting with major donors (Swiss Cooperation, CIDA, UNDP), a declaration to solve female issues was made, which has not been put into practice due to shortage of funds. The Department of Improvement of Female Status reports that since the necessary expenses for activities such as gender training for personnel, transportation for monitoring and evaluation of projects etc were not distributed, many WID/Gender policies were impossible to implement.

**[WID/Gender related Activities by other Ministries]**

Ministry of Health	<ol style="list-style-type: none"> <li>1) to educate inhabitants on preventive measure as Family Planning, Pre-maternal examination, Vaccination etc</li> <li>2) to provide Family Planning, Pre-maternal examination, Vaccination and treatment service</li> <li>3) to make strategy against bad habit for female health</li> <li>4) to improve accessibility to health service and the utilization</li> </ol>
Ministry of National Education	<ol style="list-style-type: none"> <li>1) to held seminar for parents, teachers, instructors, teacher's union and NGOs on girl's enrolment promotion</li> <li>2) to arrange Gender Focal Point in education department of ministries and prefectures</li> </ol>
Ministry of Public affairs & Labor	<ol style="list-style-type: none"> <li>1) to enforce the investigation of actual conditions of female employment in Niger</li> <li>2) to promote female employment in bars and restaurants</li> </ol>
Ministry of Planning	<ol style="list-style-type: none"> <li>1) to enforce micro finance project</li> <li>2) to promote large scale irrigation project with female view points</li> </ol>

### 3. Current Situation of Women by Sector

#### 3-1 Education

##### Education

- 1) The adult literacy rate in Niger is the lowest level in the world; the literacy rate for female is 10.6% (1999).
- 2) The enrollment rate for primary education is 35.4% for male, 25.2% for female. Since many girls drop out because of housework, pregnancy and marriage, the completion rate for primary education for female is estimated to 10.4%. (2000, UNICEF).
- 3) In the category of higher and vocational education, the field of study that women choose is limited when compared with men because of social prejudice.

#### [General situation]

Primary school (for 6 years from 7 years old), secondary education (for 7 years from 13 years old; the lower secondary: 4 years, upper secondary: 3 years) and the higher education follows after. The age of compulsory education is 7-15 years old. One type of school is the Koran school based on Islam and the other is the school based on general education. Most of the students attend the Koran school (EIU, 1996).

Educational facilities are confronted with shortage of infrastructures and teachers, both in quality and in quantity. Marked geographical disparities in enrolment rates for primary education exist: 69.7% in a capital, 24.8% in rural area (Ministry of National Education, 2000). The Ministry of Female Status Improvement reports that the disparity among geographic areas is between 8.8% and 70%, where the national average is 34% (2000, Ministry of National Education, UNICEF). Pre-school education is concentrated in urban areas and the enrolment rate is 7% for three to six years old (UNICEF, 1999 and Ministry of National education). Though education costs are free in principal, the enrolment rate in every stage of education is low because of expenses related with schooling, lack of parents' understanding, and the difficulty of attending school caused by nomadic lifestyle and religious beliefs.

The adult literacy rate is 10.6% for female, 30.4% for male (Niger development report, 1999), much lower than the average rates of African nation in Sub-Sahara (48% for female, 67% for male in 1995). To improve primary education and to raise the enrolment rate, the government invested about 76 million dollars to the basic education project since 1994. The share of educational budget in 1999 is 12.5% (Ministry of National Education, 2000).

#### [Primary, secondary and higher education]

The gross enrollment rate for primary school (1996-2000) is 25.2% for girls, 35.4% for boys, and these figures are much lower than the average rates of African nations in Sub-Sahara (66% for girls, 89% for boys, UNDP 1999). The reasons of the low enrollment rate for girls are 1) the responsibility for housework 2) lack of parents' understanding of education, 3) education related costs as stationeries and clothes. When parents can not afford educational expenses for all children, boys tend to have priority over girls in schooling. The enrollment rate for girls is low especially in the areas close to the commercial areas of Nigeria border, since parents force them to assist their business. Because of fatigue from housework or family business, girls'

school records are generally lower than boys'. Girls tend to drop out because of difficulty to catch up or, of early pregnancy. The completion rate of girls for primary school is estimated to 10.4% (2000, UNICEF).

The gross enrollment rate for secondary education (1995-1997) is 6.5% for girls, 12.5% for boys (UNICEF Annual Report 1998), and the completion rate is lower than 1% for girls (Family Plan International Cooperation Foundation 1995). The reasons why girls' enrollment for secondary school is low are 1) early marriage (the average age for marriage in the rural area: 13-14 years old), 2) parents' objection against going school in the urban area, which is far from home. Since secondary schools are often concentrated in urban areas such as the prefectural capital, mothers who have the responsibility to protect daughters' virginity are against unmarried daughters going far away. Therefore, few girls get to higher education. Faculties which female students choose are limited because of social prejudice. Though women are often engaged in such fields as health and education, fields such as science and agriculture are dominated by men.

As higher educational institutions, there are NIAME University (founded in 1973) and West Africa-Islam University (founded in 1987) but NIAME University is now closed (Europe Publication, 1997). Several hundreds of people per year go to West African countries or France to study. Primary education is under the regulation of the Ministry of Basic Education, and secondary and higher education is under the Ministry of Secondary and Higher Studies.

#### **[Teachers]**

Female civil servants who deal with education are 54% of all female civil servants. The rate of female teachers for primary education is 32%, the rate including female assistant teachers or instructors comes to 35% (2000 the Ministry of National Education).

#### **[Non-formal education]**

As children over nine years old cannot enroll in elementary school, some NGOs provide literacy and functional education for female as non-formal education. When they give women the opportunity to study, it's important to ask husbands for their understanding on education for wives through seminars, or at least to get his consent.

#### **[Vocational and Technical education]**

Public vocational schools are under various ministries, according to each respective field. Private vocational schools are under the Ministry of Public Affairs and Labor, the Ministry of Secondary and Higher Studies, and the Ministry of Basic Education. No inequality between men and women exist for entrance examination. However, because the completion of the lower secondary school is required for the examination, female enrollment rate is low. Social stereotypes that regard occupations such as automobile mechanic as traditionally men's job, keeps female enrollment low, though women who go to vocational schools to acquire those skills are increasing in recent years.

## 3-2 Health

### Health

- 1) Malnutrition caused by poverty, food shortage, lack of adequate knowledge and information is serious, 40% of under-5 is malnutrition, and maternal anemia rate is 60%.
- 2) Early and frequent childbirth put severe burden on maternal body. Because of the aftereffects of childbirth, many women are alienated from society in their teens.
- 3) Because of religious belief, family planning is uncommon, especially in rural areas.
- 4) Medical personnel are in short supply. Especially in rural areas, female personnel such as midwives and nurses are very much in need.

#### [General situation]

Health indicators of Niger are much worse than the average rates of Sub-Saharan African nations. The mortality rate of under-5 (per 1,000 birth) is 274, which is the worst in the world (EDSN 1998). The rate of people who have access to adequate sanitary facility is 7.35% in rural areas where 80% of the population lives. (The average of the rural area in African nation in Sub-Sahara: 32%). Unsanitary environment causes the spread of diarrheal diseases, the main cause of death for infants (UNICEF, 1994).

Medical facilities are distributed on the levels of national, prefecture, county, Kanton (constituency) and village; the clinics in Kanton level are severely lacking. The shortage of medical personnel is seen from statistics such as: one doctor per 36,252 people, one nurse per 6,488 people, one midwife per 4,206 childbirths, one pediatrician per 1,700,000 children under 5 years old.

It is essential for midwives or nurses to complete lower secondary education for professional education (three years), which makes it difficult for women to be involved in medical services. Because of their cultural background, not a few female are reluctant to take medical examination by male nurse who is often in rural area. Farm village medical teams (1-2 persons in a village), which consist of traditional birth attendant (Matrone) and emergency medical member, are 4,000 in the country, and they cover 52% of the rural area.

The Primary Health Care Act which government started in 1990 has not been effective, because of bad access to medical facility and marked shortage of pharmaceuticals, etc (UNICEF, 1994). The rate of medical expenses in government expenditure is 6.2% of working budget and 10.5% of investment budget (UNICEF, 2000). Since 2000, new programs on primary health was initiated by government and donators (Programme de Soins de Santé primaire).

#### [Children and maternal health]

The mortality rate of under-5 (per 1,000 birth) is 274, which means one quarter of children die before 5. The mortality rate of 1-4 is 172 (per 1,000 birth), mainly due to malnutrition and lack of tolerance against disease. Geographical disparities of the mortality rate; The rate of under-5 (per 1,000 birth) in capital city is 147, the same in rural areas is 327 (per 1,000 birth) (Demographic and health surveys, 1998 , CARE

and Macro International Inc.). The main causes for death of children include: diarrheal diseases, malaria, acute respiratory infections, malnutrition and measles (the Ministry of Health). Vaccinations rates are increasing in recent years.

Maternal mortality rate is 700 (per 100,000 birth; 1996) (the Ministry of Health, and UNICEF). Major causes for maternal death are excessive bleeding, the rupture of the uterus, infectious disease, hypertension and anemia etc. And original causes of death include:

- 1) early childbirth (the average of the first childbirth: 15-17 years old),
- 2) frequent childbirth at intervals of less than two years (total fertility rate is 7.5),
- 3) low accessibility to medical facility (pregnant women who have never taken pre-maternal examinations : 57% (MICS 2000, UNICEF),
- 4) low quality of personnel involved in medical services, (number of obstetrician and gynecologist: eight persons in the nation),
- 5) shortage of personnel who assist childbirth,
- 6) lack of equipment in medical facilities,
- 7) taboo related with pregnancy and childbirth (ex, the childbirth of the first baby should be done in her own house, even if its conditions are unsanitary). (Ministry of Improvement of Female Status, 1995)

The rate of births attended by health personnel is 18% in rural area (national average: 24%, 83% in the capital city; the Ministry of Health). Excessive labor and dietary habits of pregnant women also make childbirth complicated.

### **[Nutrition]**

Because of poverty, food shortage and lack of medical service, malnutrition is serious. Out of total under-5 children, 40% of them are short stature in the age and 40% of them are under weight. Also, 31.1% of under-5 children have vitamin A deficiency (MICS, UNICEF 2000), they are also affected by anemia and goiter caused by iodine deficiency. The rate of maternal anemia is 60% (the Ministry of Health). The causes of malnutrition are as follows, 1) chronic food shortage since 1980's, 2) unvaried and nutritionally unbalanced dietary habit, 3) lack of care of children because of women's excessive labor.

The background of the above factors include: soil erosion, subsidy cut for agricultural investment, lack of women's access to modern agricultural technology, population increase (UNICEF, 1994), desertification and lack of medical education.

### **[Family planning]**

Total fertility rate is 7.5 (EDSN, 1998), the ideal number of children regarded by married women in Niger is 7.8, and the one by married men is 11.2. Geographical gap in total fertility rate is 7.9 in rural area and 5.2 in a capital city. Gaps related to education level in total fertility rate is 7.9 for uneducated women, 6.7 for educated women (primary level) and 4.6 for secondary level. Average age at first marriage is 15.2 years old, and early marriage leads to prolificacy (Family Planning International Cooperation Foundation, 1995).

Contraceptive prevalence rate is low (7.6% for women, 11.4% for men). The rate of persons using modern contraceptive is 4.4% for women and 7.8% for men. The

remaining 3.2% of women use traditional methods of contraception. Geographic differences are high, with 26% for women and 30% for men in urban areas, compared with 2% for women and 4% for men in rural areas, in usage of modern contraception. Traditional contraceptive is a spell called “GURI GURI” (the Family Planning International Foundation, 1995). The law prohibits abortion, but it is often done unofficially, because pregnancy for unmarried woman is regarded as shameful for the family. At the present time, promoting family planning is very sensitive since the Muslim’s movement in 1994. Therefore, the government focuses on reproductive health in its population policy, and promotes protection of family health through health education.

#### **[HIV/AIDS]**

Since the first 18 AIDS cases were confirmed in 1987, reported number is increasing, with 809 cases in 1992 and 2,800 cases in 1996. In 2000, 5,626 cases were detected and the rate of prostitute’s case is reported as 10% (the Ministry of Health, 2001). The rate of HIV prevalence in pregnant women in the urban area is 0.5-0.89%. The reported AIDS cases for 0-19 years old is 4.1%, and the cases for under-5 is 1.4%(UNICEF, 1994). The Central Health Center provides the programs on AIDS. The rate of infected persons is 1.4% (Ministry of Health, 2000)

#### **[Vesicovaginal Fistula]**

Vesicovaginal fistula is the aftereffect of childbirth, caused by birth canal damage. UNFPA conducted a research on vesicovaginal fistula and produced promotion movies to raise awareness on this disease in Nigeria, but these measures have not been under taken yet in Niger. Out of the women affected by fistula, 48% of them are 13-15 years old. The rate of women divorced by their husband due to fistula is 63% (UNICEF, 2000).

### 3-3 Agriculture, Forestry and Fisheries

#### Agriculture, Forestry, Fisheries

- 1) Because of constant food shortage, men work away from home and women's labor burden in agricultural production and housework is increasing.
- 2) Though women are in charge of 50% of food production, lack of access to land, modern agricultural instruments, fertilizer, financing and information hinder productivity improvement.

#### **[General Situation]**

Though arable land is only 6% of the whole land, agriculture is Niger's key industry, which accounts for 37% of GDP (Ministry of Planning). People engaged in agriculture account for 80% of workers in 1994. (EPCES, Department of Statistics, Ministry of Planning, 1997). Key farming products are rice, peanuts for domestic consumption, and export crops such as cotton and Kaupee (animal food). Farming land with modern irrigation facility is only 50,000 hectare (EIU, 1996). Because of large dependence on natural rainfall, food production is affected by weather.

Niger faces constant food shortage because of successive drought and desertification. Since men work in neighboring countries such as Mali or Nigeria, women have to secure food for the family. Total number of working hours for women reach up to 16-17 hours for various jobs such as agriculture, distribution of farm products and handicraft work, housework, etc.

#### **[Agriculture]**

Though women's contribution in agricultural sector tends to be underestimated due to lack of official data, it is estimated that women are responsible for about 50% of food production. Women participate in cultivating various types of farm products besides grains, such as onion, potato, etc. They also cultivate cooperatively-owned land (seeding, weeding, harvesting, etc), participate in vegetable growing and rice farming as a part of off-season farming under the national self-sufficiency policy.

Using the income from marketing activities of vegetables, fruits, etc, women produce other income through cattle breeding. Women are also involved in processing and preserving agricultural products and processing of cattle products (butter, cheese). Commercializing cattle products and by-products are an important source of family income. (Seybou Binta, 1996)

#### **[Land-ownership]**

Since the government has legal ownership of land, people must purchase land use rights from the government in order to use and manage farmland. In addition to not having economic means to purchase land rights, women cannot inherit their parents' rights of land use. Therefore, men often monopolize rights related to land. After marriage, husband gives his wife the right to cultivate. When divorcing, it is common that women cannot inherit any properties including land. So they cultivate their fathers' land instead. However, women do not have any land to cultivate when they have many brothers.

According to the FAO, if women's vegetable growing were successful and increase



family income, this could improve their status within the family. However, envious men take away the land from women to get income in the same way. So, FAO's KEITA project in Keita country of Tahoua prefecture (a farming village development project, which succeeded afforestation to prevent desertification by PLA) provides women micro-finance to purchase land rights for their economic independence.

#### **[Agricultural Extension Worker]**

The female rate among agricultural expansion workers is less than 25%. To be an agricultural expansion worker, it is required to complete lower secondary and then professional education for two years in vocational school. However, women who can finish secondary education are only a few, and consequently the number of agricultural expansion workers are quite limited. There are other reasons why female workers are few such as: the requirement that they have to move around the rural area, stereotypes that women should be at home, etc.

#### **[Accessibility to Micro Finance]**

In Niger, money is generally under control of men. Because of lack of information and financing, women use primitive instruments for farming. Lack of access to adequate fertilizer also hinders women's agricultural productivity growth. MECREF (a mutual aid association of financing for women) founded with support of CIDA in 1995, is the only financial institution only for women. After the withdrawal of CIDA caused by outbreak of coup, it has continued to manage with its own budget.

The entrance deposit is 5000 CFA franc, which allows members to obtain loans up to three times their own deposit. Though the funds were from CIDA at the beginning, members tend to be decreasing because of bad financing in recent years. However, with recognition of necessity of initial capital to buy seeds and farming instruments to promote female activities, many aid organization and NGOs provide micro finance.

According to the staff of FAO, the rate of repayment of female borrowers is more reliable than for male. The FAO official pointed out several means to raise loan repayment such as; 1) proposing income generating products, 2) arranging watchman from the organization which supply the financing. In some areas and tribes, there are successful cases where creditor's use photos of debtor's face to manage loans.

#### **[Cooperative society]**

Cooperative association was founded during the uranium boom (the latter of 1970's) by the government. Since it is managed by civil servants who get paid only for seven months in a year because of lack of adequate salary, they sometimes embezzle the income, and the inhabitants do not trust them. The government is planning to reform to a new organization, but details are unclear.

In Kuwarentubare village of Maradi prefecture, they established a grain-bank where poor families can buy grains with reasonable prices during the pre-harvest months, and use the profits to distribute food supplements to children. Also, activities such as establishment of village women committee, enforcement of technical training by district government agency, provision of financing, acquisition of seeds in good quality, etc, have eased the labor burden of village women, and their income increased. Night blindness of children and women also decreased because of growing foods with

rich vitamin A. These activities have spread to 326 villages in the prefecture. (1998 UNICEF Annual Report)

**[Forestry]**

The rate of forestry and fisheries per GNP is only 3.6% (Ministry of Planning, 2000). People collect forest products, such as Arabian gum, but women do not participate in forestry as industry. On the other hand, collecting woods for fuel for family is always female role.

**[Fisheries]**

Fishery is carried out in Niger River, Lake Chad, a few tributaries and ponds. Niger exported 120 tons of fish, crustacean and shellfish in 1997. In 1999, it is estimated at 1,604 tons (959 millions CFA) (foreign trade statistics, Ministry of Planning, 2000). Fishing is done by men, and distribution of the catch is done by women. Husbands set the price, wives sell according to the instruction, and give husbands the sales. Women cannot manage the income, and receive the balance only when fish is sold at higher prices.

**[Rural Code (Code Rurale)]**

The government started to work on the enactment of the Rural Code in 1985 to clarify land-ownership and its utilization in villages, which was previously based on customary law. The statute law, proclaimed “law on basic policy of Rural Code” in 1993. It establishes concrete arrangement for farm village such as the right for nomads to use forests, and the Article four provides the right to use the natural resource for all Niger people irrespective of sex or birth, as common property. However, the effectiveness of the code is not enough at present, and some aid organizations and NGOs are promoting support activities to make the code more effective to secure female rights.

### 3-4 Economic Activities

#### Economic Activities

- 1) The rate of female workers in non-agricultural industry is low, 26.19% for civil servant and about 10% for private sector.
- 2) The causes which hinder women in employment opportunity are the social concept that women should be at home, low education level and the lack of accessibility to vocational training.
- 3) Economic activities of female and children in the informal sector are increasing.

#### [General Situation]

Percentage of work force by industry: 80% for agriculture, 7% for manufacturing, 13% for service (1997 Ministry of Planning). Key industry besides agriculture is uranium mining industry. Though it grew in 1970's, the sharp decline of uranium prices reduced the income from this industry.

Even though the government introduced the structural adjustment programs in 1983, reduction in government employment as a part of the program increased people's dissatisfaction. Besides successive draught, funds from international organizations and bilateral assistance organizations were frozen due to the coup in 1996, so the economic situation is still severe in Niger.

Economic crisis, vulnerability of employment market and influence of the structural adjustment programs lead increase of unemployment. Because husband's unemployment can be a cause of divorce, the situation for female whose social status is low is insecure.

#### [Participation in Labor]

The proportion of workers in total population is 49%; the female rate in adult working population is 47% (UNICEF, 2000). As the proportion of female engaged in agriculture is relatively high, the female in rest of the sectors is 16.9%. The rate of female employee in civil servants is 26.2%, 9.6% in semi-governmental sector and private sector<sup>1</sup> (the Ministry of Public Affairs and Labor, 2000).

The social concept that women should be at home is strong, and women could not participate in economic activities before the 1960's. Though women have participated in economic activities in recent years, the concept that women work for family service and not for their own wages is strong, even now. So, female occupation is often in the retail industry, and women engaged in trade or wholesale industry are only a few.

#### [Employed Labor]

According to the Ministry of Public Affairs and Labor, women tend to be concentrated in the sectors of education and health in Niger. Among the civil servants, 75% are engaged in education (54%) and health (21%). However, the available number of posts in both sectors is filled. On the other hand, the rate of female civil servants engaged in skilled jobs is 8%. The higher the post, the lower the participation of women.

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<sup>1</sup> "Proportion of workers by industry" provided by Ministry of Planning, Department of Statistics has significant difference from the World Bank data (Female proportion of workers by industry in 1980: agriculture 6%, industry 29%, service 66%). Attention should be paid to the data source.

According to the Ministry, the reason why the sex gap is still big in labor market is low educational background for female, and the promotion of female enrollment for primary education is needed to improve the situation. The Ministry of Female Status Improvement reports that the employers tend to hire men more than women, and point out that employers think the cost of pre and post-maternal leave is high, besides low education level of females.

Low employment for female are mining and construction industries, which is traditionally regarded as men's jobs, and the female employment rate is 4.2% for mining and 13.9% for construction (Ministry of Planning, 1997). High employment industries for female are commerce, food-hotel (91%), transportation, warehousing, finance- insurance (23%) and public service industry. The female employment rate in the industries is 20%. The result of research by the Ministry of Public Affairs & Labor reports that employers tend to hire foreigners, because people in Niger, irrespective of sex, can not meet employment requests and quit jobs soon. Many Niger women work in bars and restaurants, because the Ministry directed the managers to hire Niger women more than foreigners to promote employment, though many of them quit within two weeks.

The Ministry of Public Affairs and Labor and the National Agency for Jobs (ANPE) were established in 1996 in order to promote participation of women in the labor market through improving their work experiences. The Ministry directs companies to hire the graduates of vocational school for six to nine months with some pay (or no pay) as a part of employment promotion activities. However, normal vocational school is in the fields regarded as men's job such as electricity, machine, etc. So the program does not lead the expansion of female employment. The ministry also plans to televise TV programs on female's success story for female employment promotion.

On the other hand, new fields such as data processing is easier for women to join, because no established social concept exists. Moreover, secretaries, regarded as women's jobs, often use computers, therefore women might have an advantage for the field, and women dominate 80% of the private training schools, which is under the Ministry of Planning.

### **[Informal Sector]**

In recent years, the economic activities in the informal sector are increasing. The main fields of informal sector are production activities, trade and services. Informal sector provided more than 847,312 jobs. Its share of the GDP is 30% (Informal sector survey, Ministry of Planning, 1995)

At least 100 million people in 1992 get income from activities such as street vendors. Especially, women and children are a major workforce in the informal sector. Many women involved in the informal sector are in urban areas, and are engaged in retailing sale of foods or clothes, sewing, etc. Some women make and sell handicraft such as basket, leather goods, etc in center of urban area. Children work to help their mothers.

#### 4. WID/Gender Projects

Project/Programs	Implementing Agency	Donor	Duration	Budget (1,000US\$)	Gender-related Issues/contents
<b>Education</b>					
Education for Family Planning	INDAP	UNFPA, UNESCO	1989-1994	1,284	Education for reproductive health/empowerment & training
Education to promote organization for female activity		CCE	1993-1998	1,467	Promotion of women's social standing in development
Support of education program in non-formal education	MEN/Direct.de L'enseign. Prescolaire et du Premier Degre	UNICEF, MEN	1990-1994	1,026	Support for children's health/improvement of situation of women and children/training for female manager/ functional literacy
Umbrella Project in non-formal education		UNFPA	1990-1994	193	
Program toward female in non-formal education		SWI	1993-1995	881	Improvement of situation for female/promotion of women's activity/promotion of female manager's participation/promotion of family law enactment
Promotion of law enactment for female in non-formal education		DEN/DAN IDA, R.F.	1994-1995	177	Improvement of female ability to express their will/promotion of law enactment for women
Support to female education	MEN/ Direction de la promotion de la scolarisation des filles.	UNICEF	2001	3,340	Training teachers and support schools to enroll girls in areas where the rate of girl enrollment is very low.
Project 1 FAD/ BAD	MEN	FAD/ BAD	2001-2006		Support for young girl enrollment in school (FNASF)
Promotion of girl education	INDRAP/ MEN	ACDI	2000-2004		Improvement of female literacy rate in order to increase their activities rate
<b>Health</b>					
Family Health Program	GFR/FTZ		1994-1995	3,080	
Nutrition & Health Program	Council Reginal de Development	UNICEF, MAE	1990-1994	5,200	Implementation of nutrition improvement policy for infant to decrease infant mortality
Nutrition Improvement Program	Ministre de l'agriculture et de l'elevage	PUND, FAO	1992-1994	821	Provision of Vitamin A aimed at improvement of malnutrition of inhabitants (women & children) in BONZA country
Vaccination Extension Program	Programme Elargie de Vaccination	UNICEF, MS/PEV	1990-1994	4,600	Improvement of health and sanitation for inhabitants (infants) as a part of social goal on primary health care by 2000
Epidemic prevention program	Ministère de la santé Publique	OMS	1990-1995	228	Vaccination for more than 90% of infant/ organization for implementation for vaccination/ expansion of vaccination with promotion of health education
Health Program for children	Ministère de la santé Publique	USA/USAI D, AFC	1990-1995	7,300	Health & prevention program for infant (0~5)in DOSO & DIFA country

Project/Programs	Implementing Agency	Donor	Duration	Budget (1,000US\$)	Gender-related Issues/contents
Primary Health Care	Direct. Des aff. Sociales et de la pmi	UNICEF, MS/DASP MI	1988-1994	7,644	Program for 1800,000 women (15~45)& 350,000 children (1~11). 1) decrease of maternal & infant mortality rate 2) promotion of health awareness for female 3) improvement of health service in quality
Children and maternal health& family planning program	Ministère de la santé Publique	OMS	1989-1995	340	Improvement of maternal and infant infection & mortality rate /support for national population policy
Promotion of health service/ Children and maternal health & family planning	Centre national de sante familial	UNFPA, OMS	1988-1995	2,507	Support for national policy to improve maternal and infant infection & mortality rate/family planning policy
Health measure with cooperation between family & community		BIRD	1991-1996	17,600	Health policy for family in rural area
Support for nutrition improvement in hospital	Ministère de la santé Publique	PAM, MS	1988-1996	20,293	Nutrition improvement for general women, women in lactation period and children of school age
Improvement of health service in maternal center	Ministère de la santé Publique	CCE	1992-1994	4,200	
Improvement of health service in maternal center in NIAME	Ministère de la santé Publique	CCE, MS	1992-1994	2,817	Capital investment for improvement of maternal and infant infection & mortality rate
Rehabilitation in maternal center		SPA/AECI	1993-1994	9,537	
Health and nutrition project for infant		USA/CAR E	1995-1999	220	
Children & Maternal Health		GFR/GTZ	1996-1997	197	
Health Project for Women		DEN/DAN IDA,UNFPA	1995-1997	2,828	Family planning for children and maternal health& improvement of health service usage related with reproduction and access/ implementation of national policy for maternal and infant sick & mortality rate
Programme HKI	Ministère de la santé Publique	Denmark	1999-2000	260million FCFA	Improvement of survival for children and mothers
Initiative micro-nutriments SAHEL	Ministère de la santé Publique	Denmark	1999-2001	176,700	Improvement of maternal and infant nutrition
family Planning health program	Ministère de la santé Publique	UNFPA	1998-2000	3million FCFA	Improvement of family planning and contraception
ALG-FAD health project	Ministère de la santé Publique	ADF	1998-1999	36million FCFA	Improvement of family planning and contraception and support of population policy.
Assistance children and mothers	Ministère de la santé Publique	WFP	2000-2004	11million FCFA	Improvement of infant and maternal nutrition
SPDS	MP/PF/PE	UNFPA	2002-2003	4.9million FCFA	Improvement of contraception and family planning

Project/Programs	Implementing Agency	Donor	Duration	Budget (1,000US\$)	Gender-related Issues/contents
<b>Agriculture, Forestry and Fishery</b>					
Support Program on WID related with policy and plan in agriculture	NET, SNVNET	1993-1995		45	
Support on WID in food product	NASPF/direction de la condition feminine	1994-1995		134	
Project on women activity in gardening	NOR/NORAD	1994-1995		381	
<b>Economic Activities</b>					
Basic Social Service Program in Agui county	Arroundesse-ment d'aguie	UNICEF, AR/AGU	1989-1994	4,500	Improvement of Basic Social Service (Heath & Environment & Women) for 75,000 people in Agui county/ Development Assistance by community participation
Development Program in Rural Area		DEN/DAN IDA, UNESCO	1991-1994	328	Unification of Development Program toward women in rural area
Social Mobilization / Information/ Communication	Ministre de la communication	UNICEF, MC	1990-1994	774	To rouse public opinion by the media (radio, etc) to improvement of infection rate for children and mother
Female Support Program	MASPF/derection de la condition feminine	CAN, MASPF	1990-1994	4,152	
Female Support / Reproductive Health Program	Association des femmes du niger	UNFPA, OIT	1988-1994	212	Support for Government for promotion of population policy /Promotion of Women's Participation in program
Program on Family Law		UNFPA	1994-1995	62	
Drinking Water / Sanitation Program	Conseil sous regional de developpement	UNICEF, ABH	1990-1994	3,846	
Support for Empowerment of Women's capacity		USA/CAR E, NOR/NOR AD	1996-1997	1,146	
Support for Women's activity in Urban Community		NET/SUV NET	1996-1997	32	
Social development support	MP/PF/PE	FAC	2000-2002	500million FCFA	Support for social policy and training on women involved in social fields.
Institutional development fund	MP/PF/PE	WB			Support for Government for promotion of population policy /Promotion of law in genre and development

## 5. WID/Gender Information Sources

### 5-1 List of International Organizations and NGOs related to WID/Gender

	Name and Specialty	Past Records (Project, etc.)	Report and Writing	Contact Address
<b>International Organization</b>	UNICEF			UNICEF
	UNPD			
<b>Government Organization</b>	Ministère de la P/PF/PE			Ministère de la Population/PF/PE
<b>NGOs</b>	CONIPAT créé en 07/90 A.N 054/MI/DAPJ du 28/02/94 Salamoatou TRAORE:Présidente			Tel:75 34 72 / 75 27 56 Fax:75 35 06 BP 11631 Niamey
	GAP Groupement des Aides Privées(Collectif des ONG)			Tel:740907
	RIDD-FITLA Réseau d'Intégration et de Diffusion de Droit en Rural pour les femmes			Tel:75 21 68 Fax:74 08 88
	AFN Association des femmes du Niger; née le 21/09/75			BP 2818 Niamey
	ANBEF Association Nigérienne pour le Bien-Être Familial A N 045/MI/DAPJ			Tel:75 26 80 Fax:72 27 90 BP 13174 Niamey
	SWAA Niger: Society for Women and Aids in Africa (Femmes et le SIDA)			Tel:74 03 31/72 22 34 BP 13406 Niamey
	ANAICE:Alliance Nigérienne des Artistes Intellectuels et Communicateurs pour l'Enfance Stade S/Kountché Porte 1082 BP 12521 Niamey			Tel:741889 D Mme Tiékoura SG 723505 Mme GATIR 732565D 734726 poste 369 B M. Urbain Middah 722426
	UPFN Union pour la Promotion de la femme Nigérienne			Tel:724132D/741255B
	MVF Mieux vivre avec le SIDA			Tel:73 49 82
	CONGAFEN Collectif des ONG 34 Ass, ONGS Réseau, 1 caisse populaire,			Tel:733693B/725040D
	UFMN Union des Femmes Musulmanes du NIGER			Tel:75 22 27D / 75 33 20B BP 10256 Niamey
	WEYBI née le 8/06/92			Tel:72 41 53
	ASFN Association des Sages-Femmes du Niger			Tel:741706 BP 12280 Niamey
	FCI Family Care International -Niger			Tel:73 35 72 Fax:73 34 01 BP 10000 Niamey
ANSEN Association Nigérienne des			Tel:74 22 69 Fax:74 11 25	



	<b>Name and Specialty</b>	<b>Past Records (Project, etc.)</b>	<b>Report and Writing</b>	<b>Contact Address</b>
<b>NGOs (continued)</b>	GNFHL Groupement Nigérien des Femmes Handicapées Locomotrices			
	USTN Union des Syndicats des Travailleurs du Niger			Tel:735256 BP 388 Niamey
	GAIPF Groupement Associations Islamiques pour les Activités en matière de Planification Familiale et de Promotion de la Femme en Islam au Niger			
	RDFN : Rassemblement Démocratiques des Femmes du Niger			Tel:73 24 65 Fax:73 20 15 BP 11933 Niamey
	SAPHTA:Salubrité-Propreté-Hygiène et techniques d'assainissement			Niamey, Zinder, Dosso, Tillabéri Tahoua
	Association TANAT TIGRAW			Tel:44 05 97 BP 268 AGADEZ
	ASEFER: Appui aux activités socioéconomiques des femmes rurales			BP 11372, Tél 74 04 82 Niamey
	ANEF: Association nigerienne des éducatrices pour le développement			BP 889, Niamey
	MECREF: Mituelle d'épargne et de credits des femmes			BP 10815, Tél: 73 30 54 / 73 20 70 Niamey
	DIMOL/SRMSR: Santé de la reproduction pour une maternité sans risques			BP 13874, Tél 75 27 25 Niamey
	AFJN: association des femmes juristes du Niger			Tél 73 58 51 Niamey
	SOS femmes et enfants victimes des violences familiales			Tél 74 07 80 Niamey
	FEMJES			Tél 74 23 06 Niamey
	GAPAIN: groupe d'action pour la promotion de l'alimentation infantile au Niger			Tél 72 26 33 Niamey
	OFED: Organisation des femmes pour le développement			
	CDR:			Tél 74 09 07 Niamey
	TA-ANABI			Tél 740,6 94 Niamey
BUNKASSA-Ged			Tél 73 31 81 Niamey	

	<b>Name and Specialty</b>	<b>Past Records (Project, etc.)</b>	<b>Report and Writing</b>	<b>Contact Address</b>
	ANPJ: Association nigerienne pour la promotion de la jeunesse			
<b>NGOs (continued)</b>	CONIPRAT: Comité Nigerienne contre les pratiques traditionnelles nefastes			Tél 72 42 07 Niamey
	UFEN: Union des femmes enseignantes du Niger			
	AIFEN: Association pour l'intégration de la femme dans l'économie Nigerienne			BP 2636 Tél 74 03 39 Niamey
	PFCV: Promotion féminine du crédit villageois			Tél 73 55 26 Niamey
	TCHEMAYA			
	AFDO: Association des femmes de l'Afrique de l'Ouest			Tél 74 04 53 Niamey
	AFCEN: Association des femmes commerçantes et entrepreneurs du Niger			Tél 74 02 83 Niamey
	APNC-Niger: association des professionnelles nigériennes de la communication			BP 2039 Tél: 72 31 53 Niamey

## 5-2 List of Reports and References Related to WID/Gender

Title	Publisher	Year	Where to get
<b>General</b>			
Plan d'action 1994	Ministry of population	1994	Ministry of population
Projet evaluation, reproductive health	Toure, H. Mounkaila	1996	Ministry of population
Analysis of women situation in Niger	Gamatie Bayard M.	2000	UNICEF
General census of population	Ministry of Planing	1988	Ministry of Planing
<b>Education and Training</b>			
Analyse de la situation des femmes et des enfants au Niger	UNICEF	2000	UNICEF
Statistics of Ministry of National Education	Ministry of Education	2000	Ministry of Education
UNICEF annual report	UNICEF	2000	UNICEF
Wold human development report	UNDP	2000	UNDP
Education and promotion of women	Telli Diallo	1995	Ministry of population
<b>Health and Medicine</b>			
Analyse de la situation des femmes et des enfants au Niger	UNICEF	2000	UNICEF
Multiple indicators sample survey	UNICEF	2000	UNICEF
Multiple indicators sample survey	Ministry of Planing	1996	Ministry of Planing
UNICEF annual report	UNICEF	2000	UNICEF
Demographic and health survey	CARE	1998	CIDES, Ministry of Planing
<b>Agriculture, Forestry and Fisheries</b>			
Economic and social conjoncture survey (EPCES)	Ministry on Planing	1995	Ministry of Planing
Economic and social conjoncture survey (EPCES)	Ministry on Planing	1994	Ministry of Planing
<b>Economic Activities</b>			
Economic and social conjoncture survey (EPCES)	Ministry on Planing	1995	Ministry of Planing
Economic and social conjoncture survey (EPCES)	Ministry on Planing	1994	Ministry of Planing
Artisanat et les activités artisanales des femmes	B. Brigitte, M. M	1991	Ministry of Population
National survey on informal sector	Ministry on Planing	1995	Ministry on Planing
<b>Social/Gender Analysis</b>			
Niger, human development report	UNDP	1997	UNDP
Protection des groupes vulnérables	Ministry of population	1998	Ministry of population
Impact of development project on women situation	Bahari Bara	1995	Ministry of Population
Niger, human development report	Ministry on Planing	1999	Ministry of Planing, UNDP
Wold human development report	UNDP	2000	UNDP
Profil de la pauvreté	Ministry on Planing	1994	CIDES, Ministry of Planing

**Note:** Since September 16<sup>th</sup> 2001, the Ministry of Plan and the Ministry of Finances were merged to form the Ministry of Economy and Finance

## 6. References

CARE/DHS, 1999, Fécondité, planification familiale et santé de la mère et de l'enfant au Niger, CARE/DHS

JICA, 1998, Niger: Country WID Profile, JICA

UNDP, 2001, Human Development Report 2001, Oxford University Press

UNICEF, 2000, Analyse de Situation des Enfants et des Femmes au Niger, UNICEF

UNICEF, 2000, The State of the World Children 2001, UNICEF

World Bank, 2001, World Development Indicators 2001, World Bank

### ◆ Contracted consultants & interviewed people

#### Contracted consultants

Name	Position/Address
ABDALLAH Souleymane	Directeur SGI Tél. (227) 73 78 18
MELE Adam	DSCN Tél. (227) 72 35 60

#### Interviewed people

##### Government

Name	Position/Address
Omar Hamidou	DEP Ministry of population & women promotion
Sani Ali	DEP Ministry of population & women promotion

##### NGO

Name	Position/address
Mahaman M. Rabiou	Responsible of projects, ASEFER

##### International Organization

Name	Position/Address
ACOHAYE Denis Privat	UNICEF

## **7. Definitions**

### **<Technical Terms>**

#### **Gender**

Analytical concept to clarify the social role of men and women and interrelation between them. Sex (biological) is basically impossible to change, while gender implying the role of men and women and their interrelationship is likely to change according to social notion and sense of values.

#### **Informal sector**

Part of economy consisting of small competitive individual or family firms listed in the labor indicators. According to the definition of ILO, those engaged in this sector have simple technology, insufficient amount of capital, unidentified business location, minimum number of employees (or none of them), lack of legality and registration, and no capability of bookkeeping.

#### **WID (Women in Development)**

Concept of development incorporating women's participation into development processes, taking it into account that women are active agents and beneficiaries of development.

#### **Reproductive health/rights**

Health/Rights concerning sex and reproduction. To be able to live safe and satisfied sex life, and to have freedom to decide whether, when and how many children to deliver.

#### **National machinery**

Administrative organization to promote equal participation between men and women, and to implement and strengthen policies related to women, and to supplement organization for women.

#### **Empowerment**

To empower individuals or groups in political, economical and social sense

#### **Affirmative action**

Prioritized positive measure to promptly correct the difference, in the case that discriminated groups are placed in extremely unequal conditions to other groups, due to the discrimination accumulated in the past

#### **Access and control**

Access is to be able to use resources and services for the economic activity, or to have a right to exercise them. Control is a right to decide how to manage resources and services or to own them.

#### **Reproductive activity**

Activity to "reproduce for the next generation" including to give a birth and raise the children, and to sustain the daily life, for instance, washing and cooking

### **<Indicators>**

#### **Inflation rate**

Instead, GDP deflator is used.

**Gini index**

Aggregate numerical measures of income inequality ranging from 0 to 100. A Gini index of zero represents perfect equality, while an index of 100 implies perfect inequality.

**Percentage of Women's Income**

There are no appropriate data comparable to each country. UNDP works out that the women's income is 75% of men's in non-agricultural sector.

**Total fertility rate**

Average number of children whom a woman delivers in all her life

**Under-one mortality rate**

Annual number of infants who die among 1,000 newborn babies within 1 year after the birth

**Under-five mortality rate**

Annual number of infants who die 1,000 newborn babies within 5 years after the birth

**Maternal mortality rate**

Annual number of mothers who die among 100,000 cases of delivery because of pregnancy

**Percentage of births attended by trained health personnel**

The rate of births with the help of doctors, nurses, midwives, trained health personnel, or trained traditional midwives

**Percentage of infants with low birth weight**

The rate of newborn children of which the birth weight is less than 2,500 grams

**Oral Rehydration Therapy (ORT) use rate**

The rate of using oral rehydrate salt or substitute solution for under-five infants having diarrhea

**Enrolment ratio of primary and secondary school**

Total enrolment ratio (or gross enrolment ratio) is the rate of pupils going to school with no respect to school age against population at the school age. Net enrolment ratio is the rate of pupils going to school at the school age against the people at the school age.