Burkina Faso

Burkina Faso is affected by seasonal and chronic vulnerabilities including floods and droughts, as well as the rapidly deteriorating security situation in the Sahel region. More than 954,000 people, including over 789,000 children and pregnant and lactating women, require humanitarian assistance in 2018. Most of the population in need are food insecure. The ongoing nutrition crisis has been aggravated by chronic droughts, particularly in the Sahel, East and North regions. In 2018, an estimated 187,177 children are at risk of severe acute malnutrition (SAM) and 132,000 people require access to safe water for drinking, cooking and personal hygiene. Although less prominent than 2017, Dengue fever continues to affect in 2018, with 1,516 suspected cases reported by August 2018. Violent attacks by non-state entities in the Sahel region have left nearly 27,347 persons internally displaced. Due to the repeated attacks targeting schools, 473 schools are closed, affecting 64,046 children (47 per cent girls). Burkina Faso also hosts some 24,000 registered refugees from Mali, 60 per cent are children.

Humanitarian strategy

To promote resilience - Burkina Faso is a pilot country for United Nations Sustaining Peace Initiative - UNICEF combines emergency preparedness with response through community-based interventions. The implementation of Safe Schools Strategy continues, along with service provision through temporary classrooms and school materials to children affected by school closures due to insecurity in Sahel. Radio-based education is being piloted for students to facilitate home learning during school closures. Child friendly spaces provide protection services including psychosocial support while case management and support services are available for unaccompanied and separated children affected by gender-based violence. WASH strategy focuses on integrated service delivery and longer term solutions like rehabilitating water points along with strengthened sector coordination. WASH services are provided in health facilities giving SAM treatment and hygiene messages to caregivers. Community-Led Total Sanitation and WASH in schools is implemented to increase resilience of local populations in high-risk zones. UNICEF procures therapeutic food and supports the identification of children with SAM, paired with malaria prevention, Vitamin A and deworming campaigns, and referrals and access to nutrition services. Pregnant and lactating women with children under 2 are reached through community-based infant and young child feeding programmes to prevent malnutrition.

Results from 2018

As of September 2018, UNICEF had US$18.3 million available (including US$3.9 million carried over from previous year) against the revised appeal amount of US$36.02 million. UNICEF and partners provided SAM treatment to 46,520 children, and 6,000 caregivers received IYCF counselling. Funding constraints in the first half of the year led to low achievement which will improve as funding was received in the second half. Nutrition screening is ongoing with Vitamin A/deworming campaigns. Nearly 2,500 girls and boys (12-17 years) accessed clean water and hygiene/sanitation services in the study camp wherein students catch-up on studies and prepare for final school examination. Lower achievement of WASH results is due to critical funding shortfall of 82 per cent. UNICEF and partners reached 2,135 children with psychosocial support through child friendly centers/community-based child spaces. Child protection services for displaced children could not be implemented due to operational challenges and insecurity. Education services benefited 11,123 girls and boys, after school vacations more children will be reached with services. During summers, teachers were trained on Safe School Strategy. Equipment and medicines were provided to 96 health centers and 1,200 Community Health Workers in Sahel region for provision of quality health services for children.

2018 programme targets:

Nutrition
- 187,177 children aged 6 to 59 months suffering from SAM admitted for treatment
- 400,000 pregnant and lactating women (caregivers) benefiting from infant and young child feeding counselling

Health
- 2,500 households received at least two long-lasting insecticide-treated bed-nets

WASH
- 30,000 affected people having sustainable access to drinking water and adequate sanitation to address their vulnerabilities
- 24,000 children aged 6 to 59 months suffering from SAM with complications received a WASH kit and hygiene messages
- 24,000 mothers/caregivers receive key hygiene messages

Child protection
- 11,000 children reached with psychosocial support through child-friendly spaces/other safe spaces
- 100 unaccompanied and separated children reunified with their biological families

Education
- 150,000 boys and girls aged 3 to 17 years affected by crises accessing education
NUTRITION
Children under 5 with SAM admitted into therapeutic feeding programmes
2018,000 46,520 187,177 187,177 46,520

Children aged 6 to 23 months benefitting from infant and young child feeding services
400,000 6,000 400,000 6,000

HEALTH
Households received at least two long-lasting insecticide treated mosquito nets
- - 2,500 3,145

WATER, SANITATION AND HYGIENE
People having access to drinking water and adequate sanitation/hygiene services
55,000 25,500 30,000 2,500

Children aged 6 to 59 months suffering from SAM with complications received a WASH kit and hygiene messages
24,000 0 24,000 0

Mothers/caregivers receive key hygiene messages
24,000 0 24,000 0

CHILD PROTECTION
Children reached with psychosocial support in child friendly or community spaces

Unaccompanied children reunified with their biological families

EDUCATION
Children (3-17 years) affected by crisis accessing education in schools that implement the Safe School Strategy (teacher trained in psychosocial support and disaster/conflict risk reduction)

Results are as of September 2018 unless otherwise noted.

1 UNICEF and sector nutrition targets are the same because 100 per cent of nutrition supplies (e.g. ready-to-use therapeutic food) were procured with UNICEF funding (both emergency and non-emergency); due to the drought crisis, and based on the final results from the SMART 2017 survey which became available during the semester 1, children suffering from SAM have been reestimated and increased to the estimated target.

2 The estimated target represents 100% of the caseload at the national level based on the SMART survey results. Prevalence at the provincial and regional level are weighted to identified the national level estimate of the caseload.

3 Increased target for the WASH sector due to new IDPs mainly linked to insecurity in the Sahel region.

4 3145 mosquito nets were distributed to students who participated in “regroupement scolaire” which is intensive group study camps for them to quickly catch up the delay in their study and take the end of year exams as their schools have been closed due to insecurity in Sahel. These mosquito nets were purchased and pre-positioned prior to 2018, not with the active emergency grant in 2018.

5 Due to the summer vacation of students, the implementation of the Safe school strategy has been delayed. During the holiday, teachers have been trained and they will replicate the training with students starting October (back to school) to attain the target for this indicator.

Funding requirements
In line with the inter-agency Strategic Response Plan 2018 and based on mid-year review, UNICEF’s funding requirement increased to US$ 36.02 million, to respond to increased SAM caseload and expansion of WASH response to meet the needs of additional displacement. Timely funds are critical to respond to the ongoing nutrition crisis and support internally displaced, refugee and host community children, as well as population affected by natural disasters. With recurrent attacks by armed groups and the growing number of displaced persons, basic supplies and capacity strengthening to increase access to social services, including education, are urgently needed.

Who to contact for further information:

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1 Food Insecurity and Malnutrition National Response Plan, March 2018. This number represents about 5% of the population.

2 Estimation based on population data of under 16 as per the Annual Statistics of Institute of Statistics and Demography.

3 The figure represents estimated number of people to be reached by UNICEF’s interventions.

4 Total estimated number of children targeted by UNICEF: 150,000 in education and 187,177 through SAM treatment

5 Based on the September 2017 National Nutrition Survey - final results, Ministry of Health (see footnote ii above). Estimated caseload for SAM for 2018 has increased from 120,000 to 187,177 under-five children (100% of the estimated national caseload for 2018), which includes the addition of new SAM treatment centers.

6 Decreased target for UNICEF and re-focus on WASH in nutrition response including hygiene messages and sanitation infrastructure in health facilities/SAM treatment centers

7 UNICEF target for the implementation of the WASH in Nutrition strategy.

8 Additional funding request added to Nutrition due to the increased target of under-five children with SAM.

9 The emergency contribution for Health has been used for: 1) procurement of supplies to strengthen cold chain at 96 health centers; and 2) ORS and other medicines to 1231 community workers within iCCM (both in Sahel region). In addition, the CO received a contribution for cholera prevention which will be used for implementation of behavioral change/Communication for development efforts.

10 Funding requirement increased as initial budget did not include the implementation of WASH and Nutrition strategy and due to the emerging needs to provide WASH access to students affected by the insecurity in Sahel who participated in the study camps.

11 Available funds for Education includes development contributions: US$3,468,153 from Denmark and US$928,000 from Norway which were both requested for emergency interventions in Sahel region.

12 The total funding gap and funds available do not equal the total HAC revised targets due to a surplus under Health budget. This surplus will help fund activities until 2019.