Mali

Six years after the armed conflict started in northern Mali, the country remains affected by a protracted humanitarian crisis and a deteriorating security situation. In 2017, the insecurity spread from the northern to central regions leading to significant population movement. Some 60,500 people1 are internally displaced due to conflict. Another 138,3002 have sought refuge in neighboring countries. Lack of access to essential services and limited State presence and capacity in both north and central region are driving humanitarian needs. The malnutrition situation in 2018 is worse than anticipated. The expected caseload of severe acute malnutrition (SAM) has increased from 162,913 to 274,145 and moderate acute malnutrition (MAM) increased from 70,000 to 582,0003. In addition, an estimated 907,000 people4 will need access to safe water. Insecurity due to conflict affects education, especially in the central region of Mopti, where 63 per cent of schools are closed.5 More than 1 million children of primary school age (7 to 12) are out of school and at risk of rights violations.5 Mali is also prone to natural disasters such as flooding and drought. Presidential and legislative elections planned for 2018 may increase social tension and generate additional instability.

Humanitarian strategy

UNICEF supports the provision of sustainable essential services to affected communities in Mali by strengthening development and humanitarian programme linkages. UNICEF is supporting the response plan of the Government of Mali, focusing on the prevention and management of severe acute malnutrition through the delivery of an integrated package of specific and sensitive nutrition services. Health interventions address vaccine-preventable diseases through immunization campaigns. UNICEF provides safe drinking water at community level, including to people affected by natural disasters or outbreaks; delivery of a full package of water, sanitation and hygiene services to health centres and schools; and supporting nutrition interventions by ensuring that caregivers of acutely malnourished children receive hygiene information and supplies. Affected women and children receive holistic child protection support, including reintegration services, and UNICEF is reinforcing Mali’s Monitoring and Reporting Mechanism2. Education interventions promote the reopening of schools in insecure areas through community mobilization, community learning centres and provision of school supplies. As lead agency for the WASH, nutrition and education clusters and the child protection sub-cluster, UNICEF works with the government’s line ministries and civil society organisations to strengthen government capacities for coordination, disaster preparedness and response at national and regional levels.

Results from 2018

As of 30 April 2018, UNICEF had US$ 10.2 million available against the US$ 43.6 million appeal (23 per cent funded)9. UNICEF worked in collaboration with line ministries and local non-governmental organizations, drawing on a high level of community acceptance to mitigate insecurity and overcome access constraints in conflict-affected regions. UNICEF is leading the establishment of sentinel sites to strengthen the nutrition surveillance system and closely monitor the nutrition situation taking prompt actions to adjust response while supporting children screening. In addition, with UNICEF support, 509,685 children were vaccinated against polio. In crisis-affected areas, 21,000 people benefitted from provision of emergency WASH kits and temporary access to safe water. UNICEF’s education activities focused on strong advocacy in communities and with local leaders for children, especially girls rights to learning as well as addressing schools closure. Some 6,051 children (3,147 girls and 2,904 boys) benefitted from psychosocial support through seven child-friendly/safe spaces. For sustained access and service delivery to affected population, UNICEF as a key humanitarian stakeholder and lead agency is strongly advocating for upholding the humanitarian principles and respect of humanitarian negotiation space.
NUTRITION
Children aged 6 to 59 months with SAM admitted for therapeutic care.  
274,145  29,194  274,145  29,194
Health centres offering malnutrition treatment.  
1,307  1,307  1,307  1,307

HEALTH
# of children under five reached in each round of polio campaign in northern regions. 
418,900  509,685
# of children under 5 vaccinated against measles.  
349,000  23,703

WATER, SANITATION AND HYGIENE
# of SAM child receiving a WASH kit and hygiene promotion session.  
15,592  144  6,000  0
# of affected population provided with temporary access to safe water (water trucking, aquatabs, chlorine).  
114,000  31,134  42,608  21,000
# of people having access to permanent drinking water sources (construction/ rehabilitation).  
794,000  31,200  40,000  29,600

CHILD PROTECTION
# of Children victims of/ or at risk of violence, abuse and exploitation who received psychosocial support.  
47,298  6,561  40,000  6,051
# of CAAFGs and other vulnerable children identified accessing to referral services and reintegration opportunities.  
1,080  343  580  14
# of UASC identified and / or placed in alternative care arrangements and / or who have benefited from reunification and individual follow-up.  
900  322  300  47

EDUCATION
# of school aged boys and girls affected by crisis receiving learning / school materials.  
211,375  5,311  67,000  0
# of out of school boys and girls affected by crisis accessing education.  
211,375  6,200  150,000  0

Results are through 30 April 2018 unless otherwise noted.
1 Provision of WASH kits to mothers/caregivers of children admitted for SAM treatment is currently underway. Results will be reported in the next situation report.
2 Education activities in the first half of 2018 focused on student retention and advocacy efforts at community level to ensure schools remained open and education services continued. Enrollment campaigns focusing on out of school children are planned in the second half, which will include provision of learning/school materials.

Funding requirements
UNICEF’s funding requirement has increased to US$ 43.8 million due to deteriorating nutrition situation requiring scale up of response. Nutrition response remains underfunded, leaving over 100,000 children with SAM at risk of not accessing treatment. In addition, critical funding gaps are hampering delivery of life-saving WASH, health, education and child protection services to affected population. Without sufficient and timely funding, UNICEF will be unable to provide affected children and their communities with critical basic social services.

<table>
<thead>
<tr>
<th>Appeal Sector</th>
<th>Original 2018 HAC Requirement (US$)</th>
<th>Revised 2018 HAC Requirement (US$)</th>
<th>Funds Available (US$)</th>
<th>Funding Gap</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nutrition</td>
<td>11,936,000</td>
<td>19,000,000</td>
<td>5,936,053</td>
<td>13,063,947</td>
</tr>
<tr>
<td>WASH</td>
<td>11,187,000</td>
<td>11,187,000</td>
<td>1,950,000</td>
<td>9,237,000</td>
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<tr>
<td>Health</td>
<td>2,500,000</td>
<td>2,500,000</td>
<td>0</td>
<td>2,500,000</td>
</tr>
<tr>
<td>Child protection</td>
<td>3,052,000</td>
<td>3,052,000</td>
<td>222,578</td>
<td>2,829,422</td>
</tr>
<tr>
<td>Education</td>
<td>7,400,000</td>
<td>7,400,000</td>
<td>750,000</td>
<td>6,650,000</td>
</tr>
<tr>
<td>Coordination/Operational costs</td>
<td>700,000</td>
<td>700,000</td>
<td>1,351,132</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>36,775,000</td>
<td>43,839,000</td>
<td>10,209,763</td>
<td>33,629,237</td>
</tr>
</tbody>
</table>

1 National Directorate of Social Development - Displacement Tracking Matrix (DTM) Situation Report #19 as of 23 May 2018
4 Education Cluster, as of October 2017.
6 The Monitoring and Reporting Mechanism collects information on grave child rights violations.
7 Available funds include US$6.5 million raised against the current appeal and US$3.4 million carried forward from the previous year.
9 Ibid.
10 Population and children to be reached targets are based on UNICEF programme targets and adjusted downwards to address double counting.
11 2018 Mali HRP is currently being revised and UNICEF nutrition targets and funding requirement will be aligned with the revised HAC targets and requirements.
12 Emergency coordination/operational funds are also used to support adhoc programme operations needed to ensure sustained humanitarian programme delivery.
13 The total funding gap and funds available do not equal the total HAC requirements due to a surplus under Coordination/Operation costs. This surplus will help fund activities until 2019.