Highlights
Since early January 2019, the humanitarian situation in Burkina Faso has further deteriorated. The number of internally displaced persons has unprecedentedly increased, mostly in Sahel and Centre-Nord regions, due to increased attacks by violent extremist groups, coupled with inter-community clashes (Yirgou in early January and Arbinda early April). Access to the emergency-affected zones by the humanitarian actors is rapidly decreasing, undermining timely scale-up of humanitarian assistance. The current humanitarian situation is putting an additional pressure on already limited access to quality basic social services among the population. The ongoing crisis requires UNICEF and partners to rapidly expand multi-sectoral humanitarian responses, especially in education, nutrition, WASH and child protection, the sectors led by UNICEF.

- Almost 136,000 IDPs (59% children) including 89,000 new IDPs were registered in 2019 (OCHA, 2 April 2019)
- 622,000 people are directly affected by insecurity (OCHA, 2 April 2019)
- 250,000 people are without/with very limited access to health services due to 34 health structures closed and 26 with minimum operations (OCHA, 2 April 2019)
- 119,400 children (46.4 per cent girls) are without access to education due to 954 schools closed in four regions (OCHA, 2 April 2019)
- 332 incidents (involving 376 deaths and 187 injured) have been registered since January 2019; of those, 26 per cent (86 incidents) were during the first quarter 2019 (OCHA, 2 April 2019). In the same period, three attacks or kidnapping involving NGOs and the murder of two teachers were reported.
- In January and February 2019, 14,679 children with Severe Acute Malnutrition (SAM) were treated (4.3 per cent were in the regions most affected by insecurity - Centre Nord, Nord, Sahel and Est)
- 184, measles cases among children aged 0-5 years were identified in the Sahel (76) and Centre Nord (108) regions representing 39.4 per cent of reported cases in the country (Situation épidémiologique S12-2019, Ministry of Health).

UNICEF’s Response with Partners

### HAC indicators 2019

<table>
<thead>
<tr>
<th></th>
<th>UNICEF</th>
<th>Sector/Cluster</th>
</tr>
</thead>
<tbody>
<tr>
<td># children aged 6 to 59 months with SAM admitted for treatment</td>
<td>133,066</td>
<td>14,679</td>
</tr>
<tr>
<td># children aged 6 to 59 months vaccinated against measles</td>
<td>29,302</td>
<td>12,423</td>
</tr>
<tr>
<td># people accessing the agreed quantity of water for drinking, cooking and personal hygiene</td>
<td>30,000</td>
<td>600</td>
</tr>
<tr>
<td># children reached with psychosocial support, including access to child-friendly spaces/other safe spaces</td>
<td>35,800</td>
<td>4,764</td>
</tr>
<tr>
<td># out-of-school children aged 3 to 17 years affected by crisis accessing formal or non-formal basic education</td>
<td>76,592</td>
<td>7,400</td>
</tr>
</tbody>
</table>

### Situation in number

- **672,000** # children in need of humanitarian assistance (Interagency Emergency Plan Burkina Faso 2019)
- **136,000** # internally displaced persons (IDPs) registered (OCHA 02 April 2019)
- **24,650** # Malian refugees (UNHCR, update March 2019)

### UNICEF Appeal 2019 (HAC)

**US$36.5 million**

### Funding status 2019 (US$)*

- **$29.6 m** (81%)
- **$4.2 m**
- **$2.5 m**

* Funds available includes funding received for the current appeal year as well as carry-forward from previous year.
Situation Overview and Humanitarian Needs

The deterioration of the security situation since the beginning of 2019 has forced the displacement of an additional 89,000 people within the Sahel and Centre-Nord regions, resulting in rapidly growing humanitarian needs in zones with pre-existing multiple vulnerabilities. Since January 2019, Government-led military operations are taking place in the Sahel and Est regions to improve the security and re-open schools. In March, Human Rights Watch reported violation of human rights during these military operations and those are being investigated by the Burkinabé authorities (data not confirmed).

Furthermore, given the deteriorating security, the Government decided to increase its domestic resources allocation to the security and defence sectors by 25 per cent, leading to the reduction of the state budget’s allocation to social sectors by 23 per cent. The decreased investment is most prominent in the health and nutrition sectors. The security context, together with the extremely limited access to humanitarian actors and reduced domestic resources to social sectors, has further deprived the Burkinabe population of access to basic social services, such as education and health. Finally, tension between communities, exacerbated by violent attacks has undermined the customary authorities and degraded social cohesion (Yirgu crisis in January and Arbinda in April).

Security situation

The overall security situation has remained fragile and unpredictable, as insecurity incidents linked to armed groups have become more frequent mainly in the Sahel, Est and Centre-Nord regions. Since January 2019, 86 security incidents were registered resulting in 376 deaths and 187 injured. These incidents ranged from targeted killings and assassination attempts, to complex attacks against army or police posts. The French-language schools and public security forces continued to be the target of armed groups. Two teachers were kidnapped and found dead few days later in March in the Centre-Nord region. Three incidents of kidnapping of humanitarian personnel and vehicles (one involving a UNICEF implementing partner) have also been reported, leading to the significant reduction of the humanitarian access to deliver much needed emergency response.

Education

The number of schools closed has significantly fluctuated during the reporting period. As of 21 December 2018, 844 schools were closed (Ministry of Education - MoE) affecting 100,274 pupils (estimated 49,527 girls). Direct threats to schools and teachers in Sahel and Centre-Nord regions led to an increase in the number of schools closed to 1,119 schools reported 22 February (MoE), affecting 169,693 pupils (estimated 78,738 girls). The closure of schools is mainly due to direct threats to schools and teachers. Following the government military operations to secure the zones in the Est region, the number has decreased to 954 schools closed, as of March 22. The situation of school closures varies by regions and provinces. In Centre-Nord, where inter-community clashes took place early January, seven additional schools have closed adding the total number to 36, out of which 20 are in Bam province. The Sahel region continued to be most affected, with 56 per cent of schools closed and the Est region with 20 per cent of schools closed.

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1 Source OCHA, 2 April 2019. UNICEF is working with the Ministry of Education to get disaggregated data.
Nutrition

The nutritional situation of children under the age of 5 remains of concern in Burkina Faso. The National Nutrition Survey undertaken in September 2018, using the SMART methodology, shows the prevalence of Global Acute Malnutrition (GAM) at 8.4 per cent against 8.6 in 2017 and Severe Acute Malnutrition (SAM) has decreased from 2 per cent in 2017 to 1.6 per cent in 2018, while the prevalence of stunting has increased from 21.2 per cent in 2017 to 25 per cent in 2018. The Sahel (3 per cent), Plateau Central (2.5 per cent), Nord (1.5 per cent), Centre-Nord (1.8 per cent) and Est (1.3 per cent) regions have the highest rates of SAM prevalence. According to the same survey, 333,066 SAM cases are expected during 2019, with 42 per cent of them in the four regions mostly affected by insecurity.

Health

As of week 12 of 2019, 548 cases of measles were detected at national level (Situation épidémiologique S12-2019 - Ministry of Health – MoH). The Centre-Nord region, which hosts 24 per cent of the internally displaced people (IDPs), is the most affected with 173 cases (25.4 per cent). Within the region, the commune of Barsalogho, where one of the largest concentrations of IDPs is located, registered the highest number of cases (108). The Sahel region reported 76 measles cases (14 per cent) of which 51 in Djibo commune, one of the most affected zones by security incidents. Regardless of the increase of cases since week 10, the epidemic threshold has not been reached yet. The analysis of the current situation shows a probable correlation between the incidence of measles and the presence of IDPs. Special attention must be paid to the regions hosting IDPs, in particular the bordering communities in the Sahel region where the immunization coverage has significantly declined due to limited access to health services.

WASH

Increased population movements due to deteriorating security in the areas with scarce water has led to the high risk of water borne diseases in the IDPs sites and host communities. Non-existence or insufficient number of water points to serve host populations themselves remains the key challenge for the sector. Furthermore, lack of sanitation facilities and poor maintenance of latrines are being reported in some locations due to the new IDP influx. As per the WASH sector, an estimated 80 per cent of the 136,000 IDPs are in urgent need of WASH services such as clean water, sanitation facilities, supplies and hygiene campaigns. Ongoing WASH response is being implemented by UNICEF and its partners including Oxfam, Solidarités and Red Cross Burkina Faso (RCBF) in six IDPs sites in Sahel and Centre-Nord regions to meet the Sphere standards for water and sanitation provision. However, due to the reduction of the humanitarian space, it is estimated that only one third of the population in need of WASH is reached.

Child Protection

An estimated 376,000 children (59 per cent of the population affected by conflicts and displacements) are exposed to increased risks of all forms of violence, exploitation and abuse. In Djibo commune (Sahel region), 257 cases of orphans or separated or unaccompanied (UASC) children have been identified and protected with UNICEF’s support. The IDP sites of Barsalogho and Foubé (Centre-Nord region) are overcrowded and have insufficient monitoring and security systems in place. Women and adolescent girls are therefore the most vulnerable to the risk of sexual violence and abuse. Finally, there is the risk of children and adolescents being associated with armed groups. Several children in conflict with the law were arrested due to the presumption of being associated with violent extremist groups and were referred to the high security prison of Ouagadougou. UNICEF is advocating towards the Ministry of Justice for the adoption of a handover protocol including the release and referral of these children to social services. Meanwhile, thanks to UNICEF advocacy and support, the Ministry agreed to put in place appropriate measures to separate these children from adults in this prison and to ensure their access to social services and judicial authorities.

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2 MoH/WHO definition: The epidemic threshold for measles is reached when 10 cases per week in a health zone or 3 cases per week in a health area or 1 case in a displaced/refugee camp.
3 Barsalogho, Foubé, Kelbo, Dablo, Arbinda and Djibo
4 Sphere standards: 15 liters per person per day of water and 20 persons per latrine
5 Source: Direction de la santé et action sociale du ministère de la justice, 29 mars 2019
Refugees and Internally Displaced Persons
The persisting insecurity in the Nord, Centre-Nord, Sahel, Centre, and Est regions has led to a major increase in the number of IDPs. During the reporting period, 89,000 new IDPs (59 per cent children) have been registered, bringing the total IDPs to almost 136,000 people (OCHA, 2 April 2019). Most of the IDPs (123,191 people) are registered in Oudalan and Soum provinces in the Sahel region and in Sanmatenga province in Centre-Nord. Approximately 2,500 IDPs have been registered in the Est region (OCHA, 2 April 2019). It is, however, difficult to know the exact number of IDPs in the Est region as the access has been restricted due to security incidents since January 2019 and the intensive government military operations since March 2019. As of 12 March 2019, Burkina Faso is still hosting 25,182 refugees mainly from Mali (OCHA, 2 April 2019).

Humanitarian Leadership and Coordination
The current emergency context requires UNICEF and partners to quickly strengthen the emergency coordination systems to expand the multi-sectoral humanitarian responses. UNICEF plays a crucial role in sectoral coordination in emergency as the lead agency for three sectors and one sub-sector (Education, Child Protection, WASH and Nutrition). The Country Office (CO) is hiring 31 additional human resources (among which 20 are directly linked to emergency programming) to reinforce the office’s capacity in the coordination and enhance the emergency responses in eight priority regions.

- In the WASH sector, the 5W6 matrix and the contingency plan have been developed by the group.

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6 5Ws: Who does What Where When and for Whom
• In nutrition, UNICEF’s coordination contributed to the finalization of the mapping of emergency responses.
• With the support from UNICEF and the humanitarian partners, the MoE has introduced a new strategy on accelerating the support to children’s education in insecure zones in March 2019. UNICEF played a key coordination role in its elaboration, review and finalization. An operational plan for the strategy is being developed by MoE and partners coordinated by UNICEF. UNICEF and partners are also supporting the MoE to mobilize US$256 million for five years to implement this strategy. The Education sector is also developing the 3W matrix.
• The Child Protection in Emergencies sub-group is operational since January 2019. The group developed a 5W matrix and a response plan to address the IDP crisis, under the leadership of the Ministry of Women, National Solidarity, Family and Humanitarian Action.
• UNICEF plays an active role in the newly created Health in Emergency group, led by WHO. A sub-group was created to develop a strategy to ensure access to health services for the populations living in hard-to-reach areas. As a member of this sub-group, UNICEF has been contributing to this exercise.

Humanitarian Strategy

UNICEF Burkina Faso emergency response plan (under development) is aligned with the Country Programme Document 2018-2020 (CPD) strategies, especially on the humanitarian-development nexus and building resilience/sustainable peace, with the Interagency Emergency Plan (Plan d’urgence Burkina Faso 2019) and with the Government Stratégie d’extension du programme d’urgence pour le Sahel 2019-2021 (March 2019). The response plan will address the urgent needs on a short-term basis and the extension of the programme to new geographic areas such as Nord, Boucle du Mohoun, Est, Centre Est and Centre-Nord regions.

UNICEF is rapidly scaling up its presence in the north and east with additional sub-offices in Kaya and Fada, and increased its human resources specialized in emergency. UNICEF will respond to displacement resulting from armed hostilities and intercommunal violence and will support community-based services in areas where government services have disappeared or are being severely restricted. UNICEF will be able to use a blend of emergency and development funding for this resilience-building.

UNICEF is working with local partners and communities to ensure the access to basic services for the affected population in the most insecure areas.

The CO is also strengthening its monitoring and reporting capacity and increased its visibility to better advocate the situation to the global humanitarian community. UNICEF continues to collaborate with relevant ministries and mobilizes actors to ensure the harmonized approach to scaling up the emergency response, especially the ongoing multi-sectoral interventions in IDP sites and host communities. UNICEF also supports the Government to implement alternative strategies to ensure the access to basic social services mainly in education and health; including vaccination/immunizations in the zones affected by insecurity.

Education. UNICEF and partners are currently exploring possible adjustment or adaptation of the new strategy on Education in emergency for children in Koranic schools to progressively introduce catch-up classes leading towards the national education curriculum. UNICEF is also supporting the Ministry of Education (MoE) in implementing the Quality child-friendly school programme in the Franco-Arabic schools. Furthermore, the MoE, with support from UNICEF, is accelerating the scaling up of the Safe School strategy to build the resilience of teachers and students.

Protection. UNICEF, together with partners, continues to implement the community-based protection services for vulnerable children affected by emergencies, focusing on psychosocial support and case management for UASC suffering from violence.

WASH. The emergency response supports the health, nutrition and education services by increasing access to clean drinking water, expanding the community-led total sanitation in fragile or emergency-affected regions. Due to the huge needs for WASH services among emergency-affected population, the WASH sector is also planning on building the capacity of local communities to repair and maintain the existing water points and intensify hygiene awareness campaigns.

Nutrition. UNICEF facilitates the ready-to-use therapeutic food (RUTF) procurement system for SAM treatment and supports the identification and management of SAM cases in emergency-affected communities.

Health. The response is focused on vaccination, especially against measles, to prevent disease outbreaks.
Finally, as part of the strategy to increase the accessibility to highly vulnerable populations in hard-to-reach areas, UNICEF and other UN entities (WFP, UNHCR, IOM, etc.) are exploring the possibility of expanding their field presence in Kaya (Centre-Nord region) and Fada-NGourma (Est region) through strengthening or setting up a UN presence.

Summary Analysis of the Programme Response

Nutrition

The SAM performance indicators remained good based on the SPHERE minimum standards: SAM cure rate was 89.8 per cent (standard: >75 per cent) while SAM mortality rate was 1.6 per cent (<10 per cent) and defaulter rate was 7.9 per cent (<15 per cent) (MoH), including in the four insecure regions (Centre-Nord, Nord, Sahel and Est). In January and February 2019, 14,679 SAM children were admitted in the Community Management of Acute Malnutrition (CMAM) programme for treatment, representing 11 per cent of the estimated SAM caseload for 2019. This number includes 5,993 SAM children in the four insecure regions, representing 43 per cent of the total SAM children admitted. UNICEF ensured the purchase of 29,500 RUTF boxes during the first quarter. RUTF’s requirement for 2019 are 119,759 RUTF boxes and the gap 23.58 per cent of the pipeline for the whole 2019 year.

Advanced strategies have been put in place in one out of the four health districts of the Sahel region to ensure the continuity of treatment of SAM in insecure areas. With regards to the Infant and Young Child Feeding (IYCF) programme, 141,574 pregnant and lactating women with children less than 24 months received nutritional counselling and services through the mothers’ support groups in the Nord, Est and Plateau Central regions.

Two mass nutritional screening campaigns were carried out with UNICEF support in February and March 2019 in Kongoussi and Kaya health districts in the Centre-Nord region where IDPs reside in host families. These campaigns have allowed the screening of 136,326 children under the age of 5, including 743 SAM children and 3,661 MAM children. In addition, the RCBF had screened 1,188 IDP children in host communities in the Centre-Nord and Sahel regions. Finally, a screening was carried out by the MoH reaching 1,315 children in the Barsalogho and Foubé IDP sites in the Centre-Nord region. The screening results show a prevalence of 3.1 per cent of SAM at the Barsalogho site. These figures could not be confirmed as there is insufficient collection and transmission of nutrition data. To cope with this situation; UNICEF is strengthening the building capacity of health workers in screening and data collection to increase the nutritional surveillance in insecure areas.

A vitamin A supplementation campaign coupled with deworming was integrated in the measles campaign in January 2019 in the Barsalogho and Foubé IDP sites, reaching 3,081 children under the age of 5. With regards to the IYCF programme, 141,574 pregnant and lactating women with children less than 24 months received nutritional counselling and services through the mothers’ support groups in the Nord, Est and Plateau Central regions.

Screening results in the IDP sites of Foubé and Barsalogho and in the health district of Kaya and Kongoussi (Centre-Nord region) in January and February 2019

<table>
<thead>
<tr>
<th>Location</th>
<th>Total screened</th>
<th>MAM</th>
<th>SAM</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barsalogho Health district</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>IDP site of Foubé</td>
<td>1,095</td>
<td>112</td>
<td>12</td>
</tr>
<tr>
<td>IDP site of Barsalogho</td>
<td>220</td>
<td>45</td>
<td>7</td>
</tr>
<tr>
<td>IDPs in host community</td>
<td>1,188</td>
<td>28</td>
<td>12</td>
</tr>
<tr>
<td>Kaya Health district</td>
<td>71,104</td>
<td>1,358</td>
<td>254</td>
</tr>
<tr>
<td>Kongoussi Health district</td>
<td>62,719</td>
<td>2,118</td>
<td>458</td>
</tr>
<tr>
<td>TOTAL</td>
<td>136,326</td>
<td>3,661</td>
<td>743</td>
</tr>
</tbody>
</table>

Health

UNICEF and partners supported the MoH in planning and conducting a measles campaign in the IDP sites of Barsalogho and Foubé, in the Centre-Nord region. 9,393 children from 6 to 14 years old and 3,030 aged between 6 months and 5 years were vaccinated. UNICEF used the Central Emergency Response Fund (CERF) funding to replenish the stock of measles vaccines used for the campaign (12,925 doses) included in the global order of 20,210 doses that are underway. With the incidence of measles increasing, discussions are underway with the MoH to
conduct a measles vaccination campaign in Sahel and Centre-Nord regions for 146,000 children from 6 to 59 months, although the epidemic threshold is not yet reached.

UNICEF is supporting the implementation of two key integrated community interventions in the Sahel region: the management of uncomplicated SAM cases and community-based immunization to increase people’s access to health care. These two interventions are complementing the package of community activities being implemented in the region, including the Integrated Case Community Management (ICCM) and the care of pregnant women and newborns at home. Emphasis is being put on community-based health workers (CHWs) capacity building, monitoring/oversight and availability of supplies such as vaccines.

Education
A Joint Rapid Assessment conducted by the humanitarian community in January estimated that 5,000 children among the IDPs were in need of education in the Sahel (Arbinda) and Centre-Nord regions. UNICEF has therefore activated the Standby Agreement with the RCBF. During the reporting period, 52 school tents, 100 desks, 50 chairs, 180 recreation kits and 100 Schools in a Box kits have been distributed through RCBF mainly in the Centre-Nord and the Sahel regions. The RCBF has also begun the teachers’ training in both regions on peace education and psychosocial support. Finally, UNICEF is supporting the MoE to write an operational plan to implement the strategy of schooling children in areas with higher security challenges.

To strengthen resilience in schools and communities, UNICEF continued its support to the MoE in implementing the Safe School strategy in the Sahel, Nord, Centre-Nord and Boucle du Mouhoun regions. In this strategy, teachers analyse risks facing the students in school and the surrounding communities, and then communities and schools develop and implement a school mitigation plan. UNICEF also facilitated the access to formal pre-school and non-formal education for 7,400 children (49 per cent girls) through catch-up classes, accelerated learning programmes, provision of temporary class for IDPs and communication campaigns in the Sahel, East and Centre-Nord regions.

Child Protection
UNICEF, in partnership with the Danish Refugee Council (DRC), the CNAEJTB’ and the RCBF, reached 4,764 children (2,329 girls) from IDPs, refugees and host communities in Sahel and Centre-Nord regions with child protection services. As of 27 March 2019, 3,028 IDP children (1,493 girls) benefitted with psychosocial support.

Through its implementing partner DRC, UNICEF provided non-food items (NFIs) and cash transfer to ensure an adequate living for 515 children (250 girls). The criteria to identify vulnerability included UASCs and orphans. 257 (157 girls) UASCs were identified and supported. In the same regions, 392 adolescents and young IDPs (223 girls) received life skills education on peace building, citizenship and children’s rights, prevention of family separation and violence, particularly gender-based violence (GBV), through six training session of two days in Djibo communes. 1,068 women and children (392 IDPs and 676 refugees) received prevention and response services for GBV.

To support quality service delivery, 27 actors, including 11 women from IDP sites and host communities in Foubé and Barsalogho, were trained in child protection in emergencies and group facilitation techniques. These trained actors are helping to manage the child-friendly spaces including the provision of psychosocial services. UNICEF continued the psychosocial support, case management and reunification for 1,467 (719 girls) refugee children from Mali in the two refugee sites in the Sahel region in partnership with RCBF, CNAEJTB and UNHCR. In addition, nearly 676 parents and caregivers (including 431 women) were reached though periodic educative talks on parenting, prevention of family separation and violence, particularly GBV.

WASH
In line with the Interagency Emergency Plan (Plan d’urgence Burkina Faso 2019), UNICEF and partners are targeting IDPs as well as host communities with the provision of clean drinking water, sanitation and hygiene awareness in the Sahel, Nord, Centre-Nord and Est regions. During the reporting period, 16,008 people in the Sahel and Centre-Nord regions gained access to safe sanitation facilities amongst which 11,508 people living in 38 declared Open Defecation

7 Coordination nationale des associations d’enfants et jeunes travailleurs du Burkina Faso
Free (ODF) villages. In Foubé IDP site (Centre-Nord region), UNICEF supported the construction of 50 gender segregated emergency latrines and showers, benefitting 1,000 people including 530 children (276 girls) and 244 women. In addition, UNICEF contributed to the construction of four water points to serve approximately 2,000 people.

In the Sahel region, 21,202 IDPs and host communities received hygiene messages and soap during awareness sessions focused on handwashing, personal hygiene and environmental cleaning. The CO, in partnership with the zie (Institut international d'ingénierie de l'eau et de l'environnement), UNICEF-WCARO and Bioforce institute, organized the international “WASH in Emergency” training in March 2019 for 27 participants from eight countries.

C4D
UNICEF continued to engage communities of Soum, Oudalan, Seno, Yahga, Sanmantenga and Yatenga provinces affected by the security crisis in the Sahel, Centre-Nord and Nord regions as part of support to Education in Emergency and the Safe school strategy implementation. These interventions included strategic alliances and synergy between the Ministry of communication, eight community-based radio stations, teachers, parents’ associations and engagement with traditional and religious community leaders to deliver information, sensitization messages and community engagement activities to protect and keep schools a safe place for children. Over 150 community relays in 30 communities (villages and schools) continued door-to-door activities to sensitize parents and families on the importance of their engagement as key element of school functioning.

In addition, during the meningitis outbreak in the Est region, UNICEF supported radio-based programmes broadcasting including microprograms, public/open debates in villages and live air time programs to deliver timely relevant and accurate information. UNICEF also supported the diffusion of messages on measles prevention and vaccination in Sahel and Centre-Nord regions.

Funding
In line with the Humanitarian Action for Children appeal 2019 (HAC) and the Interagency Emergency Plan (Plan d’urgence Burkina Faso 2019), UNICEF is requesting US$36,370,000 to meet the needs of the children in Burkina Faso. The funding gap as of March 2019 represents 81 per cent (29.6 million) of the appeal. UNICEF Burkina Faso would like to recognise the generous contributions from key partners including Japan, Sweden and CERF. In addition, UNICEF recognises the flexible and unearmarked funding received through the Global Humanitarian Thematic Fund.

<table>
<thead>
<tr>
<th>Appeal Sector</th>
<th>Requirements (US$)</th>
<th>Funds available (US$)</th>
<th>Funding gap</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Funds Received in 2019</td>
<td>Carry-Over</td>
</tr>
<tr>
<td>Nutrition</td>
<td>13,950,000</td>
<td>599,046</td>
<td>3,648,946</td>
</tr>
<tr>
<td>Health</td>
<td>850,000</td>
<td>178,450</td>
<td>140,000</td>
</tr>
<tr>
<td>WASH</td>
<td>5,000,000</td>
<td>1,274,000</td>
<td>107,500</td>
</tr>
<tr>
<td>Child Protection</td>
<td>1,720,000</td>
<td>495,935</td>
<td>230,500</td>
</tr>
<tr>
<td>Education</td>
<td>14,850,000</td>
<td>0</td>
<td>57,288</td>
</tr>
<tr>
<td>Total</td>
<td>36,370,000</td>
<td>2,547,431</td>
<td>4,184,188</td>
</tr>
</tbody>
</table>

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UNICEF Burkina Faso Humanitarian Action for Children Appeal
UNICEF Humanitarian Action for Children Appeal

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**Annex A**

**SUMMARY OF PROGRAMME RESULTS**

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Overall needs</th>
<th>UNICEF and IPs</th>
<th>Sector response</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2019 Target</td>
<td>Total Results</td>
<td>Change since last report ▲▼</td>
</tr>
<tr>
<td><strong>NUTRITION</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>#Children &lt; 5 years old with SAM admitted into therapeutic feeding programme</td>
<td>133,066</td>
<td>14,679</td>
<td>133,066</td>
</tr>
<tr>
<td>#Pregnant and lactating women of children aged 0 to 23 months received iYCF counselling</td>
<td>465,000</td>
<td>141,574</td>
<td>465,000</td>
</tr>
<tr>
<td><strong>HEALTH</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>#Children aged 6 to 59 months vaccinated against measles</td>
<td>29,302 8</td>
<td>12,423</td>
<td></td>
</tr>
<tr>
<td>#Pregnant women in emergency affected areas received two long lasting insecticide treated mosquito nets</td>
<td>21,360</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>#Mothers with new born children in emergency affected areas received at least one postnatal visit by a community health worker</td>
<td>21,360</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td><strong>WATER, SANITATION &amp; HYGIENE</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>#People accessing the agreed quantity of water for drinking, cooking and personal hygiene</td>
<td>30,000</td>
<td>600</td>
<td>50,000</td>
</tr>
<tr>
<td>#People accessing appropriate sanitation facilities</td>
<td>24,000</td>
<td>16,008</td>
<td>50,000</td>
</tr>
<tr>
<td>#People accessing hygiene awareness interventions in the targeted regions</td>
<td>100,000</td>
<td>21,202</td>
<td>100,000</td>
</tr>
<tr>
<td><strong>CHILD PROTECTION</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>#Children reached with psychosocial support, including access to child friendly spaces/other safe spaces</td>
<td>35,800</td>
<td>4,764</td>
<td>64,295</td>
</tr>
<tr>
<td>#Women and children provided with prevention or response interventions to address gender-based violence</td>
<td>5,000</td>
<td>1,068</td>
<td>5,000</td>
</tr>
<tr>
<td><strong>EDUCATION</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>#Out of school children aged 3 to 17 years affected by crisis accessing formal or non-formal basic education</td>
<td>76,592</td>
<td>7,400 9</td>
<td>76,592</td>
</tr>
<tr>
<td>#Children aged 3 to 17 years affected by crisis attending education in a classroom where the teacher has been trained in psychosocial support and conflict/disaster risk reduction</td>
<td>374,839</td>
<td>5,000 10</td>
<td>374,839</td>
</tr>
</tbody>
</table>

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8 With the increase of the measles cases in Sahel and Centre-Nord regions, it is estimated that 146,000 children from 6 to 59 months old will need to be vaccinated. Targets for this indicator will be increased accordingly.

9 Data from the Fondation pour le développement communautaire (DFC), the Association nationale pour la traduction de la bible et l’alphabétisation (ANTBA) and the CRBF

10 Data from CRBF