Highlights

- In February and March, UNICEF supported the national measles rubella vaccination campaign and reached 17,565 children aged 0-12 months.
- From January 2017 to date, UNICEF has assisted the Ministry of Health to provide therapeutic feeding to 239 children (128 boys and 111 girls) with severe acute malnutrition (SAM).
- With the national elections planned on 03 June 2017, the Government of Lesotho has requested all humanitarian partners to suspend all humanitarian distributions in the three weeks before the elections so that public gatherings are only for political reasons.
- The emergency cash top up programme for vulnerable families and children will be completed in May 2017 when the remaining 177 households are reached.

UNICEF Response with partners

<table>
<thead>
<tr>
<th></th>
<th>UNICEF Target</th>
<th>2017 Cumulative results (#)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nutrition: Number of children 6-59 months with SAM enrolled in TFP/community-based programmes/facilities</td>
<td>2,500</td>
<td>239*</td>
</tr>
<tr>
<td>Education: Percentage of schools that are able to inform the Education in Emergencies working group on details of the impact of an emergency through EDUTRAC</td>
<td>1,177</td>
<td>0</td>
</tr>
<tr>
<td>Health: Children in humanitarian situations vaccinated against measles</td>
<td>52,000</td>
<td>17,565**</td>
</tr>
<tr>
<td>WASH: Number of people with access to sufficient water and safe water for drinking, cooking and maintaining personal hygiene</td>
<td>17,000</td>
<td>201</td>
</tr>
<tr>
<td>Child Protection: # of chiefs in communities where ongoing work to mobilize and strengthen social support networks to prevent and address violence, abuse and exploitation, including GBV</td>
<td>300</td>
<td>5***</td>
</tr>
<tr>
<td>HIV/AIDS: Number of people reached with information on prevention, care and treatment of HIV/AIDS</td>
<td>310,000</td>
<td>5,166</td>
</tr>
</tbody>
</table>

* Data is for the reporting period Jan to Mar 2017 from 41 health facilities out of the 175 that are providing therapeutic feeding services. Low reporting on nutrition data is due to limited transport for district nutritionists.
** Preliminary national measles rubella vaccination campaign results show that 34% of children under 12 months were reached with Measles Rubella vaccine.
***Discussions are underway with a service provider for the EDUTRAC platform

310,015
Children affected by drought

64,141
Children under 5 affected by drought

69,000
Vulnerable children in need of social safety nets

679,437
People in need of humanitarian assistance (LVAC)

*All numbers above are from the Rapid Drought Impact Assessment, the LVAC June 2016.

52% Funding Gap

2017 Funding Status

- Available Funding: $791,401
- 2017 Funding Requirement: $1,661,000
- Funding Gap: $869,600

* Funds available: No funding has been received for the current appeal year. The $791,401 is the carry-forward from the previous year.
Lesotho Situation Overview & Humanitarian Needs

Lesotho is currently approaching the final stage of the lean season which is projected to end in May 2017, when the next harvest is expected. Rainfall has been normal therefore the forecast for the harvest is expected to be good, however, the May-June 2017 Lesotho Vulnerability Assessment Committee (LVAC) will provide the required information on food security needs, results are expected before August 2017. In rural areas, the number of people living with a food security survival deficit decreased from 476,842 in May 2016 to 46,521 in November 2016 (most recent available data), suggesting that food security interventions have successfully addressed the needs. With the national elections planned on 03 June 2017, the Government of Lesotho, through the Disaster Management Authority (DMA), has asked humanitarian implementing partners to suspend all humanitarian distributions in the three weeks before the elections, so that public gatherings are only for political reasons.

Humanitarian leadership and coordination

An Inter-Ministerial Task Force, established by the Government, supports the coordination of the DMA. The Humanitarian Country Team, made up of UN agencies and NGOs, seeks to optimize the collective efforts of humanitarian actors to strengthen the overall drought response. The United Nations Disaster Management Team (UNDRMT) continues to support UN agencies on coordination with other partners in the humanitarian response. UN agency focal points continue to strengthen the DMA sector working groups which coordinate response activities under the National Mitigation and Preparedness Plan and the UN also supports a national operation centre for the DMA. The Government-led WASH sector coordination group which was set up for coordination of development in the sector has placed emergency on its standing agenda. UN agencies (UNICEF and WFP in particular) provided support for the Integrated Phase Classification (IPC) process. In Nutrition, UNICEF continues to work with the Lesotho Vulnerability Assessment Committee (LVAC) in planning, training and analysing data to ensure the integration of Nutrition, HIV and gender throughout the process.

Humanitarian Strategy

UNICEF’s humanitarian strategy uses some of its regular development programmes to build resilience for those most affected by the drought, while also implementing specific humanitarian interventions to meet critical and urgent needs of affected children and families. UNICEF continues to work for stronger, more resilient government systems through both humanitarian and development interventions. UNICEF is using the national Child Grant Programme (CGP) as a mechanism for reaching the most affected, identified as the poorest, elderly, people living with HIV, people with disability, and with a focus on children. The CGP is funded by the European Union and World Bank and is jointly implemented by UNICEF and the Ministry of Social Development (MOSD).

Working with partners, UNICEF is also supporting the Government’s humanitarian action to scale up life-saving health, WASH, nutrition, HIV and child protection interventions, including protecting girls, boys and women against violence, abuse, exploitation, and preventing children from dropping out of school, poor attendance and low learning outcomes. UNICEF continues to work with the Ministry of Health (MoH) to treat acutely malnourished children and children with diarrhoeal diseases, and is also supporting people on Antiretroviral Therapy (ART) to remain in care and treatment throughout the emergency response. In addition, UNICEF also continues to provide support so that families in the most affected areas have access to safe water and basic sanitation facilities.

Health and Nutrition

In partnership with the MoH, UNICEF plans to reach a projected 2,500 children under the age of five who are suffering with SAM with therapeutic feeding in 2017. From January 2017 to March 2017, 239 children (128 boys and 111 girls) with SAM have been reached with therapeutic feeding.1 During this reporting period, only 23 per cent (41 out of 175) of facilities managing SAM cases have provided data for the months of January to March 2017. Reporting on SAM performance indicators (cure rate, deaths, defaulters and non-responders) have improved, however, reporting rates are compromised by inadequate transport at the district level for nutritionists to undertake regular monitoring and supervision to all health centres. UNICEF and MoH are addressing the transportation challenge. Out of 137 children who exited from SAM treatment 104 (76 per cent) were cured (56 boys and 48 girls); 17 (12 per cent) died (12 boys and 5 girls) and zero defaulted. The remaining 12 per cent of exits (12 boys and 4 girls) were classified as non-recovered by the time they were discharged from treatment for SAM. Although the cure rate is above the recommended threshold of 75 per cent, the percentage of SAM related deaths is higher than 10 per cent indicating a need for improvement in the quality of management of SAM children under the age of five years. UNICEF is addressing this through the dissemination of revised and updated admission forms for outpatient and inpatient care for children with SAM. UNICEF is also providing funding and technical support for enhancing the capacity of health staff at district level for management of SAM through training and follow up support and supervision.

Preliminary reports from the national measles rubella (MR) vaccination campaign which targets children aged 9 months to 14 years indicate that 540,017 (80 per cent) of the target children have been vaccinated. In the same campaign, 17,565

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1 Please note that all 175 health facilities are implementing IMAM, however challenges with low reporting coverage has hampered UNICEF’s ability to accurately communicate results. The number of children reached is potentially far higher than reported.
UNICEF Lesotho Situation Report – April 2017

children under 12 months were reached with MR. Overall, Vitamin A coverage for all children under the age of five during the MR campaign was 49 per cent.

HIV and AIDS
UNICEF is working with the MoH and partners on HIV prevention, care and treatment in drought affected communities to ensure that people living with HIV continue to receive services and their antiretroviral medicines. UNICEF is providing support for integrated antenatal care services which includes communication for development. Pregnant women living with HIV receive antiretroviral medications to prevent mother-to-child transmission of HIV. By the end of March 2017, 5,166 pregnant women have received HIV counselling and testing services. UNICEF is continuing to support the ART Retention and Tracking system. However, retention into care is assessed annually therefore data will be available in the December 2017 situation report. The nutrition status of HIV positive children on ART is assessed each time they visit the clinic so that those that are malnourished are provided with therapeutic feeding treatment. Also, malnourished children identified at sick baby clinics are offered HIV testing by health care providers and initiated on treatment in the event they are HIV positive. Data on HIV and nutrition integration will be available in the June 2017 situation report.

Water, Sanitation and Hygiene (WASH)
The UNICEF procurement process for the provision of additional WASH facilities in 16 locations in 4 districts (Thaba Tseka, Mafeteng, Quthing and Buthe Buthe) is in advanced stage with the following scope of work: Rehabilitation/new spring boxes or water sources (3 sites), connection of new water supplies to existing distribution network (2 sites), connection of water supply to schools (3 sites), construction of latrines and WASH services to schools (4 sites), rehabilitation/repair of hand-pumps (4 sites). These activities will be undertaken through direct contracting with UNICEF coordinating project management, monitoring, supervision and evaluation in conjunction with the Government Department of Rural Water Supply and Sanitation (DRWSS). Agreements are also being processed for World Vision Lesotho (WVL) and Catholic Relief Services (CRS) to implement sensitization/hygiene promotion in communities, and to train hygiene clubs in schools. About 18,000 persons would be reached with these services in schools and communities by the end of the project in August 2017. UNICEF is strengthening the WASH sector coordination forum, led by the Ministry of Water, and also the emergency WASH working group meetings steered by the DMA.

Social Protection
UNICEF’s cash-top up for families affected by the drought ended in December 2016. However, in May 2017 UNICEF jointly, with the Ministry of Social Development, has planned to provide unconditional emergency Cash Grant Top-ups to 177 remaining households (about 530 children) in four community councils negatively affected by food insecurity and other drought related deprivations.

UNICEF continues to assist the Ministry of Social Development to expand the National Information System for Social Assistance (NISSA), a web-based database or Single Registry for storing and processing socio-economic information for all households in Lesotho. NISSA is used by all social assistance programmes to identify and select beneficiaries eligible for different social protection programmes in regular and emergency situations.

Education
A shortage of water in schools has resulted in low attendance and higher school drop-out rates. UNICEF has completed data collection on WASH needs in Early Childhood Development (ECD) centers, primary schools and secondary schools in all ten districts. UNICEF has started negotiations with Vodacom and the Ministry of Education and Training to set up a mobile based system known as Education Tracking (EduTrac) which can be used to send and receive information, track indicators, facilitate sharing and community building, support Monitoring and Evaluation (M&E) processes, and backstop supply chain tracking. Schools will provide information to the central ministry on the impact of crises such as drought, floods, and outbreaks on school attendance via mobile phone. UNICEF is working through the WASH sector for WASH in schools (including provision of potable water, latrines for boys and girls and hygiene education).

Communication trees, contact lists and 4Ws tools are being set up in each district, linking schools to the Ministry of Education, Disaster Management Authorities and partners as a preparedness measure to ensure effective and efficient information management within the Education sector.

Child Protection
A total of 420 community members (80 males, 120 females, 110 youth and 110 children) in Ha Maphohloane community (in Mohale’s Hoek district) and Ha Ramilememe community (in Mafeteng district) were reached with child protection in emergencies community sensitisation messages covering prevention and response to gender-based violence in emergencies. Separate training sessions for 20 children, 15 community leaders, 10 teachers, 5 media and 10 law enforcement officials will commence in May 2017. The Regional Psycho-Social Support Initiative (REPSSI) has since postponed the psycho-social support sessions due to the ongoing feasibility study they are undertaking in Lesotho and other Southern African countries and the active involvement of the district child protection teams (DCPTs) in the African Committee of Experts on the Rights and Welfare of the Child (ACERWC) Ordinary Session which is scheduled for 28 April to 9 May.

Communications for Development (C4D)
An assessment of child protection related behaviours and messaging in three emergency districts of Maseru, Mafeteng and Mohale’s Hoek, has been undertaken and feedback from target communities is yet to be captured and analysed. Results are expected to be reported in the next Sitrep which is due June 30. Analysis of the findings from the post-messaging exercise conducted by Catholic Relief Services (CRS) is also still underway. Findings from these two exercises will inform future interventions and community reporting mechanisms beyond an emergency situation.

Media and External Communication
UNICEF has reactivated the existing Lesotho Country Office social media platforms and additional Instagram and YouTube channels which were created to increase exposure of UNICEF’s emergency and development work in Lesotho.

Funding
In 2017, UNICEF Lesotho appealed for US$1.66 million to meet the humanitarian needs of women and children in the country. To date, UNICEF has received US $791,401 (48 per cent funded) as funds carried forward from 2016. The funds were received from DFID and Canada. Unmet funding requirements continue to pose a risk to vulnerable children and women in relation to the ongoing effects of El Nino.

<table>
<thead>
<tr>
<th>Appeal Sector</th>
<th>Requirements</th>
<th>Funds Available*</th>
<th>Funding gap</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>US$</td>
<td></td>
<td>%</td>
</tr>
<tr>
<td>Health</td>
<td>536,000</td>
<td>0</td>
<td>536,000</td>
</tr>
<tr>
<td>HIV/AIDS</td>
<td>300,000</td>
<td>250,000</td>
<td>50,000</td>
</tr>
<tr>
<td>Nutrition</td>
<td>280,000</td>
<td>0</td>
<td>280,000</td>
</tr>
<tr>
<td>Education</td>
<td>145,000</td>
<td>110,020</td>
<td>34,980</td>
</tr>
<tr>
<td>Child Protection</td>
<td>400,000</td>
<td>431,381</td>
<td>0</td>
</tr>
<tr>
<td>WASH</td>
<td></td>
<td>791,401</td>
<td>900,980</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>1,661,000</strong></td>
<td><strong>791,401</strong></td>
<td><strong>900,980</strong></td>
</tr>
</tbody>
</table>

*Funds available: No funding has been received for the current appeal year. $791,401 reflected in the table above is the carry-forward from the previous year.

Next SitRep 30 June 2017

Twitter: [https://twitter.com/unicef_lesotho](https://twitter.com/unicef_lesotho)
Instagram: [https://www.instagram.com/unicef.lesotho/](https://www.instagram.com/unicef.lesotho/)
YouTube: [https://www.youtube.com/channel/UCcuKXhhMZUNen_mmUgXGqw](https://www.youtube.com/channel/UCcuKXhhMZUNen_mmUgXGqw)

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## Annex A

### Summary of 2017 Programme Results

<table>
<thead>
<tr>
<th>Category</th>
<th>UNICEF 2017 Target</th>
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</tr>
</thead>
<tbody>
<tr>
<td><strong>NUTRITION</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of children 6-59 months with SAM enrolled in TFP/community-based programmes/facilities</td>
<td>2,500</td>
<td>239*</td>
</tr>
<tr>
<td>Caregivers of children in humanitarian situations accessing infant and young child feeding counselling</td>
<td>56,000</td>
<td>0</td>
</tr>
<tr>
<td><strong>HEALTH</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children in humanitarian situations vaccinated against measles</td>
<td>52,000</td>
<td>17,565</td>
</tr>
<tr>
<td># of children 6-59 months in the affected areas receiving vitamin A supplement in the past 6 months</td>
<td>104,000</td>
<td>113,145**</td>
</tr>
<tr>
<td><strong>WATER, SANITATION AND HYGIENE</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of people with access to sufficient water and safe water for drinking, cooking and maintaining personal hygiene</td>
<td>17,000</td>
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</tr>
<tr>
<td>People in humanitarian situations received critical WASH-related information to prevent child illness</td>
<td>34,900</td>
<td>201</td>
</tr>
<tr>
<td><strong>CHILD PROTECTION</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td># chiefs in communities where ongoing work to mobilize and strengthen social support networks to prevent and address violence, abuse and exploitation, including GBV</td>
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<td><strong>EDUCATION</strong></td>
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<td></td>
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* Data is for the reporting period Jan to Mar 2017 from 41 health facilities out of the 175 that are providing therapeutic feeding services. Low reporting on nutrition data is due to limited transport for district nutritionist.

**Vitamin A supplementation was part of the package of the national measles rubella campaign (February/March 2017) for children under five years of age hence more than 100% coverage was reached.

***Discussions are underway with a service provider for the EDUTRAC platform