Situation Overview and Humanitarian Needs

- 2,522 cases reported; 124 deaths (mortality of 4.9 per cent).

- The most affected region is Bamako (47.6 per cent of the total confirmed cases) but the regions of Timbuktu (22.5 per cent) Mopti (9.8 per cent) and Koulikoro (seven per cent) have seen an explosion of cases in recent weeks.

- Primary, secondary (general and technical), technical and vocational education are continuing to take classes and exams are scheduled for September 2020.

- Air borders were reopened on July 25.

Some features

- 45 Sanitary corridors supported
- 2,799 Health workers trained on prevention and control of COVID-19
- 204 Community Radios engaged for sensitization on COVID-19
- 113 Hand washing kits supplied to sanitary corridors

Funding Situation

- Funds available $8,024,729
- Funding gap $16,210,217
- Total funds needed $24,234,946
UNICEF’s COVID-19 Response

Health and Nutrition

UNICEF’s contributions to the COVID-19 outbreak response in Mali are aligned with the national COVID-19 response plan. One of the strategies of the health programme is to continue to provide quality health services to the population and to minimize the impact of COVID-19 on health services.

In July 2020, UNICEF made an official delivery of medical materials and equipment worth US$1.3 million to the Ministry of Health and Social Affairs as part of the response to the COVID-19 and support to the Government of Mali. The equipment includes 15,000 tests for the detection of COVID-19, oxygen extractors, masks, hydroalcoholic gels, coveralls and hand washing devices.

In addition, UNICEF provided to the AIDS Control Unit of Ministry of Health, US$ 101,565 of materials distributed as follows: 5,720 units of hydroalcoholic gels, 9,810 washable masks, 981 Hand washing devices, 3,924 Bottles of liquid soap, 1,962 Gloves and 3,758 vials of bleach.

As part of the efforts to ensure continuity of services, UNICEF provided materials, medical equipment and drugs to the Ministry of Health and Social Affairs which were used in preventive and curative consultations for 62,418 people, including 49,934 adults (20,193 men and 29,741 women) and 12,484 children aged 0 to 5 years (6,020 boys and 6,464 girls); 64,876 children aged 6-59 months (35,033 girls and 29,843 boys) were admitted for treatment of severe acute malnutrition (SAM); 653,187 pregnant women received iron and folic acid (IFA); 631,791 children aged 6-59 months received routine Vitamin A supplements in the first semester of 2020.

UNICEF is also supporting the establishment of a COVID-19 platform which will be useful in improving data management in order to influence decision-making at all levels. The model of the platform is validated, the process continues with the import of data.

Highlights from the regions

UNICEF supported in the regions of Sikasso and Mopti the training of 73 health workers in the detection, referral and appropriate management of COVID-19 cases bringing the total number of trained health workers to 2,799. In addition, this training covered 20 health workers at Prevention of mother-to-child transmission and paediatric HIV care sites in Koulikoro region.

In the region of Timbuktu, UNICEF provided the following equipment: 13 tents of 42 m2 and one tent of 72m2, 10 sanplat tiles usable to build emergency latrines.

In Kayes, Sikasso, Tombouctou, Gao and Menaka, UNICEF continued to support the operationalization of sanitary corridors through sensitization on COVID-19 and screening of travellers.

WASH

UNICEF has so far provided hygiene promotion materials (9.5 tons of chlorine, 40,434 pieces of soap) in 278 health care facilities, 216 schools and communities for 40,428 households (242,568 people: 64,402 women; 64,159 men; 57,125 girls and 56,882 boys) in 8 regions (Mopti, Timbuktu, Gao, Kidal, Menaka, Sikasso, Kayes and Bamako). Among them, 20,142 households are Internal Displaced and 8,364 of them benefited to safe water through water trucking (59,184 persons: 13,324 women, 13,274 men; 11,818 girls and 11,768 boys). As part of the efforts for the protection of health personnel and ensure continuity of services in health care centers, personal protective material has been distributed in 4 regions (Gao, Menaka, Sikasso and Bamako) for a total of 576 people
working in communities and Health centers and 4,278 health and community workers have been trained on Infection Prevention and Control measures. UNICEF continued to support at sub national level the provision of materials (1,453 Hand washing devices and soap, 124 plastic slabs for emergency latrines, 16 tarpaulins and 58 tents) in six treatments centers (Bamako, Mopti, Timbuktu, Gao, Kayes and Sikasso). Furthermore, 42,790 people (11,361 women, 11,318 men, 10,077 girls and 10,034 boys) were sensitized on the key messages and actions for the prevention and control of the COVID-19; about 1,932 of them are living on Internal Displacement sites in Mopti and Gao regions.

Highlights from the regions

UNICEF is contributing in the implementation of the prevention measures to reduce the spreading of the pandemic in 45 sanitary corridors set by Authorities with the provision of 30m3 of water per day in 6 regions (Mopti, Timbuktu, Kidal, Gao, Menaka and Sikasso).

Education

UNICEF continues to support the Ministry of Education on the safe reopening of schools in all the regions. This includes dissemination of COVID-19 protocol in schools as well as in the Teachers training Centres with the distribution of posters, prevention and control materials (WASH Kits, masks, thermos flash).

The implementation of Education Cannot Wait funded COVID-19 project is ongoing in partnership with the NGOs EDUCO (in Segou and Mopti) and NRC (in Gao and Tombouctou) with a target of 170 schools.

Under the CERF, UNICEF and two local implementing partners (ACODIS and GARDL) are supporting education response for children affected by insecurity and COVID-19 in Gao and Menaka regions.

At cluster level, two working groups have been put in place. One on catch up strategy considering the impacts of COVID-19, strike and insecurity and the other one on preparation of the reopening of schools to provide concrete guidance to education actors.

$ 5 million have been allocated to Mali as part of the Emergency Response Fund and distributed among five organizations: UNICEF, Plan International, Save the Children, World Vision International and Humanity and Inclusion. UNICEF will receive $ 1.6 million that will support education for COVID-19 and non COVID-19 response. This includes the construction and the rehabilitation of Temporary Learning Spaces (TLS) and classrooms, teachers training, acquisition of learning material, community mobilization, support to distance learning and provision of COVID-19 WASH kits.

Highlights from the regions

1,680 members of School Management Committees and 329 teachers (including 26 women) have been trained on COVID-19 prevention and control protocol in Kayes (Kita, Nioro, Kayes) while 612 teachers were trained in Sikasso. 314 schools have been provided with WASH Kits in Kayes through the implementing partner FANDEEMA.

In Gao, 1,000 COVID-19 printed protocols were delivered to 150 schools and 100 to the technical services of the Education sector.

RCCE/C4D

Over 729 sessions were undertaken by the eight-partner youth associations across the country to provide information and promote awareness on COVID-19 prevention. Their activities took the form of small group discussions (grins), mobile teams using megaphones who went around the markets, lorry parks, religious services, and the surface mining areas etc. In total they contacted some 84,200 individuals, with females making up 40,028. This brings to 204,030 the total number of persons reached, since the information and sensitization activities began at the end of May. The 324 observation sessions that followed revealed that many homes, service providers and even health centers did not have hand-washing facilities available on their premises, while social distancing was totally disregarded in the places of worship, markets and public places. The volunteers gave advice on why the protocols are to be respected, what needs to be modified as well as the positive practices that need to be encouraged and sustained.

U-Report Platform
A three-part U-Report survey was conducted to assess the perceptions of young people around COVID-19 pandemic. 78% of the respondents think it is good to carry on “normal relations” with people or families affected by COVID-19, and to ensure that competent service providers show solidarity and provide them with the care they need. Secondly, 86% of the young respondents recommend that everyone should continue to accept and co-habit with people affected by COVID-19, always being mindful of the need to adopt the measures that prevent contamination of others. Lastly, 87% think that testing positive for COVID-19 is not a death sentence. On the contrary, 34% the young people think that persons affected by COVID-19 can help to change the attitudes of those who still deny the existence of the disease. COVID-19 affected people can do this through sharing of their personal experiences to counsel others, as 29% of respondents suggested.

**Highlights from the regions**

In the regions, C4D activities focused on carrying out community dialogues, talk shows, round tables, broadcasting messages on COVID-19 prevention on radio stations and distributing leaflets on COVID-19 – 19.

**Child protection**

During the reporting period, UNICEF and its partners COOPI and Samu Social Mali reached 151 children (73 girls and 78 boys) without parental care with alternative protection care including shelter, food and medical assistance in temporary spaces in Bamako, Mopti and Ségou region. The assisted children include those living in the streets, the children whose parents are infected by the COVID-19 or in quarantine and other vulnerable children exposed to high risk of contamination by COVID-19, violence and other protection concerns such as child labor and stigmatization. 176 other children (91 girls and 85 boys) affected by COVID-19 including children in quarantine, whose parents are infected or in quarantine and other vulnerable children in psychosocial distress due to COVID-19, were reached with community-based mental health and psychosocial support in Bamako.

UNICEF and partners continue to carry out various activities to prevent the spread of COVID-19 and the exacerbation of related child protection issues. As of July 2020, a total of 17, 884 children (8,860 girls and 9,024 boys) were reached with outreach activities on COVID-19 prevention and access to child protection services in Timbuktu, Kidjel, Ménaka, Gao, Mopti, Ségou and Bamako.

In the framework of the implementation of the CERF COVID-19 project, UNICEF has established a new partnership with the Regional Directorate of Social Development and the Regional Directorate for the Promotion of Women, Children and Family in Kayes region - one of the COVID-19 most affected region - to provide psychosocial support to 500 children affected by the COVID-19 and to reach 1,524 individuals including children with awareness raising on COVID-19 and child protection matters.

**Highlights from the regions**

UNICEF and partners continue to implement community mental health and psychosocial support activities in Bamako for children affected by COVID-19 including boys and girls living in the street and those at risk of contamination to COVID-19 and violence. A total of 176 children were reached with the psychosocial support in Bamako during the reporting period.

UNICEF established a new partnership with state protection and social services in Kayes to address the issue of children and parents experiencing psychological distress or children exposed to protection risks due to COVID-19.

**External Communication**

Publication of an HIS about displaced children and community relays leading awareness-raising and combatting disinformation in IDPs sites in Mopti region, published on UNICEF global channel. Social media: Results of the communication on U-Report poll on stigmatization of persons/families affected by COVID-19; Enormous interest generated by Mali photos on global channels on malnutrition; as well as youth advocacy activities to disseminate correct information and fight fears around COVID 19. Participation of 2 Malian adolescent girls in the Fifteen and Fearless series currently broadcast on UNICEF global channels which describes the life and challenges that the 16 adolescent girls face around the world (India, Bangladesh, Niger, Chad, Madagascar, Mali etc.) during the months of confinement.

Support provided for the production and publication of the business kit entitled “Supporting workers and their
families during the COVID-19 epidemic" after the launch. Profiling of two colleagues, from WASH and Health programmes respectively as part of the UNCG-OCHA led initiative on “Real Life Heros” due to be published for World Humanitarian Day 2020 in August. Broadcast of handwashing and myth-busters videos produced by children around COVID-19 on national television.

**Coordination**

UNICEF continues to actively participate in the coordination mechanisms for the response in Mali, including the Crisis Committee for Epidemic Management COVID-19 led by the National Institute of Public Health (INSP) which is responsible for the overall coordination and the management of the national response, as well as the United Nations Country Team and the Humanitarian Country Team COVID-19 Task Force which aims to coordinate and guide the work of the inter-cluster, health cluster and humanitarian coordination structures. At regional level, UNICEF, through its five field offices supports the regional state authorities and is engaged in the works of the Disaster Management Committees which are the main sub-national coordination frameworks for prevention and response against COVID-19. UNICEF also organized a coordination meeting with IOM to discuss on how to coordinate the implementation of COVID-19 response activities at the borders and mitigate the risks in their implementing areas.
Adaptations to ongoing UNICEF programmes

UNICEF has provided to nine Government Directorates engaged in the implementation of the Country Programme 2020-2024 and the COVID-19 response at central and regional levels, communication equipment (laptops, headsets, speakers) and Zoom licenses to contribute to the continuity of their operations. This equipment will enable the beneficiary entities to cope with the constraints arising from the barrier and prevention measures against COVID-19 adopted by the Government, in particular the limitations on the number of persons authorized to attend meetings and to hold virtual working sessions with their various partners.

Funding Overview and Partnerships

UNICEF requires $24,2 million to respond to the pandemics in Mali. $8,02 million* (33 % of this requirement) has been mobilized both from internal resources and generous contributions (from the Thematic funding, The Peace Building Funds, CERF, ECW, GPE, DGIS, the French National committee and the Governments of Germany, Italy, Denmark and Luxembourg). Additional funding is being mobilized from various donors to respond effectively and efficiently to the crisis and ensure lifesaving programs for the ongoing humanitarian needs and to sustain the investments realized until now and ring-fence the results A revised plan is being developed to take into consideration short/medium and long terms needs and to link the humanitarian response to the recovery and development efforts. UNICEF is also actively contributing to the UNCT Response Plan and the updated HRP for the COVID-19.

External Media

- Press release on the arrival of vital nutrition and health supplies in Mali
- Statement on the impact of COVID-19 on children’s rights and related interviews
- Media interviews on UNICEF Mali response to COVID-19
- RFI report on remote learning in Mali
- Multimedia assets on WeShare and dedicated external web page
## Annex A

### Summary of Programme Results

<table>
<thead>
<tr>
<th>Sector</th>
<th>2020 target</th>
<th>Total results*</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Risk Communication and Community Engagement</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of people reached on COVID-19 through &lt;&lt;MESSAGING ON PREVENTION AND ACCESS TO SERVICES&gt;&gt;</td>
<td>11,953,086</td>
<td>11,953,086</td>
</tr>
<tr>
<td>Number of people engaged on COVID-19 through &lt;&lt;RCCE ACTIONS&gt;&gt;</td>
<td>600,000</td>
<td>439,247</td>
</tr>
<tr>
<td>Number of people sharing their concerns and asking questions/clarifications for available support services to address their needs through established &lt;&lt;FEEDBACK MECHANISMS&gt;&gt;</td>
<td>200,000</td>
<td>60,000</td>
</tr>
<tr>
<td><strong>WASH and IPC</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of people reached with &lt;&lt;CRITICAL WASH SUPPLIES (INCLUDING HYGIENE ITEMS) AND SERVICES&gt;&gt;.</td>
<td>500,000</td>
<td>242,568</td>
</tr>
<tr>
<td>Number of healthcare workers within health facilities and communities provided with &lt;&lt;PERSONAL PROTECTIVE EQUIPMENT (PPE)&gt;&gt;</td>
<td>600</td>
<td>576</td>
</tr>
<tr>
<td>Number of healthcare facility staff and community health workers &lt;&lt;TRAINED IN INFECTION PREVENTION AND CONTROL (IPC)&gt;&gt;</td>
<td>5,000</td>
<td>4,278</td>
</tr>
<tr>
<td>Number of institutions (HCF, schools, maternities, …) supported with a minimum WASH &amp; IPC package and demonstrating IPC improvements</td>
<td>10,500</td>
<td>494</td>
</tr>
<tr>
<td>Number of vulnerable HHs enabled to reduce risk of COVID-19 transmission through a better access to water and/or soap, and hygiene promotion</td>
<td>83,333</td>
<td>40,428</td>
</tr>
<tr>
<td><strong>Health</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of healthcare providers &lt;&lt;TRAINED IN DETECTING, REFERRAL AND APPROPRIATE MANAGEMENT&gt;&gt; of COVID-19 cases</td>
<td>4,500</td>
<td>2,799</td>
</tr>
<tr>
<td>Number of children and women receiving &lt;&lt;ESSENTIAL HEALTHCARE SERVICES&gt;&gt; in UNICEF supported facilities</td>
<td>2,500,000</td>
<td>1,561,007</td>
</tr>
<tr>
<td><strong>Nutrition</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of caregivers of children (0-23 months) reached with &lt;&lt;MESSAGES ON BREASTFEEDING&gt;&gt;</td>
<td>450,000</td>
<td>151,807</td>
</tr>
<tr>
<td>Number of children 6-59 months admitted for &lt;&lt; TREATMENT OF SEVERE ACUTE MALNUTRITION (SAM)&gt;&gt;.</td>
<td>188,052</td>
<td>64,876</td>
</tr>
<tr>
<td>Number of health and/or nutrition workers trained on nutrition in the context of COVID-19</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Number of women and adolescent girls receiving iron and folic acid (IFA) /or multiple micronutrient supplement (MMS)</td>
<td>1,026,850</td>
<td>653,187</td>
</tr>
<tr>
<td>Number of children 6-59 months who received Vitamin A supplements in Semester 1, as of date of reporting</td>
<td>3,696,660</td>
<td>631,791</td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of children supported with &lt;&lt; DISTANCE/HOME-BASED LEARNING &gt;&gt;</td>
<td>500,000</td>
<td>0</td>
</tr>
<tr>
<td>Number of schools implementing</td>
<td>5,500</td>
<td>0</td>
</tr>
</tbody>
</table>
Annex B

Funding Status*

<table>
<thead>
<tr>
<th>Sector</th>
<th>Funding requirements</th>
<th>Funds available</th>
<th>Funding gap $</th>
<th>Gap %</th>
</tr>
</thead>
<tbody>
<tr>
<td>C4D / RCCE</td>
<td>1,500,000</td>
<td>1,079,929</td>
<td>420,071</td>
<td>28%</td>
</tr>
<tr>
<td>WASH &amp; IPC</td>
<td>3,510,000</td>
<td>3,742,741</td>
<td>-232,741</td>
<td>-7%</td>
</tr>
<tr>
<td>Health &amp; Nutrition</td>
<td>1,725,000</td>
<td>1,014,141</td>
<td>710,859</td>
<td>41%</td>
</tr>
<tr>
<td>Child Protection</td>
<td>2,550,000</td>
<td>300,000</td>
<td>2,250,000</td>
<td>88%</td>
</tr>
<tr>
<td>Education</td>
<td>4,500,000</td>
<td>1,373,876</td>
<td>3,126,124</td>
<td>69%</td>
</tr>
<tr>
<td>Social Protection</td>
<td>10,000,000</td>
<td>0</td>
<td>10,000,000</td>
<td>100%</td>
</tr>
<tr>
<td>PME</td>
<td>200,000</td>
<td>236,542</td>
<td>-36,542</td>
<td>-18%</td>
</tr>
<tr>
<td>Coordination &amp; Operational costs</td>
<td>250,000</td>
<td>277,500.00</td>
<td>(27,500.00)</td>
<td>-11%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>24,235,000</strong></td>
<td><strong>8,024,729</strong></td>
<td><strong>16,210,271</strong></td>
<td><strong>67%</strong></td>
</tr>
</tbody>
</table>

* These figures supersede all information previously shared following verification and removal of duplication in the reporting of COVID-19 and HAC funding.

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