MALI
Humanitarian
Situation
Report

UNICEF's Response with partners

Key Humanitarian Performance Indicators

<table>
<thead>
<tr>
<th>UNICEF</th>
<th>Sector/Cluster</th>
</tr>
</thead>
<tbody>
<tr>
<td>UNICEF Target</td>
<td>Cumulative results (#)</td>
</tr>
<tr>
<td># SAM children receiving a WASH kit and hygiene promotion session</td>
<td>40,000</td>
</tr>
<tr>
<td># health centres with minimum WASH package</td>
<td>100</td>
</tr>
<tr>
<td># children under five reached each round of polio campaign in Northern region</td>
<td>536,996</td>
</tr>
<tr>
<td># of U-5 children newly admitted for treatment of severe acute malnutrition (with and without complications)</td>
<td>136,000</td>
</tr>
<tr>
<td># of people reached by community level Mine Risk Activities</td>
<td>50,000</td>
</tr>
</tbody>
</table>

* WASH indicators have been reformulated

31 March 2015

1.7 million
# of crisis-affected children

2.4 million
# of crisis-affected people

(OCHA, March 2015)

Internally Displaced

61,621
# of IDPs

(DTM, December 2014)

Refugees

136,712
# of registered refugees

(UNHCR, 31 March 2015)

UNICEF Appeal 2015

US$ 37.5 million

Highlights

- Although Mali has been declared Ebola free on January 18th, 2015, UNICEF has continued advocating on the importance of prevention efforts, especially in the neighboring districts with Guinea where new cases have been recently confirmed. Social mobilization, together with WASH interventions and reinforcement of the health systems will be of paramount importance also to counter the spreading of other epidemics in the future.

- The Education Cluster, co-led by UNICEF, organized a strategic workshop to restore education in the Kidal region, where children have been out of school for more than three years, gathering more than 70 actors in Gao to develop community-led intervention strategies and activities.

- Social workers of Child Protection Sub Cluster and the COU (Centre Operationnel d’Urgence) staff reached 5,226 children with awareness messages related to Ebola and availability of psychosocial support. UNICEF and partners reached 48,241 of which 50% youth and children through Mine Risk Education activities in Gao and Timbuktu. 290 survivors of Gender Based Violence (GBV) were provided psychosocial support in Gao, Mopti and Bamako.

- Two regional nutrition surveys conducted with SMART methodology in Kidal and Gao have shown that the nutrition situation in these two regions has not significantly changed since 2011. The prevalence of GAM and SAM in Gao were respectively 11.3% (C.I 9.7 – 13.2) and 2.3% (1.6-3.1). In the Region of Kidal, the GAM and SAM prevalence were respectively 5.7% (C.I 4.1 – 7.9%) and 1.0 (C.I. 0.5-1.9%), showing a critical nutritional situation.

- In February 2015, 5,187,646 children 6-59 months received Vitamin A supplementation.

- UNICEF took the lead of the polio vaccination in the Northern Region, where 513,388 children under 5 were administered the oral vaccine.

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Humanitarian Strategy

In line with the country’s inter-agency 2015 Strategic Response Plan, which was launched in February 2015, UNICEF Mali is appealing for US$37.5 million to support the country in responding to the needs of the women and children affected by the conflict and the nutrition crisis in 2015. Early recovery for the conflict-affected areas, building resilience of children and their families and ensuring social cohesion are the key to long-term stability.

Within the framework of the national contingency plan, UNICEF’s Ebola response has focused on mass communication and social mobilisation for community-based prevention and case detection, while WHO has been leading surveillance and case management. UNICEF Ebola response is targeting high risk areas, particularly border towns with Guinea where the population is still contracting the virus.

Summary Analysis of Ebola response

UNICEF response to Ebola has continued even after Mali was declared Ebola free on 18th January 2015. After the two cases that have been confirmed in the Guinean districts bordering the Kayes region on the 27th of March, UNICEF reaffirmed the importance of prevention and preparedness, especially in border towns with Guinea. UNICEF had continued working with partners to support the strengthening of regular health centres and transit centres, where new EVD cases are detected, as well as raising awareness among communities on the EVD risks and preventive good practice.

In particular:

- **Strengthening capacity of health centers**: Essential supplies such as tents and other WASH items were procured as contingency stock, which also contributed to establishment of three transit and observation units at health centers in Sikasso region (at Sikasso town, Bougouni and Yanfolila), situated near the border to Guinea. The newly established centers, equipped with water and electricity supply system, contribute to early detection of future Ebola cases and appropriate case management.

- **Social mobilization for EVD prevention and preparedness**: UNICEF and its partners disseminated 750 posters, 8200 ‘Aide-mémoire’, radio messages through 6 community radios, broadcast of 181 programs, spots and microprograms, caravans in at risk communities and door-to-door visits by community health workers. Furthermore UNICEF participated in the multi-country meeting between Senegal, Guinea, and Mali in the current Ebola situation focusing on the strategic cross border planning to strengthen joint efforts to promote life-saving behaviors including hand washing, safe burials and early isolation practices.

- **Hygiene promotion**: To date UNICEF has supported hygiene promotion in 10 health centers, 15 bus and taxi stations and 220 mosques. Training is also being provided to 150 health agents and 100 community health agents and community relays.

- **Prevention at schools**: 170 pedagogic advisors and 3,820 school principals and/or teachers from more than 3,400 schools have been trained to improve Ebola prevention sensitization for children, including intensified promotion of hand washing practices. A total of 130,409 children (66,111 girls and 64,298 boys) of 481 schools have benefited from installation of hand washing facilities with UNICEF support. Child-friendly Ebola prevention posters and model lesson guides are being distributed in over 5,000 schools.
• **Preparedness for psychosocial support**: Social workers of Child Protection Sub Cluster and the COU (Centre d’Operation d’Urgence) staff reached 5,226 children (13 schools reached including those with children who were previously quarantined, with 2531 boys and 2,695 girls) with awareness messages related to Ebola, including prevention of stigmatization and availability of psychosocial support. UNICEF supported the EVD Call Centre and participated in the elaboration of an Action Plan on burial practices together with the Ministry of Religious affairs.

### Summary Analysis of Program response

#### WASH

The WASH cluster has conducted the development of the strategic Response Plan with the collaboration of the sub-national coordination groups led by the national sectorial authorities. The plan is developed to provide assistance in WASH to almost 649,800 according to their vulnerability. The assistance include water supply, hygiene promotion and sanitation and wash in institution (school and health centres).

**Child Protection**

4,131 children received psychosocial support through child friendly spaces (6 in total) in Gossi and N’Tillit in Gao and in Tessit, Timbuktu where schools have been closed since 2012. UNICEF and partners reached 48,241 people of which 50% youth and children through Mine Risk Education activities in Gao and Timbuktu. 35 community focal points (including 23 local leaders), 15 Civil Protection staff, 15 local radio journalists and 20 education professionals from Gao and Timbuktu received training on the risks of explosive remnants of war. Furthermore, 1,151 children were reached by care and support via community-based CP services, referral services and reintegration opportunities. Among these children, 961 had access to accelerated learning in Gao, Mopti and Tombouctou; 187 had access to vocational training in Mopti and Gao; 3 released from armed groups are currently in safe care in Centre Kanuya. Also, 290 survivors of Gender Based Violence (GBV) affected by the conflict during the reporting period were provided with psychosocial support and referral services in Gao, Mopti and Bamako. In addition to response services, implementing partner Sini Sanuman and Family Care International (FCI) has been conducting community awareness and mobilization activities in Bourem, Gao and Douentza, Mopti to challenge gender adverse norms which perpetuate GBV. Though these activities Sini Sanuman and FCI reached 32,213 community members.

**Education**

The Education Cluster, led by UNICEF and Save the Children, organized a strategic workshop to promote the restoration of education in Kidal and Menaka regions. Despite the absence of the Government, over 1,800 children are learning in 27 schools (43%) in Kidal, managed by the local communities. The workshop gathered 70 actors (governmental, NGOs, communities, etc.) in Gao to review community-led interventions strategies, including immediate interventions activities. The Education Cluster employed participatory methods, so that local education commissions, parent groups, including mothers’ associations, and displaced students could come together. The workshop proposed a roadmap for the region including activities such as community mobilization, alternative education (radio, vocational, catch-up, etc.), school feeding, training and recruiting teachers, and rehabilitating formerly occupied and/or looted schools. UNICEF is advocating with the Ministry of Education for the return of teachers in the areas where security has been improved.

**Health**

UNICEF focused its response on the polio and measles vaccination campaigns which took place from the 6th to the 9th of February and from the 27th to the 26th of March 2015 respectively. 277,345 children were vaccinated in Timbuktu, 229,543 in Gao and 6590 in Kidal.

**Nutrition**

The final findings of the two nutrition surveys carried out with SMART methodology in Kidal and Gao regions were officially presented to all stakeholders and financial partners. The results of the two surveys have shown that the nutrition situation in the regions of Kidal and Gao has not significantly changed since 2011. The prevalence of GAM and SAM in the Region of Gao were respectively 11.3% (C.I 9.7 – 13.2) and 2.3% (1.6-3.1), which corresponds to a serious nutritional situation according to WHO classification. The prevalence of GAM in all the health districts of the Region was estimated between 10 and 15%, except for the District of Menaka where GAM prevalence fell under 10%. In the Region of Kidal, the GAM and SAM prevalence for the Region were respectively 5.7% (C.I 4.1 – 7.9%) and 1.0 (C.I. 0.5-1.9%), showing a critical nutritional situation.

The second round of 2014 Vitamin A supplementation campaigns (and deworming) - which had been postponed because of the risk of Ebola outbreak in Mali, has been organized in February 2015. In total 5,187,646 children 6-59 months received Vitamin A supplementation and 4,593,157 were dewormed. Coverage for Vitamin A supplementation was 104% for children 6-11 months and 87% for children 12-59 months; whereas coverage for deworming reached 101% for children 12-23 months and 85% for children 24-59 months.
Security
The security situation in the north remains highly volatile. In the meantime, the lack of humanitarian access to certain areas in the north is posing operational challenges to all humanitarian actors, including UNICEF. For example, in March 2015, a truck of ICRC was attacked in Gao region while transporting the humanitarian aid, resulting one death and one injured.

Media and External Communication
UNICEF activities are regularly uploaded through social media. In February, a press conference was organised by Japanese Embassy to announce the achievement through their cooperation with UNICEF and other agencies in 2014 and planned activities in 2015.

Funding

<table>
<thead>
<tr>
<th>Appeal Sector</th>
<th>Requirements</th>
<th>Funds received*</th>
<th>Funding gap</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td></td>
<td>$</td>
</tr>
<tr>
<td>Nutrition</td>
<td>13,300,000</td>
<td>801,184</td>
<td>12,498,816</td>
</tr>
<tr>
<td>Health</td>
<td>3,000,000</td>
<td>200,000</td>
<td>2,800,000</td>
</tr>
<tr>
<td>WASH</td>
<td>11,000,000</td>
<td>0</td>
<td>11,000,000</td>
</tr>
<tr>
<td>Education</td>
<td>5,000,000</td>
<td>0</td>
<td>5,000,000</td>
</tr>
<tr>
<td>Child Protection</td>
<td>4,000,000</td>
<td>0</td>
<td>4,000,000</td>
</tr>
<tr>
<td>Cluster Coordination</td>
<td>1,200,000</td>
<td>0</td>
<td>1,200,000</td>
</tr>
<tr>
<td><strong>Total allocated</strong></td>
<td><strong>37,500,000</strong></td>
<td><strong>1,001,184</strong></td>
<td><strong>34,498,816</strong></td>
</tr>
<tr>
<td><strong>Not allocated</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total Received</strong></td>
<td><strong>3,092,055</strong></td>
<td><strong>2,090,872</strong>**</td>
<td><strong>34,407,945</strong></td>
</tr>
</tbody>
</table>

* Received amount includes cost recovery (8%). Received amount includes grants received after 15 Dec. 2014 and unutilized as of 31 Jan. 2015: SM150005 ECHO-Nutrition $ 601,183.56; SM150090 Denmark-Emergency $ 1,202,827; SM149910 Health-Nutrition $ 100,000. Funds received for Ebola SM 149910 WCARO $ 300,000; SM 150090 Japan $ 1,000,000. UNICEF Mali has published the Humanitarian Action for Children 2015 emergency interventions and needs. UNICEF is appealing for US$37,500,000 to meet the humanitarian needs of children and women in Mali in 2015. As of 31 March 2015, US$3,092,055, and 92 per cent still is required against the 2015 appeal. In 2015, UNICEF Mali has announced it is seeking 8,575,000 USD from the international community for the Ebola outbreak and response in Mali.

**Fund not allocated yet due to the preparation of the new country programme (2015-2019) which will be finalised by end April 2015.**

Next SitRep: 31 May 2015


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Resource Mobilization Specialist  
Telephone: (+223)75 99 54 19  
jferreiro@unicef.org
## Summary of programme results

<table>
<thead>
<tr>
<th>Cluster Response</th>
<th>UNICEF and IPs</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td># of PeopleAffected</td>
</tr>
</tbody>
</table>

### WATER, SANITATION & HYGIENE

- **Affected population provided with access to safe water (construction/rehabilitation)**
  - 2015 Target: 649,800
  - Total Results: 552,000
  - Change since last report: ▼

- **Number of SAM children receiving a WASH kit and hygiene promotion session**
  - 2015 Target: 136,000
  - Total Results: 2,254
  - Change since last report: ▲

- **Number of health centers with minimum WASH package**
  - 2015 Target: 280
  - Total Results: 21
  - Change since last report: ▲

### EDUCATION

- **# children with access to alternative education activities (boys / girls)**
  - 2015 Target: 30,000
  - Total Results: 0
  - Change since last report: ▼

- **# young children with access to activities of awakening and development (boys/girls)**
  - 2015 Target: 10,000
  - Total Results: 0
  - Change since last report: ▼

- **# children benefiting from the education program for peacebuilding (boys / girls)**
  - 2015 Target: 260,921
  - Total Results: 0
  - Change since last report: ▼

### HEALTH

- **# children under five reached each round of polio campaign in Northern region**
  - 2015 Target: 1,557,775
  - Total Results: 536,996
  - Change since last report: ▲

- **# children under five in measles affected areas reached with vaccination activities - Northern regions**
  - 2015 Target: 315,386
  - Total Results: 0
  - Change since last report: ▼

- **# health facilities reached with UNICEF assistance (cold chain, logistics etc.)**
  - 2015 Target: 190
  - Total Results: 0
  - Change since last report: ▼

### NUTRITION

- **New admissions to programs for the treatment of U5 children with severe acute malnutrition**
  - 2015 Target: 181,000
  - Total Results: 181,000
  - Change since last report: ▲

- **New admissions to programs for the treatment of U5 children with moderate acute malnutrition**
  - 2015 Target: 534,300
  - Total Results: 534,300
  - Change since last report: ▲

- **# of health centers offering malnutrition treatment**
  - 2015 Target: 1,307
  - Total Results: 1,307
  - Change since last report: -

### CHILD PROTECTION

- **# of people reached by community level Mine Risk Activities**
  - 2015 Target: 325,000
  - Total Results: 48,241
  - Change since last report: ▲

- **# children victims of/or at risk of violence, abuse and exploitation (including EAFGAs, ENAs/ES) with access to referral services and reintegration opportunities**
  - 2015 Target: 1,500
  - Total Results: 1151
  - Change since last report: ▲

- **# survivors of GBV who receive appropriate care & support (desegregated by sex & age: women, girls, boys and men)**
  - 2015 Target: 1,000
  - Total Results: 290
  - Change since last report: ▲

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1. According to cluster planning figures, as of January 2015 (SRP Mali).
2. Activities will depend on the financing of the SRP online project.
3. Activities will be financed on UNICEF OR, as the ECHO project has already ended and funds provided to NGOs in 2014.
4. The number of beneficiaries is referred to the district of Kangaba.