



Mauritania

Humanitarian Situation Report

SITUATION IN NUMBERS

Highlights

Mauritania continues to suffer from a multi-dimensional crisis related to food insecurity, the high prevalence of malnutrition, the presence of Malian refugees, and significant flooding that hit the country in 2014.

Preliminary results for Nutrition SMART survey planned for July- conducted in August 2014, are available. National Global acute malnutrition (GAM) rate decrease from 13.1% in July 2013 to 9.8% including 1% of severe cases. Nutrition situation in five regions (Gorgol, Assaba, Tagant, Hod El Chargui and Hod El Garbi) are classified as serious with GAM rate over 10%. But situation in Guidimakha region remain critical with a GAM rate at 16%, exceeding the emergency threshold. UNICEF continues to work with the government and partners to respond to the humanitarian needs of populations affected by food insecurity and malnutrition, aiming in particular to treat 30,741 children under five suffering from Severe Acute Malnutrition (SAM).

Since the last reporting period UNICEF has continued to provide life-saving interventions to the Malian refugees in Mberra Refugee Camp and to the Host Community, in close coordination with the Government of Mauritania, UNHCR as well as other UN agencies and NGOs.

As part of the Ebola preparedness response, UNICEF is actively participating to weekly coordination meetings organized by the Ministry of Health, and supporting the government in their mass media campaign on good hygiene practices (in order to reduce the risk of contamination).

UNICEF is requesting 14.2 million USD to respond to the humanitarian needs in Mauritania in 2014. 38% of this amount has been funded as of September 2014 and UNICEF would like to acknowledge in particular the generous contribution of the Government of Japan and other donors in support to its emergency

October 2014

384,000

Population requiring humanitarian assistance in 2014
(OCHA, August 2014)

192,250

Children requiring humanitarian assistance in 2014
(OCHA, August 2014)

53,474

Refugees in Mbera camp
(UNHCR, 30 July 2014)

125,300

Children affected by acute malnutrition
(UNICEF, August 2014)

UNICEF Mauritania Appeal 2014

US\$ 14.2 million

(Revised Humanitarian Action for Children September 2014)

Funding level (as of September 2014)

38%

	UNICEF		Sector/Cluster		
	UNICEF Target	Cumulative results (#)	Cluster Target	Cumulative results (#)	
Children < 5 years with Severe Acute Malnutrition admitted to therapeutic care	30,741	11,913	30,741	11,193	
No of children affected by SAM receiving WASH kit	100% of children admitted	2,049	80% of children admitted	2,049	
Children under one vaccinated with Penta 3	40 000	9,133			
No of refugee children having continued access to formal/ non-formal education	16,299	6,699	16,299	6,699	
No of refugee children provided with Psychosocial support in Child Friendly Spaces	7,377	3,678	7,377	3,678	

Situation Overview & Humanitarian Needs

- According to the SMART Survey conducted in August 2014, the prevalence of the Global Acute Malnutrition has been significantly reduced and is under the 10% threshold at the national level (only the Guidimakha region is still above the critical threshold of more than 15% - and 4 other region remain under the alert threshold of under 10%). However, this positive trend should be analysed with caution due to the increase in the food insecurity (FSMS survey conducted by WFP and CSA in June 2014).
- According to UNHCR, an estimated 53,474 people live in the Mberra refugee camp in the South-East of Mauritania, of which 56 per cent are children under 18. Life-saving interventions, such as treatment for acute malnutrition cases (2,120 SAM expected in 2014), measles vaccinations, and the provision of clean water continue to be needed. Moreover, more than 9,600 (59%) of school age children have not yet access to education. 45,000 people living in host communities are estimated to have been impacted by the Malian crisis. The needs of these communities are also being addressed and assistance given to reinforce basic services and resilience.
- In regard to the floods in the Gorgol Region, UNICEF and the National Red Crescent Society (NRCS) procured essential items to 690 households displaced from their place of origin to a safe area identified by the local authorities. In the Tagant Region, UNICEF and its partner Moundi ASPD also procured essential items to reduce the increase of diarrheal diseases related to unusual rainfalls. In both cases, UNICEF and its partners promoted essential family practices.
- In order to improve its emergency response and preparedness capacities related to floods and the risk of an Ebola outbreak, UNICEF is refilling the NRCS's emergency stock and implementing new emergency standby agreements with NGOs. In addition, UNICEF is supporting the National Committee led by the Ministry of Health in the national mass sensitization campaign against Ebola.

Humanitarian leadership and coordination

UNICEF continues to work closely with the Government of Mauritania, UN partners and NGOs.

- For the nutrition response, UNICEF and the Government of Mauritania co-lead the Nutrition, WASH and Education sectors. For the Malian refugee crisis, the response is coordinated by UNHCR in support of the Government and other partners.
- No cluster is activated so far, but several sectorial groups have been set up and strengthened. Since 2012, the Humanitarian Country Team has been activated at the country level under the leadership of the Humanitarian Coordinator/Resident Coordinator.
- As a co-lead of three sectorial groups, UNICEF actively contributed to revise the Strategic Response Plan.

The Strategic Response Plan (SRP) 2014-2016 covering all humanitarian needs for Mauritania has been updated and is available at:

https://docs.unocha.org/sites/dms/CAP/SRP_2014-2016_Mauritania_FR.pdf

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Humanitarian Strategy

As per the inter-agency agreed SRP, UNICEF is the lead agency for nutrition, water, sanitation and hygiene (WASH), and education. UNICEF will continue to work with the Government of Mauritania, United Nations agencies and civil society partners on a multi-sector approach targeting the most vulnerable children and women. UNICEF continues to work in collaboration with the Ministry of Health and partners to treat 30,741 expected cases of SAM. Great focus is put on active screening, referral and mobile clinics to reach those living far from health post. Interventions to prevent malnutrition through blanket feeding, micronutrient supplementation, food fortification and the promotion of key family practices such as Exclusive breastfeeding, use of Insecticide Bed net, hand washing and other hygiene practices will continue to be carried out simultaneously. The WASH-in-nutrition strategy is being scaled up, as is the integrated management of childhood illnesses, to reduce the burden of malnutrition and child killer diseases as is Preparedness and early response will be strengthened for floods expected in the second half of the year.

UNICEF continues to work with UNHCR in the Mberra camp to improve hygiene, sanitation and access to water, treat acute malnutrition and immunize children. UNICEF is supporting equal access to education among refugees and host communities. The child protection system approach is being used to better respond to situations of abuse, violence and exploitation. Literacy classes, life skills trainings, prevention of gender-based violence, and health and hygiene promotion are emphasized to reduce vulnerabilities.

UNICEF is also supporting the National Committee in charge of coordinating the Ebola emergency preparedness and prevention at the Ministry of Health, and is an active participant to the weekly coordination meetings. In regards to the contingency and prevention plan led by the Government of Mauritania, UNICEF is supporting the mass media communication at the national level.

Summary Analysis of Programme response

Malian crisis

From January to August, 1165 under-five children suffering from SAM (out of 2,120 expected cases) have been treated in the Mberra refugee camp with a recovery rate of 92%.

During the school holiday period, 160 (28 female) secondary school candidates for upcoming exams attended their courses while 1,624 primary school students (840 female) were enrolled in summer courses. However, given the important funding gap for education, the target for 1,500 youth expected to complete vocational training will not be reached. So far only 60 youth benefited from such programme. There is also an additional gap to complement the 88 semi-permanent learning spaces constructed by UNICEF (40) and partners (48). The construction or rehabilitation of two primary schools in the host community is almost finalized.

ARI continues to be the leading cause of illness amongst children, followed by diarrhea and dermatologic problems. 221 cases of Malaria were confirmed for the reporting period. Many children continue to suffer from ARI, Diarrhea and dermatologic problems. 14 presumptive malaria cases are reported among the 23,351 who were received and treated in the five health facilities. During the recent nationwide Polio Campaign, 7597 children under 5 were vaccinated.

During the period from August to September, 3616 children aged of 3 to 17 years (1892 girls and 1724 boys) have participated in psychosocial activities at 9 child friendly spaces and 500 children affected by SAM received psychosocial support at 3 Nutrition centers in the camp. These activities are realized under the supervision of 64 animators whose 40 women. Furthermore, 244 vulnerable children, identified by the alert system, of which 43 SC (39 boys and 5 girls) have been received special follow-up and their cases have been documented.

Following the establishment a child protection system in Bassikounou and Nema, a training on child protection - including the role of child protection; child rights - was realized in partnership with international NGO FLM.

Nutrition situation

From January to August 2014, 11,913 news cases of SAM were admitted and treated (of which 6,314 recovered), out of an expected caseload of 30,741 children. 464 health facilities are providing Integrated Management of Acute Malnutrition (IMAM) services, which needs to be scaled-up. Major challenges for IMAM programme are data transmission trough the national health information system, improving defaulter rate and community mobilization for active screening.

UNICEF procured WASH kits and sensitized 3.166 child/mother couples suffering from SAM and 4.183 suffering from MAM. 81.065 households benefitted from sensitization on hygiene and water treatment. UNICEF WASH in Nut activities were implemented in 257 nutrition centers including 216 nutrition centers for severe acute malnutrition.

During the holiday period, 6,687 students (56 % girls) and 9,378 parents (81 % female) were sensitized on the fundamental practices of hygiene and nutrition in their villages.

To address malnutrition and to strengthen resilience, a cash transfer operation is targeting 12,400 vulnerable households during the lean season, with a joint FAO/UNICEF/WFP resilience program supported by the EU. The first distribution of cash transfer took place at the end of July.

In protection 1077 children (419 girls and 658 boys) at risk and victims of violence, abuse and exploitation have been identified, referred and assisted by the child protection system. In addition, 2048 families have been sensitized children's rights, harmful practices, forced and early marriage.

Floods

In regard to the floods which affected 691 households in the Gorgol Region, UNICEF activated its contingency plan in collaboration with the National Red Crescent Society (. In addition, UNICEF also supported 200 vulnerable households suffering from diarrheal diseases in the Tagant Region.

Funding

Funding Requirements (as defined in Humanitarian Appeal of DD/MM/YYYY for a period of X months)				
Appeal Sector	Requirements	Funds received*	Funding gap	
			\$	%
Nutrition	6,970,112	2,194,000	4,776,112	31%
Health/ HIV-AIDS	693,401	662,930	30,471	95%
WASH	3,135,203	501,500	2,633,703	16%
C4D	945,000	625,320	319,680	66%
Education	2,447,149	1,321,320	1,125,829	54%
Child Protection	200,000	159,640	40,360	80%
Total	14,190,865	5,464,710	8,726,155	38%

* 'Funds received' does not include pledges

Next SitRep: 1st December 2014

UNICEF Mauritania Humanitarian Action for Children Appeal: <http://www.unicef.org/appeals/mauritania.html>

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Annex A

SUMMARY OF PROGRAMME RESULTS

	Overall needs	Sector Response			UNICEF and IPs		
		2014 Target	Total Results	Change since last report ▲▼	2014 Target	Total Results	Change since last report ▲▼
WATER, SANITATION & HYGIENE							
Number of nutrition centres (CRENI and CRENAS) with WASH minimum package		231	286	+102	231	257	+151
Number of children affected by SAM receiving the WASH kit		100% of patients admitted in a nutrition program	45%		100% of patients admitted in a nutrition program	45%	N/A
EDUCATION¹							
Number of refugee children having continued access to formal and non-formal education		16,299	1,784	N/A	16,299	1,784	N/A
Number of out-of-school children benefit from school supplies		45,017	0	0	45,017	N/A	N/A
Number of students at high risk of dropping out of school benefit from school supplies		128,300	6,687	N/A	128,300	6,687	N/A
Number of students in areas affected by floods benefitting from school supplies		25509	0		198,826	0	
HEALTH –/HIV-AIDS							
Refugee crisis Children under one vaccinated with Penta 3					1,000	416	(+139)
Number of under-five children treated for ARI, diarrhea or malaria					6,000	5107	(+1548)
Nutrition crisis Children under one vaccinated with Penta 3					40,000	9,133	(+2,755)
NUTRITION							
Refugees crisis 1-Children < 5 years with Severe Acute Malnutrition admitted to Therapeutic care Children < 5 years with Severe Acute	2,120	2,120	1165	(+29%)	848	421	(+29%)

¹ August-September is school holidays. There are no major school activities during this period.

2-Malnutrition discharged recovered	1,590	1,590	812	(+35)	763	418	(+35)
Nutrition crisis							
1-Children < 5 years with Severe Acute Malnutrition admitted to Therapeutic care	30,741	30,741	11913	(+3,377)	30,741	11913	(+3,377)
2-Children < 5 years with Severe Acute Malnutrition discharged recovered	23,056	23,056	6314	(+2,046)	23,056	6314	(+2,046)
3-Number of health centres with SAM treatment	488	488	464	-	488	464	-
CHILD PROTECTION							
Emergency affected children provided with psychosocial support at CFSs	15,000	7,377	4178		7,377	4178	
Establishment of CFSs at Nutrition centres and refugee camp	488	40	12		40	12	