UNICEF ETHIOPIA HUMANITARIAN SITUATION REPORT – MARCH 2019

ETHIOPIA Humanitarian Situation Report

Highlights

- The 2019 Ethiopia Humanitarian Needs Overview has identified 8.86 million people in need of humanitarian assistance with 4.66 million being children under 18. Of the 8.86 million people, 8.13 need food assistance and 5.91 need nutrition assistance in 2019.
- With UNICEF’s support, 24,538 children with Severe Acute Malnutrition (SAM) were admitted for community-based therapeutic care treatment in stabilisation centres and Outpatient Therapeutic Programmes in January 2019.
- The humanitarian response in the Tuligulled woreda, in the Faafaan Zone of the Somali region will resume after two months of restrictions due to insecurity.
- There remains a 65 per cent funding gap for this year’s UNICEF Humanitarian Action for Children.

UNICEF’s Response with Partners

<table>
<thead>
<tr>
<th>Sector/Cluster</th>
<th>UNICEF Cluster Target**</th>
<th>Cluster Result</th>
<th>UNICEF* Target</th>
<th>Total Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nutrition: Children under 5 years with SAM admitted treatment</td>
<td>487,696</td>
<td>24,538</td>
<td>386,456</td>
<td>24,538***</td>
</tr>
<tr>
<td>Health: Women and children under 5 years accessing essential maternal and child health services</td>
<td></td>
<td></td>
<td>441,000</td>
<td>68,909</td>
</tr>
<tr>
<td>WASH: People accessing sufficient water of appropriate quality and quantity for drinking, cooking and maintaining personal hygiene</td>
<td>5,500,000</td>
<td>2,160,578</td>
<td>3,688,000</td>
<td>887,379*</td>
</tr>
<tr>
<td>Child Protection: Vulnerable children provided with psychosocial support, including access to child-friendly spaces with multi-sectoral programming interventions</td>
<td>42,000</td>
<td>9,241</td>
<td>77,000</td>
<td>39,813</td>
</tr>
<tr>
<td>Education: School-aged children, including adolescents, accessing quality education</td>
<td>2,346,922</td>
<td>27,250</td>
<td>370,017</td>
<td>27,250</td>
</tr>
</tbody>
</table>

* UNICEF target includes new arrivals of refugees
** The cluster target for 2019 has been revised with the release of the 2019 Humanitarian Response Plan in March 2019
*** Nutrition results are in lieu by eight weeks
**** WASH cumulative result has been adjusted to exclude water treatment chemicals from access to safe water. The results reported here only capture access to water through a durable solution.

SITUATION IN NUMBERS

4.89 million
# of children in need of humanitarian assistance
(Ethiopia Humanitarian Needs Overview 2019)

8.86 million
# of people in need
(Ethiopia Humanitarian Needs Overview 2019)

3.19 million
Internally displaced people in Ethiopia
(Ethiopia Humanitarian Needs Overview 2019)

919,938
Registered refugees and asylum seekers
(Ethiopia, refugees and asylum seekers
(UNHCR, 31 August 2018) and UNHCR
Eritrean influx update of 20 October 2018)

Funding Status 2019

Overall funds available for 2019 includes funding received for the current appeal year as well as the carry-over forward from the previous years.
Situation Overview & Humanitarian Needs

The Ethiopia Humanitarian Needs Overview (HNO) and Ethiopia Humanitarian Response Plan (HRP), which were developed by the United Nations Office for Humanitarian Coordination (UNOCHA) in collaboration with the National Disaster Risk Management Commission (NDRMC), were officially launched on 7 March 2019. Due to the increasing number of conflict induced Internally Displaced Persons (IDPs) and adverse effects of consecutive years of severe drought in parts of the country, 8.86 million people were identified as people in need for humanitarian and protection assistance in 2019. Of which, 4.67 are children under 18 and 1.3 are children under five. The relief food requirement continues to be significant with 8.13 million people requiring food assistance and 5.91 million people in need of nutrition assistance. Conflict related displacement significantly affected people’s lives through disrupting their access to livelihoods and education plus exposing them to protection risks. Currently, according to the HNO, there are 3.19 million IDPs in Ethiopia. The Oromia and Somali regions host the largest caseloads of those most in need. The lack of access to safe water and sanitation, coupled with poor hygiene practices, continues to pose disease outbreak risks in parts of the country. There are 3.51 million people in need of assistance in areas affected by disease outbreaks.

The disaggregated figures on population in need is depicted in the below table:

<table>
<thead>
<tr>
<th>Estimated Population in Need of Humanitarian Assistance</th>
<th>Total in Need</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Estimates calculated based on initial figures from Ethiopia Humanitarian Needs Overview 2019 and Ethiopia Demographics and Health Survey 2016)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Start of humanitarian response:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Population in Need</td>
<td>8,860,000</td>
<td>4,447,720</td>
<td>4,412,180</td>
</tr>
<tr>
<td>Children (Under 18)</td>
<td>4,669,220</td>
<td>2,427,984</td>
<td>2,241,216</td>
</tr>
<tr>
<td>Children Under Five</td>
<td>1,302,420</td>
<td>653,815</td>
<td>648,605</td>
</tr>
</tbody>
</table>

The 2019 HRP targets 8.3 million people in need of humanitarian assistance and is appealing for US$1.314 billion. The Plan aims to provide life-saving multi-sector assistance, protection services, as well as livelihoods and basic service support to a wide range of people in need, including through durable solutions for IDPs and returnees. UNICEF will support the humanitarian response through its Humanitarian Action for Children (HAC) which targets 3.7 million people1 with an integrated response to displacement triggered by conflict and seasonal climatic shocks. This includes preventing disease outbreaks, addressing malnutrition and ensuring the centrality of protection in all programme interventions. UNICEF is appealing for US$ 124.1 million in support of its HAC targets.

According to the Famine Early Warning Systems Network (FEWSNET), the amount and distribution of Belg rains were below average, leading to late and below average land preparation and planting of short-maturing Belg and long cycle Meher crops. By mid-March 2019, 6 per cent and 46 per cent of Belg season planting was completed in the SNNP and Amhara regions respectively. Additionally, concerns are growing over the March to May 2019 Gu/Gana/Sugum rains in southern, south-eastern and eastern pastoral areas that have either not started or have been erratically distributed, leading to largely below-average seasonal totals so far. Furthermore, prices of staple crops increased significantly due to early withdrawal of the 2018 Meher rains, trade flow restriction due insecurity, inflation of the Ethiopian Birr and the inadequate performance of the latest Belg season. As a result, most of these households will remain in crisis (IPC Phase 3) between March and September 2019. The Belg assessment to be conducted in June 2019 will inform the hot spot classification of households after September 2019.

There were no reported cases of Acute Watery Diarrhoea (AWD) in March 2019. Overall, reports of AWD cases in Ethiopia in 2019 show a significant decline when compared with the same period in 2018. However, poor sanitation practices continue to negatively impact on the health of IDPs and returnees, especially in areas where the infrastructure and sanitation facilities are weak or non-existent. Lack of access to safe water for drinking and cooking is also a concern. Strengthened AWD preparedness around hotspots where

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1 This figure will be revised in line with the new HRP targets. A revised HAC will be shared in May 2019.
2 Hotspot classification is derived using six multisector indicators, including agriculture, nutrition and markets, agreed at regional and federal levels. A hotspot matrix is often used as a proxy for the acute Integrated Food Security Phase Classification (IPC) and is indicative of food security and nutrition status. Scaled from Priority 1 to 3, hotspot woredas require urgent humanitarian response.
UNICEF ETHIOPIA HUMANITARIAN SITUATION REPORT – MARCH 2019

there were outbreaks in the past three years, especially mass gathering areas such as holy water sites and areas of migrant workers, are being prioritized for ongoing C4D interventions.

The United Nations High Commission for Refugees (UNHCR), in collaboration with the Administration for Refugees and Returnees Affairs (ARRA), International Organization for Migration (IOM) and other partners, relocated 77 South Sudanese refugees from Gambella to Gure-Shembola camp in the Benishangul-Gumuz Region on 28 March 2019. The relocation followed extensive discussions and registration of those who were willing to relocate to the camp established in May 2017 to accommodate additional new arrivals from South Sudan and ease the pressure on the Gambella Regional State. UNHCR is also working on comprehensive biometric data registration throughout the country. During the period 16-31 March 2019, an additional 38,826 individuals completed the registration process, bringing the overall total number to 385,297 persons. The updated population figures are planned to be released by June 2019.

According to UNOCHA, the Dilla Emergency Operations Centre (EOC) now has a permanent representative from the National Disaster Risk Management Commission (NDRMC) to strengthen the coordination of the humanitarian response efforts in the Southern Nations, Nationalities and Peoples’ (SNNP) region. This coordination structure will follow the cluster approach through which responses are driven by joint planning and based on prioritized needs agreed by clusters. The EOC was first established in May 2018.

Humanitarian Leadership and Coordination

The humanitarian response in Ethiopia is led by the National Disaster Risk Management Commission (NDRMC) through the federal and regional Disaster Risk Management Technical Working Groups (DRMTWGs). UN OCHA coordinates the humanitarian response of UN agencies and non-governmental organizations (NGOs) in support of the Government-led humanitarian response. The Government prioritizes its emergency response based on targeted hotspot woredas (districts). Prompted by global efforts and commitments to address structural causes of crises following the 2016 World Humanitarian Summit, the post-El Niño drought context in Ethiopia is increasingly defined by development programming and financing with a view to reducing humanitarian needs, risks and vulnerabilities. The Humanitarian Needs Overview, is complemented by a Humanitarian Response Plan, that documents the Government’s humanitarian ask and highlights those most in need using severity criteria.

Humanitarian Strategy

A participatory review of the UNICEF IDP response in 2018 was conducted on 14 March 2019 and provided key lessons learnt for implementation in 2019. UNICEF will focus on providing an integrated, convergent response to internal displacement triggered by conflict and seasonal climatic shocks. This includes preventing disease outbreaks, addressing malnutrition and ensuring the centrality of protection in all programme interventions, including the Prevention from Sexual Exploitation and Abuse. UNICEF will aid people in need and hard-to-reach populations through its eight field offices and UNICEF supported mobile teams; leveraging its cluster leadership role to influence how partners prioritize resources and interventions.

The response will prioritize life-saving services, including the detection and treatment of SAM and the prevention and treatment of diseases by providing essential medicines, strengthening response systems and developing the skills of health professionals. The water, sanitation and hygiene (WASH) response will focus on life-saving activities and building resilient water and sanitation infrastructure. UNICEF will invest in mitigating and preventing gender-based violence to address the protection risks faced by refugees and internally displaced persons, particularly girls. Through the Ministry of Education and regional education bureaus, UNICEF will advocate for flexible, accelerated access to education for displaced children. In line with the United Nations New Ways of Working and the Grand Bargain commitments, UNICEF will establish and strengthen new and existing partnerships to invest in durable solutions.

Summary Analysis of Programme Response

Nutrition

UNICEF, in close collaboration with the Federal Ministry of Health and respective regional health bureaus, supported the treatment of SAM children in the country, with a particular focus on regions that are hosting conflict-induced IDPs. In January 2019, a total of 24,538 children with SAM were admitted for community-based therapeutic care treatment (at a reporting
rate of 86.5 per cent) to Stabilisation Centres (SCs) and Outpatient Therapeutic Programmes (OTP). The number of admissions has shown a 14.3 per cent decline compared to the number admitted in December 2018 (29,078 at a reporting rate of 90.1 per cent) as a result of lower reporting rate and insecurities in Western and Southern Oromia as well Benishagul Gumuz leading to lower coverage. Programme performance indicators are within targets and acceptable standards with 92.6 per cent cured, 0.1 per cent death and 1.3 per cent defaulting. Out of the 24,538 children admitted for SAM treatment in January 2019, 1,693 required inpatient care due to complications.

UNICEF also supported the nutrition response in the country by providing nutrition supplies to regional health bureaus at the zonal and facility level in hard-to-reach areas. From January to March 2019, a total of 1,209 cartons of F-75 and 1,153 cartons of F-100 therapeutic milk, 525 SC treatment kits, and drugs for routine treatment of children with SAM were delivered. Prepositioning supplies were also dispatched to the SNNP and Oromia regions to support emergency responses in anticipation of worsening SAM rates among displacement communities.

Health
In February 2019, the Mobile Health Nutrition Teams (MHNTs) provide 39,899 (15,066 children under the age of five, 10,957 women, 13,876 men) medical consultations in the Afar (24,541) and Somali (15,358) regions. In addition, UNICEF supported 3,981 (1,572 children under the age of five, 1,461 women, 948 men) medical consultations in 15 woredas of Somali region through the Sustainable Outreach Services (SOS).

In March 2019, UNICEF continued to support the Gambella Regional Health Bureau to vaccinate 61 South Sudanese refugee children under the age of 14 at entry points and 591 children within refugee camps. This brings the cumulative total of South Sudanese children vaccinated in 2019 to 5,055 (1,217 at the entry point and 3,838 in refugee camps). Additionally, in response to the rising measles outbreak in the Oromia region, a total of 1,394,802 children under the age of 14 were vaccinated in Bale (783,784), West Wollega (355,687), and East Wollega zones (255,331) in March 2019.

UNICEF distributed 80,000 (60,000 in Oromia, 20,000 in Somali) Long Lasting Insecticide Treated Nets (LLINs) to benefit 40,000 IDP households in malaria prone areas.

WASH
In March 2019, through multi village water schemes, rehabilitation of shallow wells as well as other durable solutions, 53,354 additional people accessed safe water in the Oromia, Afar and SNNP regions with UNICEF support. Despite these results, access to water and sanitation coverage remain critically low in the country. In the Oromia region, for instance, it is estimated that over 2 million people, including 900,000 IDPs, are facing critical water shortages (<5 litres/person/day). UNICEF continues to focus on durable solutions with the extension of 2 km of water pipelines in Babilie town, East Hararghe zone, Oromia region, plus construction of water storage tanks, water points and a generator house in Midhaga Tola town, East Hararghe zone, Oromia region. Additionally, UNICEF, in collaboration with the SNNP Regional Water Bureau, has commenced the civil work on a distribution system of the already drilled 14 boreholes in 12 woredas. Drilling of one additional borehole and rehabilitation of 32 schemes is ongoing in the Gedeo zone of the SNNP region.

UNICEF reached 75,406 people with key messages on hygiene and sanitation practices in the Oromia and SNNP regions. In the Oromia region, communal latrines were constructed, benefiting 104,772 people from host communities and IDPs in the Bale and West Hararghe zones. In addition, 17,812 people were reached through hygiene promotion and safe water handling sessions in the West Guji and Bale zones. Moreover, 1,100 buckets and 258 jerry cans were distributed alongside household water treatment chemicals in the West Guji and Bale zones benefiting 40,809 people. To promote good hygiene practices and handwashing, 17,783 handwashing stations were constructed in the West Guji zone of Oromia. UNICEF also cooperated with the Health Development Army and Health Extension Workers to broadcast hygiene and sanitation messages through radio on FM99.6 in the Gedeo zone of SNNP region.

In response to IDPs in the Amhara region, UNICEF installed two storage tanks within the community and constructed 35 handwashing stations at Ayimba, Arebaba, Chandeba and Tikaidenday IDP sites. In addition, household water treatment chemicals were distributed to benefit 8,555 people for a duration of three months in the four sites. For the coming months, UNICEF plans to distribute additional supplies such as soaps, jerry cans and household water treatment chemicals, and to install additional hand washing stations and water storage tanks in communities.

Child Protection
UNICEF and its partners reached 9,241 (4,773 girls, 4,468 boys) children with psychosocial support through access to child friendly spaces (CFS) and provision of psychosocial support sessions in women and girls’ wellness centre. Of which, 7,122
children (3,310 girls, 3,812 boys) were in the Gedeo zone, SNNP region, 1,619 children (963 girls, 656 boys) in the West Guji zone, Oromia region, plus 2,439 women and girls (1,939 women, 500 girls) in the Fafan zone, Somali region.

UNICEF facilitated a training on mental health and psychosocial support for 40 social workers in the West Guji zone, Oromia region. The training equipped participants with the knowledge and skills required to provide Psychological First Aid to children and adults in distress, and to identify and plan other types of psychosocial interventions at the grass-root level.

Since January 2019, a total of 2,621 (1,252 girls, 1,369 boys) unaccompanied and separated children (UASC) were identified and registered in prioritized zones of the Oromia (East and West Wollega zones) and SNNP (Gedeo zone) regions. Of which, in March 2019, 51 (22 girls, 29 boys) UASC were supported with family tracing, reunification and alternative care arrangements in the Oromia (20 girls, 29 boys) and SNNP (two girls) regions. In addition, a total of 2,120 children (1,070 girls, 1,050 boys) received NFI and shelter kits, 2,184 girls and women were provided with dignity kits, and 47 social workers (12 female, 35 male) were trained on case management. The training aimed to strengthen the quality of documentation of cases and referrals in the SNNP region.

With the support of UNICEF, 13,596 (9,087 women, 4,509 men) IDPs were reached with communication messages on child protection and gender-based violence (GBV) in Oromia (1,352 women, 1,072 men) and Somali (7,735 women, 3,437 men) regions. Additionally, 750 (413 girls and 337 women) received dignity kits in the Somali region and three GBV survivors were referred to the Gondor hospital for medical services in the Amhara region.

Communications for Development (C4D), Community Engagement & Accountability
UNICEF uses an integrated approach in community engagement, incorporating elements from nutrition, health, child protection, and WASH. This puts into practice a commitment to a people-centred approach where those in need are engaged as individuals with needs across multiple sectors. All of UNICEF’s communication and community engagement related activities are coordinated through the relevant bureaus, clusters and sub-cluster working groups. UNICEF continued to support regional health bureaus in the prevention and control of disease outbreaks in the Somali region. In collaboration with NGOs, UNICEF continued to support community mobilization activities at the Qoloji IDP site. A key result was that there were no reported new cases of scabies in the last two weeks. Moreover, UNICEF supported the development of measles campaign messages in five zones of the Somali region. The messages aim at sensitizing caregivers to vaccinate their children against measles. This campaign is in response to a recent measles outbreak in the region. UNICEF also activated social mobilization committees in Fik zone of the Somali region where a dengue fever outbreak was suspected.

Media and External Communication

Security
Despite the improved security situation in Benishangul-Gumuz, Oromia and Somali regions, some parts of the country, are still experiencing insecurity and sporadic, unpredictable outbreaks of inter-communal conflict which resulted in restriction of humanitarian access. However, in the Somali region, a multi-agency mission headed by UN OCHA with support from United Nations Department of Safety and Security (UNDSS) and the UNICEF Security Team conducted a mission to Tuligulled woreda, in the Fafan Zone. Following two months of restricted access to humanitarian partners, through this assessment, it was determined that the security situation improved to allow for a resumption of activities in the area. However, the regional border areas with the Afar and Oromia regions remain sensitive and prone to conflicts.

Funding
UNICEF Ethiopia has appealed for US$ 124,093,133 million in 2019 to support humanitarian action for children. Since, January 2019, UNICEF has received a total of US$ 8,137,638 million. With a carry-over fund of US$ 11,973,964 million from 2018, the current funding gap stands at US$ 103,981,531 million.
### UNICEF Ethiopia funding status as of 31 March 2019

<table>
<thead>
<tr>
<th>Appeal Sector</th>
<th>Requirements US$</th>
<th>Funds available Current Year US$</th>
<th>Carry over US$</th>
<th>Funding gap US$</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nutrition</td>
<td>48,619,225</td>
<td>1,397,790</td>
<td>9,562,211</td>
<td>37,659,224</td>
<td>77%</td>
</tr>
<tr>
<td>Health</td>
<td>14,192,865</td>
<td>0</td>
<td>434,769</td>
<td>13,758,096</td>
<td>97%</td>
</tr>
<tr>
<td>Wash</td>
<td>49,675,000</td>
<td>6,481,783</td>
<td>1,109,407</td>
<td>42,083,810</td>
<td>85%</td>
</tr>
<tr>
<td>Child Protection</td>
<td>3,687,192</td>
<td>258,066</td>
<td>325,197</td>
<td>3,103,929</td>
<td>84%</td>
</tr>
<tr>
<td>Education</td>
<td>7,918,851</td>
<td>0</td>
<td>542,380</td>
<td>7,376,471</td>
<td>93%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>124,093,133</strong></td>
<td><strong>8,137,638</strong></td>
<td><strong>11,973,964</strong></td>
<td><strong>103,981,531</strong></td>
<td><strong>84%</strong></td>
</tr>
</tbody>
</table>

* Funds available includes funding received against current appeal as well as carry-forward from the previous year.

**Next SitRep: 10 May 2019**

UNICEF Ethiopia: [www.unicef.org/ethiopia](http://www.unicef.org/ethiopia)

Facebook: [https://www.facebook.com/UNICEFETH](https://www.facebook.com/UNICEFETH)

Twitter: [https://twitter.com/UNICEFEthiopia](https://twitter.com/UNICEFEthiopia)


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## SUMMARY OF PROGRAMME RESULTS

<table>
<thead>
<tr>
<th>Sectors</th>
<th>Overall needs</th>
<th>UNICEF and IPs</th>
<th>Cluster 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 under 5 years with SAM admitted treatment</td>
<td>609,961</td>
<td>386,456</td>
<td>24,538</td>
</tr>
<tr>
<td>Children received vitamin A supplementation</td>
<td>-</td>
<td>2,965,000</td>
<td>0</td>
</tr>
<tr>
<td><strong>HEALTH</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women and children under 5 years accessing essential maternal and child health services</td>
<td></td>
<td>441,000</td>
<td>68,909</td>
</tr>
<tr>
<td>People affected by acute watery diarrhoea with access to life-saving curative interventions</td>
<td></td>
<td>15,000</td>
<td>13</td>
</tr>
<tr>
<td>South Sudanese refugee children aged 6 months to 14 years vaccinated against measles</td>
<td></td>
<td>40,270</td>
<td>5,055</td>
</tr>
<tr>
<td>Number of households who have received two insecticide-treated bed nets in malaria-endemic areas</td>
<td></td>
<td>400,000</td>
<td>67,500</td>
</tr>
<tr>
<td>Number of people with access to health care facilities stocked with emergency drugs and supplies for three months.</td>
<td></td>
<td>320,000</td>
<td>62,500</td>
</tr>
<tr>
<td><strong>WATER, SANITATION &amp; HYGIENE</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>People accessing sufficient water of appropriate quality and quantity for drinking, cooking and maintaining personal hygiene (more than 1 million through permanent infrastructure)</td>
<td>7,260,454</td>
<td>3,688,000</td>
<td>887,379**</td>
</tr>
<tr>
<td>People reached with key messages on hygiene practices</td>
<td>7,260,454</td>
<td>2,120,000</td>
<td>251,054**</td>
</tr>
<tr>
<td><strong>CHILD PROTECTION</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vulnerable children provided with psychosocial support, including access to child-friendly spaces with multi-sectoral programming interventions</td>
<td>592,648</td>
<td>77,000</td>
<td>39,813</td>
</tr>
<tr>
<td>Unaccompanied and separated girls and boys reunified with their families and/or placed in appropriate alternative care</td>
<td>592,648</td>
<td>4,400</td>
<td>829</td>
</tr>
<tr>
<td>Children and women provided with risk mitigation, prevention or response interventions to address gender-based violence</td>
<td>1,028,910</td>
<td>95,500</td>
<td>46,180</td>
</tr>
<tr>
<td><strong>EDUCATION</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>School-aged children, including adolescents, accessing quality education</td>
<td>2,616,444</td>
<td>370,017</td>
<td>27,250</td>
</tr>
</tbody>
</table>

*Total results for Sectors are cumulative

**The water and hygiene promotion results have been adjusted to exclude household water treatment chemicals, and mass media communication which would otherwise inflate the numbers.