Highlights

- Burkina Faso registered 337 security incidents were recorded and 331 people were killed (including two children) between October and December 2021.
- As of 31 December 2021, the number of internally displaced persons (IDPs) reached 1,579,976 (CONASUR) out of which 61.66 per cent are children.
- As of 31 December 2021, 18,421 cases of COVID-19 and 333 deaths were reported, with 1,133,497 people aged 18 and above being vaccinated (11.10 per cent).
- As of 31 December 2021, 295 health facilities (20 per cent) are affected by insecurity in the eight regions (minimum operation), including 149 (10.3 percent) which are completely closed, leaving more than 1,843,421 people without access to health care.
- From January 1st to December 31st 2021, the United Nations was able to verify 27 cases of attacks on schools in Burkina Faso depriving hundreds of thousands of children of access to education. These attacks include the abduction of teachers and students, killings and threats against teachers, the destruction of school infrastructure, and the looting of school property resulting in forced closure of schools.

UNICEF’s Response and Funding Status

<table>
<thead>
<tr>
<th>Category</th>
<th>SAM admission</th>
<th>Funding status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nutrition</td>
<td>73%</td>
<td>46%</td>
</tr>
<tr>
<td>Health</td>
<td>90%</td>
<td>18%</td>
</tr>
<tr>
<td>Measles vaccination</td>
<td></td>
<td></td>
</tr>
<tr>
<td>People with safe water</td>
<td>30%</td>
<td>23%</td>
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<tr>
<td>Psychosocial access</td>
<td>69%</td>
<td>34%</td>
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<tr>
<td>Children in school</td>
<td>24%</td>
<td>8%</td>
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<tr>
<td>Cash transfert</td>
<td>39%</td>
<td>15%</td>
</tr>
<tr>
<td>Social protection and RCT</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Situation in Numbers

- 2,080,000 children in need of humanitarian assistance
- 3,533,000 people in need of humanitarian assistance (OCHA Dec 2020)
- 1,579,976 internally displaced persons (IDPs) registered
- 974,236 children (61.6 per cent) (CONASUR, Dec 2021)
- 3,280 Schools closed due to insecurity affecting 511,221 children (MENAPLN)

UNICEF Appeal 2021
US$ 157 million
Funding Status (in US$)

- Carry-forward, $14M
- Funds received in 2021, $22M
- Funding gap, $121M
Funding Overview and Partnerships

In line with the revised 2021 UNICEF Humanitarian Action for Children (HAC) appeal, the funding gap at the end of December 2021 was US$120 million (77 per cent). UNICEF Burkina Faso would like to recognize the generous support of key partners, who have contributed US$22.4 million in 2021\(^1\) and US$13.9 million in 2020 to the HAC 2021\(^2\). UNICEF also recognizes the flexible and unearmarked funding received in 2021 from the Global Humanitarian Thematic Fund\(^3\).

Situation Overview & Humanitarian Needs

According to the revised Humanitarian Response Plan 2021\(^+\) (HRP), an estimated 1.5 million people require protection and 3.5 million people were dependent on humanitarian assistance in Burkina Faso in 2021. The country is severely affected by a humanitarian crisis due to insecurity. Attacks by non-state armed groups (NSAG) persisted in 2021, with a total of 733 incidents and 1,280 victims (14 children) recorded between January and December 2021. During the reporting period, 337 security incidents were recorded and 331 people were killed (including two children).

Internally displaced persons (IDP)

The registration of new Internally Displaced Persons in Burkina Faso (IDPs) is under the responsibility of the Conseil National de Secours d’Urgence et de Réhabilitation (CONASUR), the government institution in charge of data collection and coordination of the humanitarian response. As of 31 December 2021, 1,579,976 IDPs were registered in the country (61.66 per cent children), an increase of 5.2 per cent compared to 1,501,775 IDPs registered as of 30 November 2021. While all 13 regions of the country are hosting IDPs, the most affected region remains the Centre-Nord, hosting almost 35.83 per cent of the IDPs, and the Sahel hosting 32.46 per cent. Eight municipalities are hosting more than 50 per cent of the IDPs: Kaya, Barsalogho, Pissila and Pensa in the Centre-Nord region, Fada N’Gourma in the Est region, Ouahigouya in Nord region, and Djibo and Dori in the Sahel region.

![Evolution of IDPs from January 2019 to December 2021](Data source: CONASUR)

Compared to the situation on 31 December 2020\(^5\), the end of 2021 saw an increase of 51 per cent in number of schools closed due the crisis, affecting access to education in eight out 13 regions in Burkina Faso. During the reporting period, 3,280 schools were still closed due to insecurity, affecting 511,221 students (243,528 girls) and 14,901 teachers (4,697 women). An additional 1,036 schools were closed and 209 reopened compared to the last situation update as of 30 September 2021.

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1. Japan, Germany, Sweden, Danish, ECHO, The United Kingdom, , Canadian UNICEF Committee, UNOCHA, USAID, US CDC, KS Relief Saudi Arabia, France
2. Denmark, Luxembourg, British Government (DFID), GAVI The Vaccine Alliance, Denmark, Czech Republic (The), Romania, UNOCHA, The United Kingdom, USAID/Food for Peace, USA (USAID) OFDA, Canadian UNICEF Committee, Education Cannot Wait Fund, USA CDC, Saudi Arabia, World Bank - Washington D.C., Global Partnership for Education, SIDA – Sweden and Japan
3. Several donors
5. Rapport ESU Ecoles fermées au 5 décembre 2020
On 9 March 2020, the Government of Burkina Faso declared the COVID-19 pandemic. As of 31 December 2021, the Ministry of Health (MoH) confirmed 18,421 cases (6,874 females), 16,908 recoveries and 333 deaths, with 1,180 active cases of which 75 per cent are spread across the two regions Centre and Hauts-Bassins. As of 31 December, 2021, 1,133,497 people have been vaccinated, which is a 11.10 per cent coverage rate (people aged 18 and above).

As of 31 December 2021, 149 out of 1,448 health centers (10.3 per cent) in eight affected regions were closed and 295 (20.4 per cent) offered reduced services. Out of the 37 districts in the eight affected regions, 25 (68 per cent) recorded closures and/or partial functionality of health facilities thus reducing the supply of health care and resulting a reduction or absence of promotional, preventive and curative in some health facilities.

![Overview of the functionality of health centers by health facilities and affected people](Data source: MoH)

**Summary Analysis of Programme Response**

**Nutrition**

From January to December 2021, a total of 109,780 severely acute malnourished (SAM) children under 5 years old were treated in the therapeutic feeding programmes nationwide representing 72.8 per cent of the 2021 SAM caseload. The integration of the screening of acute malnutrition was effective during four rounds of the Seasonal Malaria Chemo Prevention campaign (SMC) from July to October 2021: 3,768,403 children aged 6-59 months nationwide were reached among them 33,576 MAM children and 10,015 SAM children were identified.

From October to December 2021, 35,087 severely acute malnourished children aged 6 to 59 months were admitted in nutrition services in the country, bringing the total number of severe acute malnourished children treated since the beginning of January 2021 to 109,780. The total number of SAM children treated in the six humanitarian regions was 66,702 representing 64 per cent of the admissions recorded since the beginning of 2021. The performance of the treatment centers are good and above SPHERE standards: cured rate 91.7 (>85 per cent), defaulters’ rate: 6.4 per cent (<15 per cent) and death rate 1.9 percent (<10 per cent).

In the area of infant and young child feeding (IYCF), UNICEF and implementing partners support ensure that 26,773 mothers to mother’s support groups (GASPA) were set up, and 385,798 pregnant and lactating women (PLW) with children aged 0-23 months benefited from counselling sessions through mother-to-mother support groups; among them 7,701 were pregnant or lactating adolescents. With UNICEF funding and technical support, implementing NGOs partners trained 9,521 community-based health workers (54 per cent of total CBHW in the country) in 3,890 villages on

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2 Sahel, Est, Centre-Est, Centre-Nord, Boucle du Mouhoun, Centre-Est, Sud-Ouest, Cascade and Nord regions
optimal IYCF practices; social behaviour change communication, hygiene and early stimulation. Out of the total, 50,606 PLW received individual counselling either in community or via the six baby tents built near the sites of internal displaced populations. A total of 155,860 children aged from 6 to 23 benefited from home-based food fortification with multiple micronutrient powders (MNP) and 179,345 mothers out of 313,525 planned (57 per cent) were trained on household screening of acute malnutrition using the middle upper arm circumference tape.

Two rounds of national vitamin A supplementation days (VAS) including vitamin A supplementation, deworming, and screening for acute malnutrition took place targeted 3,393,742 children 6 to 59 months. A total of 3,322,605 children aged 6-59 months who received two doses of vitamin A (97.7 per cent), 3,060,783 children aged 12-59 months were dewormed (101 per cent), and 3,385,254 were screened for acute malnutrition (99.7 per cent) in the two campaigns held in June-July and Nov-Dec 2021.

An assessment of the nutritional supply chain was conducted by UNICEF in collaboration with the Ministry of Health in June 2021 to identify strengths and weaknesses in the supply chain. The results showed a good availability of nutrition supplies with recommendations to improve the management of nutritional supplies. In November 2021, an end user monitoring assessment was carried out in six regions and 25 health districts. A report will be made at the national level which will support the development an action plan for 2022.

The national nutrition survey was conducted from September 27 to October 20, 2021 and the results showed the prevalence of acute malnutrition and stunting at the national level (excluding the Sahel region) is 9.7 per cent (of which 0.8 per cent is severe) and 21.6 per cent, respectively, according to the 2006 WHO reference. The prevalence of acute malnutrition at the regional level varies from 6 per cent in the Plateau Central to 12.1 per cent% in the Centre. For stunting, the prevalence varied from 14.5 per cent in the Centre to 32.2 per cent in the Centre Nord. At the provincial level, the prevalence of acute malnutrition ranged from 5.3 per cent in Houet to 12.6 per cent in Kouroué. However, data collection was not possible in the following 14 provinces: Sahel region (Oudalan, Seno, Soum and Yaga); Nord region (Yatenga, Loroum); Centre Nord region (Bam, Sanmantenga); Est region (Komandoari, Kompienga, Gnagna, Tapoa); Boucle du Mouhoun (Kossi, Sourou).

**NUTRITION CLUSTER**

In 2021, quarterly health-nutrition coordination meetings were established at regional level and extended to the health district managers. The meetings were key to linking humanitarian and development actors to promote health and nutrition integrated approaches and actions, data sharing and joint analysis and responses to achieve mid-term results in the mid-term.

Through an intersectoral collaboration between clusters (nutrition, health, food security and WASH), an integrated package of multisectoral interventions was established. Five multisectoral projects were identified out of the 20 selected in 2021 while there will be 11 multisectoral projects out of the 17 selected, in 2022. In collaboration with UNICEF, the nutrition cluster developed a “WASH in Nutrition strategy”. The four clusters will continue the process of implementing the integrated packages and intersectoral approaches.

**Health**

In response to the various measles epidemics in the Est and Sahel regions, UNICEF supported the organization of immunization reconstitution campaigns and monthly vaccine intensification days, targeting all antigens with a focus on measles in a nexus approach. As a result, 37,807 children under 5 years of age were vaccinated (19,697 girls), including 25,162 against measles in the last quarter of 2021. In total, 144,780 children (75,286 girls) were vaccinated (90 per cent of annual target). Compared to 2020, measles cases increased in 2021, with some outbreaks occurring later in 2021. The involvement of Community Based Health Workers (CBHW) in immunization activities (delegation of immunization tasks) allowed the continuity of vaccination supply in hard-to-reach areas where many health facilities haved closed, especially in Sahel region.

The situation of the functionality of health facilities has worsened during 2021, resulting in a sharp decrease in the supply of health care at the institutional level. As of 30 November 2021, there were 103 health facilities closed (75 percent of the closed health facilities are in the Sahel, Centre Nord and Est regions) and 288 operating at minimum (82 percent of these health facilities are also in the three regions mentioned above). In response, UNICEF supported the strengthening and expansion of community-based interventions to provide health care to women and children in crisis regions through the recruitment, training, equipping and motivation of 100 community volunteers to increase the coverage of health interventions in areas with many closed health facilities (Sahel and Centre-Nord regions). Thanks to community-based interventions and to the partnerships with local associations trained, 34,553 children under 5 were reached by CBHWs and volunteers according to ICCM approach in the six regions affected by the humanitarian crisis. In addition, 272 CBHWs in Centre-Nord were also trained on pre-referral treatment of severe malaria at the community level with rectal artesunate among children under 5 in order to reduce child mortality from malaria at community level. Furthermore, 10 community health sites, with an integrated multisectoral activity package including nutrition and wash, entirely managed by CBHWs under the supervision of nurses, were set up in Gorom-Gorom, in the Sahel region.

UNICEF also supported free health care for vulnerable populations through the provision of emergency medical kits, tents, medico-technical materials, 300 new-born kits, 10 tricycles ambulances to ensure continuity of care at the
institutional level in the Sahel, Centre-Nord, Nord and Est regions. 10, 297 vulnerable households received impregnated mosquito nets as part of the fight against malaria.

Regarding COVID-19 situation, Burkina Faso faced a new wave, with a weekly average of 1,050 cases for the last two weeks for 2021 compared to 160 cases the previous weeks. The number of severe cases requiring hospitalization increased significantly, as well as mortality (10 deaths on average per week). As of 31 December, 2021, 18,421 cases and 333 deaths have been reported. In response, UNICEF continued to support the country in the process of devolving decentralized care. Medical-technical equipment (10 electrocardiograms, 10 ultrasound scanners, 140 oxygens concentrators, 5,000 nasal prongs and 5,000 oxygen masks) were given to the Ministry to ensure the continuity of services and the management of severe cases. UNICEF provided technical and logistical support for the preparation of the introduction of PFIZER vaccines and cold chain equipment. UNICEF also supported the roll out of vaccination campaigns against COVID-19 by providing technical, financial and logistical support. As of 31 December, 2021, only 1,133,497 people aged 18 and above are vaccinated (11.10 per cent).

The health sector received only 23 per cent of the funds expected for 2022. The focus has been on the response to measles epidemics in humanitarian areas, which has reached 90 per cent of the planned target. Priority was also given to community resilience in order to ensure continuity of care at the community level in the context of a decline in the supply of care at the institutional level.

The target on the number of children and women accessing primary health care in UNICEF-supported facilities was achieved but conceals many shortcomings. 317,791 people (88 per cent of the expected target) were reached at the community level, 100 community volunteers (16.7 per cent of the target) were recruited and trained. 700 CBSAs (38.5 per cent of the target) were trained in the delegation of immunization tasks in emergency areas as an essential strategy for maintaining the supply of immunization in hard-to-reach areas and preventing epidemics. 40 per cent of the volunteers were fully equipped, but frequent shortages of inputs linked to difficulties in the transportation of inputs to hard-to-reach areas were reported, impacting the quality of care.

The recruitment of 263 community volunteers at the end of 2020 allowed the strengthening of interventions at the community level in insecure areas. The interventions related to the care of pregnant women and newborns at the community level in areas where health facilities are closed could not be implemented due to lack of financial resources. These interventions at the community level are crucial to maintain the supply of health services with regard to the constant deterioration of the humanitarian situation. The training of the actors, equipment, supervision and support for data reporting are crucial to guarantee quality care at the community level in the context of the emergency. Finally, the lack of financial resources also impacted the number of vulnerable households benefiting from bed nets in the humanitarian regions (21,150 people, 39 per cent of the target was reached).

**WASH**

In 2021, UNICEF and its partners achieved 30 per cent (197,421 people, 73,441 children, 38,189 girls) of the annual water targets, 25 per cent of sanitation targets (172,488 people, 64,166 children, 33,366 girls) and more than 70 per cent of hygiene targets (501,404 people;186,522 children, 96,992 girls) through emergency WASH services and COVID-related response, in the five priority regions: Centre-Nord, North, Sahel, Est and Boucle du Mouhoun. UNICEF also reached about 137,884 people (51,293 children, 30,874 girls) through the distribution of several different kits, including hygiene kits to 91,207 people (33,929 children, 17,643 girls), dignity supplies to 23,530 women and adolescents and household COVID kits to 23,147 people (8,611 children, 4,478 girls). Additionally, as part of the sanitation nexus, a pilot project in the centre-Nord region (Kongoussi and Bourzanga) using the Community Lead Total Sanitation (CLTS) in emergency approach, allowed the construction of 737 latrines for 5,158 affected people (1,919 children, 998 girls).
From October to December 2021, the results following were achieved:
Center-Nord region: Water Trucking in Barsalogho, benefited 6,800 people (2,530 children, 1,315 girls); Rehabilitation of 16 boreholes providing safe water to about 8,000 people (2,976 children, 1,548 girls); Installation of 12 water solar systems benefiting 63,000 people (23,436 children, 12,187 girls); Construction/rehabilitation of more than 100 latrines in IDP sites providing access to adequate sanitation facilities to 7,000 people (2,604 children, 1,354 girls) and distribution of hygiene kits to 4,000 people.
Est region: Construction/rehabilitation of boreholes benefiting 3,250 people (1,209 children, 629 girls); Construction of 40 latrines providing access to adequate sanitation facilities to 2,220 students in schools (1,154 girls); Hygiene promotion activities reaching 57,000 people.
Nord region: Construction of seven solar systems benefiting 29,000 people (10,788 children, 5,610 girls) and Water trucking in Ouahigouya benefitted more than 1,000 people (372 children, 193 girls).
Sahel region: Rehabilitation of four boreholes benefiting 2,000 people (744 children, 387 girls) and installation of two water solar systems providing safe water to 7,500 people (2,790 children, 1,451 girls).

The security context remains a major challenge, particularly in the Nord, Centre-Nord and Sahel regions. In fact, the persisting insecurity has affected the implementation of activities, limiting access to the most vulnerable communities and leading to delays in the construction works.

Only 27.8 per cent of the 42,542,484 USD annual budget for WASH emergency activities needs was funded. This amount has allowed interventions to reach approximately 30, 25 and 70 per cent of indicators related to access to drinking water, adequate sanitation and hygiene services, respectively. All the interventions were implemented through the nexus approach, combining WASH humanitarian responses with interventions that build resilience and sustainability for the host communities.

WASH CLUSTER
From January to December 2021, WASH Cluster members reached 39 per cent of its annual water targets, 27 per cent of sanitation target and 54 per cent of its hygiene targets, including the distribution of kits. The data reported includes COVID-19 response and refer to the results of 43 organizations members of the cluster and not only to the organizations which have projects registered in the HRP (30 organizations). The low progress rate is due to funding gap (9.6 per cent funding acquired according to FTS, 46 per cent according to members), weakness in the rapidity and quality of the response, lack of integrated multi-sectoral approaches, and insufficient complementarity between humanitarian and development actors to face the gravity of the crises. The Cluster’s priorities for 2022 include strengthening the quality of the response and accountability to affected populations, better analysis and monitoring of needs, strengthening of inter-sectoral approaches, support to partners for advocacy and fundraising, increased involvement of national NGOs, and nexus approaches (improve complementarity and synergy with development actors). Key activities include the development of several technical guidelines, mapping of members’ capacity and funding, finalization of the WASH-in-school and WASH-in-health intervention packages.

Child Protection
During the reporting period, UNICEF and its partners reached 80,867 children (42,384 girls), including 378 children with disabilities (200 girls), affected by the humanitarian crisis, who benefited from mental health and psychosocial support (MHPPS) activities through community-based activities in child-friendly spaces and mobile team in the Central North, East, Sahel, Boucle du Mouhoun and North regions. This brings the total number of children reached by MHPPS activities to 137, 524 (69 per cent of the annual target), including 78,1446 girls: 4,750 parents (2,782 mothers), 240 others including 167 girls and 73 boys with severe signs of psychological distress were identified and provided with appropriate support.

400 new adolescents (168 girls) benefited from vocational training during the reporting period, bringing the annual total to 1,379 adolescents (747 girls) who have received vocational training and individual learning materials during the year. Also, 2,122 children, including 1,179 girls, who had dropped out of school and were of school age, were identified and re-enrolled in school, bringing the total of IDP children re-enrolled during the year to 3,309 (1,874 girls).

Using a case management approach, 1,273 separated or unaccompanied children (717 girls) were also identified, documented and are in interim care, waiting for successful tracing activities. 38 (28 girls) Children Associated with Armed Groups (CAAFAG) and other vulnerable children in the community who benefited from reintegration opportunities (vocational training, access to education) and other services related to their cases.

Moreover, UNICEF continued to strengthen the child protection community-based mechanism, through the reinforcement of child protection community structures. During the reporting period 15 child protection community structures were set up in East region, for the identification and referral of cases of children in need of protection. 15,190 people were reached through education/awareness raising sessions on the risks of explosive devices, including 12,257 children (5,446 boys and 6,811 girls) and 2,333 adults (1,008 men and 1,375 women). Out of a target of 20,000, a total of 18,722 people (5,525 girls, 5,217 boys, 5,293 women and 2,687 men) were reached through messages on gender-based violence prevention and risk mitigation including prevention of sexual exploitation and
abuse; 5,650 people (2,329 girls, 1,505 boys, 1,029 women and 615 men) benefited from awareness raising sessions on safe and accessible channels to report sexual exploitation and abuse; 90 women and girls survivors of gender-based violence were supported to through access to multisectoral GBV response services.

During the reporting period UNICEF continued to reinforce the capacity of the national protection actors and implementing partners on gender-based violence (GBV) and protection from sexual exploitation (PSEA) and abuse: 131 implementing partners and protection actors, including 56 women, were trained. 38 protection actors were trained as trainers on IED risk education. Finally, two important meetings were organized during the reporting period: (i) an inter-regional forum in the Central-North, East and Sahel regions for stakeholders and authorities on children's access to civil status which made it possible to formulate recommendations to facilitate IDP children's access to birth registration, and; (ii) a technical workshop to develop tools for implementing the Child Protection Information Management System (CPM+) version 2.0 with the technical services for the family and children and NGOs involved in case management. Additionally, UNICEF supported 15,603 children to get birth certificates.

CHILD PROTECTION AoR
In 2021, the CPAoR strengthened its presence at the sub-national level across the six humanitarian regions through the involvement of its government partners and national and international NGOs. In collaboration with the Ministry of Humanitarian Action and with financial support from UNICEF, the CPAoR conducted a rapid assessment of child protection needs in the humanitarian regions. This assessment helped to capitalize on the most urgent needs of children and identify response actions. Six training sessions on child protection in emergency situations were conducted in Ouagadougou, Ouahigouya, Koudougou, Kaya, etc. for 31 CPAoR member structures. These sessions enabled the partners to improve their interventions for affected children and the flow of information. The national CPAoR cluster also received support from the global CPAoR for the organization of a three-day face-to-face workshop for 32 partners structures (government partners and NGOs) on the fundamentals of mental health and psychosocial support (MHPSS). The workshop produced a capacity building needs assessment and a follow-up implementation plan, which included a SWOT analysis, a capacity building plan and a strategic intervention plan.

In terms of response, from January to December 2021, 55 per cent of children benefited from the response thanks to the commitment of 23 government partners (1), UN agencies (2), national (11) and international (9) NGOs and the Red Cross movement (1). The funding mobilized represents a gap of 60% for the sector. The low implementation rate is due to insufficient funding and the low coverage of the response in relation to the affected areas.

Education
In response to the security crisis, the Ministry of national education, literacy, and national languages promotion (MENAPLÑ) closed 3,280 schools in remote areas under the control of non-state armed groups. As a result, 511,221 children (243,528 girls) are out of school with an increased risk of long-term non-enrolment and drop-out and 14,901 teachers (4,697 women)8 were affected by school closures. Compared to the situation on 31 December 2020, the end of 2021 saw an increase of 51 percent in number of schools closed due the crisis, affecting access to education in eight out of 13 regions in Burkina Faso. The MENAPLÑ with partners successfully reopened 209 schools by the end of December 2021. To reduce the vulnerability of school-aged children to school closures in areas where children have become inaccessible to the MENAPLÑ and most education partners, two strategies have been implemented: strengthening the humanitarian situation analysis before any intervention to minimize risks to beneficiaries (Do No harm) ; implementing projects in such a way that they are not compromised by threats from armed groups.

At the operational level, the following measures were taken, among others: 1) early warning systems through school emergency preparedness plans; 2) alternative education provision to ensure continuity of teaching/learning (Radio education programmes 10; 3) psychosocial support (referral of children to child-friendly spaces). Despite these measures, very few school-aged children in inaccessible areas have had access to learning, mainly because of the risk of reprisals by armed groups against educational actors, unlike in accessible areas where children have either been reintegrated into host schools or have been brought together in listeners’ clubs to participate massively in education programmes via the radio while waiting to be reintegrated.

To support continuity of learning and increased enrolment, in 2021 UNICEF has supported a variety of activities through its implementing partners11, including the provision of school furniture (2,166 schools), the rehabilitation of classrooms (20 classrooms), the establishment of additional emergency classrooms (69 classrooms) and a Back-to-School campaign at the beginning of the 2021-2022 and ongoing community awareness sessions on the importance of education, for the benefit of 118,535 children (girls 57,152, 48 percent). This represents approximately 24.2 per cent of the annual target of 504,000 87,297 students, 43,727 girls, 50percent) received learning kits. In addition, to 300,000

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8 Rapport ESU du 31 décembre 2021
9 Rapport ESU Ecoles fermées au 5 décembre 2020
10 This programme is aimed at children in areas with high security challenges who are at risk of dropping out of school (children whose schools are closed and displaced children). It mainly targets children aged 10 to 17 who have already attended primary school for at least four years. A Radio Education Programme (REP) can last up to 9-10 months
11 Five international NGOs: Humanité Inclusion/HI, Danish Refugee Council/RDC, Plan International, Fundacion Educacion Y Cooperacion/Educo, Initiatives de Coopération et d’Appui aux actions Humanitaires et de Développement/ICAHD; a national NGO: Centre Diocésain pour la Communication/CDC) and some technical services of the MENAPLÑ: Directions Régionales de l’Enseignement Préscolaire, Post-Primaire, Secondaire et de l’Education Non Formelle, Secrétariat Technique de l’Education d’Urgence
children initially targeted by radio education programmes, during the reporting period, UNICEF and its partners reached 607,217 children (293,848 girls, 48.3 percent), more than the planned target, thus mitigating the risks associated with non-enrolment due to school closures and low capacity in displacement areas.

To improve quality education, UNICEF trained 1,317 teachers (584 women) on psychosocial support and on the Safe School approach. In addition, 53 trainers were trained (seven women) on national and international minimum standards for education in emergencies 12, 619 actors were trained (167 women) on peace and mine risk education, and 139 teachers (58 women) were trained on education curricula in emergencies. Remedial classes were also implemented in the five regions, reaching 20,020 students (9,465 girls, 47.2 percent including 9,426 displaced students (4,920 girls, 52 percent) against a target of 50,522.

For the 2021 examination session in the regions affected by the crisis, UNICEF supported the MENAPLN to ensure the participation of eligible children. Out of the 8,443 (4,500 girls) internally displaced candidates who took the exam, 4,957 were admitted (2,466 girls), a success rate of 59 per cent for the primary school certificate. UNICEF also supported the MENAPLN in the relocation of 5,807 students (3,227 girls) from 165 closed schools who were invited to participate in the national end-of-year exams in more secure areas. Of the 5,807 students (3,227 girls) who sat for the exams, 3,572 were admitted (1,984 girls), giving a success rate of 62 per cent. All the 225 examination centres were sent messages to raise awareness of the COVID-19 prevention measures.

Finally, in some areas, UNICEF’s partners recorded cases of children who had no documents and could not attend formal education. Advocacy efforts by UNICEF and the Education Cluster have continued with the relevant school authorities and the MENAPLN to support the enrolment of children until they receive the required documents (birth certificates and national identity cards). UNICEF has planned two campaigns in the first quarter of 2022, one to issue 25,000 birth certificates and the other to issue 10,000 identity cards.

Key constraints and challenges

- Delay in starting construction of emergency classrooms due to the delay in recruiting engineers on board and waiting for a no-objection notice from donors (case of the emergency fund received with the Global Partnership for Education (GPE) following the change in the initial architectural layouts).
- Security and health (COVID-19) context affecting the cost of materials and need for no-objection notices from donors to rearrange the budget (Idem).
- Difficulty in programmatic shift towards emergency response in education at several levels (donors, government, internal to UNICEF).
- Focus on the formal school system by the government.
- Poor use of educational alternatives in hard-to-reach areas under the control of non-state armed groups.

Good practices

- The use of community teachers has been beneficial in expanding educational provision in areas with limited teaching staff due to attacks on education.
- The radio education programme has proven to be a key educational alternative in the rapid response to basic learning and protection needs.
- The adoption of double flow as an alternative solution for the maximum use of existing classrooms in the face of low capacity of host schools.
- The use of emergency education curricula has facilitated a standardized implementation of remedial education.

Lessons learned

- Addressing the needs of children in conflict-affected areas and IDPs is a “must” for achieving sustainable development goals.
- Adaptation of alternative education provision to the implementation context is essential and scaling up of existing initiatives is essential to ensure continued service in shock areas where schools are closed.
- The use of community teachers expands educational provision, and the double flow will be necessary to meet demand in displacement areas.
- Sharing and reporting of achievements, including alternative and non-formal education provision, with education authorities and all stakeholders will contribute to enhancing the education in emergencies response and its capitalization by the MENAPLN, civil society and communities.

EDUCATION CLUSTER:

In the 2021 humanitarian response plan, the Education Cluster targeted 812,602 children (487,561 girls) in the six regions with high security challenges: Boucle du Mouhoun, Centre-Nord, Est, Centre-Est, Nord and Sahel. Four key results (distance learning, access to formal/non-formal education, learning materials and psychosocial support) and some twenty actions constituted the response framework. Overall, the results achieved by 30 November 2021 show a low rate of achievement, less than half of the overall target for formal education. Only one of the four key results, in

12 BFA_Normes ESU_Guide Cluster Education
terms of learning opportunities, had a satisfactory level of achievement (above 100 per cent- 679,872 children), thanks to interventions related to radio education programmes which enabled to exceed the annual target (300,000 children). Indeed, radio education programmes (lessons) continued to be implemented to promote continuity of learning for children affected by school closures and internal displacement. These lessons mainly targeted children aged 10-17 years (organized in listeners’ clubs) who have basic literacy and numeracy skills and who have completed at least four years of schooling. They provided 679,837 learners (353,515 girls) with lessons on writing, reading and mathematics skills, as well as timely messages on key child protection issues (early marriage, child labour, GBV, etc.), including COVID-19.

At the cluster level, beyond the programmatic challenges, the major challenges facing education are as follows:

- The interruption of teaching (more than 2,000 schools closed since the beginning of the year, with unsustainable reopening), which implies the loss of learning and its long-term effects on the country's development.
- The risk of disengagement from the school system and of permanent school drop-out (e.g. child labour), hence the risk of an increase in the number of children and adolescents outside school, many of them dropping out altogether, due to insecurity; an increase in the risk of exposure to violence, abuse, exploitation, etc.
- The growing inequalities against the most marginalized, without adequate investment in education, in particular in appropriate learning, there is a risk of increasing inequality of access to learning opportunities.

In the case of radio education programmes alone, challenges remain in relation to monitoring their effectiveness and, above all, the risks of reprisals by non-state armed groups against community actors, which complicates the implementation of action in this field in conflict areas. There are several consequences of the partial coverage of the educational response, including the fact that the right to education, survival and development and the best interests of the child are at risk, the psychological impact of the crisis, the increased risk of forced recruitment, sexual violence due to the lack of supervision and the prevention of a future after the emergency (risk of dropping out of school).

In order to improve the results of the Education Cluster it will be appropriate to: (1) effectively implement and coordinate alternative education programmes so that they can reach as many children as possible, including in areas where physical accessibility is impossible; (2) diversify alternative provision in national languages and go beyond radio education programmes to strengthen its relevance and coverage of education in emergencies; (3) adopt measures to accompany formal schooling, namely: (i) strengthening the capacity of host schools in displacement areas; (ii) continuing teacher training in psychosocial support (including the development of school emergency preparedness and response plans); (iii) improving school-based related services with a focus on protection and school feeding to address the holistic needs of the child; (iv) facilitating the promotion of equal opportunities for success by providing remedial education to catch up on the backlog of displaced children.

**Communication for Development (C4D), Community Engagement and Accountability**

In a context marked by both insecurity and the COVID-19 crises, UNICEF focused on supporting the coordination of community engagement and accountability to affected populations activities in collaboration with other agencies of the United Nations system, in particular OCHA, UNHCR and the WHO as well as NGOs and CSOs. Media (radio) and outreach channels (community dialogues, forum theatre, talk-debates and home visits) were used to disseminate key messages related to health, education, WASH and nutrition. During the reporting period 3,250,000 people (425,000 children, 200,000 girls) were reached with communication activities.

Several mechanisms were used to collect community feedback (views, opinions and assessments) on the services offered to them. The main means used are interactive radio programs that allow affected populations to have the flow to discuss their concerns and give their opinion on humanitarian assistance. During the reporting period 600,000 people (50,000 children, 27,000 girls) were reached, shared their concerns and asked questions of interest.

Capacity building of local actors was also a key strategy to improve access. To this end, emphasis was placed on the training of community relays who are actors from and within the community and permanently with it. 1,200 community relays had their knowledge strengthened to promote key messages and good survival practices and contribute to social mobilization around community engagement sessions. The U-Report platform was also used to mobilize members for local awareness actions. More than 4,146 U-reporters were trained and mobilized to contribute to awareness-raising activities.

150 humanitarian workers and 958 community-based health workers and internally displaced persons were trained on topics such as the consolidation of peace and social cohesion, female genital mutilation, child marriage, hygienic management of menses, WASH, nutrition, vaccination, key principles humanitarian organizations, the organization of the humanitarian response and systematically COVID-19. UNICEF strengthened its partnership with implementing partners in the East (Association Tin-Taani), Sahel (RAPS), North (Voix du paysan) and Centre-Nord (ACD) for the implementation of triple nexus entitled "Project to strengthen humanitarian information, community participation and accountability in the prevention, response and recovery of communities affected by humanitarian and public health emergencies".
C4D received approximately USD 600,000 and was able to develop humanitarian interventions in four regions with partners experienced in humanitarian response. Emphasis was placed on the dissemination of humanitarian information, strengthening community participation and accountability in the prevention, response and recovery of communities affected by humanitarian emergencies. In view of the country’s health context, awareness-raising against COVID-19 was integrated into all interventions.

The key indicators assigned to C4D were reached, even exceeded. These include the number of people who participated in social and behavior change engagement activities. The multimedia strategy used made it possible to reach more than three million people against a target of 2,500,000 people.

Emphasis was also placed on the establishment and operation of feedback mechanisms to allow affected populations to raise their concerns, ask questions and report complaints to stakeholders. The main channels used were the animation of interactive programs with the network of partner radio stations established in the information regions as well as the animation of community dialogue sessions. Through this intervention, 601,800 people were able to enter these frameworks to share their concerns against a planned target of 500,000.

**Media and external communication**

The media and external communication team leveraged traditional and social media to raise awareness on the situation of children and women in Burkina Faso as well as on the humanitarian situation and response. UNICEF facilitated several journalists’ field visits and interviews in Kaya and Dori which led to coverage by local media, and international press, including the Guardian and UN News on the consequences of the ongoing humanitarian crisis in Burkina Faso.

**December**

- In Barsalogho, Centre-Nord region, 300 dignity kits composed of soap, clothes, tents and mosquito nets were distributed as a relief measure to more than 2,000 people in need, thanks to SIDA’s funds.
- An intensive vaccination campaign against Covid19 has been launched in December. The vaccines available in Burkina Faso are Pfizer, Astrazeneca, Sinopharm and J&J: Facebook (link1, link2), Instagram and Twitter.
- In Burkina Faso, nearly half of the national population practices open defecation, which increases the risk of disease and diarrhea for children. Thanks to UNICEF and partners, 156 villages have put an end to this harmful practice: Facebook, Twitter, Instagram.
- UNICEF fights violence against girls: more than 40 traditional and religious leaders have committed to take action against child marriage and female genital mutilation, under the leadership of the First Lady of Burkina Faso: Facebook, Twitter, Instagram.

**November**

- UNICEF celebrated the International Day for the Elimination of Violence against Women and broadcast a series of awareness raising activities against child marriage (Instagram, Twitter).
- Since 2005, more than 2,500 attacks on schools and hospitals occurred in the region, affecting children, and their families: Facebook, Twitter.
- On the International Children's Day, UNICEF invited young people to speak out on climate change: climate change: Facebook (link1, link2, link3, link4, link5).
- UNICEF Burkina Faso, with the financial support of its partners, distributed more than 125,000 school kits to displaced students and those of host communities: Twitter, Instagram.
- On the United Nations International Day, young people are committed as changemaker to achieve the Sustainable Development Goals (SDGs): Facebook, Twitter.

**October**

- UNICEF helps set up resilient schools for children to prepare them to react in dangerous situations and benefit from psychosocial care: Facebook, Instagram.
- UNICEF launched the State of the World’s Children Report 2021

**Multisectoral cash response**

During the reporting period, 1,000 newly displaced households, (10,535 beneficiaries, 51.3 per cent children) received multisectoral unconditional cash assistance to prioritize and meet their basic needs on local markets. The distributions were completed with 2021. In accordance with the HAC 2021, UNICEF intended to reach 10,000 households (70,000 people including 60 per cent children). As of 31 December 2021, due to low funding levels, UNICEF achieved 39 per cent and 51.8 per cent of households and individuals (19,501 children), respectively targeted for cash distributions.

Furthermore, in collaboration with its partners, through its project “Tackling child poverty and vulnerabilities in the Boucle du Mouhoun, Centre-North, North and East regions through child-sensitive social protection”, UNICEF assisted 721 internally displaced households (5,047 individuals, 2,884 children) with quarterly cash assistance in conflict-affected areas, respectively in Madjaorì, Namounou and Pensa communes.
**Rapid response**

During the reporting period, there was a sharp rise in humanitarian needs due the intensification of incursions by unidentified armed groups in the six priority regions\(^1\) of the Humanitarian Response Plan 2021 and the expansion of armed activity to new regions\(^2\), which resulted in increased numbers of internally displaced children and families. Technical and financial support to local partners and interagency humanitarian operations mainly in the Centre Nord and Nord regions were instrumental in reaching a total of 19,019 IDP and host crisis affected communities with emergency packages of Non-Food Items (NFIs)\(^3\), as illustrated below:

- 2,356 people were reached with 330 kits in Foutouri and Batiebougou communes, Est region through UNICEF’s partnership with OCADES.
- 1,660 people were reached with 624 kits in Pama and Nadjagou communes, Est region through UNICEF’s partnership with Association Tin Tua and ASMAD.
- 25,340 people were reached with 1,763 Kits distributed to communities affected by crisis in Pensa, Rollo, Koungoussi and Bourzanga through UNICEF’s partnership with SOLIDEV and ASMAD.
- 17,864 people were reached with 2,120 Kits distributed to communities affected by crisis in Ouahigouya, Kain, Banh and Sollé through UNICEF’s partnership with ACTED.

**Humanitarian Leadership, Coordination and Strategy**

In 2021, UNICEF Burkina Faso aimed to address the needs of 2.27 million people, including 876,668 vulnerable children, affected by humanitarian crisis in the six HRP priority regions by scaling up its response to emergencies while strengthening social cohesion and resilience. UNICEF’s nutrition and COVID-19 response cover the whole country. UNICEF aims to ensure continuity and a high coverage of social services to children and families in crisis-affected regions, in accordance with UNICEF’s Core Commitments for Children (CCC) engagements\(^4\).

UNICEF’s humanitarian action is guided by the following priorities.

- 3RC – community based rapid response and resilience which is an accelerated investment in community platforms to strengthen our multi-sectoral programmes to accelerate the impact in favour of the most vulnerable populations.
- Operationalize the triple nexus (humanitarian-development and peace) to make humanitarian aid more effective and efficient (scale, speed, systems, sustainability, resilience and social cohesion).
- Invest in community platforms to strengthen our multi-sectoral programmes to accelerate the impact in favor of the most vulnerable populations (scale up, speed, convergence and equity).
- Maximize influence and results for young people at scale through a holistic approach to advocacy and partnership.
- Simplification and rationalization of existing processes, policies and tools, and increased cost efficiency.
- Strengthen the supportive work environment, including promoting UNICEF’s values and reviewing, updating and clarifying the accountability framework.

Due to the growing insecurity, UNICEF is implementing the Rapid Response and Community Resilience strategy (3RCs), used by the Country Office to localize humanitarian preparedness and response in hard-to-reach areas. The 3RCs aims to strengthen the capacities at community level to ensure the analysis of vulnerabilities and the delivery of humanitarian response, even in areas with challenging security access.

The strategy lies on four strategic pillars:

1. **Capacity building:** identify community actors and train them on humanitarian principles, Core Commitments for Children in emergencies UNICEF providing humanitarian alerts and conducting simplified multi sectoral needs assessments (MSA).
2. **Humanitarian alert:** ensure the set up and the maintenance of a humanitarian alert system within the community, from data collection and sharing alerts to conducting simplified MSA following a shock, which will be systematically shared with the GCORR.
3. **Humanitarian response:** ensure effective targeting of most vulnerable people as well as setting up of a rapid response adapted to the needs, according to MSNA findings.
4. **Resilience/ social cohesion/ local governance:** ensure support to the government through CONASUR for the institutionalization of the approach at community local and national levels and strengthened advocacy to integrate risks analysis, mitigation measures and budget in response to shocks, in community development plans.

Following a training of trainers workshop held from July 28 to 30 2021 and September 27 to 29, 2021 on simplified multisectoral assessment tools in Fada CONASUR branches in the Est region, the relays conducting multisectoral assessments for new displacements in Nadiagou, Madojaro province and proceeded to distribute 100 kits for close to

\(^1\) Centre Nord, Sahel, Est, Boucle de Mouhoun, Nord, Centre Est
\(^2\) Cascades, Haut Bassins
\(^3\) NFIs kits comprise of cooking pots, plastic plates, pastic cups, soupe ladle, washing basin,soap, plastic mat, blanket, mosquito nets, solar lamps, 100 kg bags, reinforced tarpaulin, ropes, large cups, spoons and a cooking stove
\(^4\) Core Commitments for Children https://aai92769-f487-45a2-a3e7-84a61a8745d.usrfiles.com/ugd/aai9276_1ce9a5e85e5e4b8a84e8d93aa95f6.pdf
7,000 displaced people in the commune which is only accessible from Togo due to the highly fluid security situation in the area. CONASUR proceeded to transport the kits and reach over 7,000 people (4,270 children) with this assistance.

UNICEF supports community-based interventions in areas where the Government has suspended basic social services or where insecurity severely restricts access to the most vulnerable populations. This action is seen as an opportunity to strengthen the involvement of communities and local authorities in co-creating solutions to issues affecting children and their families, and to showcase the development-humanitarian-peace nexus.

UNICEF continued actively engaging in the Groupe de Coordination Opérationnel de la Réponse Rapide (GCORR) and cluster shelter/ NFI and increased partnerships with local and international INGOs to provide protection and assistance in hard to reach rural areas.

UNICEF has fully staffed field offices in Dori (Sahel region), Kaya (Centre-Nord region), and in Fada N’Gourma (Est region) and has recruited a consultant in the UN joint office in Ouahigouya (Nord region). The field offices provide leadership, technical advice to partners and establishing dialogue and fostering strategic and principled collaboration with the local authorities and sustaining dialogue and engagement with local communities.

They are also critical to identifying the unmet humanitarian needs of children and responding appropriately in line with the CCCs to address them. The field presence enables UNICEF to guarantee the efficient functioning of regional coordination mechanisms in WASH, nutrition, education and child protection, and in the regions where UNICEF is not present or is present with reduced staff (Boucle de Mouhoun, Centre-Est and Nord regions), the coordination is ensured by implementing partners.

Updated information on the clusters' main activities can be found online:
- Health cluster https://www.humanitarianresponse.info/en/operations/burkina-faso/health
- Nutrition cluster https://www.humanitarianresponse.info/fr/operations/burkina-faso/nutrition
- CP AoR https://www.humanitarianresponse.info/en/operations/burkina-faso/protection-de-lenfant
- WASH cluster https://www.humanitarianresponse.info/fr/operations/burkina-faso/water-sanitation-hygiene

CLUSTER COVID-19 useful links
- Education https://drive.google.com/drive/folders/1Tq4I3VCoAeBVJw5myyyv400NDB4k_qT!TW?usp=sharing
- Nutrition https://drive.google.com/drive/folders/1zyVA-Me0A8umE7MdcAxw9k2cVX5P3Ony?usp=sharing
- WASH https://drive.google.com/drive/folders/1q063M4QgnsivizdWOJVD9m4kKVC79-YH?usp=sharing
- CP AoR https://drive.google.com/drive/folders/1nV3yi4GsLxpQpfW_J9JHLZ6hrBF8y3

Next SitRep: 31 March 2022

UNICEF Burkina Faso Humanitarian Action for Children Appeal
UNICEF Humanitarian Action for Children Appeals https://www.unicef.org/appeals
UNICEF Burkina Faso Facebook and Twitter

Who to contact for further information?

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Contact Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sandra Lattouf</td>
<td>Representative</td>
<td>Tel: +226.25 491 101</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Email: <a href="mailto:slattouf@unicef.org">slattouf@unicef.org</a></td>
</tr>
<tr>
<td>James Mugaju</td>
<td>Deputy Representative</td>
<td>Tel: +226.25 491 105</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Email: <a href="mailto:jmugaju@unicef.org">jmugaju@unicef.org</a></td>
</tr>
<tr>
<td>Hadrien Bonnaud</td>
<td>Chief of Communications</td>
<td>Tel: +226.66 93 31 32</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Email: <a href="mailto:hbonnaud@unicef.org">hbonnaud@unicef.org</a></td>
</tr>
</tbody>
</table>

16 UNICEF actively supports the Groupe de coordination opérationnelle de la réponse rapide (GCORR) a mechanism that strengthens rapid response at national and local levels in order to promote full coverage of immediate needs as well as more sustained assistance. This platform comprises of national and local stakeholders in humanitarian response. UNICEF provides technical support for the platforms leadership and coordination functions, participates in the development of assessment and information management systems and tools and the prepositioning of supplies in order to improve the collective impact of the humanitarian response.
## Summary of Programme Results

<table>
<thead>
<tr>
<th>Sector</th>
<th>UNICEF and IPs Response</th>
<th>Cluster/Sector Response</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Total needs</td>
<td>2021 target</td>
</tr>
<tr>
<td>Nutrition</td>
<td># children aged 6 to 59 months with severe acute malnutrition admitted for treatment</td>
<td>151,214</td>
</tr>
<tr>
<td></td>
<td># primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling</td>
<td>560,950</td>
</tr>
<tr>
<td>Health</td>
<td># children and women accessing primary health care in UNICEF-supported facilities</td>
<td>475,000</td>
</tr>
<tr>
<td></td>
<td># children aged 6 months to 14 years vaccinated against measles</td>
<td>323,000</td>
</tr>
<tr>
<td></td>
<td># households that received at least two long-lasting insecticide-treated nets</td>
<td>271,429</td>
</tr>
<tr>
<td>WASH</td>
<td># people accessing a sufficient quantity of safe water for drinking, cooking and personal hygiene</td>
<td>1,795,478</td>
</tr>
<tr>
<td></td>
<td># people accessing appropriately designed and managed latrines</td>
<td>2,548,537</td>
</tr>
<tr>
<td></td>
<td># people reached with critical water, sanitation and hygiene supplies (including hygiene items) and services</td>
<td>2,548,537</td>
</tr>
<tr>
<td>Child Protection</td>
<td># children and caregivers accessing mental health and psychosocial support</td>
<td>715,511</td>
</tr>
<tr>
<td></td>
<td># women, girls and boys accessing gender-based violence risk mitigation, prevention or response interventions</td>
<td>181,500</td>
</tr>
<tr>
<td></td>
<td># people with access to safe channels to report sexual exploitation and abuse</td>
<td>3,000</td>
</tr>
<tr>
<td></td>
<td># unaccompanied and separated children reunified with their primary caregiver or provided with family-based care/alternative care services</td>
<td>5,715</td>
</tr>
<tr>
<td>Education</td>
<td># children accessing formal or non-formal education, including early learning</td>
<td>812,602</td>
</tr>
<tr>
<td></td>
<td># children receiving individual learning materials</td>
<td>812,602</td>
</tr>
<tr>
<td></td>
<td># schools implementing safe school protocols (infection prevention and control)</td>
<td>2,000</td>
</tr>
<tr>
<td>Social Protection</td>
<td># households reached with humanitarian cash transfers across sectors</td>
<td>10,000</td>
</tr>
</tbody>
</table>

---

**Note:** The table above summarizes the results of various sectors and indicators, including nutrition, health, WASH, child protection, education, and social protection. The data includes the total needs, 2021 target, total results, and change for each indicator.
# households reached with cash transfers through an existing government system where UNICEF provided technical assistance and funding

Rapid Response Mechanism

# displaced people, including displaced people living with disabilities, who received essential household items

C4D, community engagement and AAP

# people who participated in engagement actions for social and behavioural change

# people who shared their concerns and asked questions/clarifications to address their needs through established feedback mechanisms

*The figures shown for this indicator also include updated data for activities carried out during the month of February

Annex B

Funding Status*

<table>
<thead>
<tr>
<th>Sector</th>
<th>Requirements</th>
<th>Humanitarian resources received in 2021</th>
<th>Other resources used in 2021</th>
<th>Resources available from 2020 (Carry-over)</th>
<th>$</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nutrition</td>
<td>23,417,005</td>
<td>3379622</td>
<td>0</td>
<td>7,352,721</td>
<td>12,684,663</td>
<td>54%</td>
</tr>
<tr>
<td>Health</td>
<td>14,323,886</td>
<td>1,886,981</td>
<td>100,000</td>
<td>661,419</td>
<td>11,675,487</td>
<td>82%</td>
</tr>
<tr>
<td>WASH</td>
<td>48,923,857</td>
<td>9,134,364</td>
<td>-</td>
<td>2,229,487</td>
<td>37,560,007</td>
<td>77%</td>
</tr>
<tr>
<td>Child Protection</td>
<td>10,304,000</td>
<td>2,883,720</td>
<td>200,000</td>
<td>395,137</td>
<td>6,825,143</td>
<td>66%</td>
</tr>
<tr>
<td>Education</td>
<td>42,155,435</td>
<td>1,268,600</td>
<td>-</td>
<td>2,125,440</td>
<td>38,761,395</td>
<td>92%</td>
</tr>
<tr>
<td>Rapid Response and access</td>
<td>2,637,451</td>
<td>1,756,500</td>
<td>-</td>
<td>756,226</td>
<td>124,724</td>
<td>5%</td>
</tr>
<tr>
<td>Social Protection and Humanitarian CT</td>
<td>9,292,400</td>
<td>1,039,120</td>
<td>-</td>
<td>368,083</td>
<td>7,885,197</td>
<td>85%</td>
</tr>
<tr>
<td>Cluster coordination and information management**</td>
<td>2,041,600</td>
<td>123,181</td>
<td>100,000</td>
<td>1,818,419</td>
<td>3,361,960</td>
<td>84%</td>
</tr>
<tr>
<td>C4D</td>
<td>4,000,000</td>
<td>602,571</td>
<td>-</td>
<td>35,469</td>
<td>3,361,960</td>
<td>84%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>157,095,634</td>
<td>22,074,657***</td>
<td>400,000</td>
<td>13,923,982</td>
<td>120,696,995</td>
<td>77%</td>
</tr>
</tbody>
</table>

* As defined in the 2021 Humanitarian Appeal for a period of 12 months

** The funding for cluster coordination includes only the grants received in 2021

*** The funding decreased from last SitRep due to double counting