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MOZAMBIQUE

Humanitarian Situation Report No. 2



Reporting Period: 1 - 28 February 2022

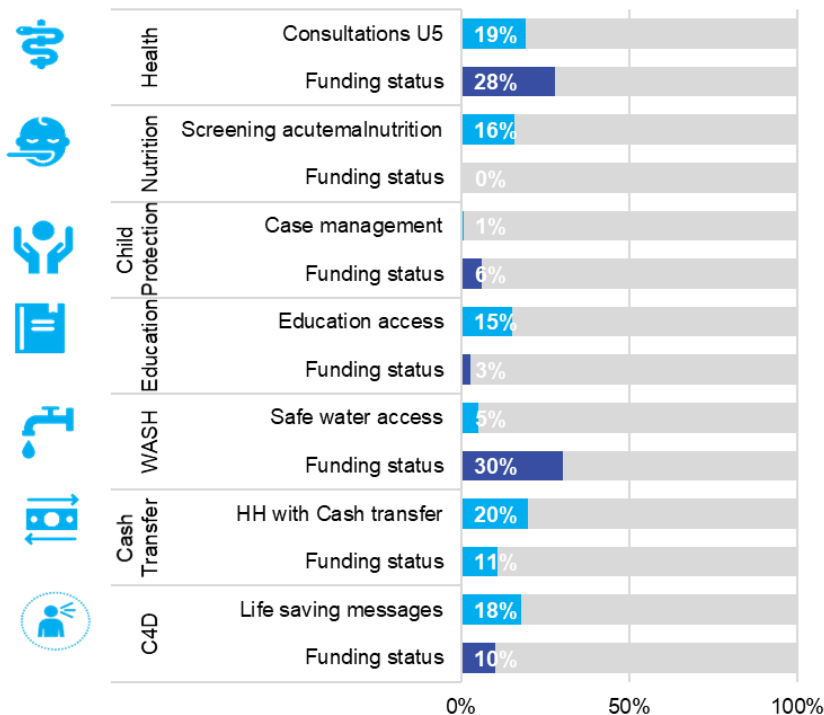
Highlights

- Two cases of vaccine derived poliovirus in Mozambique and one case of wild poliovirus in Malawi led to the declaration of a National Public Health Emergency on 21 February with mass campaigns scheduled for March.
- Over 14,000 people were displaced in February of whom 48 percent were children
- UNICEF supported the delivery of safe water to nearly 25,000 people affected by the conflict in the North
- UNICEF supported the restoration of healthcare services in provinces affected by Tropical Storm Ana benefiting nearly 42,000 people
- UNICEF has reached 10,451 children with life-saving child protection services in February

Situation in Numbers

- 453,000** children displaced in need of humanitarian assistance (INGD Jan 2022)
- 1,500,000** people in need (OCHA Dec 2021)
- 934,000** Internally displaced people (INGD Jan 2022)
- 67,000** People in hard-to-reach areas (OCHA January 2022)

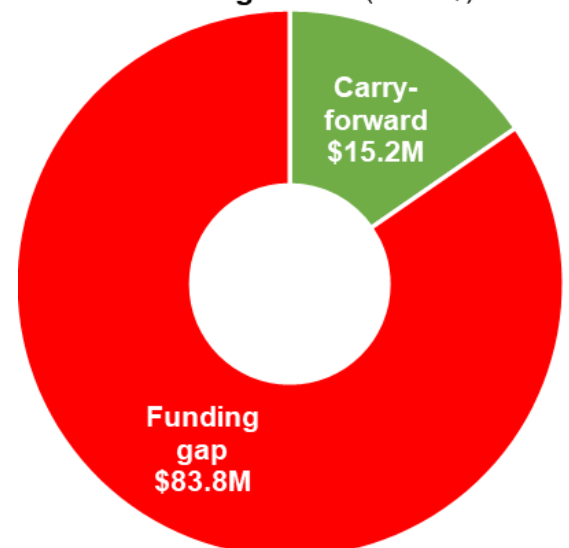
UNICEF's Response and Funding Status



UNICEF Appeal 2022

US\$ 98.8 million

Funding Status (in US\$)



Funding Overview and Partnerships

UNICEF appeals for \$98.8 million to sustain the provision of life-saving services for women and children in Mozambique affected by multiple shocks. In 2022, the GAVI Vaccine Alliance contributed to UNICEF Mozambique's humanitarian response for COVID-19 while the United Kingdom provided support for Tropical Storm Ana response activities. UNICEF expresses its sincere gratitude to GAVI and the Foreign, Commonwealth and Development Office for their generous contributions. The needs in Mozambique are increasing as a result of a busy cyclone season with multiple storms in rapid succession. The 2022 HAC, focused principally on the conflict in the north, has a funding gap of 85 percent. Without sufficient funds, over 600,000 children will not receive timely support to respond to basic needs. UNICEF is relying on resources carried over from 2021 and has reallocated some regular resources to address urgent gaps.

Situation Overview & Humanitarian Needs

In February, cyclone activity in the Indian ocean was active with the formation of four tropical systems, of which two—Dumako and Emnati—were classified as a tropical depression and cyclone respectively. Tropical Storm Dumako affected central Mozambique; areas previously affected by Tropical Storm Ana in January. The Tropical Depression Dumako brought significant rains in a short period of time impacting over 23,730 people in Nampula, Zambézia, Tete, Sofala, and Manica Provinces¹.

New displacement in Cabo Delgado continues. During the reporting period, the International Organization for Migration reported 222 movements involving 14,202 people which an average of 48 percent of the displaced people were children². The highest movement was reported in the first week of February when 5,120 people moved from Meluco District, arriving primarily in Pemba. At the end of the month, the second-highest movement was observed with 4,342 people moving from Nangade to Mueda or other parts of Nangade Districts. These movements are related to reported security incidents.

The Famine Early Warning System Network (FEWSNET) reported that households impacted by Tropical Storms Ana and Dumako are expected to improve food security outcomes assuming seeds are available for post-flood production. In Cabo Delgado and parts of Niassa, conflict-affected areas are expected to remain in the Crisis level (IPC Phase 3), with areas receiving regular humanitarian food assistance likely to remain at the Stressed level (IPC Phase 2)³.

On 14 February 2022, a polio outbreak was confirmed in Mozambique, after two vaccine-derived polio cases were reported in Nampula and Cabo Delgado Provinces. In neighbouring Malawi, a wild poliovirus case was also detected in February. As a result, the Minister of Health declared a National Public Health Emergency in Mozambique on 21 Feb 2022. UNICEF, the World Health Organization (WHO), and the Government of Mozambique have intensified surveillance measures to improve detection of Acute Flaccid Paralysis and poliovirus and working to implement a synchronized outbreak response with regional officials. The Government is planning two supplementary immunization activities in all provinces which adjoin Malawi or where poliovirus cases have been reported. This includes the provinces of Niassa, Cabo Delgado, Nampula, Zambézia, Sofala, Manica and Tete.

Regarding COVID-19, the health authorities reported 3,421 active cases as of 28 February of which nearly 95 per cent are in Maputo City⁴. Since the onset of the COVID-19 immunization campaign, health authorities have vaccinated over 11 million people, reaching 72.5 per cent of their target⁵. With the significant reduction of COVID-19 cases, the Government alleviated most restriction measures removing the curfew time, opening schools at all levels, and returning to normal working hours, among others.

Summary Analysis of Programme Response

Health

UNICEF maintains support for the expansion of health services to conflict-affected populations in remote areas of Cabo Delgado Province. Integrated mobile brigades remain the key strategy to reach populations in the resettlement sites and in host communities including those located in hard-to-reach areas. Partnering with Doctors with Africa (CUAMM), UNICEF ensured 4,057 children under five years, 1,092 pregnant, and 258 breastfeeding women received quality health

¹ <https://reliefweb.int/updates?search=dumako>

² <https://dtm.iom.int/mozambique?page=0>

³ <https://fews.net/southern-africa/mozambique>

⁴ <https://covid19.ins.gov.mz/wp-content/uploads/2022/02/Comunicado-de-Imprensa-COVID-19-28.02.2022-VF.pdf>

⁵ <https://covid19.ins.gov.mz/wp-content/uploads/2022/02/Comunicado-de-Imprensa-COVID-19-28.02.2022-VF.pdf>

services including regular, antenatal and postnatal consultations and screening for undernutrition in districts of Ancuabe, Chiúre, Mecúfi, and Metuge. Additionally, 612 children below fifteen years were immunized for measles and rubella in Ancuabe, Chiúre, Mecúfi, Metuge, and Montepuez Districts. Utilizing a similar partnership in Ibo District, UNICEF and AVSI supported access to health services including the immunization of 157 children below two years and antenatal care services for 88 women. In addition, UNICEF supported the distribution of 1,236 mosquito nets in the Chimoio Transit Centre benefiting 618 displaced families, including 507 children under five years.

UNICEF also supported COVID-19 vaccination in all districts of the Cabo Delgado province allowing 93,214 people to receive the first dose of the vaccine, while 24,759 people received the second dose and 6,028 received a booster dose.



Following the landfall of Tropical Storm Ana, 45 health facilities were partially or severely damaged Nampula, Zambézia, Tete and Sofala Provinces, with significant losses in medicines and medical materials. In order to fast track restoration of healthcare services in affected areas, UNICEF provided funding to the provincial health directorates, as well as medical supplies including 10 basic health kits, 37 interagency health kits, four peripheral drug kits, seven community drug kits, 20 community health worker kits and eight tents. These supplies are sufficient to provide services to an estimated 42,000 people for a three-month period.

Two confirmed vaccine-derived poliovirus type 2 (cVDPV2) cases were reported as circulating on 8

February in Mozambique, the most recent having been identified in Chiúre District of Cabo Delgado Province. A wild poliovirus case was confirmed in southern Malawi; the first case in Africa in over five years, as all countries were certified wild poliovirus free. On 14 February 2022, the Government of Mozambique confirmed the outbreak causing the Ministry of Health's National Department of Public Health to activate the National Emergency Operations Centre on 19 February. Campaign planning started immediately with UNICEF leading vaccine delivery, transport, and social mobilisation in coordination with the WHO and Global Polio Eradication Initiative (GPEI) partners. The door-to-door campaign is planned to start on 23 March in seven provinces reaching 4.2 million children under five years of age. By the end of February, all vaccines and materials were ordered for arrival in early March.

Nutrition

The ability to provide comprehensive nutrition services in Cabo Delgado, Nampula, and Niassa remains extremely limited, mainly caused by limited access to northern districts of Cabo Delgado, pipeline breaks of ready-to-use-therapeutic foods (RUTF) due to delays in procurement processes, adhering to COVID-19 restrictive measures and limited funding. UNICEF is prioritizing supplies for hard-to-reach and underserved areas including a new agreement with Médecins Sans Frontières to support wasting treatment in Palma District and potentially other areas in northern Cabo Delgado Province.

Through the mobile brigades described above, UNICEF, with partners CUAMM and AVSI, reached 2,862 CU5 years with nutrition screenings and treated 210 cases of wasting—154 moderate and 56 severe—in Metuge, Ancuabe, Ibo, Montepuez, Mecufi and Chiure Districts. Additionally, to support the prevention of malnutrition, nearly 3,000 children aged 6 to 69 months were supplemented with vitamin A and 809 were dewormed. Support was coupled with infant and young child feeding counselling reaching 26,160 caregivers through education sessions.



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To sustain the quality of the identification and treatment of severe acute malnutrition in Cabo Delgado, UNICEF and Ministry of Health facilitated a two-day review of the inpatient care program in February. Nutrition supervisors from 17 districts participated; the importance of sustaining the remote mentoring program, coupled with in-service support was

stressed as this resulted in the improvement of cure rates, from 86 percent to 91 per cent and reduction in defaulter rates, from 10 per cent to 6 per cent from 2020 to 2021.

As part of the response to Tropical Storm Ana, UNICEF supported nutrition cluster activations in three affected provinces, funded joint interagency assessments led by National Institute for Disaster Risk Reduction and Management and delivered 100 boxes of RUTF, 40 boxes of therapeutic milk and anthropometric materials. Similarly, UNICEF funded the implementation of integrated mobile brigades for a three-month period in hard-to-reach districts of Tete, Nampula and Zambézia through existing health structures.

Child Protection

In February, UNICEF's Child Protection programmes reached 10,451 children with immediate and life-saving child protection services in Cabo Delgado and Nampula Provinces. 752 child survivors of violence received case management services through trained social workers providing tailored support to families with additional referrals to community services. Thirty-four of these cases were children with disabilities who received support to access services and assistive devices. UNICEF and partners supported community discussions with adolescent girls on child marriage and sexual abuse reaching 4,200 children. UNICEF and partner Fundação para o Desenvolvimento da Comunidade expanded child protection services in Mueda providing case management services, alternative care and tracing services for unaccompanied and separated children, and safe spaces for recreational play and life skills for boys and girls. The capacity of 10 caseworkers and 30 psychosocial providers was enhanced through induction training.

UNICEF supported Child Protection response activities following Tropical Storm Ana in Tete Province. Two child-friendly spaces, with eight trained community volunteers, were established to provide safe spaces for children to play and learn while their families focus on rebuilding their homes. A child protection desk was established to identify any children in need of further support and pass key lifesaving messaging related to child protection risks including dangers and injuries during storms, prevention of separation, and caring for children in times of crisis.

Education

To alleviate the growing classroom size in host communities, 16 temporary learning spaces (TLS) of bamboo (locally available) and zinc sheets were erected in the districts of Pemba (10) and Chiure (6) out of a total of 75 planned to benefit about 7,500 children. In coordination with the Child Protection team, Early Childhood Development and Recreation Kits were delivered to partners in Mueda, Metuge, Ancuabe, and Metuge Districts. UNICEF continued with the distribution of leaner kits, hygiene kits and chalkboards in Chiure, Balama, Namuno, Ancuabe, Metuge, Mecufi, and Montepuez Districts. Preparation for the Teachers in Crisis Context training was held in February to agree on the training modules and subsequent training of technicians from the Provincial Education Directorate (DPE), Institute for Professional Training, and officials of organizations for replication. In Niassa, UNICEF distributed 300 plastic tarpaulins sheets, 10 rectangular tents, 20 chalkboards, 30 recreation kits, 20 school-in-bag kits, and 2,500 learners' kits.



UNICEF responded to education needs following Tropical Storm Ana with the provision of supplies to Zambézia and Nampula Provinces. Additional support was provided to the DPE for conducting impact assessments, distribution of materials, and establishing TLS tents prepositioned in these vulnerable provinces.

After two years of school closures due to COVID-19, schools reopened fully on 31st January. The long-term impact of the pandemic on education in Mozambique has created additional challenges. UNICEF is supporting accelerated learning programmes, catch-up classes and technical and vocational education and training, alternative learning, and mental health and psychosocial support as part of the response, paving the way to a steadier development response.

WASH

UNICEF reached over 25,000 people with water, 2,500 with sanitation, 8,600 with hygiene promotion, and 4,800 with hygiene kits this month. The borehole campaign was finalized with 58 new boreholes now operational in the province, completed in coordination with the government and private contractors.

UNICEF responded to Tropical Storm Ana through partnerships with the Mozambique Red Cross and Helvetas who provided hygiene kits to 10,000 people in accommodation centres. Agreements with partner Solidar allowed the construction of a new solar network and two new boreholes in the heavily affected province of Tete.



Social Protection and Cash-Based Programming

UNICEF, with the World Food Programme, supported the ongoing mobile financial service registration and payments in Zambézia, as part of the Government Social Protection Response to COVID-19.

Approximately 36,000 households out of the targeted 41,221 were registered for payments. From the number registered 25,000 received the first installment of MZN 4500, about \$70. Targeted households also received messages related to prevention of sexual exploitation and abuse, rights, expected conduct from humanitarian workers, nutrition, gender-based violence and the Linha Verde helpline through community committees, group discussion during payment sessions, and house visits in coordination with the Núcleo de Associações Femininas da Zambézia (NAFEZA).

Social and Behaviour Change and Accountability to Affected Populations

In February, 83,847 people—including 47,904 IDPs—were reached through health prevention messages on COVID-19, acute watery diarrhoea (AWD), and malaria prevention conducted by social mobilizers. 1,153 people requiring health support were referred to health facilities. Approximately 376,000 people over 15 years were reached with similar key messages, including prevention of sexual exploitation and abuse (PSEA) which were broadcast on Radio Mozambique and another 196,000 people reached by community radio programmes. Approximately 21,000 IDPs received key preventive and protective messages and behaviours through Collective Listening Centres in Montepuez, Ancuabe and Metuge Districts of Cabo Delgado, established by the Institute for Social Communication with UNICEF's support. In partnership with INGD and Radio Mozambique in Sofala and Cabo Delgado, over 60 adolescents (part of Child Parliament, RM and TVM in 8 provinces) were trained on the role of media in emergency preparedness and response to promote lifesaving behaviours and take protective actions for families and children.

In response to Tropical Storm Ana, UNICEF redirected regular resources to support health and nutrition social mobilization activities and to strengthen the intervention of community radios, multimedia mobile units and engagement of community leaders. Some 160,462 U-Report/SMS Biz users (97% adolescents and young people between 10-24 years old) received early warning, lifesaving and preventive measures messages to stay safe and out of risk zones. Additionally, 68 SMS BIZ counsellors received refresher training on emergency response actions. The outreach resulted in the receipt of, and response to, 300 questions on Tropical Storm Ana from adolescents and young people.

A TV spot on the second dose of COVID-19 vaccines was produced and broadcast in prime time to remind viewers of the importance of the vaccine. UNICEF continues to support the engagement of youth organisations and social media influencers to promote uptake of the COVID-19 vaccine among younger people.

Protection from Sexual Exploitation and Abuse (PSEA)

44 members of Associação Moçambicana de Obstetras e Ginecologistas (AMOG) were trained on PSEA, strengthening the capacity of mentors of health workers enrolled in the Maternal, Neonatal and Child Health for Primary Health Care program in Tete, Sofala and Zambézia. Additionally, 19 case management workers of partners Plan and World Vision received training on PSEA, enhancing their ability to identify SEA cases and raise awareness on rights and reporting channels among community members in Corrane and Namialo IDP sites.

Three construction, and four supervision companies, contracted by UNICEF for work in Murrupula District of Nampula Province, received PSEA training as a risk mitigation strategy. This is related to the global UNICEF pilot programme on PSEA assessment of suppliers, allowing for identification of high-risk suppliers and strengthening of their PSEA systems, increasing the safety of activities for suppliers that have direct contact with beneficiaries.

UNICEF supported the revision of the Linha Verde Humanitarian toll-free protocol, incorporating the standards of the Victims Assistance Protocol and Trauma-Sensitive Approach to improve the quality of services provided aligning it with international standards.

Humanitarian Leadership, Coordination, and Strategy

UNICEF leads the WASH, Education in Emergencies, and Nutrition Clusters, and the Child Protection Area of Responsibility at both national and sub-national levels. UNICEF-led cluster partners are supporting coordination and interagency needs assessment in accessible areas including those recently affected by tropical storms. UNICEF provided technical and logistic support to conduct rapid needs assessment in 10 districts of Zambézia, Tete and Nampula Provinces.

As the cluster lead for Nutrition, UNICEF participated in an intersectoral needs assessment in Palma in late February. Main needs and areas of strategic support to be provided to re-establish healthcare services in Palma were identified. Also during February, at the national cluster meeting, partners agreed to fast-track responses to cyclone season by prepositioning nutrition supplies, building the capacity of district-level nutrition in emergency focal points and joint fundraising to support needs assessments and nutrition response activities.

Partners working in the Child Protection Area of Responsibility (CPAoR) are reaching 43,940 children with mental health and psychosocial support services. 728 unaccompanied children have been supported with alternative care while going through tracing services to find parents or caregivers.

Human Interest Stories and External Media

<https://www.unicef.org/mozambique/historias/ensaio-fotogr%C3%A1fico-tempestade-tropical-ana-na-prov%C3%ADncia-da-zamb%C3%A9zia>

<https://www.unicef.org/mozambique/historias/cabo-delgado-unicef-e-parceiros-ajudam-fam%C3%ADlias-deslocadas-em-met%C3%BAge>

<https://www.unicef.org/mozambique/comunicados-de-imprensa/lote-de-vacinas-astrazeneca-contra-covid-19-chega-mo%C3%A7ambique-contando-com>

https://web.facebook.com/unicef.mozambique/posts/4835058139912417?_rdc=1&_rdr

<https://web.facebook.com/watch/?v=672942280819199>

Next SitRep: 20 April 2022

UNICEF Mozambique Humanitarian Action for Children Appeal: <https://www.unicef.org/appeals/mozambique>

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Annex A: Summary of Programme Results - Northern Mozambique Response 2022 (Cabo Delgado, Nampula and Niassa)

Sector/Indicator	Total needs	2022 target	UNICEF and IPs Response			Cluster/Sector Response		
			Disaggregation	Total results	Change since last report	2022 target	Total results	Change since last report
Health								
# children under 15 years receiving measles rubella vaccine	596,000	156,300	N/A	612	612			
# children under 5 years received mosquito nets	195,252	130,900	N/A	507	507			
# of sick children under 5 provided with consultations	195,252	96,400	Boys	6,688	2,545			
			Girls	7,246	2,758			
			Disability	-	-			
# children and women accessing primary health care in UNICEF-supported facilities	743,073	318,500	Boys	2,956	2,220			
			Girls	3,204	2,406			
			Women	29,675	21,467			
Disability	-	-						
Nutrition								
# of primary caregivers of children 0-23 months reached with messages on IYCF	157,842	61,533	NA	123,754	71,791		51,963	NA*
# of children 6-59 months receiving routine vitamin A supplementation	327,288	271,478	Boys	32,598	19,559	327,288		
			Girls	35,314	21,188			
			Disability	-	-			
# of children 6-59 months screened for acute malnutrition (MUAC)	74,700	74,700	Boys	32,598	19,559	74,700	13,039	NA*
			Girls	35,314	21,188		14,126	NA*
			Disability	-	-		-	*
# of children 6-59 months admitted for treatment of SAM	27,400	27,400	Boys	347	187	27,400	347	187
			Girls	376	203		376	203
			Disability	-	-		-	-
Child Protection								
# of UNICEF girls and boys in humanitarian contexts who have received individual case management	15,000	9,500	Boys	689	395		294	NA*
			Girls	649	356		293	NA*
			Disability	221	34		187	NA*
# of UNICEF children, adolescents, parents and caregivers provided with community-based MHPSS	776,811	197,000	Boys	2,706	2,543		3,469	NA*
# of women, girls and boys accessing GBV risk mitigation, prevention or response interventions		96,855	Girls	2,805	2,660			
			All	4,200	4,200	-	-	-
# of children & adults with access to safe and accessible channels to report SEA		96,855	All	4,385	4,385	-	-	-
Education								
# of out of school youth trained in practical skills through non-formal and formal professional training		2,500	Boys					
			Girls					
# of children with access to safe/clean TLS, schools, basic learning materials, personal hygiene and MHM kits.	386,200	172,969	Boys	20,094	9,250	382,404	24,228	0
			Girls	20,094	9,250		17,983	0
# of teachers trained in Teaching in Conflict Contexts and PSS		1,869	Boys	325	0			
			Girls	325	0			
WATER, SANITATION & HYGIENE								
# of people accessing a sufficient quantity of safe water for drinking and domestic needs	992,000	649,225	Male	16,911	11,966	992,000	20,962	12,408
			Female	18,330	12,964		22,708	13,442
			disability	-	-		-	-
# of people using safe and appropriate sanitation facilities	992,000	649,225	Male	4,423	1,202	992,000	7,232	406
			Female	4,792	1,303		8,353	439
			disability	-	-		-	-
# of people reached with hand-washing behaviour-change programmes	992,000	927,464	Male	8,453	4,157	992,000	19,437	12,017
			Female	9,157	4,503		21,057	13,019
			disability	-	-		-	-
# of people reached with critical WASH supplies	992,000	649,225	Male	6,381	2,323	992,000	18,377	13,097
			Female	6,914	2,517		19,908	14,188
			disability	-	-		-	-
Social Protection								
# households reached with unconditional cash transfers	-	51,000	-	0,0	0,0			
C4D/ accountability mechanisms								
# of people reached with SBCC	970,000	420,000	All	83,847				
# of people receiving information on PSEA and response	970,000	336,000	All	0				
# of adolescents and young people participating in SBC engagement actions	186,000	15,000	All	300				
# of people with access to established accountability mechanisms	500,000	500,000	Men	NA				

*Facing delays with cluster reporting as OCHA is still setting up the reporting mechanism for 2022

Annex B: Summary of Programme Results – Response Nationwide

Annex B: Summary of Programme Results – Response Nationwide				UNICEF and IPs Response			Cluster/Sector Response		
Sector/Indicator	Total needs	2022 target	Disagg-regation	Total results	Change since last report	2022 target	Total results	Change since last report	
Health									
# of children under 15 years receiving measles rubella vaccine during child health days in response to emergency	596,000	178,900	All	612	612				
# children under 5 years received mosquito nets (2 mosquito net per family)	225,150	150,000	Boys	351	243				
			Girls	382	264				
			Disability	-	-				
# of children under-five provided with consultations (Sick consultation in HF and MB)	112,560	110,500	Boys	10,213	2,545				
			Girls	11,064	2,758				
			Disability	-	-				
# of children and women accessing primary health care in UNICEF-supported facilities (CCS, CPN, FP)	405,750	365,000	Boys	4,344	2,220				
			Girls	4,707	2,406				
			Women	32,282	21,467				
			Disability	-	-				
Nutrition									
# of primary caregivers of children 0-23 months reached with messages on IYCF	157,842	79,000	All	125,468	71,791		53,677	NA*	
			Male	-	-				
			Female	-	-				
# of children 6-59 months receiving routine vitamin A supplementation	545,085	283,160	Boys	33,533	19,918	414,123	13,615	NA*	
			Girls	36,327	21,577		14,750	NA*	
			Disability	-	-		-	-	
# of children 6-59 months screened for acute malnutrition (MUAC)	545,085	443,850	Boys	33,533	19,918	414,123	13,615	NA*	
			Girls	36,327	21,577		14,750	NA*	
			Disability	-	-		-	-	
# of children 6-59 months admitted for treatment of SAM		34,880	Boys	438	255	34,880	438	255	
			Girls	475	277		475	277	
			Disability	-	-		-	-	
Child Protection									
# of UNICEF girls and boys in humanitarian contexts who have received individual case management	15,000	10,000	Boys	689	395	15,000	486	NA*	
			Girls	649	356				
			Disability	221	34				
# of UNICEF children, adolescents, parents and caregivers provided with community-based MHPSS	776,811	209,000	Boys	2,706	2,543	440,190	3,469	NA*	
			Girls	2,805	2,660				
# of women, girls and boys accessing GBV risk mitigation, prevention or response interventions		102,600	All	4,200	4,200	-	-	-	
# of children & adults with access to safe and accessible channels to report SEA		102,610	All	4,385	4,385	-	-	-	
Education									
# of out of school youth trained in practical skills through non-formal and formal professional training		2,500	Boys						
			Girls						
# of children with access to safe/clean TLS, schools, basic learning materials, personal hygiene and MHM kits.	860,864	262,740	Boys	20,094	9,250	590,345	43,311	0	
			Girls	20,094	9,250				
# of teachers trained in Teaching in Conflict Contexts and PSS		1,869	Boys	325	0		325	0	
			Girls	325	0		325	0	
WATER, SANITATION & HYGIENE									
# of people accessing a sufficient quantity of safe water for drinking and domestic needs	950,000	700,000	Male	16,920	11,966	850,000	21,202	12,648	
			Female	18,330	12,964		22,968	13,702	
			disability	-	-		-	-	
# of people use safe and appropriate sanitation facilities	1,000,000	700,000	Male	4,953	1,202	900,000	8,383	1,027	
			Female	5,367	1,303		9,082	1,113	
			disability				-	-	
# of people reached with hand-washing behaviour-change programmes	1,260,000	1,000,000	Male	8,453	4,157	1,000,000	19,437	12,017	
			Female	9,157	4,503		21,057	13,019	
			disability				-	-	
# of people reached with critical WASH supplies	860,000	700,000	Male	11,810	6,312	850,000	22,366	17,086	
			Female	12,795	6,838		24,229	18,509	
			disability	-	-		0	-	
Social Protection									
# households reached with unconditional cash transfers		63,000	NA	12,583	0				
C4D/ accountability mechanisms									
# of people reached with SBCC	970,000	467,000	All	83,847	83,847				
# of people receiving information on PSEA and response	970,000	373,600	All	1,168,000	606,401				
# of adolescents and young people participating in SBC engagement actions	186,000	39,000	All	300					
# of people with access to established accountability mechanisms	500,000	500,000	All						

*Facing delays in cluster reporting as OCHA is still setting up the reporting mechanism for 2022

Annex C Funding Status*

Sector	Requirements	Funds available		Funding gap*	
		Humanitarian resources received in 2022	Resources available from 2021 (Carry-over)	\$	%
Health	7,327,163	7,831	2,032,730	5,286,602	72%
Nutrition	7,771,410	-	-	7,771,410	100%
Child Protection	19,061,650	-	1,181,915	17,879,735	94%
Education	16,593,907	-	488,848	16,105,059	97%
WASH	30,952,152	-	9,354,089	21,598,062	70%
Social Protection	13,065,862	-	1,781,797	11,284,065	86%
Social and Behaviour Change, AAP	3,979,800	-	403,141	3,576,659	90%
Total	98,751,944	7,831	15,242,520	83,834,239	85%

* In the funding gap it is deducted \$332,646 which are unallocated yet