Mali

**HIGHLIGHTS**

- Mali is experiencing a multidimensional crisis that is driven by conflict, sociopolitical instability, climate change and the impact of the war in Ukraine. Around 12.9 million people are affected. Of these, 7.5 million people - one in three Malians - need humanitarian assistance. Grave violations of children's rights continue, while displacement remains a major concern with 422,620 people internally displaced.

- UNICEF will implement an integrated, coordinated and gender-sensitive response that contributes to building peaceful and inclusive communities while strengthening the linkages between humanitarian action, development and peace. Interventions are designed to meet the needs of the most vulnerable children and communities.

- In 2023, UNICEF is requesting US$114.8 million to reach 2.9 million people in Mali, including 2.5 million children, with critical humanitarian assistance. Sectors requiring the most funding are nutrition, child protection, education and water, sanitation and hygiene (WASH).

---

**KEY PLANNED TARGETS**

- **200,000** children vaccinated against measles
- **206,700** children with severe wasting admitted for treatment
- **372,700** children/caregivers accessing community-based mental health and psychosocial support
- **482,000** people accessing a sufficient quantity and quality of water

**IN NEED**

- 7.5 million people
- 5.1 million children

**TO BE REACHED**

- 2.9 million people
- 2.5 million children

**FUNDING REQUIREMENTS**

- **US$ 114.8 million**

---

Figures are provisional and subject to change upon finalization of the inter-agency planning documents.
Mali is facing multiple crises: insecurity in the central and northern parts of the country that has strong subnational ramifications (especially in the Liptako Gourma region); intercommunal conflicts; sociopolitical instability; adverse weather events linked to climate change; the protracted effects of the coronavirus disease 2019 (COVID-19) pandemic; and the impact of the war in Ukraine. Overall, 12.9 million people in Mali are affected. The 2022 rainy season was marked by heavy rains in several localities, causing crop losses, the disruption of agricultural livelihoods and the destruction of productive assets. The humanitarian situation has deteriorated, and 7.5 million people need assistance, including 3.9 million women, 5.1 million children and 1.1 million people with disabilities. As a result of ongoing attacks against civilians, the number of people who are internally displaced has steadily increased and now totals 422,620 people (54 per cent women and 63 per cent children). Hostilities often result in grave violations of child rights, including killing and maiming and recruitment and use by armed groups. There is a high risk of gender-based violence. Throughout the country, 1.6 million children need protection. Attacks and threats on education infrastructure, initially limited to the central and northern regions, have now expanded to the southern part of the country, affecting 1,766 schools, 500,000 children and 10,000 teachers in insecure regions.

In the northern and central regions, more than 96 per cent of internally displaced people live in areas where access to water is below the national average. Mali has one of the highest mortality rates due to unsafe water, sanitation and hygiene in Africa. Global acute malnutrition prevalence exceeds 10 per cent in several areas; more than 275,700 children under 5 years of age are suffering from severe wasting and food insecurity affects 3.6 million people. The country faces recurrent disease outbreaks, including measles and polio. In Mali, 4.4 million people need access to basic health services. Increasing constraints on humanitarian access are a major concern, especially in areas lacking essential social services and infrastructure.

Mali ranks 186 out of 191 countries on the Human Development Index, and 49.7 per cent of households live below the income poverty line. Gender inequalities also impact the realization of child rights and hinder access to essential services. The political situation in Mali remains unstable, with changes of power observed in 2020 and 2021, and this instability could undermine the government’s ability to provide essential social services, and also cause delays in the humanitarian response.

### SECTOR NEEDS

- **4.4 million** people in need of health assistance
- **2.5 million** people in need of nutrition assistance
- **1.6 million** children in need of protection services
- **2.9 million** children in need of education support
- **3.7 million** people lack access to safe water

### STORY FROM THE FIELD

Since February 2022, UNICEF has been supporting mobile clinics for displaced people from the Ansongo district who have fled to elsewhere in the Gao region. The mobile clinics offer multiple services to children and parents, especially mothers. Services include routine immunization, counselling (on infant and young child feeding and on safe water, sanitation and hygiene practices), health, nutrition and birth registration services. The clinic travels on average 7-10 days per area. Mariam Touré is one of the health workers providing the services.

Mariam Touré, a health worker providing mobile health clinic services, meets with residents at a site for internally displaced people in Bawa, Gao, northern Mali.
UNICEF will focus on strengthening the linkages between humanitarian action, development and social cohesion to build inclusive and resilient communities and systems. UNICEF will emphasize community engagement, risk communication and the participation of women and girls; scale up accountability to affected populations; expand gender-, youth- and disability-responsive programming; and strengthen the principle of ‘do no harm’.

UNICEF will provide technical assistance to authorities to strengthen emergency preparedness and response system at the national and sub-national levels.

UNICEF will build on its comparative advantage in localization to foster linkages with national social protection systems by ensuring a child-sensitive approach and strengthening of coordination and governance systems. Financial support will facilitate families’ access to goods and services that meet the basic needs of children, in line with Grand Bargain commitments.

UNICEF will lead the WASH, education and nutrition clusters and the child protection area of responsibility to ensure an integrated and coordinated response while strengthening conflict-sensitive, gender-responsive and child-centered policies and local development plans.

Through an integrated package of services, UNICEF will address both acute and chronic malnutrition through early detection of wasting and provision of quality nutrition care to severely wasted children. To reduce malnutrition in the long-term, UNICEF’s response aims to increase the proportion of infants aged 0-5 months who are exclusively breastfed to 46 per cent and the proportion of children aged 6-23 months who are receiving the minimum dietary diversity to 24 per cent (by 2025).

UNICEF will continue to support national immunization campaigns, outbreak response and essential maternal, neonatal and child health services. Systems strengthening will include the provision of equipment, medicines and commodities. Infection prevention and control interventions will be implemented in communities and facilities, and crisis-affected people will gain access to safe water and adequate sanitation.

UNICEF and partners will undertake activities for gender-based violence risk mitigation and prevention of sexual exploitation and abuse in all sectors. Children experiencing psychosocial distress, children released from armed groups, unaccompanied and separated children, and survivors of gender-based violence will be reached with services including mental health and psychosocial support, family reunification and socioeconomic reintegration. Strengthening the Monitoring and Reporting Mechanism on grave violations of child rights will enhance evidence-based advocacy and response.

The most vulnerable children will gain access to quality education, in protective, safe and clean learning environment, including through conflict and disaster risk reduction and alternative education activities.

### Health
- 200,000 children vaccinated against measles
- 352,000 children vaccinated against polio

### Nutrition
- 206,700 children 6-59 months with severe wasting admitted for treatment
- 496,600 primary caregivers of children 0-23 months receiving infant and young child feeding counselling
- 381,400 children 6-59 months receiving micronutrient powder
- 2,045,900 children 6-59 months receiving Vitamin A supplementation

### Child protection, GBVIE and PSEA
- 372,700 children, adolescents and caregivers accessing community-based mental health and psychosocial support
- 40,400 women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions
- 124,000 people with safe and accessible channels to report sexual exploitation and abuse by personnel who provide assistance to affected populations
- 700 children who have exited an armed force and groups provided with protection or reintegration support
- 1,200 unaccompanied and separated children provided with alternative care and/or reunified

### Education
- 155,000 children accessing formal or non-formal education, including early learning
- 430,000 children receiving individual learning materials

### Water, sanitation and hygiene
- 482,000 people accessing a sufficient quantity and quality of water for drinking and domestic needs
- 50,000 people accessing appropriate sanitation services
- 390,000 people reached with critical WASH supplies

### Social protection
- 15,000 households reached with UNICEF-funded humanitarian cash transfers
- 70,000 households benefitting from new or additional social assistance (cash/in kind) measures from governments with UNICEF-technical assistance support

### Cross-sectoral (HCT, SBC, RCCE and AAP)
- 12,383,400 people reached through messaging on prevention and access to services
- 800,000 people who participate in engagement actions
- 250,000 people sharing their concerns and asking questions through established feedback mechanisms

---

Progress against the latest programme targets is available in the humanitarian situation reports: [https://www.unicef.org/appeals/mali/situation-reports](https://www.unicef.org/appeals/mali/situation-reports)

This appeal is aligned with the revised Core Commitments for Children in Humanitarian Action, which are based on global standards and norms for humanitarian action.

Programme targets are provisional and subject to change upon finalization of the inter-agency planning documents.
FUNDING REQUIREMENTS IN 2023

UNICEF is requesting US$114.8 million in 2023 to meet the humanitarian needs of crisis-affected children in Mali. Planned work complements the 2020-2024 country programme document, which focuses on strengthening the linkages between humanitarian action and development programmes, and the multi-year Humanitarian Response Plan.

This 2023 appeal no longer includes COVID-related social protection activities, which have now been integrated into UNICEF’s regular programming, resulting in a reduced funding requirement.

Emergency needs in Mali related to conflict, forced displacement and reduced access to social services have continued to rise over recent years, especially in newly affected localities like Menaka, Kidal and Mopti. Compared with 2022, the budget for nutrition has increased by 13 per cent due to higher targets of interventions in this sector. UNICEF will continue to strengthen its efforts to provide a comprehensive and multisectoral humanitarian response for the most vulnerable populations and communities in a context of increasing humanitarian needs.

Without sufficient and timely funding, UNICEF will be unable to facilitate access to quality, critical basic social services (including protection for 2.5 million children affected by the crisis), respond to the needs resulting from the fragilized education system or support the national response to the continuing nutrition crisis.

*This includes costs from other sectors/interventions: Social protection (5.4%), Cross-sectoral (HCT, SBC, RCCE and AAP) (2.1%), Emergency preparedness (2.0%).

<table>
<thead>
<tr>
<th>Sector</th>
<th>2023 requirements (US$)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health</td>
<td>10,432,800</td>
</tr>
<tr>
<td>Nutrition</td>
<td>31,259,097</td>
</tr>
<tr>
<td>Child protection, GBViE and PSEA</td>
<td>22,884,613</td>
</tr>
<tr>
<td>Education</td>
<td>20,168,798(^36)</td>
</tr>
<tr>
<td>Water, sanitation and hygiene</td>
<td>19,200,598</td>
</tr>
<tr>
<td>Social protection</td>
<td>6,233,882</td>
</tr>
<tr>
<td>Cross-sectoral (HCT, SBC, RCCE and AAP)</td>
<td>2,381,400</td>
</tr>
<tr>
<td>Emergency preparedness</td>
<td>2,270,000</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>114,831,188</strong></td>
</tr>
</tbody>
</table>

Who to contact for further information:

Andrea Berther  
Representative, Mali, a.i.  
T +223 75 995 444  
aberther@unicef.org

Manuel Fontaine  
Director, Office of Emergency Programmes (EMOPS)  
T +1 212 326 7163  
mfontaine@unicef.org

June Kunugi  
Director, Public Partnerships Division (PPD)  
T +1 212 326 7118  
kunugi@unicef.org
1. UNICEF deactivated its Level 3 Sustained Phase for the global COVID-19 pandemic response. All activities related to COVID-19 pandemic response, including programme targeting and funding requirements, have been shifted into regular development programming and operations. While UNICEF’s Level 3 emergency response phase of the COVID-19 pandemic was deactivated, the organization is continuing to respond to the COVID-19 pandemic and its impact on children, their families and their communities and on the social systems they rely on.

3. UNICEF activated its Corporate Emergency Level 2 Scale-up Procedure for Mali for the following period: 18 July 2022 to 18 January 2023. UNICEF Emergency Procedures are activated to ensure a timely and effective response to all crises. The emergency procedures provide a tailored package of mandatory actions and simplifications required for all offices responding to Level 3, Level 2 and Level 1 humanitarian situations.


7. UNICEF is committed to needs-based targeting, which means covering the unmet needs of children; and will serve as the provider of last resort where it has cluster coordination responsibilities.

8. The 2022 data are carried forward until the 2023 Humanitarian Needs Overview and Humanitarian Response Plan are finalized.

10. This figure is calculated using highest coverage programme targets of children aged 6-59 months to be reached with vitamin A supplementation every six months (2,045,861); 10 per cent of people accessing a sufficient quantity of safe water for drinking and domestic needs, representing children aged 15-18 years (38,560); children to be reached with individual learning materials (430,000); and unaccompanied and separated children to be reached with family-based care or a suitable alternative (1,200). This total includes 51 per cent women/girls and 14 per cent people/children with disabilities. UNICEF is committed to needs-based targeting, which means covering the unmet needs of children; and will serve as the provider of last resort where it has cluster coordination responsibilities.

11. A study commissioned in 2022 by UNICEF and carried out by the Observatoire du Développement Humain durable et de la Lutte contre la Pauvreté, on institutional changes, Economic Community of West African States (ECOWAS) sanctions and the war in Ukraine reveals that both crises have led to an increase in price levels in Mali, impacting already low household incomes. The study indicates that prices of imported products rose by 7.7 per cent in 2022 as the economic sanctions and the Ukraine crisis disrupted the supply chain of such products as fuel, gas, rice and wheat.


15. DNDS, Matrice de Suivi des Déplacements (DTM), Août 2022.


28. Ibid.

29. Ibid.

30. This appeal is aligned with the revised Core Commitments for Children in Humanitarian Action, which are based on global standards and norms for humanitarian action.

31. UNICEF is committed to supporting the leadership and coordination of humanitarian response through its leadership or co-leadership of cluster coordination for the WASH, Nutrition and Education Clusters and the Child Protection Area of Responsibility. All cluster coordinators costs are included into sectoral programme budgets.

32. UNICEF is committed to empowering local responders in humanitarian crises in a variety of ways. The revised Core Commitments made investing in strengthening the capacities of local actors in the humanitarian response a mandatory benchmark for UNICEF action. A more localized response will improve humanitarian action and is fundamental to achieving better accountability to affected populations.

33. This represents 40 per cent of the cluster target. The balance is covered by other actors as agreed within the cluster.

34. Targets and budgets are reduced compared with 2022, where there was a strong focus on the response to the coronavirus disease 2019 (COVID-19) pandemic. For 2023, UNICEF has prioritized interventions on localities newly affected by the crises (Menaka, Kidal, Mopti), and on nutrition- and food security-sensitive interventions.

35. The population targeted is higher than the total number of people/children to be reached because the target includes mass media outreach.

36. The education budget includes activities to support access to education for 155,000 affected children (temporary learning spaces, community learning centres, support for reopening schools, community mobilization, etc.). In addition, 450,000 children are targeted to benefit from individual learning kits. The quality of education and the protective learning environment will also be supported and promoted through teachers and other educational personnel trained in pedagogy and didactic, mental health and psychosocial support, community disaster risk reduction and other areas.