



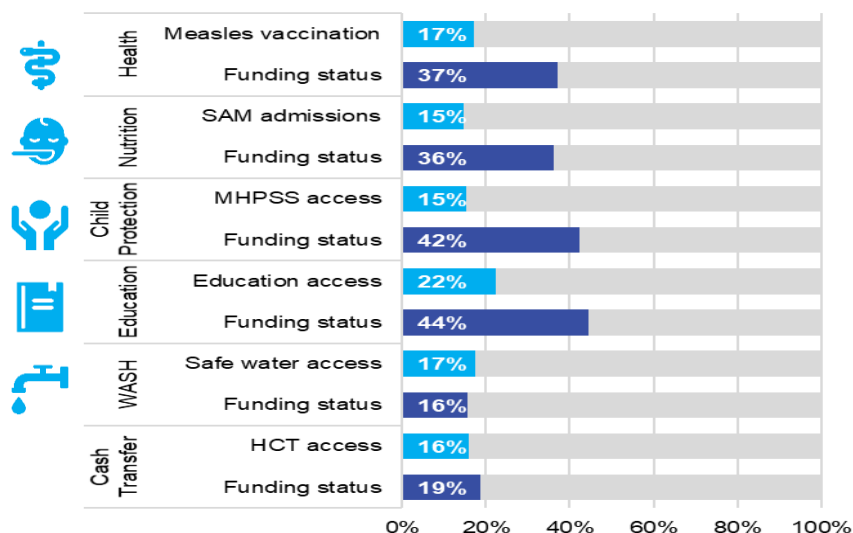
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Reporting period: March to April 2023

## Highlights

- Uganda remains vigilant and prepared for waterborne diseases resulting from flooding during the March-April-May (MAM) rainy season, which has caused fatalities, property damage and displacement in various regions of the country.
- Preparedness efforts were stepped up in the at-risk districts neighbouring Tanzania to strengthen capacity to respond in the event a Marburg case is confirmed in Uganda.
- Measles outbreak was confirmed in Koboko, a third refugee-hosting district, during this reporting period. This was caused by a refugee influx from South Sudan, where there is currently an active measles outbreak.
- From January to date, 9,870 children have been admitted for treatment of severe acute malnutrition (SAM).
- 43,982 children accessed formal or non-formal education, including early learning as of April 2023.
- 28,800 people were reached with sufficient quantity and quality of water for drinking and domestic use.
- 104,125 children have been vaccinated against Measles as of April.

## UNICEF's response and funding status\*



# Uganda Country Office

## Humanitarian Situation Report No.2

March - April 2023

unicef   
for every child

## Situation in Numbers

**7,400,000**



# of children in need of humanitarian assistance (UNICEF HAC 2023)

**13,800,000**



# of people in need (UNICEF HAC 2023)

**1,900,000**



# of children to be reached with humanitarian assistance (UNICEF HAC 2023)

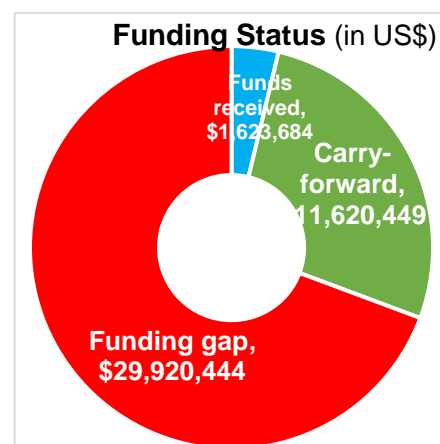
**13,800,000**



# of people to be reached with humanitarian assistance (UNICEF HAC 2023)

## UNICEF Appeal 2023

**US\$43.2 million**



\*UNICEF results are attributed to both ORE funding received, as well as reprogrammed funds, regular and other resources.

## Funding overview and partnerships

This year, 2023, UNICEF is appealing for US\$43.2 million to sustain life-saving services for women and children in Uganda affected by multiple hazards. UNICEF has so far received US\$1.6 million from the Government of Japan and an internal allocation from the Global Humanitarian Thematic Fund (GHTF) to mitigate the impacts of climate change on food security and livelihoods in Karamoja sub-region. UNICEF has carry-over funds from 2022 totalling to US\$11.6 million, generously contributed by various donors including the UK Government, through the Foreign, Commonwealth, and Development Office (FCDO); Government of Japan; US Fund for UNICEF; Spanish Committee for UNICEF; German Committee for UNICEF, United Kingdom of Great Britain and Northern Ireland, the Netherlands Committee for UNICEF; United States Agency for International Development (USAID); United Nations Office for the Coordination of Humanitarian Affairs (OCHA) - Central Emergency Response Fund (CERF) Secretariat; Global Humanitarian Thematic Fund (GHTF), European Community Humanitarian Office (ECHO) and the Government of the Netherlands. UNICEF is grateful to all donors for their contributions. However, the HAC appeal still has a funding gap of US\$29.9 million or 69 per cent which if filled, will enable UNICEF and its partners to provide lifesaving services to vulnerable women and children in humanitarian situations.

## Situation overview and humanitarian needs

### Hydrometeorological hazards

According to the Office of the Prime Minister (OPM) and the International Organization for Immigration (IOM),<sup>1</sup> 26,857 individuals were reportedly hit by disasters internally displacing 636 people during this reporting period. 212 individuals were injured, 527 houses were completely destroyed and 98 water facilities and three health facilities were damaged. This is mainly attributed to the March- April -May (MAM) rains. 31 per cent of the affected population are children. In the first four months of 2023, about 20 districts experienced disasters including floods, drought, landslides, heavy winds and hailstorms. The impact of these disasters on the population has noticeably increased with a total of 31,287 people affected as of now. Reports from Kasese, Rukungiri and Kisoro districts highlight the severity of the situation. While the eastern and Karamoja regions continue to face drought, other parts of the country have been hit by heavy rains causing floods, storms and landslides.

Karamoja typically experiences rainfall from April to September. However, heavy rains in March resulted in a cumulative rainfall total exceeding 145 percent of the long-term average across the region, according to Famine Early Warning Systems Network (FEWSNET). Although these rains were beneficial for rangeland resources such as pasture and water and prompted some early planting activity, many soils remained too saturated to work. In addition, ongoing insecurity and insufficient access to agricultural inputs are expected to result in a below-normal area of planting. Poor households in Karamoja face chronic challenges in accessing seeds, and the situation has worsened in recent years due to consecutive seasons of below-average crop production, low income-earning, and high prices for seeds. Even more significantly, insecurity continues to hinder access to agricultural land, which is often located far from the manyattas (enclosed homesteads). These factors have contributed to a nutrition crisis in the sub region that is expected to continue.

In March and April, UNICEF helped implement the 2023 Karamoja Food Security and Nutrition Assessment (FSNA) which gathered up-to-date data on malnutrition in children under five in the area. The preliminary report will be validated in May 2023, but the available evidence indicates that the global acute malnutrition slightly dropped to 11.3 per cent from 15 per cent in 2022. The prevalence of severe acute malnutrition remained at 2 per cent. The districts of Kaabong, Kotido and Amudat remain at emergency level. UNICEF is leading the FSNA for Refugee settlements and host communities which is anticipated to take place in May/June 2023. The preparatory activities, including the recruitment of an agency to support with the training of the data collectors, data analysis and report writing is ongoing.

### EVD

The Ministry of Health (MoH), World Health Organisation (WHO) and partners including UNICEF continue to implement the key priorities of the “180 days Recovery Response Plan”, that were developed following the declaration of Uganda Ebola Virus Disease (EVD) free in January. A total of 48 activities are being followed up. Currently, seven activities in the recovery plan are complete, 27 are on track while 14 are still pending. UNICEF finalized its post EVD response plan and completed its internal After-Action Review (AAR) that documented best practices, gaps, lessons learned and suggested areas of improvement. The UNICEF learning focused evaluation for preparedness to Level 2 Ebola emergency is in progress.

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<sup>1</sup> Uganda Multi-Hazard DRR Infographic Sheet as of April 2023.

## Marburg

In March 2023, a Marburg outbreak was declared in Bukoba District of Tanzania's Kagera Region. In response, the Uganda Ministry of Health (MoH) and WHO, along with other partners, conducted a rapid risk assessment (RRA). The assessment identified Kyotera, Rakai, Isingiro, Masaka and Kalangala as the high-risk districts for a potential outbreak due to their shared border with Tanzania, active trade activity, and the availability and mobility of refugees hosted in Isingiro District. As of the end of April 2023, Tanzania had reported eight Marburg cases with five deaths, including two health workers.

## Measles

A Measles outbreak has been confirmed in Koboko district among the South Sudanese refugees at the reception centre following the active outbreak in South Sudan. Lamwo and Kiryandongo districts are no longer in active outbreak but are still conducting surveillance and monitoring. UNICEF, UNHCR, AVSI, and WHO have supported the district in responding to the measles outbreak.

## Cholera

The confirmation of cholera outbreaks in 12 African countries, some of which are neighbouring to Uganda, poses a high cholera risk for Uganda. Currently, five neighbouring countries including Kenya, South Sudan, Tanzania, DRC and Burundi are experiencing cholera outbreaks, and the flooding situation reported across Uganda following the return of the rains greatly increases the risk of a cholera outbreak. Throughout the reporting period, UNICEF continued to work with the MoH and WHO to support the finalization of the country's cholera strategic response plan 2023-2030, while prioritizing preparedness activities for possible cholera outbreaks in the country. In response to the outbreak in the region, UNICEF developed a costed preparedness and response plan against cholera that focuses on risk communication and community engagement (RCCE), prepositioning of supplies, Infection Prevention and Control (IPC)/Water Sanitation and Hygiene (WASH) support, and continuity of essential services.

## Meningitis

During this reporting period, an outbreak of Meningitis was confirmed in Obongi District in the South Sudanese refugee settlement. By the end of April, the district had recorded 23 cases, of which three were confirmed, and 20 suspected with one reported death within the treatment facility established at Belameling Health Centre II. Only one individual from the host community was affected, while the rest were refugees). The MoH working with WHO deployed a Rapid Response Team (RRT) and a risk assessment was conducted as the district continued to take leadership in the response with support of WHO, Medical Teams International (MTI) and UNHCR. UNICEF provided technical support to the District Task Force (DTF) meetings. Despite limited funding for local operations, the district activated all response pillars. However, the district faces challenges such as delays in obtaining results for samples sent to Central Public Health Laboratories (CPHL) in Kampala, limited Information, Education Communication (IEC) materials on meningitis and limited funding to the DHT to support the response efforts at the sub-national level.

## Other Disease Outbreaks

During the reporting period, two cases of Crimean Congo Hemorrhagic Fever (CCHF) were confirmed in Wakiso and Rakai districts. By end of April, there was no new case reported in these districts. 19 cases of Rift Valley Fever (RVF) were confirmed in the districts of Kazo, Mbarara and Mbarara city.

## Refugees

Uganda is currently hosting over 1.5 million refugees and asylum-seekers, with 56 per cent of these being children. Due to ongoing conflicts in the Democratic Republic of Congo and South Sudan, Uganda is continuously receiving new arrivals, making the situation in the country unpredictable. In 2023 alone, 26,717 individuals (53 per cent from South Sudan and 47 per cent from DRC) have arrived in the country. 295 refugees were received in Arua following the deadly conflict in North Sudan. Nyakabande and Lokung Transit and collection centres remain full beyond capacity, while relocation of refugees from Lokungu town in Arua remains a challenge due to ethnic differences and sighted safety issues. Alternative settlements may be necessary to address this issue. Overall, the protection space remains conducive for the delivery of international protection and assistance.

## Summary analysis of programme response

### Health

UNICEF has been actively collaborating with the MoH both nationally and sub-nationally to ensure the integration of COVID-19 vaccination into routine vaccination programmes. Additionally, UNICEF is providing support to the government to maintain the momentum of the accelerated mass vaccination against COVID-19 (AMVAC). UNICEF has

continued to provide support to the post EVD recovery response plan in areas of IPC/WASH, Mental Health and Psychosocial Support (MHPSS) working through Butabika RRH and coordination to support the strengthening of emergency operation centres of Jinja and Mubende districts while ensuring adequate measures are in place for continuity of services in case of any outbreak.

UNICEF participated in the MoH led mission to Mutukula border post under the leadership of the Minister of health for an assessment field mission and support to the local health authorities. As part of preparedness efforts, UNICEF supported the districts of Kyotera and Isingiro to develop their district Marburg preparedness and response plans, participated in and deployed four RCCE officers to support RCCE activities on Marburg infection. UNICEF has since developed a Marburg preparedness and response plan to guide the response in case of active outbreak but also use the plan to mobilize resources.

UNICEF supported a mass Measles Rubella campaign in Koboko District covering six sub-counties. The organisation provided monitoring and technical support to the District Health Team (DHT) of Koboko.

Cumulatively, 104,125 children were vaccinated against measles and 222,078 people accessed primary health care at UNICEF supported facilities.

## **Nutrition**

During this reporting period, UNICEF provided technical assistance to MoH, RRHs and District Local Governments (DLGs) in nutrition service delivery including prepositioning of nutrition supplies and capacity strengthening to ensure facilities are equipped to deliver quality nutrition services to the affected population and individuals. UNICEF supported MoH to convene the nutrition Technical Working Groups and sub-groups aimed at monitoring and evaluating the Integrated Management of Acute Malnutrition (IMAM) and nutrition emergencies. UNICEF continued to support the MoH in monitoring the use of Ready to Use Infant Formula (RUIF) in different hospitals which had Ebola Treatment Units (ETUs) for EVD to ensure it is appropriately managed. Additional RUIF was delivered to Mubende RRH which still has children in need of RUIF while retrieval of RUIF from other hospitals including Fort Portal, Mulago, Naguru, Masaka and Jinja which no longer have children affected by EVD in care is ongoing.

UNICEF through Kabale RRH conducted a comprehensive on job mentorship and coaching on IMAM for 55 health workers at five health facilities in the host community and refugee transit camp in Kigezi sub region. 244 health workers (157 male, 87 female) from 24 facilities, and 195 Village Health teams (VHTs) (135 male, 60 female) from Arua city, Madi Okollo, Terego, Koboko and Yumbe in West Nile were trained on community Maternal, Infant, Young child and Adolescent Nutrition (MIYCAN). Additionally, 57 care groups composing of 571 volunteer lead mothers were formed to support community MIYCAN counselling and growth monitoring including identification and referral of child wasting. In Karamoja, 355 health workers were trained on Nutrition supplies management. In Soroti, 150 frontline health workers were trained on IMAM surge model and Health Management and Information System (HMIS) reporting for Nutrition. District Disaster Management Committees (DDMCs) and Subcounty Disaster Management Committees in Kaabong, Moroto and Amudat were trained on emergency preparedness and response including for the ongoing nutrition crisis. Resulting from this support, 9,870 children received SAM treatment and 255,508 primary caregivers of children aged 0-23 months received infant and young child feeding counselling as of April 2023.

The programme is facing several challenges, including stockouts of therapeutic milk due to delays in the delivery of supplies ordered offshore. The insecurity in Karamoja is also impacting movement of beneficiaries and implementers especially in Kotido and Karenga districts. There are also stock outs of essential medicines required for complementary treatment of malnutrition such as amoxicillin and dewormers. There have been delays in the government clearance of vitamin A capsules imported by UNICEF for use during Integrated Child Health Days (ICHDs) in April 2023. These challenges need to be addressed to ensure the successful implementation of the programme.

## **Child Protection**

During the reporting period, UNICEF, in partnership with Save the Children, provided critical life-saving protection services reaching a total of 6,680 individuals. Of this total, 5,738 were children (2,893 boys, 2,845 girls), and the remaining 942 (335 male, 607 female) were adults, with a breakdown of 3,228 males, 3,452 females. The services provided included mental health and psychosocial services (MHPSS) in response to the protection needs of refugee children and the post EVD context. Moreover, 148 new unaccompanied and separated children (91 boys, 3 girls), received appropriate alternative care services. 173 open cases of unaccompanied and separated children/children at risk, (79 boys, 94 girls), were followed-up for proper case management. Five children (all girls) affected by sexual violence were supported with multi-sectoral protection services.

UNICEF supported the districts of Kyegegwa, Mubende and Kassanda to plan for interventions aimed at supporting communities affected by the EVD outbreak, to strengthen resilience, preparedness and readiness for future emergencies and quality MHPSS services for affected children and women. As a result, a total of 178 community-based structures were earmarked to benefit from training on the para-social workers (PSW) national training manual including provision of basic PSS. The same support was extended to Isingiro DLG where 150 para-social workers were identified to benefit from the PSW training with the goal of aligning coordination structures within the refugee settlements to better serve the needs of refugee children and strengthen the inclusion of refugee children in the national system.

To address the negative social norms related to children's protection in emergency contexts, UNICEF continued to work through partners, government structures and community volunteers reaching 4947 children (2528 boys, 2419 girls) and 4,309 adults (2,053 female, 2256 male) with social, and behavior change communication interventions. In the same period, 329 (159 boys; 170 girls) who experienced violence accessed multi-sectoral services including GBV response interventions, while 9 children (2boys; 7girls) who experienced or were at risk of sexual violence received at least one kind of multi-sectoral support. In addition, 5,307 persons (2,331 male, 2976 female) of which 2885 (1072 male, 1813 female) were adults and 2422 children (1259 boys, 1163 girls), were reached with VAC prevention messaging, GBV risk mitigation, prevention and sexual exploitation and abuse (SEA) awareness prevention and reporting in addition to having access to safe channels to report SEA. 124 mothers, fathers and caregivers were empowered with positive parenting skills.

In the Karamoja districts of Moroto, Kotido and Kaabong, child protection prevention and response interventions were provided, and the following results were achieved. Up to 309 children (143 boys and 166girls) who experienced different forms of violence, received health, social work, justice and law enforcement services delivered by front-line workers.

### **Gender Based Violence (GBV) & Protection from Sexual Exploitation and Abuse (PSEA)**

As of April 2023, a total of 33, 327 adults and children (15,007 male, 18,320 female), accessed one of UNICEF PSEA reporting channels. Despite the deactivation of L2, Uganda remains highly vulnerable to public health emergencies, natural and human induced hazards which have unprecedented impacts on the most vulnerable groups such as children, the elderly, adolescent girls, persons with disability and women. As a result, there is a pressing need for strengthened PSEA systems and policies including ease of access to a safe and confidential SEA reporting channel that resonates with the communities. UNICEF supported 44 implementing partners' staff (20 male, 24 female) to benefit from PSEA capacity building initiatives. As part of its support to the UN system wide approach on PSEA, the country office has provided both technical and financial support for a three days interagency PSEA Training of Trainers (ToT), benefitting 30 UN PSEA focal persons (16 female,14 male). The Country Office has begun rolling out the 'UN Protocol on allegations of SEA involving implementing partners' with the Government through the Country Representative's March 2023 letter to the Government of Uganda's Prime Minister. Against this backdrop, 34 District Local Government Officials (17 female, 17 male), from eight of UNICEF supported districts in the Southwestern region have had their capacity enhanced on PSEA and GBViE. More capacity building initiatives are underway to strengthen the Government of Uganda's work on PSEA.

### **Water, sanitation, and hygiene (WASH)**

During the reporting period, UNICEF continued to support post-Ebola preparedness and response in health facilities and schools through the provision of a standard WASH supplies packages to target institutions. The six water supply systems, powered by both solar and national grid, were completed in January and have provided access to safe water for 28,800 people. The installation of mobile toilets at Jinja RRH and Maga Maga HCIII have benefited 9,600 people with a proper sanitation facility. To date, critical WASH supplies have been provided to 561,300 people.

IPC-WASH supplies have been procured and distributed to 336 health facilities (serving 268,800 patients) and 330 schools (benefiting 167,500 students) in Kassanda, Mubende, Kagadi, Kyegegwa, Wakiso, Jinja and Kampala in support of safe re-opening of schools, sustaining improved hygiene standards and to protect the gains made during the recent EVD outbreak. Documentation of EVD WASH interventions in Mubende and Kassanda was completed to assess the impact of WASH service delivery in the health facilities and communities. This coincided with the Uganda Sanitation week 2023 and UN 2023 water conference. Both called for uniting the world for safe water and examining the balance between pre- and post-disaster investments.

## Education

The Education Response Plans (ERP) Steering Committee at Ministry of Education and Sports has approved sub-grantees selected to implement the Education Cannot Wait (ECW) funded multi-year resilience plan (MYRP). This paves way for implementation of the US\$25.5 million grant in supporting education response for refugee and host communities.

UNICEF and partner Finn Church Aid (FCA) in collaboration with district local governments supported advocacy initiatives that resulted into enrolment of at least 12,292 children in Early Childhood Development (ECD) centres across the districts of Adjumani, Koboko, Terego and Yumbe. Out of these 5,953 are refugees and 6,339 are nationals from host communities. Additionally, the tricycle initiative for mobilization of parents and communities to access ECD services in Terego district is being rolled out. The use of tricycles enables play materials to be brought closer to designated centres in hard-to-reach communities. This allows parents to appreciate the value of play and why they need to get involved in the process. So far 165 children (72 male, 93 female) from 70 households (27 refugee and 43 Non refugee households) have been reached.

A total of 7,830 refugee children (4,020 male, 3,810 female) have accessed UNICEF supported primary schools across the eight focus districts. Up to 996 teachers (700 male, 296 female) were trained on abridged curriculum which was introduced by Ministry of Education and Sports (MoES) and National Curriculum Development Centre (NCDC) to help learners recover from learning loss. In addition, 424 teachers (231 male, 193 female) were trained on competence-based assessments to improve assessment strategies in schools in refugee districts of Koboko, Yumbe, Obongi, Madi Okollo, Terego, Adjumani, Lamwo and Kiryandongo. Cumulatively, 43,982 children accessed formal or non-formal education, including early learning.

## Social behaviour change (SBC), accountability to affected populations (AAP), and localization

UNICEF supported the RVF affected districts of Mbarara and Isingiro with translated IEC materials in three languages: Runyankore-Rukiga (RR1), Runyoro-Rutooro (RR2) and English. The materials included messages on what people need to know about RVF and talking points and DJ mentions were developed for Radio hosts and the facilitators of radio talk shows.

UNICEF deployed two SBC consultants as surge human resource to support mobilization and community outreach activities in the high-risk districts of Kyotera, Kalangala and Rakai districts. A total of 34,500 posters in three languages<sup>2</sup> on MVD causes, signs and symptoms, and prevention were printed and distributed in the five most-at-risk districts.

Eight refugee hosting districts (Terego, Yumbe, Madi-Okollo, Kiryandongo, Lamwo, Koboko, Adjumani and Obongi) were engaged and mobilized to take-up services provided during the Integrated Child Health Days in April. District Local Governments used multifaceted community approaches including dialogues, focus group discussions, home visits reaching 13,876 people (5,400 male, 8,476 female) with messages on Key Family Care Practices.

Cumulatively, through a range of social and behaviour change interventions, a total of 2,123,980 people were reached with messages on prevention and access to services for several Public Health emergencies, mainly Ebola. 377,929 people, influencers/change agents were engaged in Risk Communication and Community Engagement actions; and 332,188 people shared their concerns through established accountability and feedback mechanisms.

## Social Protection

During this reporting period, UNICEF began targeting for the Country Office's first Humanitarian Cash transfers in Lamwo District, targeting both refugees and host communities. The project will target 6,400 households with six monthly cash transfers, at US\$12 per child, up to a maximum of four children per household. Data verification is now underway with the first cash transfer scheduled for June 2023.

## Humanitarian leadership, coordination, and strategy

UNICEF's humanitarian response in Uganda is carried out with partners in line with the Comprehensive Refugee Response Framework, Grand Bargain commitments and the current Country Programme Document (CPD), emphasizing district-level systems strengthening. District actors are supported to incorporate humanitarian preparedness and response into their annual and midterm district plans.

The Government's National Response to disease outbreaks builds on significant investments made by UNICEF and partners in recent years to support national health systems and incorporate learning from previous health emergencies.

<sup>2</sup> Luganda, Swahili and Runyankore-Rukiga (RR1)

UNICEF, in collaboration with the Ministry of Health and other partners, is focusing on public health awareness through risk communication and community engagement, coordination and leadership and information and communication technology through the National and District Task Forces. UNICEF is supporting national and district specific nutrition coordination meetings around nutrition emergency response and governance.

UNICEF Uganda is supporting Emergency and Planning and Response (EPR) initiative by scaling up support to selected districts and sub-county disaster management committees on capacity-building efforts in partnership with the Office of the Prime Minister. The partnership is focusing on the provision of EPR soft skilling and practical simulation exercises.

UNICEF participates in the in-country interagency Prevention of Sexual Exploitation and Abuse (PSEA) Task Force, and technically supports the Humanitarian Interagency Coordination Group (HICG) led by the United Nations Resident Coordinator's Office at the national and sub-national levels. UNICEF is actively engaged in the UN HICG activities including emergency planning and coordination meetings for flooding and Karamoja Nutrition Response. The support to HICG includes developing a joint contingency plan for natural disasters and acceptable thresholds and supporting the request for a joint Central Emergency Response Fund (CERF).

## Human interest stories and external media

Stories: [www.unicef.org/uganda/stories-field](http://www.unicef.org/uganda/stories-field)

UNICEF Uganda human interest story: <https://www.unicef.org/uganda/stories/madudu-community-finds-hope-sustainable-water-system-amid-wash-crisis>

## Next SitRep due: July 2023

UNICEF Uganda: [www.unicef.org/uganda](http://www.unicef.org/uganda)

Uganda Humanitarian Action for Children Appeal: <https://www.unicef.org/appeals/uganda>

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## Annex A

### Funding Status\*

Funding requirements 2023					
Sector	Requirements	Funds available		Funding gap	
		Humanitarian resources received in 2023	Resources available from 2022 (carry-over)	US\$	%
Nutrition	7,281,879	1,103,482	1,531,225	4,647,172	64
Health	9,014,266	172,167	3,162,923	5,679,176	63
Water, sanitation & hygiene	12,198,083	0	1,922,947	10,275,137	84
Child protection, GBViE and PSEA	6,305,839	348,035	2,311,189	3,646,615	58
Education	4,364,510	0	1,940,166	2,424,344	56
Social Protection	4,000,000	0	752,000	3,248,000	81
<b>Total</b>	<b>43,164,577</b>	<b>1,623,684</b>	<b>11,620,449</b>	<b>29,920,444</b>	<b>69</b>

\* As defined in the 2023 Humanitarian Action for Children Appeal for 12 months

**Annexe B**  
**Summary of programme results**

Indicator disaggregation by SVD pillars	UNICEF and implementing partners' response		
	2023 target	2023 results	Progress
<b>Health</b>			
# of children vaccinated against measles	602,174	104,125	▲ 17%
# of children and women accessing primary healthcare in UNICEF - supported facilities	2,045,688	222,078	▲ 11%
<b>Nutrition</b>			
# of children 6-59 months with severe wasting admitted for treatment	67,440	9,870	▲ 15%
# of primary caregivers of children 0-23 months receiving infant and young child feeding counselling	1,104,787	255,508	▲ 23%
<b>Child protection, GBVIE and PSEA</b>			
# of children, adolescents and caregivers accessing community-based mental health and psychosocial support	89,156	13,738	
# of women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions.	218,216	35,210	▲ 16%
# of people with safe and accessible channels to report sexual exploitation and abuse by personnel who provide assistance to affected populations	205,644	33,327	▲ 16%
# of unaccompanied and separated children provided with alternative care and/or reunified	3,785	102	
<b>Water, sanitation, and hygiene</b>			
# of people accessing a sufficient quantity and quality of water for drinking and domestic needs	166,000	28,800	▲ 17%
# of people accessing appropriate sanitation services	58,300	9,600	▲ 16%
# of people reached with critical WASH supplies	1,494,900	561,300	▲ 34%
<b>Education</b>			
# of children accessing formal or non-formal education, including early learning	197,644	43,982	▲ 22%
<b>Social protection</b>			
# of households reached with UNICEF-funded humanitarian cash transfers	10,000	1,600	▲ 16%
<b>Risk communication and social mobilization/ Community Engagement</b>			
# of people reached through messaging on prevention and access to services	9,677,046	2,123,980	▲ 22%
# of people who participate in engagement actions	1,935,409	377,929	▲ 20%
# of people sharing their concerns and asking questions through established feedback mechanisms	3,870,819	332,188	▲ 9%