

Displaced children pose for a portrait at a temporary shelter. Following continued fighting in Khartoum since 15 April, children and their families have fled and sought safety in neighbouring safer states. UNICEF is on the ground assessing the critical and immediate needs of the displaced people to inform its emergency response. UNICEF is also providing urgent assistance to newly displaced states without ongoing conflict, supporting continuity of essential basic services and maintaining critical and life-saving services in hot spots through local partners and staff on the ground. © UNICEF/UN0844236/Mohamdeen

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Humanitarian Situation Report

19 May 2023

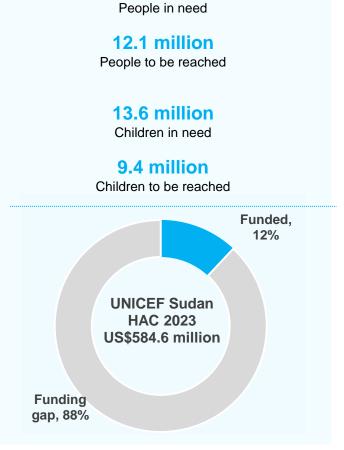
Key figures*

24.7 million

SUDAN

Highlights

- Fighting that erupted in Khartoum between the Sudanese Armed Force (SAF) and the Rapid Support Force (RSF) on 15 April 2023 has significantly worsened the humanitarian crisis in Sudan, with a serious impact on civilians.
- Intercommunal violence and tension were reported across Darfur States. On 11 May, new fighting along tribal lines erupted in Geneina, West Darfur, with unconfirmed reports of people being killed and injured, including children.
- With the central warehouse under threat, UNICEF successfully dispatched two rounds of trucks from Khartoum to Madani. In total, 17 x 50-MT trucks loaded with \$3 million in UNICEF health, WASH and education supplies are being delivered to displaced population in Madani and dispatched to facilities and partners in other states.
- UNICEF also successfully delivered life-saving health, nutrition and WASH supplies worth US\$155,000 to implementing partners for hospitals, health facilities and the Maygoma orphanage in Khartoum.
- The revised Humanitarian Response Plan (HRP) 2023 for Sudan was published on 18 May. It is estimated that the number of people in need of humanitarian assistance has increased by 57 per cent from 15.8 million to 24.7 million. The humanitarian community requests US\$2.56 billion to continue the emergency response.
- UNICEF Sudan Humanitarian Action for Children (HAC) 2023 is only 12 per cent funded currently leaving a funding gap of over US\$500 million. UNICEF urgently requires US\$60 million to immediately restock (this week and deliver lifesaving supplies over the coming weeks) and is revising the HAC in line with the HRP and the current conflict.



*Key figures reflect the new provisions of <u>Humanitarian Response Plan (HRP)</u> for Sudan published on 18 May. UNICEF Sudan HAC 2023 is 12 per cent funded, which includes ACT-A funding currently under discussion for re-programming.

Funding overview and partnerships

Just over a month into the conflict, UNICEF and its partners are already responding to what is proving to be a vast and complex crisis. The humanitarian situation in Sudan was already precarious and is now catastrophic. Without timely and flexible funding and interventions, the cycle of protracted humanitarian crises, recurrent conflicts, displacements, disease outbreaks, and inadequate basic social services will have devastating - and lifelong - effects on Sudanese and refugee children living in the country. Support now is a cost-effective investment that will pay dividends for decades.

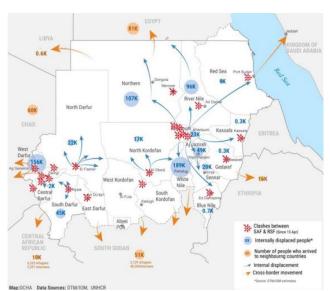
UNICEF Sudan would like to sincerely thank the donors supporting the humanitarian response in Sudan. In 2023, the humanitarian response has to date been supported by the European Union Humanitarian Aid (ECHO), the governments of the United States of America, Germany, Canada, the United Kingdom, Norway, Kuwait, and Japan, as well as Gavi, the Vaccine Alliance, Education Cannot Wait (ECW), Central Emergency Response Funds (CERF), and UNICEF National Committees.

Situation overview

The fighting that erupted in Khartoum rapidly expanded to other areas of Sudan, significantly worsening the humanitarian crisis in the country. According to the reports from the Federal Ministry of Health, as of 14 May, the number of casualties across Sudan has risen to 705 deaths and 5,276 injuries.

Despite repeated ceasefire announcements as well as the signing of the Jeddah Declaration of Commitments to Protect the Civilians of Sudan and guarantee the safe passage of humanitarian aid on 11 May, the conflict and violence continued in Khartoum, West Kordofan, White Nile and the Darfurs, resulting in hundreds of deaths and thousands of injuries.

Since 15 April, over a million people have been displaced,



including over 843,000 individuals within Sudan of whom 368,000 are children¹ and 248,299 into neighboring countries of whom an estimated 82,000 are children.² Among the displaced are thousands of refugees and asylum seekers who had sought refuge in Sudan before the conflict and who have been displaced once again. Prior to the conflict, there were 3.7 million people internally displaced and 1.1 million refugees and asylum seekers in Sudan.³

Intercommunal violence and tension were reported across Darfur States. On 11 May, new fighting erupted between Masalit and Arab tribes in Geneina West Darfur State with unconfirmed reports of 260 people killed, including 7 children and injuries of more than 300 people. There are also unverified reports of resuming the clashes between SAF and RSF forces and involvement of armed Arab militias in parts of Central and North Darfur States. On 15 May, in El Fasher, North Darfur, the Governor of the Darfur Region had a meeting with the state governors of North, South and Central Darfur and the Native Administration to discuss the current situation in the region. Participants reportedly agreed to reinforce security in the region and requesting the UN and neighboring countries to provide urgent humanitarian aid to Darfur people.

Shortage of cash and the dramatic increase in fuel and transportation costs have significantly impacted the daily life and the ability of people to move out of insecure areas. Rapid market assessments across nine locations namely: Nyala in South Darfur, Dilling and Kadugli in South Kordofan, Gedarif, Kassala, Sennar, Khartoum, El-Obeid in North Kordofan reported that markets are mixed open and closed because of insecurity or lack of goods. Specifically in Khartoum, 40% of markets were reported open. There is significant increase in the price of goods such as price

¹ IOM - Displacement Tracking Matrix (DTM) Situation Report No. 4

² Operational Data Portal - Refugees Situation

³ OCHA - Clash between SAF and RSF Flash Update Report No.12

of sugar which has increased 250 per cent and shortages of imported goods such as wheat flour, oil, and tomato paste.¹

Humanitarian needs

Continued fighting has caused tremendous human suffering and worsened significant pre-existing humanitarian needs. The HRP 2023, published on 18 May, estimates that the number of people in need of humanitarian assistance has increased by 57 percent from 15.8 million, in November 2022, to 24.7 million in May 2023. The HRP requires US\$2.56 billion, an increase of US\$800 million, making it the largest appeal ever issued for Sudan.

Power shortages, limited medical supplies, infrastructure damage and active conflict severely hamper the delivery of essential health care. The national vaccination programme has been disrupted amidst an ongoing polio outbreak reported across the country before the crisis. The suspension of nutrition services in conflict areas has disrupted treatment programmes for 50,000 children with severe acute malnutrition. In addition, SAMIL factory in Khartoum, producing 60 per cent of vital nutrition supplies used for treating children with severe and moderate malnutrition in Sudan, has burnt down.

Critical water shortages have been reported across Khartoum, Darfur, and other states affected by ongoing clashes. The urban water treatment plants in Bahri and Omdurman remained partially functional, with challenges to performing regular operations and maintenance and delivery of critical supplies due to access constraints. The humanitarian corridor for the provision of services remains limited. Assessment missions to the gathering points of IDPs in Gedaref, Kassala, Red Sea and West Kordofan reflect the urgent need to provide lifesaving WASH services.

Schools and learning institutions are still closed in conflict-affected areas of Khartoum, Gezira, South Darfur, West Darfur, and West Kordofan. Seven million children were not attending school before the conflict, exposing them to a higher risk of physical and mental threats, including recruitment into armed groups and these numbers have now increased significantly, especially because of the large population in Khartoum. The conflict further increases the risk for gender-based violence, with minimal access to prevention and response services. In addition, unexploded ordnances are spread in the streets and houses, exposing children to a high risk of death and injuries.

UNICEF and partners' emergency response focuses on three key elements:

- I. HOTSPOTS: Maintaining critical and lifesaving basic services in Khartoum, Darfur, Kordofan regions, through local partners and staff on the ground (focus on delivery of programme criticality one in these areas).
- II. DISPLACED POPULATIONS: Providing urgent assistance to the newly displaced and host communities in the five states with no ongoing conflict and along border areas where there are the largest gathering points: Gedaref, Gezira, Kassala, Red Sea and White Nile.
- III. BASIC SERVICES (ONGOING): Continuing treatment of children with severe acute malnutrition, primary healthcare, including vaccinations, water, sanitation and hygiene (WASH), child protection and education in emergencies, cash plus programming, including emergency preparedness response for recurrent emergencies such as floods and epidemics.

UNICEF is the Cluster Lead Agency for Nutrition, WASH, Education (co-leading with Save the Children) and Child Protection, and is maintaining and strengthening these coordination mechanisms at national and sub-national levels.

UNICEF is delivering its response in Sudan through 15 international NGO partners, 43 NNGO partners, and directly to line ministry institutions and facilities, as well as with community groups and private sector. By drawing on its capacity to deliver a principled, child-centered humanitarian response in line with its Core Commitment to Children, UNICEF aims to ensure that lifesaving and sustainable solutions, underpinned by solid preparedness, are tailored

¹ Mercy Corp - Rapid Market Access Survey May 2023

to the needs of the most vulnerable families, focusing on children, women, and including those with disabilities. UNICEF draws on its substantive field presence to be closer to the affected population and its partners.

UNICEF continues to promote community engagement and localization of aid that prioritizes children and women, establishing solid feedback and accountability mechanisms by leveraging local organizations. More support will be provided to credible evidence generation through regular performance and real time monitoring to inform decision-making.

Major gaps and constraints: The operationality of public infrastructure continues to be affected due to the ongoing fighting, looting and access restrictions of movement of personnel. Cash shortages, very limited or no electricity, communication disruption and a spike in fuel and essential commodities prices further threaten the operational capacities to deliver essential social services. The Central Bank of Sudan and local commercial banks in conflict areas have been closed, leaving people without access to cash and financial assets. UNICEF has contracts with three financial service providers. All financial service providers are facing serious operational and liquidity challenges such as poor internet connectivity, fuel shortage and high withdrawals. Finally, funding availability curtails UNICEF's capacity to deliver critical supplies and support services. US\$60 million funding is urgently needed this week to restock, distribute and utilize supplies as per UNICEF urgent needs document shared with development partners on 10 May.

UNICEF programme response

Health Response

UNICEF continued to support the Ministry of Health and humanitarian partners to maintain health services in Khartoum state through provision of lifesaving health supplies, including integrated emergency health kits, midwifery kits, primary health care and acute watery diarrhea kits, which will cover 1,400 normal deliveries and 150,000 people accessing primary health care. In addition to the distribution of supplies to partners operating in Blue Nile, Darfur, Gezira, Kassala, Kordofan, Red Sea, Sennar and White Nile states aiming to cover the needs of over a million children, newborns and their mothers, and over 764,000 adults over the next 3-5 months.

UNICEF is supporting Federal Ministry of Health in implementing a flexible crisis management plan to maintain immunization services across the county through securing vaccine supplies, monitoring the cold chain system, maintaining fuel supply and distributing vaccines to 12 relatively safe states to maintain routine immunization services and provide emergency response targeting the newly displaced population. As of 16 May, vaccine supplies, including Polio Zero Dose, were dispatched from Khartoum to Gedaref, Gezira, Kassala, North Kordofan, Red Sea, River Nile, and White Nile, with estimated coverage of almost 244,000 children.

UNICEF is also working with Gavi to secure critical supplies, including vaccines, cold rooms and fuel, through reprogramming the existing funds which can benefit over 248,000 children who have been denied access to basic lifesaving interventions like vaccination due to active conflicts in Khartoum, East Darfur and West Darfur. Similarly, UNICEF is also working with Global Fund to secure emergency supply of antimalarial treatment and malaria rapid diagnostic tests, especially in preparation of the rainy season.

UNICEF ensured continuation of the lifesaving health services to the targeted population through supporting the functioning of the health facilities by providing supplies and covering for operational cost in Gedaref, Gezira, Kassala and Port Sudan, Red Sea where more than 97 per cent of health facilities are functional and supporting response for the additional caseload of new arrivals of almost 14,000 children and mothers this week.

Nutrition Response

UNICEF nutrition team continues to assess the capacity of partners and the functionality of OTPs and health facilities, as the majority of nutrition partners are facing ongoing security constraints and looting of assets and supplies. Nutrition lifesaving services continue to be provided in 188 out of 192 health facilities (98 percent) in Kassala, 128 in Red Sea State, and 111 sites in Gedaref. In North Darfur and South Kordofan, all health facilities and OTPs are currently operational. However, many are facing stock-outs of nutrition supplies, including 40 percent

in South Kordofan, due to the security situation preventing timely replenishment. UNICEF conducted MUAC screening for 264 children under five in two IDP gathering points in Gedaref and 25 IDP gathering points in Port Sudan. Children with Severe / Moderate acute malnutrition received the initial treatment and were referred to the nearest treatment sites. UNICEF supported four mobile nutrition teams to provide nutrition support in IDPs gatherings. 2,100 mother support groups are operational in Central Darfur, East Darfur, North Darfur, Kassala, Blue Nile and Red Sea states.

Mygoma Orphanage Center in Khartoum, home to over 300 children, is facing severe food shortages. UNICEF delivered 1,440 cartons of ready-to-use therapeutic food (RUTF) for children in the Center, however, other needs related to health, protection and WASH still remain.

Water, Sanitation and Hygiene (WASH) Response

In South Darfur, UNICEF supported the Ministry of Health's efforts in ensuring the availability of clean drinking water at Nyala main Hospital and the nutrition Stabilization center by distributing 3,200 pieces of soap. Additionally, UNICEF also supported the distribution of 2,000 tabs of chlorine to three health facilities.

Three water storage tanks of 10,000 liters each were provided to the IDP gathering points in the Red Sea, providing 3,000 people access to safe water. Additionally, UNICEF provided four water storage containers of 5,000 liters installed in three sites, water quality testing, and disinfection for six sites. UNICEF provided supplies for the installation of 10 emergency latrines to support the relocated people in the six gathering shelters. UNICEF also continued water trucking (24 600 litter) to four healthcare facilities to provide safe water with water in El Fasher town, North Darfur.

UNICEF supports the provision of lifesaving WASH services through the distribution of supplies across different states. In Khartoum state, water treatment supplies were dispatched to Water, Environmental Sanitation Corporation (WES), and Ministry of Health (MoH), which will benefit 40,000 people for three months. In South Darfur, UNICEF provided 2,000 chlorination tablets to disinfect 2,000 cubic meters of water in a nutrition stabilization center and two main hospitals in Nyala. Additionally, 3,600 bars of soap were provided to these health centers to support hand washing.

Child Protection Response

During the reporting period, 844 community members, including children, were sensitized on the dangers of unexploded ordnance and remnants of war, including children who work in collecting haberdashery. UNICEF and its partners provided Psychosocial support to 5,443 children and their parents in Sudan. At least 50 males and females were reached with awareness-raising sessions on mental health of psychosocial support (MHPSS) for children and their caregivers. Most community structures, including the Child clubs and CPCBNs, were activated to facilitate emergency response and denounce and report violence against the children.

The Monitoring and Reporting Mechanism (MRM) on grave child rights violations has been activated from the onset of the crisis but faces some challenges in verifying the incidents. The trained community-based child protection network members actively monitor and report violence against children, including MRM in the field.

Education Response

UNICEF is committed to providing children in Sudan with secure and supportive learning environments that promote their psychosocial well-being and protect children from exploitation, abuse, and involuntary recruitment into armed groups.

A total of 356 Alternative Learning Program (ALP) centers are operational in Blue Nile, Central Darfur, East Darfur, Gedaref, Kassala, North Darfur, Red Sea, West Darfur, and White Nile, providing secure learning spaces for 16,812 girls and boys. <u>42 E-learning centers are operational</u> in East Darfur, Kassala, Red Sea, South Darfur and White Nile, benefitting 2,520 girls and boys.

UNICEF, in collaboration with the State Ministry of Education in Red Sea, has established a child-friendly space in Port Sudan, benefiting 117 girls and boys. This space has been designed to provide children with a nurturing environment for learning and recreational activities. Additionally, it offers access to essential services like psychosocial support.

Social Inclusion and Cash Assistance Response

UNICEF continues to implement the <u>Mother and Child Cash Transfer Plus (MCCT+) for the First 1,000 Day of Life</u> <u>programme</u>. The programme operates in nine localities in Kassala and Red Sea states, currently hosting over 16,000 people displaced from Khartoum and other conflict areas.

In the latest payment cycle concluded at the end of March, a total of 51,651 pregnant women and lactating mothers were reached through the programme, benefiting almost 310,000 household members. In addition to the cash entitlements, the women benefited from antenatal and postnatal care and other essential services at the health facilities. UNICEF is currently taking several initiatives to sustain the MCCT+ programme and expand its coverage to more women and mothers, including those that have been newly displaced by the current crisis. UNICEF is conducting detailed risk and feasibility assessments to identify different cash payment modalities and assess market functionality in priority areas. UNICEF is also mapping out local partners to implement cash interventions. In addition, UNICEF continues to actively engage with the Cash Working Group to coordinate across partners and engage in joint assessments.

Cross-cutting areas

Social and Behaviour Change (SBC)

UNICEF continues to support to Ministry of Health in Gezira, including on planning response interventions focused on IDPs, behavioral data collection and analysis, and community discussions to support WASH demand and service utilization.

Social listening efforts are ongoing to extract and summarize community feedback on needs, concerns, and complaints. While diaspora voices continue to be prominent in online conversation, the Sudanese-based share of voice is increasing, especially from women. New emerging trends this week include health topics (critical situation in Mygoma orphanage, chronic illness medication, dire lack of gynecologists and accessible pharmacies in Khartoum, anticipated disease outbreaks during the upcoming rainy season, treating injuries at home, mental health for children and warring parties threatening doctors) and protection topics (gender-based violence, including rape in Khartoum, missing children and safe routes out of Khartoum) as well as overall safety and security concerns and criticism of international community and media.

Accountability to Affected Populations (AAP)

UNICEF is committed to providing timely and lifesaving information, active participation and access to complaints and feedback mechanisms. An emergency AAP plan is to be activated covering rapid and needs assessments, mapping of resources, drafting of resourceful references like Q&As and counseling lines, empowering local community networks for sensitization and awareness. In addition, establishing of more than one complaints/community feedback mechanisms is being assessed internally to safeguard safe, inclusive, accessible and equitable mechanisms and fortified referral pathway for resolving and responding to the disclosed queries; While new intra- and inter-agency coordinated efforts on complaints/community and feedback mechanisms to map all available resources, build potential inter-agency referral pathway, channels and agree on the way forward in possibilities and feasibilities to join running initiatives and efforts, to map, share, conduct assessment, equip all CFM stakeholders with country/agency level information.

Supply and Logistics

Supply Plan: This week, UNICEF urgently requires an initial USD 60 million to reach children impacted by the current conflict, their families and communities with lifesaving humanitarian assistance. This will allow UNICEF to immediately restock lifesaving health, nutrition, WASH, education and child protection supplies, and sustain and scale-up its crisis response in Sudan. The supplies will be distributed directly to service providers and partners in both hotspot areas in Khartoum and the Darfur, and areas of high displacement, and necessary additional support will be provided to utilize supplies for continuation of lifesaving services.

Supply delivery to partners: UNICEF has distributed supplies to the State Ministry of Health (SMoH) in Khartoum, the Sudan Social Development Organisation (SUDO) and the Maygoma orphanage worth US\$155,000 and more supplies are ready to be picked by the implementing partners. On 17 May, two trucks (one with 2,200 cartons of RUTF and one with health supplies, which arrived in El Fasher and will be distributed in coordination with SMOH.

Relocation of supplies from Khartoum to Wad Madani: On 16 May, supplies worth US\$657,000 and loaded in four 50MT trucks were relocated from Khartoum to Madani for onward dispatching. On 19 May, a total 13 x 50-MT trucks with supplies worth US\$2.03million were relocated from Khartoum warehouses to Madani for onward dispatching to displaced and host communities in Gezira and other states.

Local supply market assessment and procurement: The supply market assessment has been launched in all strategic economic hubs to enable procurement of response supplies from local markets.

Humanitarian leadership, coordination and strategy

UNICEF leads the Education (with Save the Children), Nutrition and WASH Sectors as well as the Child Protection Area of Responsibility (AoR). Inter-sector working group (ISWG) is led by OCHA, with regular coordination in place. UNICEF is a key partner in the in-country inter-agency prevention of sexual exploitation and abuse (PSEA) task force, Access working group and Refugee Coordination Forum.

Child Protection (AoR), Education, Nutrition and WASH Sectors in consultation with the stakeholders re-analyzed the sectors need after the conflict and revised the Humanitarian Response Plan.

Interagency coordination at Accountability to the Affected Population working group was resumed by two leads UNICEF and International Aid services International and international/national NGOs and community-based organizations. Creation of networks by the co-chairs and the members to share lifesaving information drafted agreed by members and disseminate to partners and communities.

Human interest stories and external media

Human Interested Stories

- <u>11-year-old Ali shares how the conflict in Sudan has upended his life</u>
- An agonizing journey from Khartoum to Egypt

Press release

- Sudan violence forces at least 450,000 children to flee their homes
- Another Bitter Blow for Children in Sudan

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unicef la for every child

Annex A

Summary of Programme Results

The humanitarian performance table is partially update due to low capacity of partners to report on the results. The targets are adjusted to the revised Humanitarian Respoken Plan (HRP)

| | , <u>,</u> | UNICEF and Ips Response | | | Cluster Response | | |
|---|------------------|--------------------------|------------------|---------------------------------------|------------------|------------------|------------------------------------|
| Sector | Overall needs | 2023 target | Total results | Change since the last report | 2023 target | Total results | Change since the last report |
| Health | | | | | | | |
| # children vaccinated against measles | 11 million | 1,655,308 | 237,622 | | | | |
| # of children and women accessing primary health care in UNICEF- supported facilities | | 3,163,728 | 317,085 | | | | |
| Nutrition | | | | | | | |
| # children 6-59 months screened for wasting | 4.6 million | 5,917,508 | 840,917 | | 5,917,508 | 840,917 | |
| # children aged 6 to 59 months with severe wasting admitted for treatment | | 559,446 | 40,920 | | 559,446 | 40,920 | |
| # primary caregivers of children 0-23 months receiving IYCF counselling | | 1,637,337 | 104,414 | | 1,637,337 | 104,414 | |
| # pregnant women receiving preventative iron supplementation | | 1,637,337 | - | | 1,637,337 | - | |
| Child Protection, gender-based viole | ence in emer | gencies and _l | prevention of | sexual expl | oitation and | abuse | |
| Number of children and caregivers accessing mental health and psychosocial support | 4.3 million | 349,211 | 5,443 | | | | |
| # women, girls and boys accessing GBV risk mitigation, prevention and/or response interventions | | 20,953 | 1,164 | | | | |
| # people with safe and accessible channels to report SEA by personnel who provide assistance to affected populations | | 5,918,000 | 25 | | | | |
| # children provided with landmine or other explosive weapons prevention and/or survivor assistance intervention | | 325,829 | 853 | | | | |
| # unaccompanied and separated children provided with alternative care or reunified | | 13,968 | 246 | | | | |
| Learning and Skills | | | | | | | |
| # children accessing formal or non- formal education, including early learning | 8.6 million | 3,473,900 | 73,042 | | 4,300,000 | | |
| # children receiving individual learning materials | | 3,473,900 | 72,529 | | 4,300,000 | | |

| # trained teachers/ECD facilitators | | | | | | | | | | | |
|--|-------------|-----------|---------|--|-----------|--|--|--|--|--|--|
| | | 57,915 | | | | | | | | | |
| Adolescents and young people who participate in or lead engagement initiatives through UNICEF-supported programmes | | 173,746 | - | | | | | | | | |
| Water, Sanitation & Hygiene | | | | | | | | | | | |
| # people accessing a sufficient quantity of safe water for drinking and domestic needs | 14.9million | 4,000,000 | 427,700 | | 5,051,743 | | | | | | |
| # of people reached with critical WASH supplies | | 200,000 | | | 500,000 | | | | | | |
| # of people reached with hand- washing behaviour-change programme | | 4,000,000 | 422,994 | | 6,100,000 | | | | | | |
| # of people accessing appropriate sanitation services | | 300,000 | 12,567 | | 911,186 | | | | | | |
| # of health facilities with basic WASH services | | 30 | | | | | | | | | |
| # learning facilities and safe spaces reached with basic WASH services | | 50 | | | | | | | | | |
| Social Protection & Humanitarian Cash Transfer (HCT) | | | | | | | | | | | |
| # of households reached with UNICEF funded humanitarian cash transfers | | 250,000 | | | | | | | | | |
| Cross-sectoral (SBC, RCCE, gender and AAP) | | | | | | | | | | | |
| # of people participating in engagement actions | | 2,000,000 | 440,567 | | | | | | | | |
| # of people sharing their concerns and asking questions through established feedback mechanisms | | 1,250,000 | | | | | | | | | |
| # women's rights, adolescent girls and youth groups that have been consulted and/or participated in all phases of the programme cycle | | 2 | | | | | | | | | |