



Zimbabwe

Humanitarian Situation Report







Multi-hazard Situation Report #2 March 1– April 30, 2023

Highlights

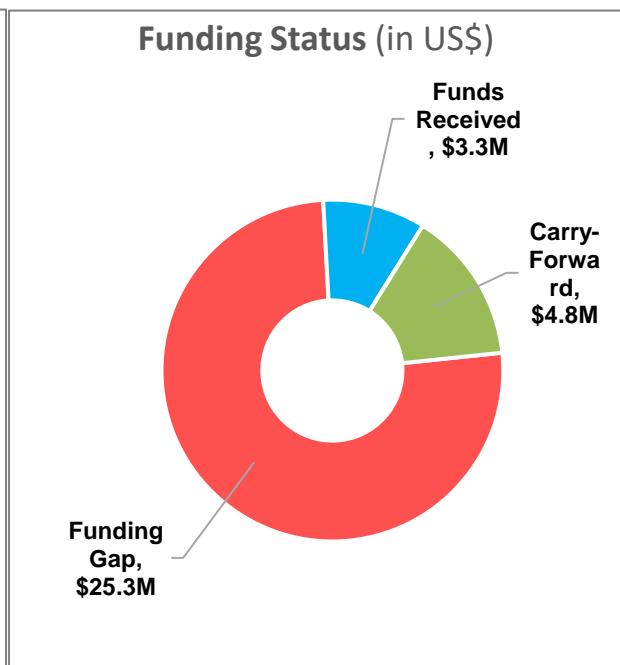
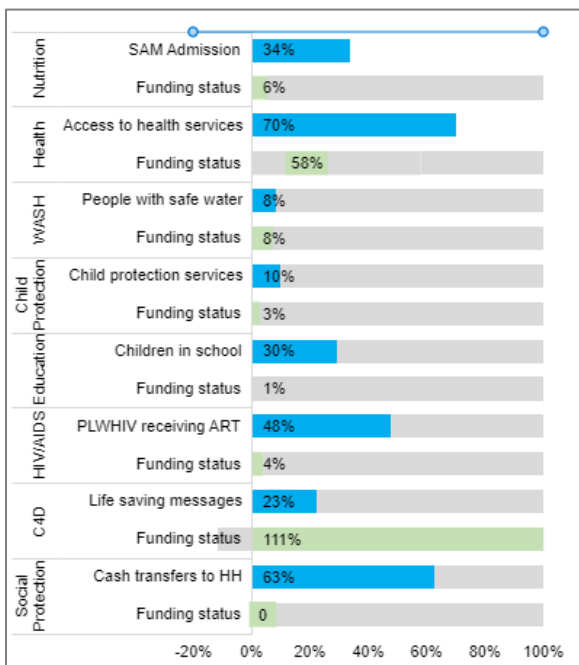
- A total of 4,295 children (2,355 girls and 1,940 boys), were treated for wasting between January and April 2023.
- A total of 1,096,416 people (264,717 males and 831,699 females) accessed essential primary health care against an annual target of 1,358,712 between January and April 2023.
- In March and April 2023, 39,011 people (18,727 Male; 20,270 Female, 14 people with disabilities) were provided with critical WASH supplies to enable families to practice safe hygiene and 41,696 people (20,193 Male; 21,481 Female; 22 PWD) with safe water for drinking and domestic purposes.
- A total of 6,930 children and caregivers (4,546 Female; 2,384 Male) accessed community based mental health and psychosocial support between January and April 2023.
- A total of 7,350 children (3,722 girls and 3,628 boys) were supported by UNICEF through provision of learning materials to continue accessing formal and non-formal education including early learning.
- UNICEF reached 34,453 people (13,490 men, 16,606 women and 4,431 children) with lifesaving messaging on hygiene promotion, including WASH practices for cholera prevention and cholera treatment through interpersonal communication.
- As of April 2023, 16,877 (8,952 females) children aged 0 – 14 years, and 13,518 pregnant and lactating women continued to receive HIV treatment in UNICEF supported districts.

Situation in Numbers

-  **2,000,000** children in need of humanitarian assistance (HAC 2023)
-  **3,000,000** people in need (HAC 2023)
-  **2,000,000** People to be reached (HAC 2023)
-  **900,000** Children to be reached (HAC 2023)

UNICEF's Response and Funding Status

UNICEF Appeal 2023 US\$ 32.8 million



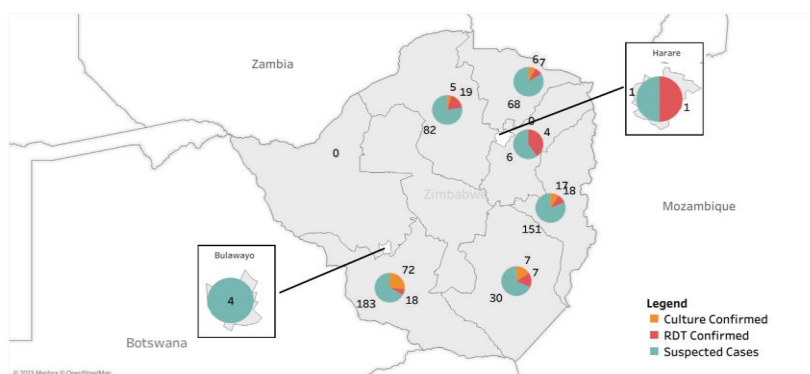
Funding Overview and Partnerships

UNICEF is appealing for US\$ 32.8 million to meet the increased humanitarian needs in the country in 2023 because of the multiple hazards of drought, tropical storm Freddy, flash floods, COVID-19, diarrheal disease outbreaks, and the economic crisis impacted by COVID-19, among other factors. The funding will enable UNICEF to provide critical humanitarian assistance to 3 million people including 2 million children in the affected areas. UNICEF Zimbabwe Country Office has received a total of US\$ 9.1 million (26% per cent of the total 2023 funding requirement) from various donors that include ECHO, GAVI The Vaccine Alliance, Norway, USAID BHA, USAID (CDC), USA Permanent Mission, FCDO, European Commission, UN OCHA (CERF) and UNICEF Global Thematic.

Situation Overview & Humanitarian Needs

Zimbabwe's humanitarian context remains fragile and complex, chronically grappling with floods and drought, exacerbated by climate change, economic instability, and regular disease outbreaks including typhoid, cholera, COVID-19, and measles. Currently, the country is experiencing an outbreak of cholera since the 12th of February 2023. The index cases were reported in Chegutu town, Mashonaland West Province. As of the 30th of April, 593 suspected cholera cases with 129 culture confirmed positive cases and 4 cholera confirmed deaths had been reported. All the provinces except Midlands had reported cases with Matabeleland South Province reporting 33% of the cases.

Figure 1: Cases and Deaths Distribution by Province. Data Source: Ministry of Health and Child Care (MOHCC) sitrep-30 April 2023



The determinants of the outbreak are linked to poor WASH infrastructure, regular sewer bursts, erratic water supply exacerbated by regular power cuts, shortage of bulk water treatment chemicals, sub-optimal solid waste management and unsafe hygiene practices. Compounding the foregoing, rapid population growth in urban settings has resulted in communities settling in areas not serviced with water and proper sewer system e.g. in Beitbridge district. This has resulted in the at-risk communities looking for alternative water sources- shallow wells, and river water, which

are contaminated. Perennial sewer blockages in urban residential areas are also noted, and with the emergence of illegal settlements that are under served, this has exacerbated open defecation, and or the use of septic tanks leading to groundwater contamination. Unprecedented attrition of health frontline workers has also resulted in a staff shortage to manage the outbreak. Through targeted distributions of critical WASH supplies and cluster/case area targeted interventions (CATIs) UNICEF in partnership with government and partners supported 8,669 families reaching a total of 39,011 people (18,727 Male; 20,270 Female, 14 PLWD) with hygiene kits comprising soap for handwashing, household water treatment chemicals, water storage containers and Information, Education & Communication (IEC) materials in response to the cholera outbreak. In partnership with the Government and implementing partners, UNICEF reached 41,696 people (20,193 Male; 21,481 Female; 22 PWD) with safe water for drinking and domestic purposes through provision of point of use water treatment chemicals in the cholera affected districts.

To keep schools safe following the cholera outbreak in the country, UNICEF distributed hygiene supplies to schools throughout Zimbabwe. The supplies distributed include water purification tablets, chlorine, thermometers, 70-litre plastic buckets, knapsack sprayers, liquid soap, disinfectants, and hand sanitisers to 10 147 primary and secondary schools in Zimbabwe which have benefitted 4,642,023 students, (2,325,056 girls and 2,316,967 boys). Additionally, through interpersonal communication, UNICEF reached 34,453 people (13,490 men, 16,606 women and 4,431 children) with lifesaving messaging on hygiene promotion, including WASH practices for cholera prevention and cholera treatment. Information, Education and Communication (IEC) materials on the nutrition response to cholera were disseminated to all nutrition sector partners and training on the treatment of cholera in children with wasting. Additionally, a total of 4,295 girls and boys were admitted for treatment of wasting, (2,355 girls and 1,940 boys

Between January and April, A total of 6,930 children and caregivers (4,546 Female; 2,384 Male) accessed community-based mental health and psychosocial support, while UNICEF's emergency social cash transfers (ESCT) have reached 83,299 people in six districts and extended to include new districts namely Binga, Rushinga, Mudzi, Mangwe and Makoni in Matabeleland, Mashonaland central, Mashonaland East, Matabeleland South, and Manicaland Provinces respectively.

Summary Analysis of Programme Response



Nutrition

Nutrition sector coordination was strengthened during March and April with a review of the TORs of all the national sub-working groups, a review of the 5W's matrix for nutrition and the sector contact / membership list. Monthly nutrition sector meetings have continued, co-led by the Ministry of Health and Child Care (MoHCC) and UNICEF. Social Behavior Change and Communication (SBCC) information and materials on the nutrition response in cholera have been circulated to all nutrition sector partners and training on the treatment of cholera in children with wasting and protection of breastfeeding during cholera will be rolled out through partners in May. Between January and April 2023, a total of **4,295** girls and boys were admitted for treatment of wasting, (**2,355** girls and **1,940** boys), in line with admissions for the same time last year. The defaulter rate in the cities remains high and influencing the national defaulter rate at 17% in February, which has impacted the national cure rate (68.5% for February) and is below the international Sphere standard of 75%. There is a shortage of ready to use therapeutic food (RUTF) and therapeutic milks (F100 and F75) in the country and stock-outs are starting to occur in high-burden facilities which will affect the performance of programmes for treatment of wasting in the coming months and will affect the survival of children with wasting. Vitamin A supplementation (VAS) has continued through health facilities and community platforms and **385,861 children** received VAS between January and April (167,081 girls and 28,780 boys). In addition, **596,633 children** (308,707 girls and 287,926 boys) have been screened for wasting using middle upper arm circumference (MUAC) in the community and 207,836 caregivers have received counselling on improving infant and young child feeding practices including through Care Groups. Data collection for the Rural ZimVAC assessment is underway, the report is expected to be available in early July. Activities under the new emergency social cash transfer (ESCT) project are starting up and include nutrition, specifically ensuring nutrition considerations are included in the vulnerability criteria used and ensuing beneficiaries enrolled on the programme that have children less than 2 years are enrolled in a Care Group. This is aimed at influencing the use of the cash transfer at household level to improve child diet diversity and overall nutrition status.



Health

Between January and April 2023, UNICEF, in coordination with the Ministry of Health and Child Care (MoHCC) and other partners, continued to support emergency preparedness and response activities for COVID-19 and cholera.

Between January and April 2023, 133,339 children (66,188 girls, 67,151 boys) received the first dose of Measles-Rubella 1 against an annual target of 450,000 children (29.6 per cent) children. In addition, 1,096,416 people (264,717 males and 831,699 females) accessed essential primary health care against an annual target of 1,358,712. Community and school-based Social and Behaviour Change (SBC) activities were also supported through partners to create demand for immunization services including for COVID-19 vaccination. As of the 30th of April 2023; 5,381,080 (47.9%) of targeted people aged from 12 years and above had received their second dose of COVID-19 vaccination.

As of the 30th of April, 593 suspected cholera cases with 129 culture confirmed positive cases and 4 cholera confirmed deaths had been reported. All the provinces except Midlands had reported cases with Matebeleland South Province reporting 33% of the cases. UNICEF in collaboration with various partners provided technical, financial, and material support to the MoHCC to respond to the outbreak. With support from UNICEF, acute watery diarrhoea kits were also prepositioned to the all the cholera hotspots. Additional AWD kits, high performance tents and ringer's lactate were also procured in response to the cholera outbreak. These are expected to be delivered by the third week of May.



HIV and AIDS

As of April 2023, 116,877 (8,952 females) children aged 0 – 14 years, and 13,518 pregnant and lactating women continued to receive HIV treatment in UNICEF supported districts. Considering the cholera outbreak in the country UNICEF is monitoring HIV service delivery to children, pregnant and lactating women. The National AIDS Council has been supported to disseminate information to communities of PLHIV on continued adherence to treatment and to utilization of HIV services through community health workers, networks of PLHIV, and adolescent peer supporters in areas affected with the cholera outbreak.



Water, Sanitation and Hygiene (WASH)

During the reporting period, UNICEF continued to play its WASH Cluster lead role by co-chairing the Emergency Strategic Advisory Group (ESAG) with the Ministry of Lands, Agriculture, Fisheries, Water and Rural Development (MoLAFWRD). The ESAG provides WASH sector emergency leadership, operating as the mechanism to ensure WASH Cluster activities are well-coordinated. In March and April, through two ESAG meetings, the WASH sector: a) provided inputs to reflect WASH in the MOHCC-led Cholera Emergency Preparedness and Response Plan, b) discussed and disseminated infection, prevention, and control (IPC)/WASH strategies critical for the control and management of cholera, enabling all WASH partners to be aligned behind the national strategy; and c) evaluated the WASH cluster response capacity, based on the geographic distribution of cholera cases.

In responding to the cholera outbreak, which was first reported 12 February 2023; UNICEF – in support of the Government and through implementing partners including WHH, Oxfam, Mercy Corps and Christian Care - has provided critical WASH supplies to **8,669** affected families, reaching a total of **39,011 people** (18,727 Male; 20,270 Female, 14 PLWD). Hygiene kits, comprising soap for handwashing, household water treatment chemicals, water storage containers and IEC materials; were provided to affected households through targeted distributions and case/cluster area targeted interventions (CATIs). UNICEF, with and through implementing partners, has reached **167,255** people (80,270 Male; 86,964 Female; 21 people with disability (PWD) with an integrated package of hygiene messages in cholera-affected provinces; including Mashonaland Central, Midlands, Masvingo, Matabeleland South, Manicaland, Harare and Mashonaland West. Messages on hand hygiene, water safety and food safety reached beneficiaries through mass media, door to door hygiene promotion, public hailing, and roadshows. Additionally, UNICEF, in partnership with the Government and implementing partners, reached **41,696 people** (20,193 Male; 21,481 Female; 22 PWD) with safe water for drinking and domestic purposes through provision of point of use water treatment chemicals in the cholera affected districts.



Figure 2: A village health worker in Beitbridge district demonstrating how to use water guard during distribution of NFI's for promoting household water treatment, hand washing and proper

UNICEF and partners will continue to support the Government of Zimbabwe through conducting water quality monitoring, implementing case/cluster area targeted interventions, hygiene awareness raising and provision of critical WASH supplies including soap, household water purification chemicals, water storage containers as well as support improved access to safe water in cholera affected areas. Additionally, UNICEF will continue supporting the government to convene meetings to enable a coherent and coordinated cholera response.



Education

In the reporting period, UNICEF continued to co-lead the cluster together with Save the Children. The Education Cluster held two meetings focusing on lessons learned from the preparedness and response efforts for the 2022/2023 rainfall season. The cluster members led by Ministry of Primary and Secondary Education (MoPSE) agreed to improve coordination and communication for the next rainfall season, especially field visits and reports, which will help allocate Education in Emergencies supplies. Through the cluster meetings, MoPSE urged Education cluster members to focus on providing safe water, hygiene supplies and and strengthen school health clubs in response to the cholera outbreak in the country.

The storm Freddy which hit between February and March resulted in damages to schools in Zimbabwe, especially in Chipinge where 22 schools reported infrastructure damages. The district school inspectors reported that out of these 22 schools, 10 of them had damages that would impact learning opportunities. In responding to the impact of cyclone Freddy on schools, UNICEF distributed 20 additional tents to Manicaland Province providing temporary learning spaces for up to 1 540 students. Another seven tents were distributed to the Globe and Phoenix Primary School in

Kwekwe district, which had a part of the school collapse into a sinkhole due to illegal mining activities, injuring 17 pupils.

Additionally, in response to the rainfall season, UNICEF distributed five school-in-a-box and two early childhood development (ECD) kits to each of the 72 districts in Zimbabwe providing educational opportunities to 14 400 students and 7 200 ECD learners. To support teachers, UNICEF also distributed 12 850 teacher's kits for satellite schoolteachers. These kits included backpacks, towels, pens, solar chargers for phones and raincoats.

To keep schools safe following the cholera outbreak in the country, UNICEF distributed hygiene supplies to primary and secondary schools across all provinces. The supplies distributed include water purification tablets, chlorine, thermometers, 70-litre plastic buckets, knapsack sprayers, liquid soap, disinfectants, and hand sanitizers to 10 147 primary and secondary schools in Zimbabwe which benefitted 4,642,023 students, (2 325 056 girls and 2 316 967 boys).



Child Protection

During the first quarter of 2023 UNICEF co-chaired the Child Protection Working Group (CPWG) together with the MoPSLSW in preparation for the projected seasonal multi-hazards associated with mudslides due to cyclones, flooding and diarrhoeal disease outbreaks. Child Protection continued to support response, prevention and monitoring of VAC and GBV mitigation in COVID-19 targeted districts. The focus has been on CIE coordination with interest on child protection and gender-based violence response services and prevention through the National Case Management in 2023. Preparedness plans are currently being developed and a standby humanitarian programme document was finalized with Child Protection Society (CPS). Coordination cascaded to community social service workforce, Community volunteers such as ARC's Sexual Health Advocates (SHAs) and MoPSLSW Community Childcare Workers (CCWs) play a critical role in raising awareness beyond the project life of humanitarian work providing critical information and referral to services working under the auspices of the national Case Management System.

For Cholera response, UNICEF engaged MoPSLSW to consider prevention of cholera in residential care facilities as this was an identified gap. In addition to this, UNICEF Child Protection provided technical support and collaborated with UNICEF South Africa, other UN agencies such as IOM Zimbabwe and Government to prepare for 178,000 Zimbabwean holders of ZEP anticipated to return in June at the expire of their permits.

During the quarter, Regional Psychosocial Support Initiative (REPSSI,) Farm Orphan Support Trust (FOST) reached 57,368 people with awareness on GBV and VAC prevention and services including safe reporting, Musasa reached 718 people (497 women and 221 girls) ARC concentrated its interventions in Harare suburbs and a total of 971 (203 women, 768 girls) survivors were reached with specialized psychosocial and medical support. CSO partners implementing humanitarian response and those in regular CP work strengthened the referral pathway with coordination from Ministry of Public Service Labour and both medical and specialised PSS support were provided alongside other regular CP services such as birth registration, tracing and reunification of separated minors, foster care and positive parenting and HIV services provided by non-humanitarian partners.

FST work continued in 2023 reaching 975 children (882 females and 93 males). MoPSLSW continues providing the critical Child Protection in Emergency coordination role after UNICEF supported training. This has resulted in comprehensive wrap around services for children, and especial women and girls survivors of VAC and GBV. Child Protection work with UNICEF Education sector with support from FCDO and KFW resulted in a total of 306 CCWs and school-based staff members benefitting from child protection training.

A total of 24,618 girls and 29,917 women were reached with VAC and GBV information including information on where to access psychosocial support and referral for protection services. Toll free numbers, physical addresses for drop-in centres and centres where safe reporting could be made were also shared. Online and physical contact for counselling services was also offered. A total of 1,228 survivors of violence were reached of these 438 survivors were from Beitbridge supported by FST and 790 from Harare supported by ARC were reached with specialized medical survivors as well as linked to community based specialized Mental Health and Psychosocial Support Services provided by REPSSI and FOST trained community cadres as well as referral to other child protection and gender-based violence service providers within the National Case Management System for other needs. In the next quarter, the focus will be addressing the potential influx of people from South Africa whose permits are not renewed.

Social Protection

UNICEF continues to provide direct support to households through its Emergency Social Cash Transfer Programmes (ESCT). The ESCT, implemented in partnership with Goal and World Vision, reached a total of 83,299 individuals including over 38,000 children through its support to 18,410 households across the six districts of Beitbridge, Binga, Bulawayo, Chitungwiza, Lupane and Mufakose. This phase of support is coming to an end and the last 2 districts will receive their payments in June 2023. All the households under the ESCT will be transitioned to Government Harmonized Social Cash Transfer programme. Validation of the beneficiaries is currently ongoing in these districts.

In addition to the existing programme is going to extend to five new rural districts of Matabeleland North and South, Manicaland, Mashonaland East and Mashonaland Provinces under a new phase of support. The new districts are Binga, Rushinga, Mudzi, Mangwe and Makoni. In this new phase, the programme will combine nutrition and child protection services, as well as support to school feeding to P3 and satellite schools in five new districts. Inception meetings in all the 5 districts has been completed. Registration of beneficiaries will start in May 2023 for the first 2 pilot districts where a new registration approach (Pulled Registration) will be implemented before rolling out to the rest of the districts.

In these districts UNICEF will support the Ministry of Public Service, Labour and Social Welfare to retarget its recipients under the Harmonized Social Cash Transfer Programme and support them with six monthly payments before handover back to the Government. The target is to support about 18 000 households across the 5 districts. Additionally, UNICEF will also support retargeting of Hurungwe urban district with support of 3,500 households.

Social Behaviour Change (SBC) Community Engagement & Accountability

Between March and April, UNICEF responded to the cholera outbreak in Zimbabwe targeting the hotspot districts. UNICEF conducted a U-Report poll targeting adolescents and young people (15-23 years) and a Community Rapid Assessment, targeting adults between 18-60 years in 12 cholera hotspot districts. More than half of the respondents expressed high cholera risk perception, were aware of the dangers of cholera but less knowledgeable about safe food practices to prevent cholera. Nearly 40% of the respondents felt their water is not safe because it was not treated, often contaminated with sewage or water sources not protected. Many respondents use their own or shared toilets and latrines. However, a concerning percentage report practicing open defecation (11% from Community Rapid Assessment and 8% from U report survey). These findings have informed RCCE messaging and interventions. including multi-sectoral coordination and collaboration to support creation of enabling environment for effective cholera prevention and containment.

In April, UNICEF in partnership with WHO, supported the Ministry of Health to conduct a cholera response readiness assessment focusing on Cholera hotspot districts and points of entry. Assessment identified key barriers to uptake of public health and safety measures for improved hygiene practices, which include inadequate household and public WASH facilities (hand washing stations, water shortages, toilets) and poor waste management by local authorities especially in urban areas. Channels utilized by affected populations to share feedback were focus group discussions, suggestion or complaint boxes, participatory radio discussions, and community meetings conducted by Health Centre Committees.

During the Easter holiday, Apostolic Women Empowerment Trust supported a cholera awareness campaign in cholera hotspots (Bikita, Beitbridge, Muzarabani, Mutasa, Mutare rural, Chiredzi and Chimanimani) targeting places of worship, markets, and transport hubs. The campaign reached 34,453 people (13,490 men, 16,606 women and 4,431 children) with lifesaving messaging on hygiene promotion, including WASH practices for cholera prevention and cholera treatment through interpersonal communication. A radio and social media campaign reached more than 5 million people. To support creation of enabling environment for the promoted behaviours, AWET distributed 462 twenty-litre buckets, 462 water containers, 924 water guard bottles and 462 bars of soap to at risk communities and during religious gatherings. Under the CERF funded Measles Rubella RCCE project, in partnership with AWET and Youth Advocates, UNICEF conducted a post campaign rapid assessment in 6 districts (Bikita, Gutu, Chiredzi, Chipinge, Mwenezi and Mazowe). A total of 30 focus group discussions (FGDs), 11 key informant interviews (KIIs), interviews with 2,420 learners, and 748 caregivers were conducted. The results highlighted the influence of religion, parents/caregivers, and supply-side factors in the uptake of vaccination services. Parents/caregivers, Community Health Workers, and teachers (school health masters) were cited as the main influencers for MR vaccination. The findings also highlighted the importance of health workers-caregivers' relationship in influencing uptake of vaccination services for children, especially among vaccine hesitant populations.



Figure 3: AWET Behaviour Facilitator conducting hygiene promotion and distribution of buckets and containers at an Apostolic gathering during Easter holiday. Photo Credit/AWET 2023

Strategy

UNICEF's humanitarian strategy is anchored on the core humanitarian principles of humanity, impartiality, neutrality, and independence. The strategy has four dimensions namely, strengthening coordination, increasing response capacity, social and behaviour change communication, and evidence-based monitoring. To address the risk of natural disasters, disease outbreaks and the deepening economic crisis, UNICEF is strengthening government-led national and district coordination structures' emergency preparedness and response capacity. Working with humanitarian partners, UNICEF is also strengthening coordination structures for the prevention of sexual exploitation and abuse to ensure that crisis-affected populations have

access to appropriate prevention and response interventions and protection is prioritized. UNICEF is scaling up response capacity of its partners and cluster members through provision of technical and financial support to deliver multi-sectoral humanitarian responses. Social and behavior change communication (SBCC) is integrated across all sectoral programmes and comprises of a combination of community engagements through inter-personal communication and outreach through mass media, digital platforms, and data generation.

Human Interest Stories and External Media

Stories can be found on UNICEF's website and social media channels:

UNICEF Zimbabwe stories: <https://www.unicef.org/zimbabwe/stories>

UNICEF Zimbabwe Humanitarian Action for Children Appeal: www.unicef.org/appeals/zimbabwe

UNICEF Zimbabwe Social Media: [Facebook](#), [Twitter](#), [LinkedIn](#)

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Summary of Programme Results

Sector	Cluster/Sector Response*				UNICEF and IPs				
	2022 target	Total results	Total results	Change since last report	2023 target	Total results		Change since last report	
						April			
				▲▼—				▲▼—	
Nutrition									
# of children aged 6 to 59 months with severe acute malnutrition admitted for treatment					12 700	Girls	2 355	2 232	▲
						Boys	1 940		
						Total	4 295		
# of children aged 6-59 months screened for wasting					848 000	Girls	308 707	327 652	▲
						Boys	287 926		
						Total	596 633		
# of primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling					300 000	Girls	-	110 324	▲
						Boys	-		
						Total	207 836		
# of children aged 6-59 months receiving Vitamin A supplementation					565 400	Girls	167 081	192 313	▲
						Boys	218 780		
						Total	385 861		
Health									
# of children aged 6 to 59 months vaccinated against measles					450 000	Female	66 188	73 896	▲
						Male	67 151		
						Total	133 339		
# of children and women accessing primary health care in UNICEF-supported facilities					1 559 735	Female	831 699	634 570	▲
						Male	264 717		
						Total	1 096 416		
WASH									
# of people accessing a sufficient quantity of safe water for drinking and domestic needs					495 000	Female	21 481	41 696	▲
						Male	20 193		
						PLWD*	22		
						Total	41 696		
# of people reached with critical WASH supplies					275 000	Female	21 761	39 011	▲
						Male	20 491		
						PLWD*	22		
						Total	42 274		
Child Protection									
# of children and caregivers accessing community-based mental health and psychosocial support					40 000	Female	4 546	5 959	▲
						Male	2 384		
						PLWD	-		
						Total	6 930		
# of women, girls and boys accessing gender-based violence risk mitigation,					70 000	Female	2 571	-	—
						Male	93		

prevention or responses interventions						PLWD	-		
						Total	2 664		
# of unaccompanied and separated children accessing family-based care or a suitable alternative					500	Female	-		
						Male	-		
						PLWD	-		
						Total	-		
# of people who have access to a safe and accessible channel to report sexual exploitation and abuse by aid workers					60 000	Female	54 535		
						Male	2 833		
						PLWD	-		
						Total	57 368		
Education									
# of children accessing formal or non-formal education including early learning					314 100	Girls	3 722		
						Boys	3 628		
						Total	7 350		
HIV/AIDS									
# of pregnant and lactating women living with HIV receiving antiretroviral therapy					50 000	Female	20 879		
						Male	12 594		
						Total	33 473		
Social Protection									
# of households reached with UNICEF funded multi-purpose humanitarian cash transfers					25 000		25 801	10 066	▲
C4D									
# of people reached with messages on prevention and access to services					7 500 000	Female	442 000		
						Male	408 000		
							850 000		
						Total	1 700 000		
# of people with access to established accountability mechanisms					2 500 000	Female	-		
						Male	-		
							19 876		
						Total	19 876		

*Compilation of cluster response figures for Nutrition, WASH, Child Protection and Education under finalization. PLWD – People living with disabilities.

Annex B

Funding Status

Sector	Requirements for 2023	Funds Received	Carry Over	Total Available	Funding Gap	Funding gap %
Nutrition	7 100 000	89 822	309 779	399 601	6 700 399	94%
Health	8 000 000	1645702	3 012 348	4 658 050	3 341 950	42%
WASH	9 300 000	147630	561 129	708 759	8 591 241	92%
Child Protection	2 000 000	24151	36 770	60 921	1 939 079	97%
Education	5 025 350	27921	-	27 921	4 997 429	99%
HIV & AIDS	400 000	17851	5	17 586	382 414	96%
Social Protection	-	0	-	-	-	#DIV/0!
Cross Sectoral	1 000 000	202046	909 895	1 111 941	488 059	49%
Being Allocated		2 132 687		2 132 687	(2 132 687)	