Highlights

- During the first half of 2023, the humanitarian situation in Haiti continued to deteriorate. The influence of armed groups has increased, including attacks on health centres and schools. The spike in actions by vigilante groups has added another layer of complexity. There are increasing reports on the use of gender-based violence by armed groups. Over 165,000 people are now internally displaced due to armed group violence. In areas already hit by violence, heavy rainfall caused floods affecting over 45,000 families. Thousands are displaced due to damages. The further deterioration of food security and increasing cholera contagion as a consequence of these early-season flooding events, are of great concern.

- Despite the outstanding challenges in delivering humanitarian assistance, as of June 2023, UNICEF has been able to reach nearly 545,000 people with safe water, over 477,000 with WASH supplies; 373,590 people with cholera kits; close to 40,000 caregivers with nutritional counselling and 7,824 children with treatment for severe wasting; around 73,000 children and women have received health care services; nearly 700,000 people have been vaccinated against cholera; 32,603 children received learning materials; nearly 36,000 children and caregivers received psychosocial support; 2,570 households have received cash transfers and nearly 5 million people have been reached with life-saving information.

- To respond effectively to the imminent humanitarian needs, while building conditions for more shock-responsive systems in Haiti, UNICEF requires US$245.9 million. As of June, UNICEF’s humanitarian appeal has a funding gap of US$207.5 million (84 per cent).

UNICEF’s Response and Funding Status

UNICEF Appeal 2023
US$245.9 million

Funding Status (in US$)
Funding Overview and Partnerships

Despite the ever-increasing humanitarian needs in Haiti, UNICEF’s Humanitarian Action for Children (HAC) appeal remains underfunded, with a funding gap of 84 per cent against the US$245.9 million ask.

During the first half of 2023, generous contributions have been received from public partners including the Government of Canada, the Government of Japan, the Swedish International Development Cooperation Agency, USAID’s Bureau for Humanitarian Assistance, the European Union Civil Protection and Humanitarian aid Operations department (ECHO), the Central Emergency Response Fund (CERF), and the World Bank. In addition, contributions from individuals and private donors have been received through the United States Fund for UNICEF; the French, German, Swiss Committees for UNICEF; and UNICEF Mexico. UNICEF also received allocation of its internal flexible Global Humanitarian Thematic funding to scale up the cholera response.

Access to timely, flexible funding is critical to address urgent needs in Haiti during the second half of the year. Of particular concern is the underfunding of nutritional support, specifically for treatment of moderate acute malnutrition (MAM); gender-based violence prevention and response services; cholera response; deployment of mobile units for health, nutrition and protection services in hard-to-access areas; and for supporting internally displaced children and families and host communities.

Situation Overview and Humanitarian Needs

Haiti, grappling with a complex history of poverty, political instability, and natural hazards, continued to face increasing humanitarian challenges during the first half of 2023. It is estimated that over 5.2 million Haitians, nearly half of the population, need humanitarian assistance and protection. Thousands of other highly vulnerable people may fall in need shortly, if the situation continues to deteriorate or in case new shocks affect their communities. The compounded crises have differentiated impacts on distinct groups and regions: urban populations entrapped by armed violence; families displaced by violence; food insecure and marginalized communities outside the capital; and repatriated migrants.

The influence of armed groups has increased, coupled with severe human rights violations, including attacks on health centres and schools. The spike in actions by vigilante groups has added another layer of complexity. Since April, BINUH has documented the killing of at least 264 alleged members of armed groups by vigilante groups. The deliberate use of gender-based violence (GBV) against women, girls and boys remains a serious concern. UNICEF partners are documenting increasing numbers of cases, at levels higher than last year, and the trend is likely to rise as armed violence exacerbates risks of sexual violence and exploitation.

Haiti’s vulnerability to natural disasters is well-documented and the country continues to grapple with their devastating consequences. The levels of rainfall intensified in early June, causing heavy flooding across Haiti, Ouest being the most affected department- including Citè Soleil, Léogâne, Grand-Goâve and Port-au-Prince communes. Approximately 45,000 families were affected, 58 fatalities were recorded, and 30,000 hectares of cultivated land were flooded. With livelihoods considerably impacted, this early-season flooding event adds to multiple layers of vulnerability in the country and is expected to further exacerbate the food insecurity situation, and further impact access to income and basic goods, in the coming months. Also in June, a 5.5 magnitude earthquake shocked the Grand’Anse department, leaving four people dead and 37 injured.

By the end of June 2023, since the resurface of the disease in October 2022, 52,021 suspected cholera cases had been reported, of them 3,385 were confirmed – 37 per cent were children under ten years of age. With a healthcare system facing significant challenges, concerns arose due to spikes in cholera cases detected in June after the floods affecting parts of the country.

The combination of political instability, economic hardships, and environmental challenges continues to lead to significant internal displacement and migration from Haiti. According to latest figures released by IOM, at least 61,600 Haitian returnees have arrived in the country by land, sea and air so far in 2023. Furthermore, over 165,000 people are now internally displaced in Haiti due to armed groups violence, and around 13,000 more have displaced due to recent floods. While most of the internally displaced people (IDPs) seek shelter with family members, a significant number has sheltered in spontaneous sites. According to recent assessments conducted by UNICEF partners, IDPs in these spontaneous sites are in urgent need of emergency aid and psychosocial support, and need support for long-term

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2 Known as Bwa Kale, these self-defence groups have emerged to counter armed groups.
3 BINUH, ‘Remarks of Special Representative Maria Isabel Salvador to the Security Council open briefing on Haiti’ 6 July 2023.
5 WFP, ‘Detection of flood impacts on agriculture through satellite imagery (June 2023)’, 22 June 2023.
resettlement, cash, clothing, education opportunities for children, livelihoods and income sources. Most of them are unemployed women heads of household.9

The past month has been also marked by high level missions and advocacy moments which have helped raise awareness on the situation in Haiti. On 16 June, the United Nations Economic and Social Council (ECOSOC) held a high-level special emergency meeting to address the urgent humanitarian and development needs in Haiti. During the meeting, ECOSOC president remarked the concerning underfunding of the 2023 Humanitarian Response Plan (HRP), which is currently only 23 per cent funded. UNICEF Executive Director remarked that lifesaving humanitarian assistance must go hand-in-hand with development solutions that build resilience of Haitian communities and social service systems.10 Furthermore, from 18 to 20 June, the Executive Directors of the World Food Programme (WFP), Cindy McCain, and UNICEF, Catherine Russell, visited Haiti. They called for far more support for highly vulnerable children and families facing rampant violence, deadly natural disasters, and a resurgence of cholera in Haiti.11

UNICEF’s Executive Director has been appointed as the Principal Advocate on Haiti for the Inter-Agency Standing Committee (IASC). At the request of the United Nations Emergency Relief Coordinator, Russell will help lead the international humanitarian community’s effort to galvanize attention, support, and resources at a moment of unprecedented need in the country. She will be engaging with Haitian civil society, government, and international partners to help expand access for safe, dignified, and predictable humanitarian assistance and protection for children and their families and create a pathway for new solutions.

Humanitarian Leadership, Coordination and Strategy

In early June, the cluster approach was activated for Haiti, endorsed by the Emergency Relief Coordinator. UNICEF’s leadership has been confirmed as follows: Education Cluster (UNICEF-Save the Children/Ministry of Education-MoE co-leadership); WASH Cluster (UNICEF / national water and sanitation agency – DINEPA co-leadership); Nutrition Cluster (UNICEF/Ministry of Health –MoH co-leadership), and Child Protection Area of Responsibility (UNICEF/Institute of Social Welfare and Research co-leadership). UNICEF is currently increasing its capacities with dedicated staff for cluster coordination and information management (IM). For Education, a Coordinator is in country, ensured by Save the Children; IM is in country – through stand-by-partner; for WASH, a Coordinator is in country until August and a the process for new recruitment is ongoing, IM is in country – through stand-by-partner; for Nutrition, Coordinator and IM are in country; for Child Protection, a Coordinator will be deployed by end July/early August, the recruitment process for the IM position is in its final stages.

In addition, UNICEF will continue co-leading Protection against Sexual Exploitation and Abuse (PSEA) engagement and compliance alongside the United Nations Integrated Office in Haiti (BINUH). UNICEF actively participates in humanitarian inter-sector and inter-agency coordination platforms led by OCHA, in coordination with the Haitian Civil Protection General Directorate (DGPC) and other Haitian Government institutions.

Following the declaration of the cholera outbreak in October 2022 by the Government of Haiti, a Cholera Task Force with five dedicated Thematic Groups has been activated, notably: Group 0 - Coordination led by the MoH; Group 1 - Epidemiology and surveillance of suspected cases, led by the MoH Division of Epidemiological Research (DLER); Group 2 - Case management, led by DOSS (Direction Organisation des Soins de Santé); Group 3 WASH - Infection Prevention and Control (IPC), led by DINEPA and the MoH Division for Health Promotion and Environmental Protection (DPSPE); Group 4 – Vaccination, led by the MoH National Vaccination programme Coordination Unit (UCNPP); Group 5 - Community awareness and Communication, including RCCE, led by the MoH Communication Coordination Unit (UCP). UNICEF continues supporting the departmental-level coordination mechanisms notably for the health and WASH response, including through the Department Sanitaire or Health Directorsates and the WASH directorates (OREPAs) – and local government counterparts.

Summary Analysis of Programme Response

Education

During the reporting period, the security situation, generalized violence, and heavy rains continued to challenge access to education in many parts of Haiti. Soaring violence in Cité Soleil and Martissant in Port-au-Prince (PaP), and Artibonite, which has resulted in forced displacement and school closures, causing disruptions in education for at least 54,469 students (including 27,464 girls and 27,005 boys) in Artibonite department.

The impact of recent heavy rains caused destruction across Haiti, affecting more than 19,000 school-aged children in the West, Nippes, South-East, Grande Anse and Artibonite departments.

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9 Assessments conducted by UNICEF implementing partners in targeted spontaneous sites in Port-au-Prince, in May 2023.
Through UNICEF-supported emergency assistance, 2,147 school kits were distributed to 950 girls and 1,197 boys in PaP, Nippes and South-East departments. To raise awareness and understanding of management of menstruation in schools, during the reporting period, 517 children were trained on menstrual hygiene, in the Grand Sud and Nippes departments. Through ECHO-funded activities, 17 teachers (16 men and 1 woman) coming from six schools (one private and five public) in areas affected by armed violence in Martissant, were trained to deliver accelerated learning methodologies to prepare 220 children for official national exams.

To ensure the continuation of children’s education in the South department, a total of 750 items of school furniture (benches, chalkboards, tables and desks) were distributed to five schools. Since May 2023, UNICEF has provided cash transfers to 697 teachers in ten departments of Haiti as part of the recovery of learning loss efforts launched by the MoE to support 2,000 substitute teachers in financial difficulty, for a four-months period. This initiative will enable students to be better prepared for the official exam and increase catch-up learning efforts to address learning losses in the country. The Education Cluster is scaling up its capacity to better respond to increasing needs following the impact of floods, by supporting needs assessment on education in various departments, and by developing with cluster members a response plan for an all-in mobilization.

Health

In an effort to continue improving access to health care services for the most vulnerable populations across Haiti, UNICEF continued supporting the deployment, supply and operations of mobile clinics. During the reporting period, the Southern Health Department, with UNICEF support, deployed mobile clinics to strengthen health services at the level of the nine health institutions in seven communes of the department.

Aiming at strengthening the capacities of the health system, UNICEF ensured staff capacities in public health establishments and communities in Ouest, Sud, Grand’Anse and Nippes departments, including 204 health providers and 213 community health workers (CHWs) available for the provision of health care services. More than 5,218 gallons of fuel were distributed to two major hospitals in the Ouest department to continue the delivery of care. As part of the government's health emergency response plan, 140 ASCPs (Agents de Sante Communautaire Polyvalents- Community Health Agents) and AIPs (Auxilière Infirmière Polyvalent – Polyvalent Auxiliary Nurse) have been trained and deployed in Artibonite to strengthen the community response to cholera.

On the health cholera response, in collaboration with WHO/PAHO, UNICEF supported a vaccination campaign against cholera which was organized in the health departments of Centre, Artibonite and Ouest. According to preliminary data, nearly 700,000 people have been vaccinated during the campaign, with coverage rates of coverage rates of 94.35 per cent for Artibonite, 91.37 per cent for Centre, and 60.47 per cent for Ouest department. Due to security constraints in Ouest department, not all communes were reached by the cholera campaign, hence the lower coverage in this department.

UNICEF continued supporting the MoH/ Expanded Program on Immunization (EPI) to procure routine immunization vaccines including injection material, to prevent a stock out at central and health departments level. All the vaccines are delivered to the MoH/EPI. These vaccines help to continue the integrated campaign (Cholera and catch-up of zero dose and under immunized children). The quantities procured by UNICEF in June include: 800,000 doses of BCG vaccine, 200,000 doses of MR vaccine, 100,000 doses of IPV vaccine, 10,000 doses of Penta vaccine, 400,000 doses of DTP vaccine and 500,000 doses of Td vaccine.

Nutrition

UNICEF has continued to scale up its emergency nutrition response in light of the worsening nutrition situation. During the reporting period, a total of 18,172 children aged between 6 and 59 months (9,214 girls and 8,958 boys) were screened for malnutrition across the country, out of which 561 were admitted for treatment for severe wasting and 957 for treatment for moderate wasting. UNICEF has also ensured an uninterrupted pipeline of ready-to-use therapeutic food (RUTF) and other nutrition supplies to support the provision of care for children with wasting. UNICEF also took proactive actions to ensure prevention of malnutrition. During the reporting period, about 900 mothers and caregivers were sensitized on improved infant and young child feeding practices.

The need to scale up the nutrition response in light of the deteriorating nutrition has also entailed increased capacity and enhanced coordination. In this regard, UNICEF has deployed surge emergency nutrition specialists and stand-by partners on the ground to support the response. In addition, UNICEF has recruited a dedicated Nutrition Cluster Coordinator as well as an Information Management Officer to strengthen coordination at national and sub-national levels.

Child Protection and GBV

The intertwined crises in Haiti have significant impacts on families, where the most vulnerable children face psychological distress. As a co-leader in the field of child protection, UNICEF, in collaboration with its partners (APADEH, OCCEDH, ICDH, and SAKALA), provides support to these children by establishing Child-Friendly Spaces (CFS) and

12 Support to this campaign was ensured with non-emergency funds.
organizing psychosocial activities. During the reporting period, eight girls have benefited from interventions addressing gender-based violence.

For the Metropolitan Area of Port-au-Prince (ZMPP), where most neighbourhoods are under the control of armed groups, the implementation of Mobile Support Teams (EAEs) has allowed for the provision of psychosocial care and awareness-raising services to 17,606 individuals, including 6,082 children (3,544 girls, 2,538 boys) and 736 parents (528 women, 208 men), through UNICEF partners (APADEV, SAKALA, OCCEDH, and ICDH). Furthermore, awareness sessions on children’s rights and protection, as well as on the recruitment of children by gangs and armed groups, have reached over 10,000 people, including 4,632 girls 2,241 boys, and 2,369 women, in the ZMPP and the Grand Sud.

In the ZMPP, 329 children (215 girls, 114 boys) living in Bas Delmas and Cité Soleil communes have received specialized care. At the border points of Ouanaminthe and Belladère, 27 unaccompanied or separated children have benefited from alternative care or family reunification.

UNICEF, through its partners, continued scaling up response, prevention, and risk mitigation actions for survivors of gender-based violence, as well as for women and girls at risk as a result of the upsurge in incidents of GBV, particularly cases of sexual violence committed by armed groups. Through UNICEF-supported activities, 3,432 people (including 1,635 women, 783 girls, 534 boys and 480 men) received GBV services through multi-sectoral case management, psychosocial support, and the dissemination of information on GBV risks and services in communities.

In addition, as part of the capacity-building plan for partners involved in GBV, a three-days training session was carried out 30 participants from various UNICEF partner organizations, on the basic principles and procedures of case management in the field of GBV. The training was aimed at GBV partners (IBESR, BPM, OFAVA, CAPAC, RAPHA HOUSE) involved in GBV response programming (social workers, social assistants, counsellors legal and security staff, supervisors, among others). The aim of the training is to help case managers develop critical skills in their work with survivors of GBV. An additional training was carried out targeting focal points from UNICEF and partner organizations, on GBV risk mitigation, including PSEA, safety auditing, consultation with women and girls, and on the GBV Pocket Guide (to manage GBV/ASR incident disclosures).

UNICEF continues to provide technical support to the MoE to integrate aspects of GBV into education programmes by organizing a workshop with managers and partners. The workshop resulted in a plan to implement the code of conduct and the charter of good practice on GBV.

As part of UNICEF’s sectoral coordination role, following the floods in early June, coordination meetings were organized including two meetings of the child protection sub-sector and an ad hoc meeting of the coordination group in the ZMPP. These meetings have allowed the sub-sector to reach an overall understanding of the situation of children after the floods, with the aim of advocating for the concerned stakeholders. The report contains relevant recommendations for the child protection sub-sector in particular, as well as for the overall protection sector.

**PSEA**

During June, UNICEF trained 36 (15 men, 21 women) partners, including government counterparts, from Direction Sanitaire Nord-Est (DSNE), MoH, Institut du Bien-Etre Social et de Recherches (IBESR), Groupe de Recherche et d'action pour le Bien Étre collectif (GRABEC), General Directorate of Civil Protection (DGPC), Brigade de protection des mineurs (BPM) in Artibonite. The training focused on their roles and responsibilities in preventing and reporting cases of sexual exploitation and abuse. In Port-au-Prince, 190 frontline workers (76 men/104 women) from the partner organization OCCEDH were trained on issues related to gender and sexual exploitation and abuse. UNICEF distributed a total of 8,000 leaflets on PSEA, and 7,500 posters explaining the existing complaint mechanisms.

The PSEA hotline (8811), funded by WFP and UNICEF, received 656 complaints relating mainly to fraud and requests for information. Operators shared existing support services with callers.

**WASH**

During the reporting period, 126,655 affected people gained access to safe drinking water through UNICEF support to water trucking and distribution of 9,462 m³ of chlorinated water in Cité Soleil (PaP), implemented by OREPA Ouest, and through the provision of 2,103 m³ of chlorinated water in six IDPs sites, implemented by Solidarités Internationals. Through these UNICEF-supported actions, over 544,000 people have been reached with access to safe drinking water thus far in 2023.

UNICEF continued supporting cleaning and removal of waste in Cité Soleil in partnership with NGO VIVARIO and the Ministry of Civil Engineering. A total of 1,125 people, including 340 women, from 14 neighbourhoods are mobilized for daily waste cleaning through a cash-for-work approach, and through removal by trucks to the main landfill.

On the WASH cholera response, 62,442 affected people were reached with cholera and/or hygiene kits and sensitization for behaviour change, particularly on hygiene practices for cholera prevention and response. These activities were conducted in Ouest, Centre and Nord departments, through implementing partners (Handicap International-HI, ADRA, etc.).

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13 Including Institut Monfort, Terrain Basket Corridor Lumière, Centre d’Urgence de la Santé Lakou Mouzin, Eglise de Dieu Assemblée Chrétienne, Place Sapatann, Appartement /Place Jean Charles/Place Hogedebre.
ACF, ACCESS) and the leadership of government counterparts (MoH, DINEPA). Over 477,640 people have been reached with ‘cordon sanitaire’ interventions thus far in 2023.

As required, UNICEF supplies humanitarian actors with cholera WASH supplies including chlorine, household water treatment product (Aquatabs), soap, and hygiene kits. Since the start of the outbreak, over 10.96 million tabs of Aquatabs and half a million soap bars have been provided to partners, sufficient for 250,000 people.

For sectoral coordination, UNICEF is reinforcing human resource capacity for co-leadership with DINEPA, through the mobilization of a dedicated WASH sector Coordinator and an Information Manager.

**Social Protection (Humanitarian Cash Transfers)**

One of UNICEF’s core commitments during emergencies is to ensure that children and their families have access to financial assistance to help them meet their basic needs in a dignified manner, and according to their own priorities. In Haiti, the markets are operational, and the provision of humanitarian cash transfers (HCTs) has been demonstrated to be an effective in addressing the needs and promoting the wellbeing of families. Since May 2023, cash transfers have been implemented with the Government (MoE) to guarantee continuity of essential services amidst multiple crises. This intervention makes it possible to pay the salaries of 2,000 teachers to ensure the continuity of education in 123 schools and prevent school breaks. By the end of June, about 34 per cent of beneficiaries (697 households) had received their payments and US$226,930 have been distributed.

The HCT modality is part of UNICEF’s emergency response strategy to help people affected by the crisis and to preserve their dignity and choice. The actual emergency plan aims to provide assistance to 33,840 households, distributing US$10 million by the end of December 2023. Based on the experiences and to continue to increase existing capacities to deliver Cash Transfers, the following actions are being implemented:

- Establishment of HCT Task Force to enhance preparation for and implementation of cash transfers.
- Develop a strategy to monetize UNICEF’s assistance, complementing the procurement model.
- Diversification of Financial Service Providers.

UNICEF continues to closely coordinate its HCT work with Government. During the reported period, UNICEF participated in the strategic workshop on the management information system led by the Ministry of Social Affairs and Labour (SIMAST), contributing to improve the identification of the most vulnerable households covered by social protection programmes, including in response to emergencies.

**Social and Behavior Change (SBC) Accountability to Affected Population (AAP), and Localization**

During the peak of the epidemic at the beginning of June, 40 radio stations covering the entire country broadcast five times a day spots on cholera prevention, reaching 4,400 broadcasts during June.

During the reporting period, over 182,000 people participated in interpersonal communication activities, and around 81,000 people visited the publications of UNICEF’s digital platforms. In June, implementing partners across Haiti conducted 131 training sessions for ASCPs, 75 discussions sessions with community leaders, 1,081 educational talks on preventative measures against cholera, 1,023 demonstration sessions on hand washing, water disinfection, preparation of ORS and homemade formula; 194 tippy taps for handwashing installed in households.

Around 195 questions and feedback inputs were received through complaint and suggestion boxes. The questions focused on the availability of water, aquatabs and cholera vaccination sites.

In terms of community engagement, two partners have been active: CHREFSSA and ADRA. These two organizations work respectively in the departments of Grande Anse, Ouest and Sud-Est. New partnerships are being finalized for the continuation of mobilizations throughout the country.

**Human Interest Stories and External Media**

**Press releases:**

- **15 June 2023**: Nearly 3 million children need support in Haiti – highest number on record
- **16 June 2023**: UNICEF Executive Director Catherine Russell's remarks at the ECOSOC Special Session on Haiti - “Saving Lives: Addressing the urgent food security needs of Haiti”
- **20 June 2023**: WFP and UNICEF Executive Directors visit Haiti to galvanize international support amid record humanitarian needs
- **29 June 2023**: UNICEF Executive Director Catherine Russell's remarks on Haiti at the Daily Press Briefing by the Office of the Spokesperson for the Secretary-General

**External media:**

- **15 June 2023**: [Miami Herald] HAITI Record hunger, armed gangs and raging inflation: U.N. convenes special meeting on Haiti crisis
- **26 June 2023**: [TV5 Monde] Interview UNICEF Regional Director
Next SitRep: August 2023

UNICEF Haiti: https://www.unicef.org/haiti/

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Email: gethomas@unicef.org

Annex A
Funding Status*

<table>
<thead>
<tr>
<th>Sector</th>
<th>Requirements</th>
<th>Humanitarian resources received in 2023</th>
<th>Resources available from 2022 (Carry-over)</th>
<th>Funding gap</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health</td>
<td>23,981,485</td>
<td>2,669,798</td>
<td>903,514</td>
<td>20,408,173</td>
<td>85%</td>
</tr>
<tr>
<td>Nutrition</td>
<td>43,099,989</td>
<td>4,793,759</td>
<td>3,318,443</td>
<td>34,947,787</td>
<td>81%</td>
</tr>
<tr>
<td>Child Protection</td>
<td>42,048,720</td>
<td>2,112,028</td>
<td>863,108</td>
<td>39,073,584</td>
<td>93%</td>
</tr>
<tr>
<td>Education</td>
<td>45,221,328</td>
<td>11,125,788</td>
<td>2,122,895</td>
<td>31,972,645</td>
<td>71%</td>
</tr>
<tr>
<td>WASH</td>
<td>60,518,572</td>
<td>5,963,625</td>
<td>2,285,737</td>
<td>52,269,210</td>
<td>86%</td>
</tr>
<tr>
<td>Social Protection***</td>
<td>14,941,584</td>
<td>29,214</td>
<td>0</td>
<td>14,912,370</td>
<td>100%</td>
</tr>
<tr>
<td>Cross Sectoral</td>
<td>16,160,407</td>
<td>919,176</td>
<td>1,370,117</td>
<td>13,871,114</td>
<td>86%</td>
</tr>
<tr>
<td>Total</td>
<td>245,932,085</td>
<td>27,613,387</td>
<td>10,863,814</td>
<td>207,454,884</td>
<td>84%</td>
</tr>
</tbody>
</table>

*As of 30 June 2023. As defined in Humanitarian Appeal 2023 for a period of 12 months.
**Distribution across sectors may vary from the previous report, due to corrections on funding received dates.
***Funding invested in sectoral cash transfers is reflected under the respective sector's available funds (i.e. education).

Annex B
Summary of Humanitarian Response Results

<table>
<thead>
<tr>
<th>Sector</th>
<th>Indicator</th>
<th>HAC 2023 Target TOTAL</th>
<th>Girls</th>
<th>Boys</th>
<th>Women</th>
<th>Men</th>
<th>Results</th>
<th>Change (since the last SitRep)</th>
<th>% PROGRESS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nutrition</td>
<td># Children aged 6 to 59 months screened for wasting</td>
<td>600,000</td>
<td>85,719</td>
<td>81,725</td>
<td></td>
<td>167,444</td>
<td>18,172</td>
<td>24%</td>
<td></td>
</tr>
<tr>
<td></td>
<td># Children aged 6-59 months with SAM admitted for treatment</td>
<td>115,602</td>
<td>3,976</td>
<td>3,848</td>
<td></td>
<td>7,824</td>
<td>602</td>
<td>7%</td>
<td></td>
</tr>
<tr>
<td></td>
<td># Primary caregivers of children 0-23 months receiving IYCF counselling</td>
<td>519,000</td>
<td></td>
<td></td>
<td>39,972</td>
<td>-</td>
<td>39,972</td>
<td>900</td>
<td>8%</td>
</tr>
<tr>
<td>Health</td>
<td># Children and women receiving essential healthcare services in UNICEF supported facilities</td>
<td>652,200</td>
<td>25,222</td>
<td>23,462</td>
<td>24,266</td>
<td>72,950</td>
<td>3,378</td>
<td>11%</td>
<td></td>
</tr>
<tr>
<td></td>
<td># Children under one vaccinated against measles</td>
<td>162,400</td>
<td>35,480</td>
<td>31,693</td>
<td></td>
<td>67,173</td>
<td>9,489</td>
<td>41%</td>
<td></td>
</tr>
<tr>
<td></td>
<td># new health professionals recruited and deployed in health institutions</td>
<td>200</td>
<td></td>
<td></td>
<td>33</td>
<td>13</td>
<td>58</td>
<td>46</td>
<td>29%</td>
</tr>
<tr>
<td>Water, sanitation and hygiene</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

14 Figures are reported in the national health information system. Results reported in the previous Situation Report have been modified and updated, taking into account additionally reported data, verified and modified in the national health information system.
<table>
<thead>
<tr>
<th>Sector</th>
<th>Indicator</th>
<th>HAC 2023 Target TOTAL</th>
<th>Total Result 2023</th>
<th>Change (since the last SitRep)</th>
<th>% PROGRESS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Girls</td>
<td>Boys</td>
<td>Women</td>
<td>Men</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>1,543,900</strong></td>
<td><strong>136,145</strong></td>
<td><strong>115,249</strong></td>
<td><strong>157,041</strong></td>
</tr>
<tr>
<td></td>
<td># People accessing a sufficient quantity of safe water for drinking and domestic needs</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td><strong>1,440,000</strong></td>
<td><strong>119,412</strong></td>
<td><strong>95,528</strong></td>
<td><strong>143,292</strong></td>
</tr>
<tr>
<td></td>
<td># People reached with critical WASH supplies (including hygiene items) and services</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td></td>
<td><strong>118,000</strong></td>
<td><strong>603</strong></td>
<td><strong>482</strong></td>
<td><strong>723</strong></td>
</tr>
<tr>
<td></td>
<td># People accessing appropriate sanitation facilities</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>382,714</strong></td>
<td><strong>14,981</strong></td>
<td><strong>17,622</strong></td>
<td><strong>-</strong></td>
</tr>
<tr>
<td></td>
<td># of children accessing mental health and psychosocial support in their schools/learning programmes</td>
<td></td>
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<td></td>
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<tr>
<td></td>
<td></td>
<td><strong>382,714</strong></td>
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<tr>
<td></td>
<td># People accessing a sufficient quantity of safe water for drinking and domestic needs</td>
<td></td>
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<tr>
<td>Education</td>
<td></td>
<td><strong>1,120,000</strong></td>
<td><strong>21,409</strong></td>
<td><strong>8,806</strong></td>
<td><strong>3,415</strong></td>
</tr>
<tr>
<td></td>
<td># Children accessing formal or non-formal education, including early learning</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td><strong>205,200</strong></td>
<td><strong>16,894</strong></td>
<td><strong>12,437</strong></td>
<td><strong>3,990</strong></td>
</tr>
<tr>
<td></td>
<td># Children receiving individual learning materials</td>
<td><strong>6,480</strong></td>
<td><strong>462</strong></td>
<td><strong>539</strong></td>
<td><strong>-</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>99,600</strong></td>
<td><strong>6,097</strong></td>
<td><strong>5,461</strong></td>
<td><strong>10,014</strong></td>
</tr>
<tr>
<td></td>
<td># of children accessing mental health and psychosocial support in their schools/learning programmes</td>
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<tr>
<td></td>
<td># Women, girls, and boys accessing gender-based violence risk mitigation, prevention and/or response interventions</td>
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<td></td>
<td></td>
<td><strong>346,571</strong></td>
<td><strong>4,632</strong></td>
<td><strong>2,241</strong></td>
<td><strong>2,369</strong></td>
</tr>
<tr>
<td></td>
<td># Unaccompany and separated children provided with alternative care or reunited</td>
<td></td>
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<tr>
<td></td>
<td># People assisted with cholera kits through rapid response teams benefitting from cordon sanitaire and community response</td>
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<td><strong>4,000,000</strong></td>
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<td>People assisted with cholera kits through rapid response teams benefitting from cordon sanitaire and community response</td>
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<td></td>
<td></td>
<td><strong>4,000</strong></td>
<td><strong>75</strong></td>
<td><strong>53</strong></td>
<td><strong>-</strong></td>
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<td></td>
<td>People assisted with cholera kits through rapid response teams benefitting from cordon sanitaire and community response</td>
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<tr>
<td></td>
<td></td>
<td><strong>4,000</strong></td>
<td><strong>75</strong></td>
<td><strong>53</strong></td>
<td><strong>-</strong></td>
</tr>
</tbody>
</table>

15 To avoid double counting, the total results figure reflects the highest single monthly reported figure during the year.