Highlights

- This reporting period marked the beginning of the El-Niño impacts as forecasted for the September, October, November, December (SOND) rainfall season by the Uganda National Meteorological Authority (UNMA).

- Government of Uganda disseminated the National El-Niño Preparedness and Contingency Plan in September to which aligned its UNICEF’s preparedness plan.

- The localized Cholera outbreak in the two districts of Kayunga and Namayingo, was declared over by the end of September 2023.

- UNICEF and partners have reached a total of 4,807 severely wasted children with treatment in Karamoja region and among refugees and host communities during this reporting period.

- As of October this year, 64,900 children and women have been reached with safe water for drinking and domestic needs.

- A total of 129,767 children were cumulatively supported to access formal and non-formal education, including early learning.

**UNICEF’s response and funding status**

![Bar graph showing funding status across various sectors]

<table>
<thead>
<tr>
<th>Sector</th>
<th>Measles vaccination</th>
<th>Funding status</th>
<th>SAM admissions</th>
<th>Funding status</th>
<th>MHPSG access</th>
<th>Funding status</th>
<th>Education access</th>
<th>Funding status</th>
<th>Safe water access</th>
<th>Funding status</th>
<th>HCT access (Households)</th>
<th>Funding status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health</td>
<td>63%</td>
<td></td>
<td>46%</td>
<td></td>
<td>35%</td>
<td></td>
<td>66%</td>
<td></td>
<td>39%</td>
<td></td>
<td>24%</td>
<td></td>
</tr>
<tr>
<td>Food/ Nutrition</td>
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<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td>44%</td>
<td></td>
<td>16%</td>
<td></td>
</tr>
<tr>
<td>Child Protection</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>54%</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td>10%</td>
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<tr>
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<tr>
<td>WASH</td>
<td></td>
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<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Cash/ Transfer</td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

**UNICEF Appeal 2023**

US$43.2 million

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

Despite the growing humanitarian needs of women and children in Uganda, UNICEF’s Humanitarian Action for Children (HAC) remains underfunded, with a gap of US$28.7 million or 66 per cent, against a total requirement of US$43.2 million. UNICEF has received a total of US$14.5 million to sustain life-saving services for women and children. This includes US$11.6 million carried over from 2022 and funding received from the Spanish Committee for UNICEF, Government of Japan, and the UK Government through the Foreign, Commonwealth, and Development Office (FCDO) in response to the refugee influx in Uganda, as well as an internal allocation from the Global Humanitarian Thematic Fund (GHTF) to mitigate the impacts of climate change on food security and livelihoods in Karamoja sub-region.

Carry-over funds from 2022 were generously contributed by the US Fund for UNICEF, Spanish Committee for UNICEF, German Committee for UNICEF, United Kingdom of Great Britain and Northern Ireland, the Netherlands Committee for UNICEF, United States Agency for International Development (USAID), United Nations Office for the Coordination of Humanitarian Affairs (OCHA), Central Emergency Response Fund (CERF) Secretariat, Global Humanitarian Thematic Fund (GHTF), European Community Humanitarian Office (ECHO) and the Government of the Netherlands.

Situation overview and humanitarian needs

Hydrometeorological hazards

The month of September marked the beginning of the September October November December (SOND) rainfall season and also the beginning of the El-Nino impacts as forecasted by the Uganda National Meteorological Authority (UNMA). These climatic events triggered heavy storms/hailstorms in different parts of the nation, floods and landslides/mudslides. According to the Office of the Prime Minister (OPM), and the International Organization for Immigration (IOM), disasters have so far affected a total of 2,557 individuals, representing 662 households while 246 individuals from 57 households were internally displaced in the month of September. Adults (19-64 years) were the most affected population group (59 per cent), followed by children under 18 years (30 per cent) and the elderly who were above 64 years (11 per cent). The most pressing needs are non-food items and child protection among others. Houses partially damaged totaled 189 while 51 houses were completely destroyed. Twenty-eight water facilities and seven schools were also affected. Disasters have so far affected 97,727 individuals and displaced over 7,908 people as reported from January to September 2023. The Government of Uganda and its partners continue to support preparedness and response efforts as the peak of the El Nino is expected in mid-November. A national El Nino response plan was developed and shared with partners under the coordination of the Department of Relief, Disaster Preparedness, and Management in the Office of the Prime Minister.

Food insecurity in Karamoja region

In Karamoja region, crisis (IPC Phase 3) outcomes will continue to persist into 2024 due to minimal food stocks, severely weakened coping capacity, livestock asset depletion, and low purchasing power caused by poor short cycle harvests in September. The severely wasted children (6-59 months) being treated with severe acute malnutrition (SAM) remained above the five-year average. However, it is 48 percent lower than last year’s figures due to timely identification, referral, and treatment. While severe wasting typically improves following the September harvests, sustained poor dietary intake is expected to keep levels of SAM elevated.

Disease Outbreaks

During this reporting period, UNICEF participated in a recent Joint External Evaluation (JEE) of the International Health Regulations (IHR - 2005) which was organized by the World Health Organisation (WHO), Department of Disaster Preparedness and Risk Mitigation in the Office of the Prime Minister (OPM) and coordinated by the Ministry of Health – National Public Health Emergency Operations Center (PHEOC). The assessment focused on Uganda’s current capacity to comply with the IHRs with reference to the National Action Plan for Health Security (NAPHS), which was put in place in 2019, and the country’s experience from the COVID-19 pandemic and the 2022 Ebola outbreak. Some of the successes that have been registered since the first JEE include the passing of the amended Public Health Act by Parliament, the approval by Cabinet of the principles for amending the Animal Diseases Act, strengthening surveillance of zoonotic diseases and the launch of the biosafety Level 2 laboratory in Queen Elizabeth National Park.

Measles

Measles outbreak in refugee hosting districts in Northern Uganda continues to be a threat to both refugees and host communities. During the reporting period, Kiryandongo district experienced yet another round of measles outbreak in

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1. [https://fews.net/east-africa/uganda](https://fews.net/east-africa/uganda)
the refugee settlement of Panyandoli where 60 cases were reported with no deaths. The measles outbreak in the settlement is still linked to an ongoing Measles outbreak in South Sudan and the low district measles vaccination coverage of about 64% that cannot offer herd immunity. UNICEF, UNHCR, IRC, WHO and other partners have supported the district in responding to the measles outbreak.

Cholera
During this reporting period, Uganda continued to respond to a localised cholera outbreak\(^2\) in the districts of Kayunga and Namayogo. The cholera outbreak in the two districts, was declared over by end of Sept 2023 due to efforts that were engaged by MoH and its partners including UNICEF hence stopping the transmission cycle. The risk factors for cholera transmission including poor hand hygiene practices, low sanitation coverage, traditional beliefs, and weak enforcement of the Public Health Act among others still persist at community level and the anticipated El Niño - induced heavy rains pose a threat for likely outbreaks in other districts or resurgence in the same districts. UNICEF has documented human interest stories during the outbreak and continues to monitor the situation through the district health office and national task force at the public health emergency operations center (PHEOC).

Refugees
As of October 2023, Uganda is home to over 1.5 million refugees and asylum-seekers, of which 58 per cent are children. Since the start of 2023, Uganda has received 79,964 new arrivals, of which 42,184 arrived through the border entry points mainly at Kisoro, Lokung, and Bundibugyo, and 37,780 were received in Kampala. The 37,780 new arrivals in Kampala are mainly from Eritrea (41 per cent), Somalia (27 per cent), Ethiopia (12 per cent), Sudan (17 per cent), and other nationalities (3 per cent). Uganda has concluded the Uganda Contingency Refugee Response Plan (UCRRP 2024-2025) appeal process and assessment for new and existing partners. Partners are reviewing the revised 2024 Contingency Plans for South Sudanese and DRC refugees through Inter-Sector Working Groups. The Government of Uganda policy pledges were endorsed and will be presented at the upcoming Global Refugee Forum (GRF) in Geneva this December. The pledges reflect the Government’s priorities over the next few years and are intended to inform commitments which will be made by donors during the GRF.

Summary analysis of programme response

Health
During this reporting period, UNICEF continued to engage with MoH and partners, prioritizing delivery of essential health services, risk communication and community engagement, Infection Prevention and Control (IPC)/WASH, follow up and support to EVD survivors. During the period, 101,199 targeted children and women received essential health care services, including immunization and antenatal care of which 7,624 were refugees. Similarly, a total of 51,518 children under one year received measles vaccination in the 29 supported districts of which 4,781 were refugee children. Cumulatively, a total of 450,006 children under one year received measles vaccination of which 38,898 were refugee children while a total of 933,330 women and children received primary health care services (ANC and immunization). UNICEF supported Kiyandongo district to develop a response plan, mapping of hot spots, registration of households and children and conducting a campaign in the community in response to a Measles outbreak.

Nutrition
UNICEF provided technical support to districts and health facilities to carry out community mass screening and integrated outreach to hard-to-reach communities and refugee hosting districts for the early detection and management of child wasting and delivery of essential nutrition supplies\(^3\) and health services during this reporting period. As a result, a total of 1,317 children were treated for Severe Acute Malnutrition (SAM) during the reporting period in Karamoja, bringing the total to 18,353 children aged 6-59 months reached\(^4\) since January. Comparable support was provided to the refugee hosting districts, resulting in the admission of 822 children bringing the number to 9,482 children treated for SAM. Within this reporting period, a total of 121,795 and 483,345 pregnant women seeking Antenatal Care (ANC) received infant and young child feeding counselling (IYCF) in Karamoja and refugee hosting districts respectively. Cumulatively, UNICEF supported treatment of 31,333 children with SAM and 1,021,131 people were reached with IYCF since the beginning of the year. UNICEF efforts to improve Maternal, Infant, Young Child and Adolescent Nutrition (MIYCAN) continued through on-job coaching and job mentorships conducted for 300 health workers in Isingiro and 101 in Kyegyowa and Kamwenge. Despite this accomplishment, there were some instances of therapeutic milk

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\(^2\) Outbreak kicked off in July 2023

\(^3\) Supplies including Ready to Use Therapeutic Food (RUTF), RoSoMal, F75, and F100, to designated healthcare facilities, ensuring they deliver timely and appropriate care for malnourished children. Furthermore, priority was given to providing essential nutrition equipment such as weighing scales, ITC kits, and ECD kits to ensure access to services for screening and management of child wasting.

\(^4\) In both Outpatient Therapeutic Care (OTC) and Inpatient Therapeutic Care (ITC)
shortages observed, primarily as a result of the high global demand. UNICEF worked closely with the UNICEF Supply Division in Copenhagen to prioritize procurement to the country.

**Child Protection**

During this reporting period, UNICEF and its implementing partners continued to provide technical support and mentorship to district officials and partners for provision of critical child protection services to children and their families in need of care and protection through probation officers, community service departments, social welfare officers at sub-county level and community-based structures notably para-social workers.

Provision of Mental Health and Psychosocial support (MHPSS) services continued in Kasese reaching a total of 337 Allied Defence Forces (ADF) attack victims (136 female, 201 male). A further 1,821 people (616 male, 1,205 female) were reached with community-based MHPSS by para-social workers in the 12 border sub-counties of Kasese as part of extended support to those affected by the attack. Of the total number reached, 816 are children (232 boys and 584 girls). A total of 445 children (199 male, 246 female) children experiencing violence and those at risk of experiencing violence in both refugee settlements and host sub-counties were provided with case management services, including legal aid.

In Karamoja region, UNICEF provided multisectoral case management services\(^5\) to 541 children (238 boys, 303 girls) affected by the Nutrition emergency in Kaabong, Amudat, and Napak Districts. To create awareness on child protection prevention and response in and out of emergency, UNICEF supported engagements with 1,774 adolescents (806 boys, 968 girls) in Amudat District to create awareness on prevention and response to Violence against Children (VAC). Additionally, 60 adolescents (25 boys, 35 girls) in Amudat District were trained in the life skills.

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

During the reporting period, UNICEF supported capacity building of 319 people (213 male and 106 female) from respective District Disaster Management Committees and Sub County Disaster Management Committee on GBV and PSEA in Napak, Amudat and Nabilatuk districts. The training session enhanced the capacity of the committee members on emergency preparedness and response and referral pathways including preventive and response mechanism for GBV and PSEA. Additional 362 persons (80 male, 282 female) were reached with messages on PSEA and GBV, including information on safe and accessible channels to report SEA.

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

During this reporting period, UNICEF continued to support post-Ebola and Marburg viral disease (MVD) preparedness and response in Kassanda and Kyotera districts respectively. In Kassanda, seven solar-powered water supply systems were completed in Health Centre Facilities (HCFs) that are being implemented in line with the Ministry of Health’s post-EVD recovery and preparedness plan. These facilities have been extended to support the immediate communities around the health centres, which is also a key component for system sustainability with trained water committees that comprise both health facility staff and community members and responsible for the Operation and Maintenance (O&M) of the systems, and financial contribution (water fees) provided by those community members benefitting from access to the water system. These water systems are benefitting a total of 30,100 people (HCF patients, staff, and community members). UNICEF supported IPC strengthening at eight regional referral hospitals, operationalizing two emergency operation centres at Jinja and Mubende hospitals and finalizing the national IPC strategy and training for critical national level IPC specialists.

In Kyotera, the water supply system, which was initiated as part of the MVD response to strengthen WASH services in the HCF identified to receive anticipated MVD cases, was delayed several times due to challenges identifying suitable drilling locations near the facility. However, these were finally overcome during this reporting period with a productive borehole now drilled, and the remaining civil works underway.

**Social Protection**

UNICEF has recently completed the second round of the Humanitarian Cash Transfer project in Lamwo district. The project started in the first half of the year, targeting 6,335 beneficiaries in refugee and host communities in Lamwo district. In this reporting period, the activities were conducted at the end of August in collaboration with the Office of the Prime Minister (OPM) and key stakeholders in Lamwo district. Out of the 6,335 individuals (2,427 households) initially targeted as beneficiaries, 6,251 individuals (2,396 households), or 99 per cent, successfully received their cash

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\(^5\) The cases supported included defilement, forced marriages, child trafficking, child neglect and children in conflict with the law. The services provided included mediation and provision of MHPSS, access to Justice, health, and provision of alternative care to children in need of alternative care services based on the nature of their cases.
allocations. Each eligible child, just as in the first cycle, received a two-month allocation of 90,000 Uganda Shillings, equivalent to US$25. UNICEF retained 30 per cent of this amount, which amounts to US$7.5, as part of a beneficiary savings plan designed to mitigate future unforeseen challenges.

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

**Recommendations from the JEE specific to the Risk Communication and Community Engagement (RCCE) systems and pillar moving forward include:**

- Use one Health platform to advocate for RCCE under the coordination of the Office of the Prime Minister to allow multi sectoral approach to public health emergencies, shocks and disasters.
- Promote and facilitate joint planning and reporting by community stakeholders on community engagement interventions.
- Advocate and motivate for allocation of financial and human resources for RCCE at national and district level.
- Improve RCCE capacities at district and subdistrict level - train district teams and community-based organisations on RCCE principles and practices.

During this reporting period, UNICEF supported the Ministry of Health to develop and disseminate messages on El Nino, which were incorporated in the ongoing mass media campaign on recurring public health emergencies (PHEs). Messages were in English and 12 local languages and ran interchangeably with other different messages on both Radio and Community Audio Towers (CAT) in different regions across the country. The mass-media campaign on PHEs is running on 30 FM radio stations and 100 CATs, up to the end of December 2023.

Cumulatively, 6.6 million people have been reached with messages on prevention and access to services; 650,000 accessed risk communication and community engagement and 1 million people shared feedback and concerns through established mechanisms.

UNICEF supported 15 priority refugee hosting districts to design, budget, implement and monitor social mobilisation plans for the October Integrated Child Health Days (ICHDs). The District Health Educators (DHEs) were supported to conduct outreaches to engage with community structures in order to adopt the recommended family care practices and demand basic services at different points. The community-based mobilization is complimenting the on-going mass-media campaign on PHEs mentioned above.

**Education**

During this reporting period, schools opened for the third and final academic term in the school calendar. Schools across the country are sitting for promotional and national examinations. A total of 148 (74M;74F) Accelerated Education Programming (AEP) learners of which 132 (63M; 69F) are refugees and 16 (11M;5F) are nationals from AEP centres supported by UNICEF and partners; are sitting for Primary Leaving Examinations and Uganda Certificate of Education.

UNICEF supported 445 caregivers (110M and 345F) from Bishop Stuart, Busuubizi and Bulera Core Primary Teachers Colleges (PTCs) to successfully complete model three training on community childcare practices. In addition, 218 (51M; 167F) more caregivers from ECD centres in Rwamwanja Refugee Settlement in Kamwenge district successfully completed Module II training in Community Child Care Practices (CCCP) from Canon Apollo core PTCs.

UNICEF provided five tents to five Church of Uganda (COU) Early Childhood Development (ECD) centers in Isingiro, Kamwenge and Kasese as alternative learning spaces to promote access to learning among refugees and flood affected learners benefiting 620 ECD children (280 Boys and 340 Girls). In addition, Kabirizi Primary school in Kasese was supported with four large tents to provide alternative learning space following the destruction of classroom roofs due to strong winds and hailstorm. A total of 114 children (65B and 49G) are benefitting from the tents.

Cumulatively, 129,767 accessed formal or non formal education including early learning.

**Humanitarian leadership, coordination, and strategy**

UNICEF’s humanitarian response in Uganda is in line with the Comprehensive Refugee Response Framework, Grand Bargain commitments and the current Country Programme Document (CPD), and centres on district-level systems strengthening. To this end, district actors are supported to incorporate humanitarian preparedness and response into their annual and midterm district plans.

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6 Overall, 9,459 (4,635F, 4,824M) refugee learners are sitting for primary leaving examinations.
7 P1-68 learners, P.4-16 learners, P5-15 learners, P.6-15 learners.
The Government's national response to disease outbreaks builds on significant investments made by UNICEF and partners in recent years to support national health systems and incorporate learning from previous health emergencies. UNICEF, in collaboration with the Ministry of Health and other partners, is focusing on public health awareness through risk communication and community engagement, coordination and leadership and information and communication technology through the national and district task forces.

UNICEF is supporting national and district specific coordination meetings around nutrition emergency response and governance. UNICEF is supporting the emergency preparedness and response (EPR) initiative by scaling up support to selected districts and sub-county disaster management committees on capacity-building efforts in partnership with the Office of the Prime Minister.

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

Human interest stories and external media

Stories: www.unicef.org/uganda/stories-field

UNICEF Uganda human interest stories:
1. Rescuing dreams amid a cholera outbreak in Buduma Primary School, Namayingo District | UNICEF Uganda
2. Kayunga District’s triumph over Cholera within its borders | UNICEF Uganda
3. The little things making a big difference for education in emergency contexts in Uganda

Next SitRep due: January 2024
UNICEF Uganda: www.unicef.org/uganda
Uganda Humanitarian Action for Children Appeal: https://www.unicef.org/appeals/uganda

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Annex A: Funding Status*

<table>
<thead>
<tr>
<th>Sector</th>
<th>Requirements</th>
<th>Funds available</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Humanitarian resources received in 2023</td>
<td>Resources available from 2022 (carry-over)</td>
<td>US$</td>
<td>%</td>
</tr>
<tr>
<td>Nutrition</td>
<td>7,281,879</td>
<td>1,732,413</td>
<td>1,531,225</td>
<td>4,018,241</td>
</tr>
<tr>
<td>Health</td>
<td>9,014,266</td>
<td>172,167</td>
<td>3,162,923</td>
<td>5,679,176</td>
</tr>
<tr>
<td>Water, sanitation &amp; hygiene</td>
<td>12,198,083</td>
<td>0</td>
<td>1,922,947</td>
<td>10,275,137</td>
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<tr>
<td>Child protection, GBVIE and PSEA</td>
<td>6,305,839</td>
<td>1,068,868</td>
<td>2,311,189</td>
<td>2,925,782</td>
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<tr>
<td>Education</td>
<td>4,364,510</td>
<td>0</td>
<td>1,940,166</td>
<td>2,424,344</td>
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<td>Social Protection</td>
<td>4,000,000</td>
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<td>752,000</td>
<td>3,248,000</td>
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<tr>
<td>Total</td>
<td>43,164,577</td>
<td>2,973,448</td>
<td>11,620,449</td>
<td>28,570,680</td>
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</tbody>
</table>

* As defined in the 2023 Humanitarian Action for Children Appeal for 12 months
## Annex B: Summary of programme results

<table>
<thead>
<tr>
<th>Indicator disaggregation</th>
<th>2023 target</th>
<th>2023 results</th>
<th>Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Health</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of children vaccinated against measles</td>
<td>602,174</td>
<td>379,268</td>
<td>63%</td>
</tr>
<tr>
<td># of children and women accessing primary healthcare in UNICEF - supported facilities</td>
<td>2,045,688</td>
<td>795,514</td>
<td>39%</td>
</tr>
<tr>
<td><strong>Nutrition</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of children 6-59 months with severe wasting admitted for treatment</td>
<td>67,440</td>
<td>31,333</td>
<td>46%</td>
</tr>
<tr>
<td># of primary caregivers of children 0-23 months receiving infant and young child feeding counselling</td>
<td>1,104,787</td>
<td>1,021,131</td>
<td>92%</td>
</tr>
<tr>
<td><strong>Child protection, GBVIE and PSEA</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of children, adolescents and caregivers accessing community-based mental health and psychosocial support</td>
<td>89,156</td>
<td>30,971</td>
<td></td>
</tr>
<tr>
<td># of women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions.</td>
<td>218,216</td>
<td>63,774</td>
<td></td>
</tr>
<tr>
<td># of people with safe and accessible channels to report sexual exploitation and abuse by personnel who provide assistance to affected populations</td>
<td>205,644</td>
<td>138,422</td>
<td></td>
</tr>
<tr>
<td># of unaccompanied and separated children provided with alternative care and/or reunified</td>
<td>3,785</td>
<td>732</td>
<td></td>
</tr>
<tr>
<td><strong>Water, sanitation, and hygiene</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of people accessing a sufficient quantity and quality of water for drinking and domestic needs</td>
<td>166,000</td>
<td>64,900</td>
<td>39%</td>
</tr>
<tr>
<td># of people accessing appropriate sanitation services</td>
<td>58,300</td>
<td>11,004</td>
<td>19%</td>
</tr>
<tr>
<td># of people reached with critical WASH supplies</td>
<td>1,494,900</td>
<td>702,479</td>
<td>47%</td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of children accessing formal or non-formal education, including early learning</td>
<td>197,644</td>
<td>129,767</td>
<td>66%</td>
</tr>
<tr>
<td><strong>Social protection</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of households reached with UNICEF-funded humanitarian cash transfers</td>
<td>10,000</td>
<td>2,396</td>
<td>24%</td>
</tr>
<tr>
<td><strong>Risk communication and social mobilization/ Community Engagement</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of people reached through messaging on prevention and access to services</td>
<td>9,677,046</td>
<td>3,309,627</td>
<td>34%</td>
</tr>
<tr>
<td># of people who participate in engagement actions</td>
<td>1,935,409</td>
<td>600,817</td>
<td>31%</td>
</tr>
<tr>
<td># of people sharing their concerns and asking questions through established feedback mechanisms</td>
<td>3,870,819</td>
<td>777,965</td>
<td>31%</td>
</tr>
</tbody>
</table>