



Children play with staff from UNICEF's partner NGO, in front of the Espace Ami des Enfants at the Diaba site for internally displaced people in the central region of Mopti.

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for every child

Humanitarian Situation Report No. 03

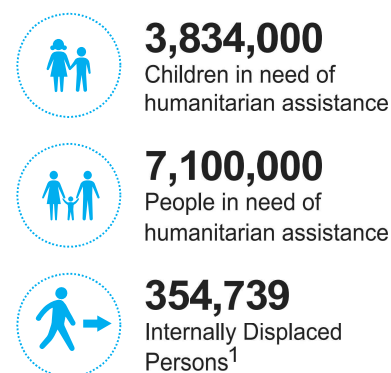
Reporting Period
March 2024

Mali

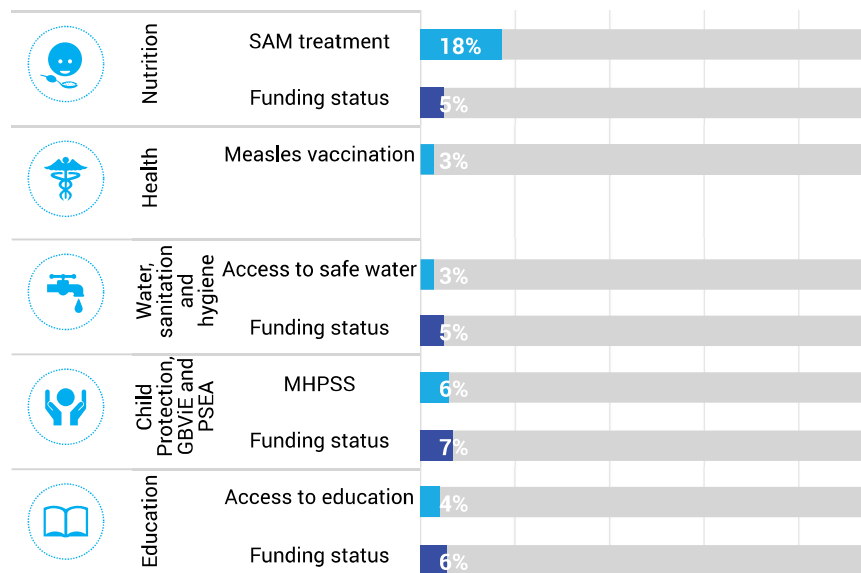
HIGHLIGHTS

- During the reporting period, the humanitarian and security situation continues to deteriorate in the northern regions of Mali, with a sharp rise in violence against civilians across the country and increasing difficulties to access basic social services.
- According to the recently published March 2024 Cadre Harmonise, the below average food availability among the worst affected population is expected to push some areas into catastrophe (IPC Phase 5) during the upcoming lean season. The Menaka region is already in a state of severe food insecurity, from March to May 2024, 850 people will be in famine-like conditions, while 2,575 people are expected to be in such a situation during the 2024 lean season.
- UNICEF is appealing for US\$133.5 million in 2024 to sustain and scale lifesaving and resilience services for 3.8 million of the most vulnerable children. As of the end of March, the UNICEF HAC is 7 per cent funded.

SITUATION IN NUMBERS

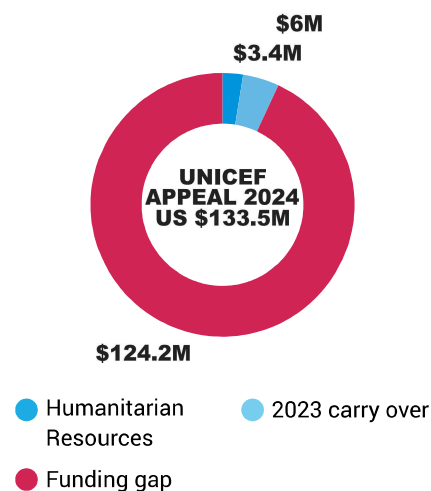


UNICEF RESPONSE AND FUNDING STATUS*



* UNICEF response % is only for the indicator, the funding status is for the entire sector.

FUNDING STATUS (IN US\$)**



** Funding available includes: funds received in the current year; carry-over from the previous year; and repurposed funds with agreement from donors

FUNDING OVERVIEW AND PARTNERSHIPS

In 2024, UNICEF has appealed for US\$ 133.5 million to respond to the humanitarian needs of children and women in Mali.

A total of US\$ 9 million (7 per cent of the total appeal) has been funded.

In March, new contributions were received from Germany, Austria, and global thematic humanitarian funding (provided by the Netherlands). UNICEF sincerely thanks these partners for their much-appreciated support.

The funding gap is US\$ 124.4 million (93 per cent of the appeal). There are major funding gaps, the largest in Health, Water, Sanitation and Hygiene (WASH), Social Inclusion, and Social and Behaviour Change (SBC).

UNICEF will continue to advocate for resources, and in particular flexible/softly earmarked, pooled, and multi-year funding, which is one of the best ways to achieve impact for children by facilitating a faster, more agile, and cost-effective response.

UNICEF appeals for urgent assistance to reach the most vulnerable emergency-affected children and families with life-saving support.

SITUATION OVERVIEW AND HUMANITARIAN NEEDS

In March, Mali continued to face a complex and protracted humanitarian crisis marked by the persistence of conflicts and insecurity, mainly in the northern and central regions. Children remained the primary victims of these crises, with 3.8 million of them requiring diverse forms of humanitarian aid, including protection assistance against grave violations of child rights. More than half of the 354,739 internally displaced people (IDPs) were children, whose schooling and lives were disrupted, and who suffered multiple and severe vulnerabilities.

The southern regions, which until recently seemed spared, appear to be increasingly affected by Non-State Armed Groups (NSAG) operations. As part of its expansion strategy, the group is targeting the positions of the security forces in the regions of Kayes, Sikasso, Segou and Koulikoro in order to create a security vacuum and collect weapons and vehicles needed to spread its operations. This would allow the group to disrupt traffic on main supply routes connecting Bamako, the capital, to Dakar (Senegal) and Conakry (Guinea) and establish itself in mineral rich areas (gold, lithium, etc.) and other resources (livestock, food...).

Continuing attacks by Islamic State in the Greater Sahara (ISGS) in the Menaka region, combined with the imposition of blockades by the armed groups of the Permanent Strategic Framework (CSP), have led to significant population displacements and accentuated the isolation of the region. In the face of a dire situation and ever-increasing needs, humanitarian space continues to shrink, and humanitarian access is becoming less possible because of insecurity and administrative impediments for UNICEF and its partners. Despite all these constraints – UNICEF with its humanitarian partners continue to provide life-saving assistance to the vulnerable people they managed to reach.

The conflict dynamics, strongly affecting the region of Ansongo, is the main driver of food insecurity. On 19 March, NSAG intercepted 25 civilian cars transporting critical foodstuff to Tessit from Ansongo. Several of these vehicles and a number of people are still missing. Since November 2022, the town of Tessit is under blockade,

hampering the supply of basic products for the general population. This circumstance illustrates the increased pressure on civilians by non-state armed groups.

The consequential sustained rise of food prices combined to the insufficient access to livelihoods opportunities, including agricultural production, and climatic conditions exacerbate the reduction in income opportunities, and the worsening of food insecurity.

According to the latest projection of Integrated Phase Classification (IPC) published in December 2023, approximately 60,000 people in Mali are likely to experience emergency acute food insecurity of crisis level (IPC Phase 4). Following the FEWSNET's March 2024 situation update, the below average food availability among the worst affected population is expected to push some areas into catastrophe (IPC Phase 5) during the upcoming lean season, specifically in parts of Menaka region, with over 66 500 in urgent need of food assistance. In the insecure areas of the Kidal, Timbuktu, Gao, and Mopti regions, and in parts of the northern regions of Kayes, Koulikoro, and Ségou, households are expected to remain in Stressed (IPC Phase 2) until May 2024. From May 2024 onward, outcomes will likely deteriorate to Crisis (IPC Phase 3) due to the expected rise in prices of basic food commodities and households' increased reliance on negative coping strategies.

During the reporting period, 167 confirmed cases of measles were recorded in Mali. Since February 2023, the country has been also facing a polio epidemic caused by the circulating PV variant type 2. There has been a total of 24 cases of cVDPV2, including 6 cases detected through environmental surveillance and 18 cases identified through Acute Flaccid Paralysis (AFP) reporting. Among these, 2 cases date back to 2022, 15 cases to 2023, and 1 case to 2024.

There have been 1,119 suspected dengue cases in the Koulikoro, Sikasso, Mopti, Taoudenit and Bamako regions, including 185 confirmed cases. Since January 2024, 2,746 samples have been analyzed, with 481 positive cases and 1 death, resulting in a fatality rate of 2.72 per cent.

SUMMARY ANALYSIS OF PROGRAMME RESPONSE

Health

The Global Polio Eradication Initiative (GPEI) provided support to the weekly meetings of the Lake Chad and Sahel Basin (LCBS) block, as well as to the weekly monitoring of AFP surveillance performance. In March, the Government of Mali received 2,968,000 doses of the nVPO2 vaccine, with an additional 2,039,500 doses expected by April.

UNICEF and its partners continued to respond to the health needs of the affected populations, by providing health services at fixed health facilities and at community levels, throughout the country.

UNICEF supported the measles outbreak response in the Sikasso and Segou regions where 5,136 children were immunized (2,920 in Koutiala, 1,305 in Kignan, 733 in Macina and 178 in San), in the reporting period. Also, 20,344 pregnant women benefited throughout the country from Antenatal Care (ANC), 12,167 under one-year children (5,960 girls) were immunized with pentavalent (penta3),

The most common morbidities among children continued to be attributed to malaria, diarrhea, and acute respiratory infection. A total of 48,191 under five years children (including 23,614 girls) were treated for malaria, 3,447 children (1,689 girls) received adequate treatment for diarrhea and, 48,191 children (23,614 girls) received treatment for Acute Respiratory Infections (ARI).

Nutrition

In March, a total of 10,846 children, identified to have severe acute malnutrition (SAM), were admitted for treatment. Given the combination of access restrictions, limited telecommunication coverage to allow remote monitoring, food insecurity and increasing malnutrition, there is a major concern that there could be areas that could descend into famine like situation where humanitarian actors could not intervene to assess and act timely.

To support optimal infant and young child feeding practices, over 102,596 caregivers received counselling throughout the country, of whom 79,254 pregnant and lactating women. Since the beginning of the year, Nutrition Cluster partners have provided life-saving assistance to 379,269 people, which represents 15% of their annual target of 2.5 million people. The monitoring of the nutrition status in hot spots areas through rapid SMART surveys is ongoing with the recent end of the preparatory phase. Data collection will start in April 2024 targeting ten areas in IPC3&4 namely the cercles of Kidal, Ansongo, Bourem, Koro, Bankass, Douentza, Gourma Rha Rous and IDPs sites of Gao, Mopti and Menaka.

Child protection, GBViE, and PSEA

The conflict and the volatile security situation continue to significantly increase the risks of child rights violations and violence against children across the regions, while affecting the efficiency of the humanitarian interventions, including child protection responses. UNICEF pursue its commitment to working with other UN agencies, local community structures and other partners to ensure the protection of all children from violence, improve humanitarian access and implement awareness-raising campaigns to empower affected populations from various forms of violence, including accidents from unexploded ordnance (UXO) and improvised explosive devices (IED).

During the reporting period, over 12,429 people received mental health support services, including 12,249 children (6,409 girls) and 180 adults (120 women), in the regions and areas of Bamako, Gao, Asongo, Bourem, Menaka, Mopti, Douentza, Djenne, Tombouctou, Dire, Goundam, Niafunke and Rharous.

Through partnerships with government agencies, civil society organizations, community leaders, and local service providers, UNICEF provided access to gender-based violence (GBV) risk mitigation, prevention, and response interventions to around 3,123 people, including 2,639 children (1,382 girls) and 484 adults. Additionally, 31 unaccompanied children, including 12 girls, were given alternative care, and referred to necessary social services during the reporting period.

Education

Mali continues to grapple with an unprecedented educational crisis, with nearly 520,000 school-aged children experiencing disruptions to their schooling. UNICEF, in collaboration with its partners, has been advocating for the immediate reopening of schools, including the 1,743 schools that were closed due to insecurity.

In March, UNICEF provided access to learning for 817 internally displaced children in the Segou and Mopti regions. Additionally, UNICEF collaborated closely with UNHCR and the education cluster to draft an advocacy document addressing the situation of refugee children in the Mopti and San regions.

During the same month, the Cluster actively participated in the development of three contingency plans for the Mopti, Bandiagara, and Douentza regions. These sessions saw active engagement from regional directorates of social development, civil protection, women, and children, as well as other education stakeholders. Supported by the National Cluster, this initiative aims to enhance the capacity of sectoral groups in addressing the longstanding humanitarian crises persisting for over a decade.

Water, sanitation and hygiene

The pressing needs of the IDPs and their hosting communities remained a priority for UNICEF. However, with a US\$15 million funding gap in 2024 (95 per cent), the hopes of around 500,000 people to receive basic WASH services will remain unfulfilled without adequate funding, further jeopardizing their coping capacity to face such a multifaceted crisis.

In terms of the WASH Cluster response, UNICEF and 23 other WASH Cluster actors reached 105,095 people, including 56,489 children, since January 2024.

Cross-sectoral (HCT, SBC, RCCE and AAP)

UNICEF and its partners continue to reach communities with lifesaving messages in the emergency response with focus on disease outbreak prevention (measles, dengue fever), essential family practices and immunization campaigns. SBC interventions have supported the promotion of other cross-cutting areas, including the Accountability to Affected Population (AAP), community feedback mechanisms (CFM) and PSEA, to engage and reach communities.

In March, SBC activities at community level have continued, including through religious leaders, household visits, community group discussion and youth volunteers in addition to dissemination of messages through radio and TV to reach a total of 23,179 people, including 10,198 44 women and girls.

Throughout the month, 98,658 people individuals asked questions and provided feedback on health emergency issues.

HUMANITARIAN LEADERSHIP, COORDINATION AND STRATEGY

Humanitarian action coordination is led by the Ministry of Health and Social Development, the Ministry in charge of Humanitarian Affairs, with the support of the Humanitarian Country Team. UNICEF leads the WASH and Nutrition Clusters, the Child Protection Sub-Cluster (Area of Responsibility) and co-leads the Education Cluster As Cluster lead agency, UNICEF has continued to effectively support and participate in the Humanitarian Planning Cycle (HPC) process in Mali. UNICEF led/co-led clusters are all part of the Inter-Cluster Working Group (ICWG), led by the UN Office for the Coordination of Humanitarian Affairs (OCHA) at the national and sub-national levels. UNICEF also participates in the in-country interagency prevention of SEA (PSEA) Task Force and interagency Gender in Emergency Working Group.

UNICEF leads the WASH and Nutrition Clusters, the Child Protection Sub-Cluster (Area of Responsibility) and co-leads the Education Cluster.

HUMAN INTEREST STORIES AND EXTERNAL MEDIA

In March, UNICEF representative, the head of the Education and Vocational Training Dialogue Group, and the National Director of the Global Partnership for Education met with the Mali National Education Minister to reiterate their commitment to ensuring that every girl and boy has access to education. The minister stated that "the Malian government has high ambitions for quality education for all in Mali and will mobilize all necessary resources to monitor these efforts."

ECHO's Director of Operations in Sub-Saharan Africa visited a center in Mopti that welcomes young people who have been abused or marginalized. Over the past 6 years, ECHO has supported UNICEF Mali in providing holistic support to 557 children to help them reintegrate into society.

The voices of Malian girls were heard through Makadidia Sall, an 18-year-old Malian youth activist and member of the Global Girls' Leaders Advisory Group, who participated in the 68th Annual Commission on the Status of Women (CSW68) in March in New York. Through various panels, Makadidia represented the voices of Malian girls, advocating for their place in decisions affecting their lives, sharing their concerns but also their power when they are engaged, empowered, and supported. She took part in the discussion "What Adolescent Girls Want: Priorities and Solutions," a side event of CSW68 with UNICEF Executive Director Catherine Russell, three adolescent girls from the United States, Peru, and the Dominican Republic, and other key stakeholders. As a member of the Malian national delegation, she participated in a roundtable with the Ministry of Women's, Children's, and Family Promotion and inside events organized by the Malian delegation. The Malian Minister of Women's, Children's, and Family Promotion, Dr. Coulibaly Mariam Maiga, met with the UNICEF Executive Director during her participation in CSW68 in New York. They discussed ways to further strengthen joint efforts to realize the rights of all children in Mali.

Kadidia, a 23-year-old poet separated from her loved ones due to insecurity in Mali, shared her powerful poem for peace on World Poetry Day. Kadidia and a dozen other Malian teenagers and youth produced poems advocating for peace and the impact of the humanitarian crisis on their lives during a workshop organized with UNICEF's support.

Media engagement this month resulted in 58 media reports mentioning UNICEF and focusing on the impact of the humanitarian crisis on children.

In March, more than 200,000 accounts were reached by our content, focusing on advocacy around the humanitarian crisis and children's needs, and by the meantime, responses UNICEF and local NGO partners are doing to help support crisis-affected communities.

- "When the children are clean, I am clean!"
<https://www.unicef.org/mali/en/stories/when-children-are-clean-iam-clean>
- A Path Strewn with Hope
<https://www.unicef.org/mali/en/stories/path-strewn-hope>
- World Water Day
<https://twitter.com/unicefmali/status/1771269777568252057>

- Mopti, training in natural disaster management
<https://www.studiotamani.org/158911-mopti-formation-sur-la-gestion-des-catastrophes-naturelles>

HAC APPEALS AND SITREPS

- Mali Appeals
<https://www.unicef.org/appeals/mali>
- Mali Situation Reports
<https://www.unicef.org/appeals/mali/situation-reports>
- All Humanitarian Action for Children Appeals
<https://www.unicef.org/appeals>
- All Situation Reports
<https://www.unicef.org/appeals/situation-reports>

NEXT SITREP: 31 MAY 2024

ANNEX A - PROGRAMME RESULTS

Consolidated Programme Results

Sector			UNICEF and IPs response			Cluster/Sector response		
Indicator	Disaggregation	Total needs	2024 targets	Total results	Progress*	2024 targets	Total results	Progress*
Nutrition								
Children aged 6 to 59 months with Severe Acute Malnutrition (SAM) admitted for treatment	Total	-	201,250	35,929	▲ 6%	201,250	35,929	▲ 6%
	Girls	-	201,250	19,402	▲ 4%	201,250	19,402	▲ 4%
	Boys	-	201,250	16,527	▲ 4%	201,250	16,527	▲ 4%
Primary caregivers of children aged 0 to 23 months receiving Infant and Young Child Feeding (IYCF) counselling	Total	-	463,522	158,637	▲ 22%	463,522	158,637	▲ 22%
	Women	-	463,522	121,724	▲ 17%	463,522	121,724	▲ 17%
	Men	-	463,522	37,213	▲ 5%	463,522	37,213	▲ 5%
Health								
Children aged 6 to 59 months vaccinated against measles	Total	-	2.2 million	61,586	0%	-	-	-
Children aged 6 to 59 months vaccinated against polio	Total	-	1.4 million	-	0%	-	-	-
Water, sanitation and hygiene								
People accessing a sufficient quantity of safe water for drinking and domestic needs	Total	3.4 million	523,500	14,559	0%	1.3 million	105,096	▲ 1%
	Girls	3.4 million	523,500	4,051	0%	1.3 million	29,244	0%
	Boys	3.4 million	523,500	4,222	0%	1.3 million	30,477	0%
	Women	3.4 million	523,500	3,203	0%	1.3 million	23,120	0%
	Men	3.4 million	523,500	3,083	0%	1.3 million	22,255	0%
People use safe and appropriate sanitation facilities	Total	2.1 million	50,000	-	0%	160,000	1,843	▲ 1%
	Women	2.1 million	50,000	-	0%	160,000	918	0%
	Men	2.1 million	50,000	-	0%	160,000	925	0%
People reached with critical WASH supplies	Total	2.1 million	336,000	11,559	▲ 1%	1.3 million	30,722	▲ 1%
	Women	2.1 million	336,000	5,759	0%	1.3 million	15,307	▲ 1%
	Men	2.1 million	336,000	5,800	0%	1.3 million	15,415	▲ 1%
Child Protection, GBVIE and PSEA								

Children, adolescents and caregivers accessing community-based Mental Health and Psychosocial Support (MHPSS)	Girls	-	384,783	23,995	▲ 2%	786,930	27,131	▲ 1%
	Boys	-	384,783	22,351	▲ 2%	786,930	25,328	▲ 1%
	Women	-	384,783	547	0%	786,930	856	0%
	Men	-	7,486	292	▲ 1%	786,930	559	0%
People with safe and accessible channels to report Sexual Exploitation and Abuse (SEA) by personnel who provide assistance to affected populations	Girls	-	572,500	1,134	0%	-	-	-
	Boys	-	572,500	696	0%	-	-	-
	Women	-	572,500	822	0%	-	-	-
	Men	-	572,500	623	-0%	-	-	-
Children who have exited armed forces and groups provided with protection or reintegration support	Girls	-	700	1	0%	1,000	1	0%
	Boys	-	700	16	▲ 1%	1,000	17	▲ 1%
Unaccompanied and separated children accessing family-based care or a suitable alternative	Girls	-	2,400	59	▲ 1%	4,000	81	0%
	Boys	-	2,400	68	▲ 1%	4,000	98	0%
Women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions	Total	-	166,100	12,772	▲ 2%	-	-	-
	Girls	-	166,100	5,502	▲ 1%	-	-	-
	Boys	-	166,100	5,037	▲ 1%	-	-	-
	Women	-	166,100	1,315	0%	-	-	-
	Men	-	166,100	918	0%	-	-	-
People with safe and accessible channels to report Sexual Exploitation and Abuse (SEA) by personnel who provide assistance to affected populations	Total	-	572,500	3,275	0%	-	-	-
Children who have exited an armed force and groups provided with protection or reintegration support	Total	-	700	17	▲ 1%	1,000	8	0%
Children, adolescents and caregivers accessing community-based Mental Health and Psychosocial Support (MHPSS)	Total	-	384,783	47,185	▲ 3%	786,930	38,902	▲ 3%
Unaccompanied and separated children provided with alternative care and/or reunified	Total	-	1,600	127	▲ 2%	4,000	147	▲ 1%
Education								

Children accessing formal or non-formal education, including early learning	Total	-	300,000	12,351	0%	300,000	12,351	0%
	Girls	-	300,000	6,080	0%	300,000	6,080	0%
	Boys	-	300,000	6,271	0%	300,000	6,271	0%
Children receiving individual learning materials	Total	-	1.1 million	2,079	0%	2.8 million	2,079	0%
	Girls	-	1.1 million	888	0%	2.8 million	888	0%
	Boys	-	1.1 million	1,191	0%	2.8 million	1,191	0%
Cross-sectoral (HCT, C4D, RCCE and AAP)								
People engaged in reflective dialogue through community platforms	Total	-	600,000	26,376	▲ 4%	-	-	-
People sharing their concerns and asking questions through established feedback mechanisms	Total	-	100,000	100,448	▲ 99%	-	-	-

*Progress in the reporting period March 2024

ANNEX B — FUNDING STATUS

Consolidated funding by sector

Sector	Requirements	Funding available		Funding gap	
		Humanitarian resources received in 2024	Resources available from 2023 (carry over)	Funding gap (US\$)	Funding gap (%)
Health (including public health emergencies)	14,005,125	127,694	230,731	13,646,700	97%
Nutrition	33,272,170	382,447	1,416,350	31,473,373	95%
Child protection, GBViE and PSEA	25,346,535 ^{2,3}	255,388	1,628,827	23,462,320	93%
Education	32,437,460	196,698	1,665,919	30,574,843	94%
Water, sanitation and hygiene	15,622,525	752,417	-	14,870,108	95%
Social protection	1,000,000	-	-	1,000,000	100%
Cross-sectoral (HCT, SBC, RCCE and AAP)	8,815,085 ⁴	-	-	8,815,085	100%
Emergency Preparedness	3,001,100	1,636,580	1,015,621	348,899	12%
Total	133,500,000	3,351,224	5,957,448	124,191,328	93%

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ENDNOTES

1. Rapport DTM Decembre 2023
2. This budget line item is higher than in 2023 due to mine action activities and an increase in targeted unaccompanied and separated children; this budget may change during revision as unit costs are revised.
3. The Child Protection budget (including mine action) includes US\$ 2,807,873 for protection from Sexual Exploitation and Abuse (SEA), and US\$3,743,831 for Gender-Based Violence (GBV) in emergencies response.
4. Of the total of US\$ 8,815,085, the Humanitarian Cash Transfer (HCT) budget is US\$ 5,298,400; Social and Behaviour Change amounts to US\$ 1,406,674; rRisk Communication and Community Engagement (RCCE) is US\$ 1,406,674; and Accountability to Affected Populations (AAP) amounts to US\$ 703,337.