



The students of the elementary school in Fachoribougou are drinking potable water from the water fountain provided by Sweden as part of the joint UNICEF-FAO-WFP programme.

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for every child

Humanitarian Situation Report No. 06

Reporting Period
1 January to 30 June
2024

Mali

HIGHLIGHTS

- The regional geopolitical landscape changed significantly with the announced departure of Mali, Niger, and Burkina Faso from ECOWAS to form the "Alliance des Etats du Sahel" (AES).
- Despite substantial logistical and security challenges within a limited timeframe, MINUSMA completed its departure from Mali by 31 December 2023.
- UNICEF's level 2 emergency procedure was in effect from 19 December 2023 to 19 June 2024.
- The food and nutritional crises have been worsening, with the Harmonized Framework projecting catastrophic levels (IPC Phase 5) in areas like Menaka during the upcoming lean season. The latest rapid SMART survey revealed acute malnutrition exceeding the emergency threshold of 15 per cent in targeted region and IDP sites.
- In 2024, UNICEF has appealed for US\$133.5 million to respond to humanitarian needs of children and women in Mali. As of 30 June, only 12 per cent of the total appeal were funded.

SITUATION IN NUMBERS



3,834,000
Children in need of humanitarian assistance








7,100,000
People in need of humanitarian assistance



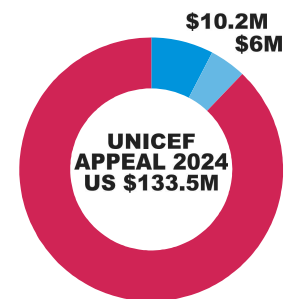
330,713
Internally Displaced Persons¹




FUNDING STATUS (IN US\$)**

UNICEF RESPONSE AND FUNDING STATUS*

	Nutrition	SAM treatment	43%
		Funding status	19%
	Health	Measles vaccination	105%
	WASH	Access to safe water	7%
		Funding status	12%
	Child protection	MHPSS	8%
		Funding status	10%
	Education	Access to education	9%
		Funding status	6%

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



\$117.3M
 Humanitarian Resources
 2023 carry over
 Funding gap

** 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



During his visit to Zaniéna, UNICEF Representative Pierre Ngom answered questions from journalists.

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\$16.9 million (12 per cent of the total appeal) has been funded.

In June, new contributions were received from the European Civil Protection and Humanitarian Aid Operations (ECHO) and the United States Agency for International Development (USAID)'s Bureau for Humanitarian Assistance (BHA). UNICEF Mali sincerely thanks these partners for their much-appreciated support.

By the end of the reporting period, the funding gap stood at US\$116.6 million (88 per cent of the appeal), with Health, Education and Child Protection being the most affected sectors.

UNICEF will continue to advocate for additional financial 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 calls for urgent assistance to reach the most vulnerable emergency-affected children and families with life-saving support.

SITUATION OVERVIEW AND HUMANITARIAN NEEDS

From January to June 2024, Mali experienced a significant increase in humanitarian needs, driven by persistent conflict and political instability, compounded by substantial challenges in delivering aid due to widespread insecurity, blockades, and inadequate funding. An estimated 7.1 million people in Mali require humanitarian assistance, including 23 per cent women and 54 per cent children. The most severe needs are concentrated in regions bordering Burkina Faso and Niger, as well as in the northern regions of Mali.

During the first half of the year, the security situation in Mali remained highly dynamic, marked by the redeployment of Malian defense and security forces to the northern regions of Timbuktu, Kidal, Gao, and Menaka. This redeployment led to an increase in direct confrontations with armed politico-military groups, with 335 armed conflict incidents reported — an increase of 16 per cent compared to the same period the previous year. Non-state Armed Groups (NSAGs) took advantage of the "Forces Armées Maliennes"

(FAMA) shifting their efforts from the central to the northern regions, resulting in more attacks, particularly asymmetric ones using Improvised Explosive Devices (IEDs), mortar attacks, and ambushes, in the central regions of Mopti, Segou, Koulikoro, Bandiagara, and Douentza. According to UNDSS, at least 106 mine/IED incidents were recorded throughout Mali, a 47.22 per cent increase from the same period last year. The expansion of NSAG's operations into the southern regions of Kayes and Sikasso, along with the use of IEDs, has also affected the movement of humanitarian actors, including UNICEF.

Following the June 2023 Government's request for MINUSMA to leave Mali by December 31st, 2023, 12 out of the 13 mission's camps had been transferred to the Malian Government. The remaining site (Bamako) is handling the liquidation process, which began in January 2024 and is expected to last until the end of 2024. MINUSMA's departure contributed to create a significant security vacuum, resulting in a deterioration in the security situation, increased armed conflict, and population displacement.

The regional geopolitical landscape significantly changed with the announcement, on 28 January 2024, of the withdrawal of Mali, Niger, and Burkina Faso from ECOWAS to form the Alliance of Sahel States (AES). Political tensions also emerged between Mali and Mauritania due to security concerns along their shared borders. Internally, the democratic space in Mali continued to shrink. On 10 April 2024, the Council of Ministers adopted a decree suspending the activities of political parties and associations across the Country "until further notice." This decision was reversed by Government in June. Additionally, on 11 April 2024, the Malian Communications Regulatory Body ordered all media outlets to stop broadcasting and publishing the activities of political parties and associations. Meanwhile, the "Inter-Malian Dialogue for Peace and National Reconciliation" concluded in May, resulting in over 300 recommendations.

Restrictions on humanitarian access persist due to insecurity and administrative bottlenecks. Insecurity hampers UNHAS flights and the delivery of aid, especially in blockade-affected areas. Since the beginning of 2024, only 5 flights were authorized to land in Menaka.

According to the Government, the total number of IDPs in the Country reached 330,713 by May 2024. Since the end of October 2023, there has been a massive influx of refugees and asylum seekers from Burkina Faso. As of 30 June 2024, more than 107,000 Burkinabe refugees (55,866 registered and 52,000 unregistered) are living in Mali.

During the reporting period, significant Health challenges were identified in Mali. One case of circulating Vaccine-Derived Poliovirus Type 2 (cVDPV2) was detected, underscoring the ongoing efforts to maintain polio vaccination coverage. Additionally, between January and April, a severe dengue epidemic emerged, resulting in 3,231 confirmed cases and three fatalities. Measles also posed a considerable threat, with 294 confirmed cases reported during the first half of the year. By the end of May, there were 58 confirmed cases of meningitis. These Health issues highlight the need for continuous surveillance and robust public Health interventions to mitigate the impact of infectious diseases in the region.

As of April 2024, the Education Cluster reported that 1,791 schools were non-functional due to insecurity, affecting over 537,300 students and 10,746 teachers, a slight increase from January 2024, when 1,653 schools were non-functional. The number of closed schools varies between regions, indicating that the situation remains highly volatile in Mali.

According to Mali's 2024 Human Needs and Response Plan (HNRP), an estimated 2.5 million people in Mali are expected to be food insecure in 2024, and an estimated 268,000 children will suffer

from severe acute malnutrition (SAM). The Menaka region experienced severe food insecurity from March to May 2024, with at least 850 people in famine-like conditions, while 2,575 people are expected to face such conditions during the 2024 lean season. The nutritional situation has been a concern throughout the first half of 2024, particularly in conflict zones in the North and Center of the Country. Most areas in these regions are classified as "Critical" (IPC AMN Phase 4) or "Serious" (IPC AMN Phase 3). The results of the rapid SMART survey conducted in May-June 2024 revealed a critical situation of acute malnutrition, with levels exceeding the emergency threshold of 15 per cent in almost all covered zones (Circles of Bankass, Douentza, Ansongo, Gourma-Rharous, Koro, Kidal and Bourem) and IDP sites in Mopti, Bourem, Menaka and Gao.

SUMMARY ANALYSIS OF PROGRAMME RESPONSE

Health



These happy parents were able to have their two children, aged 3 and 4, vaccinated, and are now helping to raise awareness of the need to vaccinate their children among family members and other people

From January to June 2024, 294 measles cases were reported in Mali, compared to 276 cases in 2023 and 643 cases in 2022. Most cases were reported in the regions of Sikasso (62 cases), Mopti (43 cases), Kayes (42 cases), Koulikoro (40 cases), Segou (31 cases), Bamako (23 cases), Tombouctou (21 cases), Gao (20 cases), and Kidal (4 cases). Despite limitations in implementing activities due to fund shortages and a volatile security environment, 2,300,808 children aged 9 months to 14 years living in fragile contexts were vaccinated against measles.

Regarding poliomyelitis, in response to the cVDPV2 outbreak, 4,818,958 children aged 0-59 months were vaccinated with novel oral polio vaccine type 2 (nOPV2), in 27 Health districts in the southern regions of the Country.

Regarding routine delivery services from January to June 2024, a total of 114,071 pregnant women benefited from antenatal care, and 91,047 children under one year of age (44,613 girls) were immunized with the pentavalent (penta3) vaccine. Additionally, 200,582 children under five years of age (98,285 girls) were treated for malaria, and 46,218 children (22,647 girls) received adequate treatment for diarrhea. Furthermore, 200,582 children (98,285 girls) received treatment for acute respiratory infections. Over the same period, 32,669 children (16,008 girls) benefited from birth registration, declared by the health centres. Mali's law 087/2011 stipulates that all healthcare facilities are now designated as birth registration sites. At community level, a government memorandum

also authorises community health workers to register births at their sites.

Nutrition



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Kadiatou gives enriched porridge to Boubacar, 9 months old, here during a nutritional demonstration session organized by the Nutrition Activities Support Group (GSAN) in the village of Maraki.

In the first 6 months of 2024, 87,339 children aged 6 to 59 months were admitted in health and community facilities and treated for Severe Acute Malnutrition (SAM), representing 43 per cent of the total annual target of 201,250 cases set by the Health Cluster. Performance indicators showed satisfactory results aligned with international standards, with a SAM cure rate of 95.31 per cent (>75 per cent), a SAM mortality rate of 0.43 per cent (<5 per cent), and a SAM defaulter rate of 4.26 per cent (<15 per cent).

During the same period, efforts to improve caregivers' feeding practices for their infants and young children aged 0 to 23 months intensified, reaching 265,513 pregnant and lactating women, compared to 232,167 during the same period in 2023. These women were educated on essential family practices, including Infant and Young Child Feeding (IYCF), hygiene and sanitation best practices, early stimulation, and early screening of acute malnutrition. To address micronutrient deficiencies, 520,818 children aged 6 to 59 months received Vitamin A supplementation, and 424,234 children aged 12 to 59 months were dewormed through routine Health services. Additionally, complementary foods for 30,184 children aged 6 to 23 months were fortified with multi-micronutrient powders to improve dietary diversity and prevent anemia.

As of mid-2024, UNICEF and its partners have provided nutritional assistance to 732,728 people in need, including 261,971 boys and 258,847 girls aged 0-5 years, as well as 211,910 pregnant and lactating women. This figure represents only 29 per cent of the 2.5 million people targeted by the Nutrition Cluster in the HNRP for the Nutrition sector.

Child Protection, GBViE, and PSEA



The "Cultural Center for Peace" is a place for play and entertainment for displaced children in the Timbuktu region. The center is equipped by UNICEF in partnership with the NGO GARDEL.

In the first half of 2024, UNICEF and its partners continued to provide essential Child Protection services for children affected by the security and socio-political crisis in Mali. Between January and June, psychosocial support (PSS) was provided to 58,672 children (30,379 girls) through community activities and close follow-up by social workers in more than 108 Child-Friendly Spaces (CFSs), including 42 mobile ones, as well as other safe spaces such as 66 formal and 2 spontaneous host families. Additionally, PSS activities were extended to 1,097 caregivers (700 women), involving them in awareness raising and PSS activities conducted by UNICEF's partners Child Protection Officers and Social Workers. Consequently, the total number of individuals benefiting from PSS activities amounted to 59,769, which is 21 per cent of the established target.

The Child Protection Area of Responsibility (CPAoR) conducted a capacity-building needs assessment for its members to address the limited technical capacity of field-based partners, which was identified as one of the bottlenecks to achieve better results for the sector.

Furthermore, 120 Children (including 11 girls) who were Associated with Armed Forces and Groups (CAAFAG) have been released and received comprehensive support from UNICEF-affiliated partners, achieving 15 per cent of the yearly goal. In addition, 398 Unaccompanied and Separated Children (UASCs), 147 of whom are girls, have been provided with comprehensive temporary care in family settings and other suitable alternative arrangements, such as 3 transit centers and 66 formal host families throughout the country, amounting to 14 per cent of UNICEF's annual objective.

Following the departure of MINUSMA, UNICEF assumed the MRM leadership on grave violations against children, in co-leadership with the Resident Coordinator (RC). By reinforcing its capacities at the central and field levels and recruiting 6 staff members, UNICEF improved its monitoring capacity and provided technical support and capacity building for field-based partners involved in MRM. 12 training sessions on the Child Protection Information Management System Plus (CPIMS+), the Protocol of Transfer and Handover of CAAFAGs, and age assessment, among other topics, were conducted for Child Protection stakeholders. Overall, 238 people (55 women) from UNICEF, eight (8) other UN agencies (UNDP, UNWOMEN, UNFPA, UNESCO, WHO, FAO, OIM, UNHCR), other organisations and government departments in the regions of Timbuktu, Gao, Kidal, Menaka, Ségou, and Bamako received training.

During the reporting period, UNICEF and its Child Protection partners intensified their efforts to reduce the risks of GBV and Sexual Exploitation and Abuse (SEA). They conducted comprehensive training sessions for local staff and 75 partner NGO staff in the northern and central regions of the Country, including Gao, Mopti, and Timbuktu. The training used a Train the Trainer (ToT) approach, enabling participants to further impart the knowledge to peers and community members. The GBV risk mitigation training provided tools for safety audits, gender- and age-specific discussion groups, and risk analysis. In addition to capacity building, UNICEF and partners set up community-based mechanisms for around 10,025 individuals, comprising 3,561 girls and 2,205 women, to report SEA incidents. In collaboration with partners, UNICEF initiated campaigns to increase awareness and spread information about PSEA and GBV within the communities.

Throughout the reporting period, UNICEF maintained its leadership role within the CPAoR. The annual CPAoR retreat, held for the first time in several years, gathered 48 participants representing 31 organizations, encompassing both national and international NGOs, Government Technical Services, and various UN agencies from the capital and field locations. This retreat served as a platform to evaluate member performance, address challenges, and establish consensus on priorities and strategies, which included discussions on capacity building, resource mobilization, and the strengthening of data collection, validation, management, and reporting processes.

Education



Oumar, an 11-year-old student in the Mopti region, is a displaced child from Ogossagou. He is currently studying in a class (grade 2) supported by UNICEF.

During the reporting period, despite the prevailing challenges of insecurity and low funding (only 6 per cent of total required resources), UNICEF Mali's concerted efforts in collaboration with Government and stakeholders have made significant strides towards improving access to quality education for children in Mali. Furthermore, UNICEF was engaged in supporting the Ministry of Education's (MoE) efforts to re-enroll 28,337 children (15,057 girls) who were previously Out-Of-School and provide essential support to the sector, including the reopening of 174 non-functional schools and the construction of 93 temporary classrooms to accommodate 3,900 displaced learners (1828 girls) in a protective environment. Additionally, 3,171 children (1,411 girls) received individual learning materials, and 382 teachers (134 women) received training on pedagogy & MHPSS so far.

As Education Cluster co-lead agency, UNICEF continued to strengthen the capacity of Government staff to collect and process Education data through training sessions. This initiative aimed at continuous monitoring and effective planning for educational

interventions in affected regions, including up-to-date information on affected students, teachers, schools.

The National Education Cluster supported the development of contingency plans for the regions Sikasso, Mopti, Bandiagara and Douentza. It facilitated training sessions that strengthened the response capacity of Education Cluster partners in same regions, ensuring that all actors are better equipped to address educational needs in times of humanitarian distress. Regional Directorates of Social Development, Civil Protection, Women and Children's affairs, and other Education actors participated in these sessions.

During this period, the Education Cluster played a crucial role in developing sectoral contingency plans for the region of Mopti, Gao, Timbuktu, Ménaka and Kidal with technical and financial support of UNICEF. This initiative, supported by the National Cluster, aims at strengthening the capacity of sectoral groups in responding to humanitarian crises. Additionally, the Education Cluster has been instrumental in supporting the process for the ECW's new multi-year resilience program – Phase II MYRP, for the Malian education system.

Water, Sanitation and Hygiene (WASH)



Awa and other women gather at the water fountain to secure their drinking water supply at the Faladié IDP site in Bamako, which shelters over 1,189 displaced families.

From January to June 2024, 35,399 people, including 19,027 children, received short-term WASH assistance in response to the persistent humanitarian emergency in the Mopti, Gao, Menaka, and Timbuktu regions. This assistance, which benefited 15,820 individuals in June alone, included the distribution of hygiene kits with water treatment and storage products, as well as water distribution through water trucking.

Against the annual targets for water access (523,500 people), kit distribution (336,000 people), and sanitation services (50,000 people), UNICEF reached 7 per cent of the target for water access, 11 per cent for kit distribution, and 11 per cent for sanitation services. Due to an 88 per cent funding gap from the US\$15.6 million requested for WASH emergency interventions in 2024, UNICEF's response has remained limited. This funding shortfall has directly impacted the mobilization of partners to deliver lifesaving interventions and connect structural WASH responses to meet immediate needs and long-term sustainable goals. It has also constrained the necessary support to schools and Health centers through the delivery of minimum WASH packages.

Despite the challenging context, several factors contributed to the achieved results. Building on lessons learned in recent years, UNICEF, in collaboration with the Government, established a

coordination platform with local partners to improve the efficiency of WASH activities. Awareness-raising sessions, stakeholder involvement, and capacity building by construction companies, in parallel with WASH infrastructure construction, facilitated ownership of WASH services and behaviour change in their use and maintenance.

Amidst deteriorating WASH services due to insufficient technical State services, worsening insecurity causing massive population displacements, and limited humanitarian access, practical training of Water Management Committee members by WASH construction companies played a significant role in ensuring the routine operation and maintenance of water systems. Furthermore, collaboration between regional technical services (Regional Hydraulics Directorate (RDH), Regional Director of Sanitation and Control of Pollution and Nuisance (DRACPN), Regional directorate of Health (RDH), Regional Public Procurement Directorate) and the Governor improved coordination in the recruitment of local construction companies and the implementation of WASH activities in the regions.

The various crises Mali has faced in recent years have highlighted the importance of a risk-informed approach that can effectively help prevent, mitigate, adapt, and respond to shocks and stressors, not only the personal shocks experienced during a child's life cycle but also the impact of climate change, displacement, and conflict. WASH interventions at the community level contribute to building resilience and social cohesion. Half of the trained members of the WASH Management Committees are women. Their participation is essential to ensure that decisions reflect the will of entire community and meet the expectations of women, who are the main users of water points. Reducing distances and making water fetching easier are measures that offer comfort and better protection to the children and women who perform these tasks in Mali.

In terms of the WASH Cluster response, UNICEF and 38 WASH Cluster members reached 181,737 people, including 103,272 children, representing 8 per cent of the WASH Cluster's annual target. In total, 74 per cent of the assistance focused on access to water (including 36 per cent to emergency water supplies) and 23 per cent to hygiene promotion.

Approximately 2.2 million people will be deprived of water, hygiene, and sanitation if an immediate WASH response is not provided in the Country, especially in IDP sites where the risks of epidemics and waterborne diseases are present. Several humanitarian hotspots, especially Koro, Macina, Kidal, and Menaka, require emergency WASH interventions in a context of resource scarcity, where the sector funding need amount to US\$57.5 million in 2024 with a funding level of only 12 per cent required amount for the WASH cluster.

During the reporting period, the WASH Cluster, with support from the Global WASH Cluster, finalized the WASH Insecurity Analysis (WIA). This tool identifies and classifies areas and people in WASH insecurity according to the level of access to WASH infrastructure and services, the hazards affecting the populations, the possibility of future hazards, and underlying vulnerability. The overview of WASH insecurity showed that the districts with the highest WASH insecurity are Ansongo, Gourma-Rharous, Niafunke, Bourem, Dire, Djenné, Goundam, Timbuktu, Bandiagara, Tominian, and Kidal.

Furthermore, the WASH Cluster launched the Market-Based WASH Programming (MBP) initiative to boost the use of humanitarian cash transfers and market-based approaches in Mali. According to the 2023 Multi-Sector Needs Assessment (MSNA) in Mali, 44 per cent of affected people prefer cash modality to meet their water and sanitation needs. A technical working group for MBP WASH, composed of about ten members (International and local NGOs, UN agencies, and observers), was activated for 4 months by the WASH Cluster to calculate the value of the baskets of the WASH sub-

sectors and establish a WASH MBP strategy to achieve the WASH sector objectives. Partner training is planned at the end of the process, and further results will be available in the upcoming months of this pilot.

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



Mariam, a public crier, calls on the Bakaiwait community to come and vaccinate their children in the village.

In the first half of 2024, several vaccination campaigns were organized: A COVID-19 vaccination campaign in January, the first measles and rubella campaign in March, and the year's first cross-border polio campaign in May. These campaigns were supported by comprehensive Social Behavior Change (SBC) interventions implemented region-wide, encompassing coordination, local communication, social and community mobilization, advocacy, community engagement, and radio and social media. Additionally, a workshop was convened to formulate the communication plan for the Human Papillomavirus (HPV) vaccine's introduction, and a U-Report survey was conducted to gather evidence for identifying strategies to be incorporated into the communication plan.

The activities involved a total of 263,671 individuals (91,755 women) accounting for 44 per cent of the yearly goal of 600,000 people. Furthermore, 102,597 individuals engaged by asking questions and giving feedback on Health emergency topics, surpassing the initial goal of 100,000. This increase is attributed to the polio campaign, which experienced considerable interaction via social media platforms. Finally, it is estimated that messages on prevention and access to services reached over 5 million people.

HUMANITARIAN LEADERSHIP, COORDINATION AND STRATEGY

Humanitarian Action and Coordination are led by the Ministry of Health and Social Development, the Ministry in charge of Humanitarian Affairs, with the support of the UN 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 also participates in the in-country Interagency PSEA Task Force and Interagency Gender in Emergency Working Group.

HUMAN INTEREST STORIES AND EXTERNAL MEDIA



Harouna and Fatoumata, both 10 and in third grade at Primary School, hold a tree they will plant as part of World Earth Day celebrations in Mali on 27 April 2024.

UNICEF Mali continues to advocate for children's rights, facilitate humanitarian access, and support the implementation of programmes which protect children. UNICEF Mali raises awareness about the situation and needs of Mali's children, women, and communities, as well as UNICEF's response efforts.

In the first half of 2024, the UNICEF Representative highlighted the impact of the humanitarian crisis on children in Mali, engaging with partners and the media. Advocacy efforts emphasized access to quality Education, the disproportionate impact of the learning crisis on girls, and the fight against malnutrition. Several roundtables were held with Government ministries, where child participants shared their experiences of the humanitarian crisis, particularly its effects on girls.

Consistent media engagement resulted in an average of 50 articles per month, highlighting the impact of the crisis on children and UNICEF's collaborative response with the Government and partners. UNICEF Mali continues to strengthen its partnership with the national public broadcaster ORTM and the National State Press AMAP to include more child rights issues in the media while building reporting capacity on key humanitarian topics. From January to June, UNICEF Mali significantly increased its social media reach, engaging more than 3.2 million viewers.

Partner contributions were showcased through human interest stories online, digital media content, visual products, and social media. The Young Voices of Sahel, a youth advocacy platform on climate change, have emerged as changemakers, taking action and raising awareness on why and how to combat the impact of climate change in Mali.

- Press Release <https://www.unicef.org/mali/en/press-releases/mali-more-half-71-million-people-requiring-humanitarian-assistance-2024-are-children>

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 AUGUST 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	87,339	▲ 43%	201,250	87,339	▲ 43%
	Girls	-	201,250	47,070	▲ 23%	201,250	47,070	▲ 23%
	Boys	-	201,250	40,269	▲ 20%	201,250	40,269	▲ 20%
Primary caregivers of children aged 0 to 23 months receiving Infant and Young Child Feeding (IYCF) counselling	Total	-	463,522	347,483	▲ 75%	463,522	347,483	▲ 75%
	Women	-	463,522	265,513	▲ 57%	463,522	265,513	▲ 57%
	Men	-	463,522	81,970	▲ 18%	463,522	81,970	▲ 18%
Health								
Children aged 6 to 59 months vaccinated against measles	Total	-	2.2 million	2.3 million	▲ 105%	-	-	-
Children aged 6 to 59 months vaccinated against polio	Total	-	1.4 million	4.8 million	▲ 341%	-	-	-
Water, sanitation and hygiene								
People accessing a sufficient quantity of safe water for drinking and domestic needs	Total	3.4 million	523,500	38,398	▲ 7%	1.3 million	181,737	▲ 14%
	Girls	3.4 million	523,500	10,685	▲ 2%	1.3 million	50,570	▲ 4%
	Boys	3.4 million	523,500	11,135	▲ 2%	1.3 million	52,702	▲ 4%
	Women	3.4 million	523,500	8,447	▲ 2%	1.3 million	39,980	▲ 3%
	Men	3.4 million	523,500	8,131	▲ 2%	1.3 million	38,485	▲ 3%
People use safe and appropriate sanitation facilities	Total	2.1 million	50,000	5,627	▲ 11%	160,000	4,008	▲ 3%
	Women	2.1 million	50,000	2,823	▲ 6%	160,000	9,635	▲ 6%
	Men	2.1 million	50,000	2,804	▲ 6%	160,000	4,801	▲ 3%
People reached with critical WASH supplies	Total	2.1 million	336,000	34,670	▲ 10%	1.3 million	82,668	▲ 6%
	Women	2.1 million	336,000	16,908	▲ 5%	1.3 million	41,189	▲ 3%
	Men	2.1 million	336,000	17,762	▲ 5%	1.3 million	41,479	▲ 3%
Child Protection, GBVIE and PSEA								

Children, adolescents and caregivers accessing community-based Mental Health and Psychosocial Support (MHPSS)	Girls	-	384,783	30,379	▲ 8%	786,930	36,083	▲ 5%
	Boys	-	384,783	28,293	▲ 7%	786,930	33,633	▲ 4%
	Women	-	384,783	700	0%	786,930	1,359	0%
	Men	-	7,486	397	▲ 5%	786,930	806	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	3,561	▲ 1%	-	-	-
	Boys	-	572,500	2,534	0%	-	-	-
	Women	-	572,500	2,205	0%	-	-	-
	Men	-	572,500	1,905	0%	-	-	-
Children who have exited armed forces and groups provided with protection or reintegration support	Girls	-	700	11	▲ 2%	1,000	43	▲ 4%
	Boys	-	700	109	▲ 16%	1,000	109	▲ 11%
Unaccompanied and separated children accessing family-based care or a suitable alternative	Girls	-	2,400	147	▲ 6%	4,000	263	▲ 7%
	Boys	-	2,400	251	▲ 10%	4,000	424	▲ 11%
Women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions	Total	-	166,100	20,514	▲ 12%	-	-	-
	Girls	-	166,100	8,348	▲ 5%	-	-	-
	Boys	-	166,100	7,515	▲ 5%	-	-	-
	Women	-	166,100	2,666	▲ 2%	-	-	-
	Men	-	166,100	1,985	▲ 1%	-	-	-
People with safe and accessible channels to report Sexual Exploitation and Abuse (SEA) by personnel who provide assistance to affected populations	Total	-	572,500	10,025	▲ 2%	-	-	-
Children who have exited an armed force and groups provided with protection or reintegration support	Total	-	700	120	▲ 17%	1,000	152	▲ 15%
Children, adolescents and caregivers accessing community-based Mental Health and Psychosocial Support (MHPSS)	Total	-	384,783	59,769	▲ 16%	786,930	71,881	▲ 9%
Unaccompanied and separated children provided with alternative care and/or reunified	Total	-	1,600	398	▲ 25%	4,000	687	▲ 17%

Children accessing formal or non-formal education, including early learning	Total	-	300,000	28,337	▲ 9%	300,000	34,562	▲ 12%
	Girls	-	300,000	15,057	▲ 5%	300,000	18,609	▲ 6%
	Boys	-	300,000	13,280	▲ 4%	300,000	15,953	▲ 5%
Children receiving individual learning materials	Total	-	1.1 million	3,171	0%	2.8 million	5,224	0%
	Girls	-	1.1 million	1,411	0%	2.8 million	3,310	0%
	Boys	-	1.1 million	1,760	0%	2.8 million	1,914	0%
Cross-sectoral (HCT, C4D, RCCE and AAP)								
People engaged in reflective dialogue through community platforms	Total	-	600,000	263,671	▲ 44%	-	-	-
People sharing their concerns and asking questions through established feedback mechanisms	Total	-	100,000	102,597	▲ 103%	-	-	-

*Progress in the reporting period 1 January to 30 June 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	254,753	273,328	13,477,044	96%
Nutrition	33,272,170	4,736,047	1,470,991	27,065,132	81%
Child protection, GBVIE and PSEA	25,346,535	794,305	1,687,019	22,865,211	90%
Education	32,437,460	196,698	1,718,350	30,522,412	94%
Water, sanitation and hygiene	15,622,525	1,931,515	5,229	13,685,781	88%
Social protection	1,000,000	-	-	1,000,000	100%
Cross-sectoral (HCT, SBC, RCCE and AAP)	8,815,085	-	98,954	8,716,131	99%
Emergency Preparedness	3,001,100	2,297,523	703,577	-	0%
Total	133,500,000	10,210,841	5,957,448	117,331,711	88%

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ENDNOTES

1. DTM Mali Report May 2024