Zambia

Humanitarian Situation Report update # 9.



A mother with her o children at Mambolomoka health center in Shang'ombo district

Update 15th October 2024

Situation in Numbers

- **12,200,000 people** affected by drought.
- **6.600,000** people in need of humanitarian assistance.
- Over **3,000,000 children under 18** and **1,200,000 children under 5** years are facing prolonged food insecurity and are at high risk of common childhood illness, vaccine preventable disease outbreaks and malnutrition.
- **23,378** cumulative Cholera cases with **740 deaths.** No new Cholera cases reported since 29th June 2024.
- **1** reported case of Mpox through the Zambia National Public Health Institute.

Sources

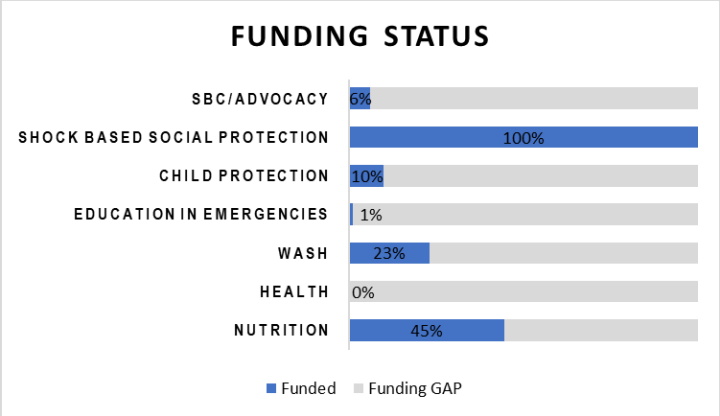
*1)*Zambia : IPC Acute Food Insecurity Analysis
2)ZNPHI : Zambia Cholera Situation Report,
3)UNOCHA: Zambia Drought Flash Appeal, May – December 2024)
4)SMART Survey Results

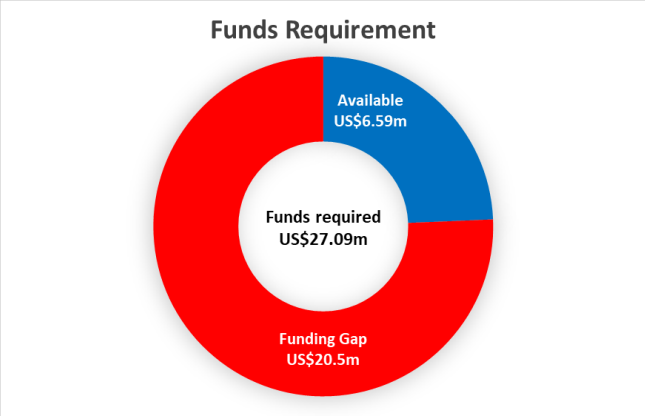
Highlights

- An estimated 4.95 million people (about 29 per cent of the population, are facing high levels of acute food insecurity (IPC Phase 3 or above). This includes about 84,000 people facing critical levels, classified as IPC Phase 4 (Emergency) and 4.87 million people facing crisis levels, classified as IPC Phase 3 (Crisis).
- About 7.23 million people (42 per cent of the population) are further classified in IPC Phase 2 (Stressed).
- 111,964 children have been screened for malnutrition; 316 have been enrolled for SAM; and 821 MAM cases have been enrolled for management of moderate wasting.
- UNICEF supported the distribution of 1,521 carons of RUTF, 69 cartons of F75, 71 cartons of F100, 2 cartons of Resomal and 47 cartons of CMV to 24 districts in Western, Southern and Northwestern provinces.
- 75 schools, of which 70 are primary schools are currently on the school feeding programs.
- In this reporting period, 74 per cent of the 867 calls received at the Child Helpline 116 relate to violence against children. This reflects increasing concern on the safety, well-being, and dignity of children due to the devastating effects the drought has on families' capacity to protect and provide basic needs for their children.
- 300 healthcare facilities, 44,500 vulnerable families, and 1,000 children have been discharged from malnutrition treatment centers.
- A nationwide under-five measles campaign was conducted reaching 95 per cent of the targeted 4,092,396 children.
- In this reporting period, 213 new traditional toilets and tippy taps have been constructed in Ituba Village in Chama district.
- A social media campaign documentary run on UNICEF Zambia social media sites, reaching 923,000 people.
- First case of Mpox in Zambia reported on 10 October 2024.

UNICEF's Drought Response Funding Status per sector*

Drought Funding Status in US$





*Funding available includes funds received in the current year and repurposed funds with agreement from donors.

FUNDING OVERVIEW & PARTNERSHIPS

To respond to the growing humanitarian needs, as well as sustaining the lifesaving services of close to 10 million people affected by the ongoing drought and the upcoming public health emergencies including cholera and Mpox – UNICEF requires a total amount of US$33,582,543. Of these, a total amount US$27,095,543 is for the drought response and US$6,487,000 is for Cholera response. US$2,834,797 has been received from ECHO and CERF to support the Cholera response. In addition, UNICEF reallocated US$ 490,000 from its Regular Resources (RR) bringing the total amount available funds for the response to US$3,324,797. The country office had accessed an internal Emergency Programme Fund (EPF) loan of US$2,210,950 to enable scaling up of its interventions in view of the criticality of quick action. For the drought response, US$6,595,138.93 (US$$3,263,631 from European Commission, US$122,566 from GIZ, US$1,526,698 reprogrammed funds and US$1,682,243 from CERF), is available for the response leaving a funding gap of US$20,500,404.

SITUATION OVERVIEW & HUMANITARIAN NEEDS.

Zambia continues to face a severe drought due to the ongoing effects of El Niño. Between April and September 2024, an estimated 4.95 million people (29 percent of the population) are facing high levels of acute food insecurity (IPC Phase 3 or above). This includes about 84,000 people facing critical levels, classified as IPC Phase 4 (Emergency) and 4.87 million people facing crisis levels, classified as IPC Phase 3 (Crisis). The affected populations require urgent response action to fill their food needs and to protect and save lives and livelihoods. Of the 94 districts analyzed, 82 are classified in Phase 3 with the rest of the districts being classified as IPC Phase 2 (Stressed).
Cumulatively, from March to September 111,964 children were screened for malnutrition; 316 have been enrolled for SAM; and 821 MAM cases have enrolled for management of moderate wasting. 8,074 children below five years of age have been enrolled for SAM treatment, and a further 20,162 children have been enrolled for MAM treatment in the 84 drought-affected districts of Zambia. On average, 785,853 children are screened monthly in drought affected districts with an average monthly enrolment of 1,346 SAM cases and 3,361 MAM cases (DHISII, 09 Oct 2024). The number of cases enrolled has increased over the last reporting period.

According to the recent SMART Survey (May 2024) conducted by UNICEF and partners, over 3 million children under 18 and 1.2 million children under five years are facing prolonged food

insecurity and are at high risk of common childhood illnesses, vaccine-preventable disease outbreaks, and malnutrition. An estimated 51,103 children are likely to suffer from severe wasting (SAM) in 2024, and 2 out of 3 children from child food poverty, meaning they do not have diverse diets.

While the country has not registered new cholera cases since 29 June 2024, the cholera outbreak has not yet been officially declared over, as the risk of cases continues with the ongoing drought and water shortages.

Zambia remains at high risk of Mpox outbreak since it has a long porous 2000kms border with the Democratic Republic of Congo – a country with the highest reported cases of Mpox, the country too, records huge population movements by land and air with countries in Eastern and Southern Africa that have recorded Mpox cases. As of 10th October 2024, Zambia recorded her first case of Mpox, originating from Tanzania. The national Mpox contingency plan for Zambia has been developed and surveillance is ongoing.

SUMMARY ANALYSIS OF PROGRAMME RESPONSE

NUTRITION

UNICEF continues to work with the Government of the Republic of Zambia (GRZ) and other Nutrition Cluster members to treat cases of Serve Acute Malnutrition (SAM) and Moderate Acute Malnutrition (MAM) in children. Between March and September, 8,087 children below five years of age were treated for SAM, whilst 20,162 children were treated for MAM in the 84 drought affected districts. As for the 20 drought affected districts that UNICEF prioritized, a total of 111,964 children were screened for malnutrition; 316 have been enrolled for SAM; and 821 MAM cases were enrolled for management of moderate wasting in August 2024[1].

Additionally, UNICEF trained and set up sub-national nutrition cluster coordination structures in these 20 districts to facilitate coordination. Inception meetings for the sub-national clusters were conducted in at least 18 districts, targeting key line Ministries including Agriculture, Health, Community Development and Social Welfare, Fisheries and livestock, Green Economy, Chief representatives, NGOs and CSOs.

UNICEF supported the training of 233 health workers in Maternal Infant and Young Children Nutrition (MAIYCN) in Emergencies while reaching 233 health workers trained in Integrated Management of Acute Malnutrition (IMAM) in Western province bringing the cumulative number of health workers trained in IMAM to 347 out of a targeted 792. Furthermore, UNICEF has cumulatively supported the training of 944 community-based volunteers in IMAM out of a target of 3081 representing 31 per cent since the inception of the drought response. Moreover, UNICEF supported the Infant and Young Child Feeding in Emergencies (IYCF)- and Nutrition data management training for health workers, reaching 169 health workers in Pemba, Kazungula, Rufunsa, Chavuma and Zambezi districts.

In addition, during the current reporting period, UNICEF supported the distribution of 1,521 carons of Ready-to-Use Therapeutic Food (RUTF), 69 cartons of F75, 71 cartons of F100, 2 cartons of Resomal and 47 cartons of CMV to 24 districts in Western, Southern and Northwestern provinces.

CHILD PROTECTION

The Government, through the Ministry of Community Development and Social Services (MCDSS) continues to play a lead role in coordinating the Protection Cluster. With support from UNICEF, the

[1] DHISII, 9 Oct 2024

Ministry is prioritizing the protection of children at risk of violence and abuse. The Ministry and partners continue to support the community volunteers to undertake community case management and referral of children for services.

Two counsellors have been deployed to the DMMU call centre through UNICEF support. The counsellors will facilitate awareness raising on Prevention of Sexual Exploitation and Abuse, Gender Based Violence, and provision of Psychosocial Support. The counsellors are also supporting the DMMU call centre to handle beneficiaries' grievances relating to the drought response. In the month of September, two grievances relating to cash transfer were received and referred to the Ministry of Community Development and Social Services for their follow up action.

Violence and abuse of children remains a top concern to many children and adults calling the Child Helpline for support. Out of the 867 calls received at the Child Helpline 116, 74 per cent related to violence, abuse and exploitation of children. This reflects the challenges children and communities are coping with due to distress because of drought. Caregivers concerns on their inability to meet the basic needs of their children has increased. UNICEF is sharing this feedback with the Government and stakeholders for continued. support including social protection interventions.

EDUCATION

UNICEF has maintained its steadfast support to the Ministry of Education (MoE) by facilitating and Co-chairing regular bi-weekly Education cluster meetings to enhance the coordination of the drought response.. In addition, UNICEF is actively engaging the Department of Disaster Management and Mitigation (DMMU) in sector coordination efforts, involving them in various committees such as the committee on International Day on Disaster Risk Reduction (IDDRR).

UNICEF in collaboration with education sector stakeholders shared the initial results of the Rapid Need Assessment conducted to investigate the effects of drought on the education sector during the inter-cluster coordination meeting at the DMMU and UNHCT; with the purpose of synchronizing the response and the highlighted needs as indicated from the findings. The protection cluster highlighted that the findings from the assessment harmonized with their sector feedback, particularly those concerning factors that are contributing to school absenteeism. Based on the report findings, 66 per cent of the respondents are not attending school because of their involvement in supporting their families or engaging in work.

From the 29 September to the 3 October 2024, UNICEF participated in an Inter-Agency mission in western Province where a meeting was held at Sioma Primary School with teachers, Parent-Teacher Committee (PTC) members, boys and girls to gain an understanding of the impacts of the drought on schools and the education sector. Furthermore, UNICEF in collaboration with Airtel Zambia through the "Connecting the School" initiative supported Sioma Primary School with 10 tablets for children with disabilities. However, challenges with power supply due to drought are hindering the effective utilization of this tablets by the children. The team further held a meeting with Sioma District Education Board Secretary (DEBS) colleagues where it was noted that out of a total of 75 schools, all 70 primary schools were currently on the school feeding programs. DEBS through MoE HQ and DMMU requested the extension of the school feeding initiative to secondary schools, as



FGD on drought with learners at Sioma Primary schools during Inter-Agency mission. Sioma district, October 2024

learners at that level were also affected by the drought situation in the district. Teachers emphasized challenges they face due to drought related electricity outages which hindered their ability to prepare lesson plans in the evening. Additionally, the lack of water in their homes posed difficulties to prepare early for school as the need to sought alternative sources of water for their household, hence affecting lesson delivery. Moreover, the decreasing water levels and increased salinity due to drought had resulted in health issues among children after drinking water from hand pumps in school.

Water, Sanitation and Hygiene (WASH)

UNICEF completed the delivery of IPC-Hygiene kits to 14 drought-affected districts in six provinces with supplies reaching 300 healthcare facilities, 44,500 vulnerable families, and 1,000 children discharged from malnutrition treatment centers, enabling about 227,950 drought-affected people to have improved hygiene practices. The distribution was complemented by risk communication and community engagement in partnership with Rise Community Aid Program (RICAP), District Health Offices and Community-Based Volunteers.

UNICEF also facilitated the post Cholera Intra Action Review (IAR) training which was led by Zambia National Public Health Institute (ZNPHI) that brought together 111 participants from Cholera Rapid Response Teams from all the 10 provinces of Zambia. The IAR served as a platform for key emergency responders to collaboratively assess strategies, share experiences, pinpoint challenges, and identify successful actions. The insights will be used to refine programme decisions and control future outbreaks more effectively. The country-led review brought together key stakeholders, decision makers, and implementing partners including experts from technical agencies including the Zambia Red Cross Society, the United Kingdom Health Security Agency (UKHSA) Centers for Disease Control and Prevention (CDC), Ministry of Water Development and Sanitation (MWDS), Ministry of Health (MOH), Centre for Infectious Disease Research in Zambia (CIDRZ), Foreign, Commonwealth & Development Office (FCDO), Japan International Cooperation Agency (JICA), World Health Organization (WHO) as well as UNICEF.

In addition, MOH in collaboration with UNICEF, CDC, and ZNPHI, conducted training sessions for 110 Environmental Health Technicians (EHTs) responsible for water quality monitoring on the use of the Kobo data collection tool and data visualization with Power BI in Lusaka, Southern, and Central Provinces. Additionally, a team of 6 focal points from MOH, ZNPHI, and UNICEF were trained by CDC on Power BI dashboard management.

UNICEF continues to provide support to the WASH Cluster coordination as the co-lead, conducting monthly WASH cluster meetings as well as Water Quality Monitoring meetings with the continued use of the more comprehensive 5W tool. With endorsed ToRs for WASH cluster coordination, a work plan for the cluster has been developed in collaboration with MWDS and WASH cluster members which will serve as a key tool for coordination and planning in WASH cluster operations.

HEALTH

To strengthening the country's outbreak preparedness and response capacities, UNICEF has integrated community surveillance into the emergency preparedness and response contributing to the mapping of priority areas for multisectoral intervention (PAMI) in selected districts as well as prepositioning of the cholera supplies. The integrated surveillance also included events such as Malnutrition in view of the on-going drought response, other events included were Mpox, Measles and Anthrax. n the process, 19,336 children were screened for different illness, 112 had diarrhoea, 6 had moderate malnutrition and 4 had severe malnutrition, 78 were referred to nearest health facilities for further management from among all the children that were screened. Furthermore, UNICEF together with other partners is supporting MoH with re-activating district, provincial and national incident management systems (IMS) structures to respond to Cholera, Mpox and any other outbreak or public health event across all the 10-provinces with focusing on the 50 cholera hot spots

districts. This is being done in anticipation of a possible outbreak during the rainy season between October to March. There have been no cholera cases reported since 29th June 2024.

While the primary focus for UNICEF was Cholera, the community surveillance activity in the training of the Community Based Volunteers (CBVs) included surveillance of Malnutrition with the on-going drought response in the country as well as for Mpox, Measles and Anthrax. During this period, 19, 336 children were screened for different illness: 112 had diarrhoea, 6 moderate malnutrition and 4 had severe malnutrition, 78 were referred to nearest health facilities for further management. Additionally, between September 23 and 29, 2024, a nationwide under-five measles campaign was conducted reaching 95 per cent of the targeted 4,092,396 children.



UNICEF's Community Health Emergencies Officer - Chitengi Munganga interacting with community members in Kabwe's Makululu area during the integrated event-based surveillance.

In response to the drought, vaccines and other supplies were received in the country with UNICF support. A subnational training of healthcare workers was done therefore conducted in time for the campaign. Furthermore, UNICEF repurposed AWD Kits (drugs and renewable modules) and other supplies such as cholerine to the 20 priority districts, that is, the IPC3+ districts.

Social and Behaviour Change (SBC)/ Risk Communication & Community Engagement (RCCE)

UNICEF in collaboration with Ministry of Health-Health Promotions Department, Disaster Management and Mitigation Unit, Zambia Red Cross and Childline held a 3-day Community Feedback Standard Operating Procedures (SOP) workshop. The purpose of the workshop was to review and finalize the Community Feedback Mechanism SOP for CBVs and MoH staff at both sub national and national levels. The SOP was developed to facilitate the collection, analysis, and utilization of community feedback during multi-hazard Public Health emergencies such as Drought, Cholera, Mpox and Polio.

UNICEF conducted virtual RCCE orientations to WASH and Nutrition Partners engaged in drought response activities across UNICEF supported districts. These training sessions aimed to equip partners with the knowledge and skills necessary to contextualize and incorporate RCCE into their respective drought activities. The orientations further included co-created drought messages for WASH and Nutrition of which had to be disseminated using the 26 identified community radio stations across 20 drought-affected districts.

During the reporting period, UNICEF conducted a joint Programme Monitoring Visit (PMV) aimed at monitoring and documenting key RCCE WASH cholera activities being implemented of the Cholera WASH RCCE programme in three districts of Eastern Province: Lumezi, Lundazi, and Chama. During the visit in Ituba Village in Chama district it was recorded that because of the programme 213 new traditional toilets and tippy taps were constructed increasing the number of toilets in the community from 498 in June to 711 in September thereby significantly improving water, sanitation, and hygiene practices in the community and preventing future cholera outbreaks. (The community action is documented as a good practice for further dissemination Link).



Maggie Lungu, a community member of Ituba village demonstrating how to use a traditional tippy tap outside her newly constructed traditional toilet.

In addition, UNICEF in collaboration with World Food Programme (WFP), DMMU, MoH and Childline supported the training of 13 DMMU Call Centre agents in RCCE and Community Feedback Mechanisms. This training aimed to enhance the capacity of call centre agents from WFP, Childline, and Zambia Electricity Supply Cooperation Limited (ZESCO) in RCCE and community feedback processes. The training provided key multi-sectoral drought messages which the call centre agents can use to respond to callers inquiring on drought related issues.

In collaboration with the Collective Service and the Social Science in Humanitarian Action Platform, UNICEF spearheaded the development of a Brief on the findings of the drought Rapid Qualitative Assessment (RQA) highlighting lessons and key considerations for policy action. The Drought Rapid Qualitative Assessment Brief was published on 27th September,2024 on the Social Science in Humanitarian Action Platform.

Human Interest Stories and External Media

During this reporting period, UNICEF conducted several key activities, these included participating in the Southern Africa Regional Conference of Youth (RCOY) - a multi-stakeholder platform aimed at fostering regional collaboration and mobilizing collective efforts to combat climate change. During this event, discussions around climate hazards such as the drought, touching the lives of children and youth across southern Africa were deliberated.

Other activities included media interviews on the drought situation in Zambia with UNICEF Country Representative – Dr Penelope Campbell. Additionally, a social media campaign documentary was run and reaching 923,000 people highlighting UNICEF's response to cholera taking the opportunity to thank the Government, our donors and all the other stakeholders involved.

Finally, various content pieces were created to support UNICEF's advocacy and communication efforts towards drought and cholera, which were posted on our social media pages and our website.

Cluster Leadership, Coordination and Strategies.

As co-leads in the drought and cholera response with DMMU, the United Nations Resident Coordinator in Zambia continues its coordination mechanisms efforts during the emergency response.) To avoid duplication of efforts, the United Nations has assigned cluster lead agencies to co-lead priority clusters in collaboration with line ministries. The clusters activated as per the Humanitarian Response Plan for drought and Cholera response at national, provincial and district level.

The UN continues to conduct periodic drought response coordination meetings both at national and provincial level. UN Coordination meetings at national level focuses on the strategic and operational level. Province and district coordination meetings focus on operational issues. The UN Country Team decides on the frequency of the coordination meetings in consultation with UN sector lead agencies and partners including INGOs and NNGOs. UN sector lead agencies continue to coordinate sector responses in collaboration with DMMU, line ministries, INGOs and NNGOs. UNICEF co-leads the WASH, Nutrition and Education clusters. UNICEF Zambia is prioritizing an integrated WASH, health and nutrition, child protection, education response, supported by shock-responsive social protection, social and behavior change (SBC) and operational support interventions in emergency response.

Press Releases:

Youth in Southern Africa Come Together to Raise Their Voices and Influence Climate Change Policies in the lead up to the Conference of The Parties Meeting – COP29

Video Assets:

Cholera Survivors Share Their Stories: UNICEF Provides In-Kind Support to Vulnerable Individuals

UNICEF Zambia Cholera Response 2024 1 Documentary

Web Stories:

Building Resilience Through Nutrition - The Impact of SUN II on Manungu's Lead Farmers Amidst Devastating Drought. (02 September)
Addressing Cholera Risks through Distribution of Household Kits - A story of hope amidst a cholera outbreak in Mulumbwa, Monze District (30 August)
Students Take Ownership to End Cholera - School implements effective measures to remain cholera-free (01 October)

NEXT Humanitarian Situation Report: 15 November 2024

For more information: UNICEF Zambia Fighting the Cholera Outbreak in Zambia | UNICEF Zambia

Who to contact for further information:

Dr Penelope Campbell
Representative
UNICEF Zambia Country Office
Email: pcampbell@unicef.org

Henri Heikura
Deputy Representative Operations
UNICEF Zambia CO
Email:hheikura@unicef.org

Dr Nejmudin Kadir Bilal
Deputy Representative Programme
UNICEF Zambia CO
Email: nkbilal@unicef.org

Annex A1: Summary of Programme Results – Drought

Sector	UNICEF Target 2024	Total results to date	Change ▲▼
Health			
# children 0 to 15 years vaccinated against measles	4,100,000	3,887,776	▲ 3,887,776
# children and women accessing primary healthcare in UNICEF supported facilities	554,693	19,336	▲19,336
Nutrition			
# pregnant women receiving preventative iron-containing supplements	125,955	93,206	No Change
% health facilities in UNICEF supported districts that provide treatment services for the management of severe wasting	80%	35%	No Change
# children 6-59 months screened for wasting	554,593	779,867	No Change
Child Protection			
# of targeted women, girls and boys provided with risk mitigation, prevention and/or response interventions to address gender-based violence	1,750	867	▲867
# of targeted people, including girls and boys in humanitarian contexts who have received individual case management and/or referrals to address severe protection risks	700,000	0	No Change
# of children and adults who have access to a safe and accessible channel to report sexual exploitation and abuse by humanitarian, development, protection and/or other personnel who aid affected populations	700,000	0	No change
Education			
# children accessing formal or non-formal education, including early learning	TBD	0	No Change
# teachers/educators trained in MHPSS	3,000	0	No change
WASH			
# people accessing a sufficient quantity and quality of water for drinking and domestic needs	103,500	227,950	▲183,200
# of boreholes provided in learning and health care facilities and safe spaces in communities, reached with basic WASH services"	414	179	No change
Social protection (Cash based response)			
# households reached with vertical cash transfer expansion with UNICEF technical assistance	75,000	1,311,101	No Change
#households reached with horizontal cash transfer expansion with UNICEF technical assistance	75,000	952,570	No Change
SBC			
# People reached with multi-sectoral messaging on drought response and access to services	6,000,000	0	No Change

Annex A2: Summary of Programme Results – Cholera

		Total Result 2024		
Sector	**UNICEF Target 2024**	**Total Result**	**Total result (%)**	**Change ▲▼**
Health				
# Health facilities that received UNICEF supplied AWD kits to manage Cholera cases.	60	30	50%	No change
# of Oral Rehydration Corners/Points (ORC/Ps) set up with UNICEF Support	200	200	100%	No change
# People vaccinated with OCV	2,238,112	2,193,046	99%	No change
WASH				
# of people benefitting from chlorination, water supply systems upgrade, and water quality monitoring	2,100,000	3,613,919	172%	No change
# of people benefitting from WASH and IPC supplies	2,100,000	2,804,873[2]	133.5%	No change
Nutrition				
# Children aged 6-59 months with SAM who are admitted for treatment and recover	2, 000	1,469	73.45.%	▲31.85%
Education				
# Schools supported to implement safe school protocols (IPC) through the provision of soap and buckets	141	663	448%	▲ 182%
# Schools reached with hygiene awareness campaigns in schools and surrounding communities	141	481	341%	No change
# Schools provided with hygiene-related IEC materials and messages for schools	141	663	448%	No change
# Teachers trained on infection prevention, Cholera response and management at the school level	204	0	0%	No change
Child protection				
# of people accessing protection referral mechanisms and/or pathways	24,562	6,864	26%	▲400
# of children affected by Cholera receiving protection support (example family tracing, reunification, case management services)	21,412	40, 939	191%	NA
# of children and adults who have access to a safe and accessible channel to report sexual exploitation and abuse by humanitarian, development, protection and/or other personnel who aid affected populations	600,000	39,694	6%	▲2,398
SBC				
# People who participate in engagement actions	1,800,000	2,262,942	125%	▲262,942
# People reached with messaging on prevention and access to services through multi-media platforms	8,000,000	11,000,000	138%	▲1,000,000
# People sharing their concerns and asking questions/clarifications for available support services to address their needs through established feedback mechanisms	2,400	15,384	641%	**▲3,160**

[2] Distribution of household kits is reaching 2,027,000 people, whilst school WASH Cholera kits are reaching 760,658 learners + 17,215 learners.

Annex B1: Funding Requirements for Drought response

		Funds available			Funding gap	
Appeal Sector	**Requirements (US$)**	**Other resources used (US$)**	**Humanitarian resources received (US$)**	**Total**	**US$**	**%**
Nutrition	11,672,752	1,207,088	4,520,651	5,727,739	5,945,013	50.9%
Health	7,659,180	-		-	7,659,180	100%
WASH	3,381,800	-	1,078,243[3]	1,078,243	2,303,557	68%
Education (EiE)	1,795,415	19,610		19,610	1,775,805	99%
Child Protection	1,500,000	150,000		150,000	1,350,000	90%
SBC/Advocacy	325,000	-	20,000	20,000	305,000	94%
SRSP	150,000	150,000		150,000	-	0%
TOTAL	**27,095,543**	**1,526,698**	**1,682,243**	**3,208,941**	**23,886,601**	**88%**

Annex B2: Funding Requirements for Cholera response

		Funds available			Funding gap	
Appeal Sector	**Requirements (US$)**	**Other resources used (US$)**	**Humanitarian resources received (US$)**	**Total**	**US$**	**%**
WASH	2,850,000	100,000	1,776,183	1,876,183	973,817	34%
Health	2,000,000	212,000	558,575	770,575	1,229,425	61%
Nutrition	307,000	0	199,979	199,979	107,021	35%
Education	685,000	0	-	-	685,000	100%
Child Protection, GBViE & PSEA	300,000	10,000	222,188	232,188	67,812	23%
SBC/RCCE	345,000	168,000	77,872	245,872	99,128.00	29%
Total	**6,487,000**	**490,000**	**2,834,797**	**3,324,797**	**3,162,203**	**49%**