



Community-based management of acute malnutrition program in Karaga, Ghana.

unicef
for every child

Humanitarian Situation Report No. 2

Reporting Period
1 January to 31
December 2024

Response in coastal countries linked to Sahel crisis spillover

HIGHLIGHTS

- In 2024, UNICEF continued to work closely with the governments of Benin, Côte d'Ivoire, Ghana and Togo to address humanitarian needs. Joint efforts included conducting nutritional screenings for 147,000 children for wasting, providing treatment to 39,000 children aged 6-59 months with severe wasting and vaccinating 310,000 children against measles. 78,000 children received access to formal and non-formal learning including early learning.
- The deterioration of the security situation in Burkina Faso and Mali has led to the displacement of 166,000 people into neighboring coastal countries. Côte d'Ivoire has seen a sharp increase in asylum-seekers over the past year and currently hosts 65,962 individuals from Burkina Faso.
- Climate change is increasing the frequency and intensity of floods, while also exacerbating dry spells. In 2024, floods have affected 135,000 people across Benin, Côte d'Ivoire, Ghana, and Togo. Ghana has also experienced a severe drought, with children being particularly vulnerable to its effects.

SITUATION IN NUMBERS



3,020,000
Children in need of
humanitarian assistance

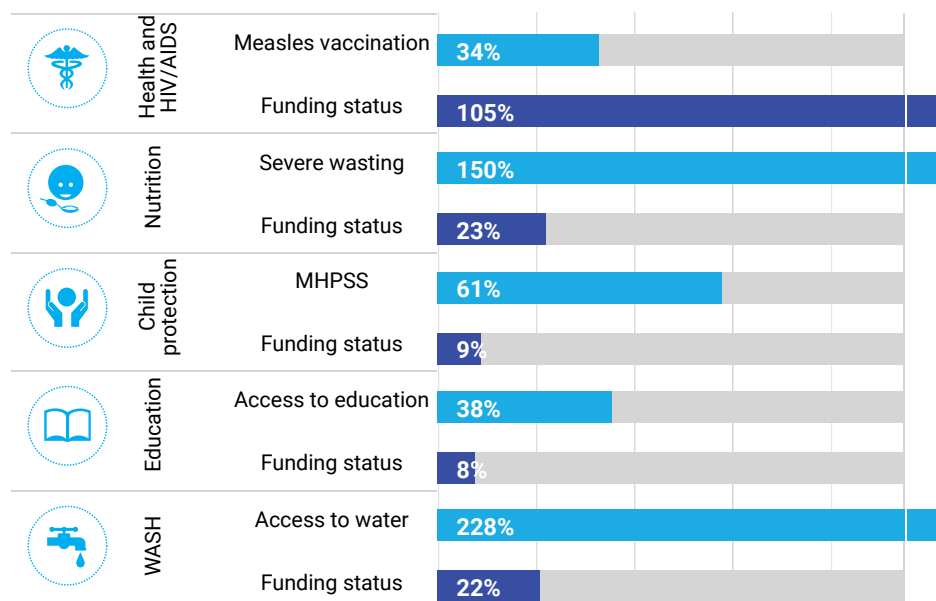


6,100,000
People in need of
humanitarian assistance



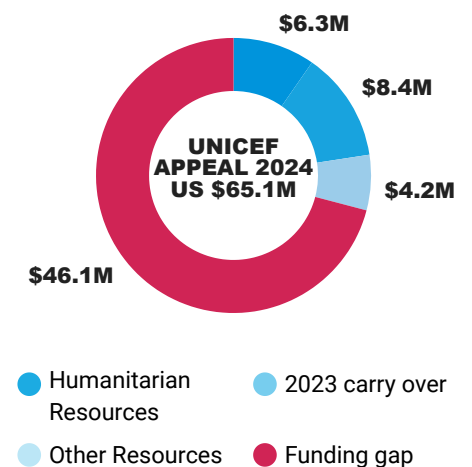
166,000
Displaced¹

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

SITUATION OVERVIEW & HUMANITARIAN NEEDS

Benin, Côte d'Ivoire, Ghana and Togo continued to experience humanitarian challenges in 2024, largely due to the ongoing conflicts in neighbouring Burkina Faso and Mali. Insecurity in the central Sahel countries caused a steady flow of refugees and internally displaced persons (IDPs) into the coastal countries, putting pressure on local resources and basic social services. By the end of 2024, an estimated 166,000 people had been displaced across the four coastal countries, although these figures are likely to be underestimated as census data and the registration of new arrivals and displaced people was not consistently carried out in all locations. As of December 2024, over 200 security incidents have been reported within the coastal countries (to the north, along the border with Burkina Faso, Mali and Niger), including attacks, abductions, violent demonstrations, and the use of improvised explosive devices (IEDs) by non-state armed groups (NSAG).

Côte d'Ivoire, in particular, saw a substantial rise in asylum-seekers in 2024, from 36,729 in December 2023 to 65,962 by December 2024. Whilst 20 per cent resided in the Timalah and Nioronigué settlements, the remaining 80 per cent were dispersed across more than 250 towns and villages of the nine regions hosting populations coming from Burkina Faso and Mali, with 53 per cent of asylum-seekers concentrated in the Bounkani region and 38 per cent in Tchologo. Security along Côte d'Ivoire's northern border with Burkina Faso also deteriorated in 2024, with incursions by non-state armed groups (NSAG) into villages in the Téhini prefecture (Tchologo region). Further unrest and displacement along Mali's border, particularly in the Tengrela and Folon regions, have exacerbated humanitarian needs for both displaced populations and host communities. and

host Continued instability in the Sahel region also led to more asylum-

seekers from Burkina Faso entering Ghana. An estimated 2,000 arrived between March and June 2024, bringing the total to around 17,353 across three northern regions. 5,309 asylum-seekers were registered after Ghana lifted its ban on registering asylum-seekers living outside settlements, including 3,707 in host communities and 1,602 in the Tarikom and Zini settlements. the Tarikom

Despite increased military presence along Benin's borders, security risks remained elevated in 2024, especially in border regions with Burkina Faso, Togo and Niger. Attacks by non-state armed groups (NSAGs) continued in the Alibori, Atacora, Donga and Borgou departments. While the number of reported incidents (217) decreased slightly compared to 2023 (235), their severity intensified, disrupting essential services like schools and healthcare, and negatively impacting livelihoods, particularly in Karimama, Kandi (Atacora department), Matéri, and Tanguiéta (Alibori department). An estimated 33,238 people (19,732 refugees/asylum-seekers and 13,506 internally displaced persons) were forced to flee their homes due to a resurgence of armed group violence, including 8,219 children and 3,315 women. including 8,219 In Togo, the number of displaced persons reached 49,607 by the end

of 2024, a 4.5 per cent increase from 47,507 in March. This total includes 39,436 refugees and asylum-seekers in the Savanes region, of whom 38,871 are recognized refugees, mainly from Burkina Faso. Togo also registered 10,171 internally displaced persons (IDPs). Furthermore, security incidents, initially limited to the northeastern Savanes region (Kpendjal and Kpendjal West prefectures), expanded to the Tône and Tandjoaré prefectures. These incidents, including the use of IEDs by NSAGs, have restricted access and worsened living conditions for the local population. access

and Humanitarian consequences for children, adolescents **and their families** children,

The arrival of displaced children in the four coastal countries is straining already limited resources for essential services like education, health, psychosocial support and mental health, immunization, nutrition, social protection, water, hygiene and sanitation and child protection. Schools are struggling to accommodate the increased number of students, and more support is needed to ensure access to these vital services for all children.

Girls are particularly vulnerable to protection risks, including family separation, forced marriage, lack of birth registration, abuse, and exploitation, and require professional support. birth

registration, Political and economic tensions

The military coup in Niger mid-2023 and the withdrawal of Mali, Burkina Faso and Niger from ECOWAS have profoundly altered the region's geopolitical landscape, particularly the dynamic between the Alliance of Sahel States (AES) countries and coastal countries. This power shift has fueled tensions over competing economic interests, including oil exploitation, supply chains and trade routes, while also raising concerns about border closures (Benin/Niger) and regional security. These challenges are compounded by existing resource conflicts between farmers and herders over vital resources like water and arable land, that already particularly concern the border regions. land,

that Vulnerability and impact of climate **change on children and adolescents** change

The coastal countries, already grappling with the influx of displaced

populations due to the central Sahel crisis, also face increasing vulnerability to the effects of climate change. Floods, droughts and extreme weather events annually devastate communities across all four nations, including the northern regions already burdened by the Sahel outflow. This combination of factors strains already limited infrastructure and resources. Schools, health centres and other essential social service facilities have been destroyed, occupied, or damaged, further disrupting access to basic services, especially for children and adolescents. access

to Côte d'Ivoire experienced heavy rains and violent winds in 2024, causing floods and landslides that affected 19,266 people, including 9,470 children. Ghana faced severe flooding in March due to overflows from the Volta and Kpong dams, displacing approximately 40,000 people across 192 towns and villages in the Volta, Eastern and Greater Accra regions. Major floods in Togo caused widespread damage to crops, displaced communities and destroyed socio-economic infrastructure in vulnerable rural areas, affecting 42,000 people, including 21,420 children. Benin was also impacted by floods, affecting 33,442 people (17,438 in Atacora, 9,816 in Alibori, and 6,188 in Couffo) and disrupting the education of 6,188 students. The impact of floods has created precarious living conditions, increasing the risk of waterborne and foodborne illnesses due to the contamination of 137 water points and 226 latrines, particularly in Malanville, Kérou, Matéri and Coby. points

and Between June and August 2024, parts of Ghana also experienced a

dry spell that led to a food shortage. A rapid assessment found that 37 per cent of communities reported cases of malnourished children, with even higher rates in the Upper East (86 per cent) and Northeast (75 per cent) regions. Prior to the dry spell, most communities (86 per cent) were able to feed children under five 3-4 times a day.

However, by August 2024, this number had dropped significantly to 38 per cent, indicating a substantial decrease in food access for young children and families. indicating

a Vulnerability to public health emergencies families.

Disease outbreaks pose **a significant threat in the coastal countries.**

In 2024, Benin, Côte d'Ivoire and Togo reported suspected and

confirmed cases of measles, dengue and polio. Ghana continues to grapple with its largest cholera outbreak in years, with 4,618 suspected cases reported, including 398 confirmed cases across the Greater Accra, Central, Eastern, Western, and Ashanti Regions and 37 deaths. On 24 July 2024, Côte d'Ivoire declared an mpox epidemic. By 16 December 2024, the country had recorded 484 suspected cases, of which 1,078 were confirmed across 34 health districts. Of the confirmed cases, 106 patients recovered, and one death was reported. Children under 15 account for 40 per cent of confirmed mpox cases.

death

was
Strong collaboration between four United Nations agencies in 2024 – UNHCR, WFP, IOM and UNICEF – resulted in the development of the Gulf of Guinea Joint Response Plan. This initiative *has fostered coordination and complementary actions across the four coastal countries*, supporting government and local partner efforts to mitigate the impacts of the central Sahel crisis spillover. It aims to support national authorities to bridge the gap between humanitarian and development interventions by ensuring complementarity with development initiatives. authorities
to UNICEF's 2024 appeal for US\$65.1 million to address the humanitarian needs of children and women in the coastal countries had received only 28 per cent of its target as of 31 December 2024. While UNICEF remains committed to responding to the growing needs of children and families in these four countries, further support is critical to effectively address the escalating crisis and humanitarian needs. four
countries,

BENIN

SITUATION OVERVIEW & HUMANITARIAN NEEDS

the Sahel crisis, epidemics and floods. The Alibori, Atacora, Donga and Borgou departments experienced ongoing attacks by non-state armed groups (NSAGs), which displaced 33,238 people (19,732 refugees/asylum seekers and 13,506 internally displaced individuals), 8,219 of whom are children and 3,315 women. 3,315 women. Despite the reinforced military presence in border areas, security
risks remain high, particularly in cross-border areas. By December 2024, 217 incidents were reported, including armed clashes, violence, riots and explosions. While incidents decreased slightly from 2023 (235), their severity escalated, disrupting schools, healthcare, and livelihoods, particularly in Karimama, Kandi, Matéri and Tanguiéta. Children's education and family stability were significantly impacted. were
significantly The closure of Niger's border continues to disrupt trade, worsening
economic vulnerabilities. economic
vulnerabilities.

Additionally, floods affected 33,442 people including 17,438 in Atacora, 9,816 in Alibori and 6,188 in Couffo, and disrupted the education of 6,188 pupils. Living conditions are precarious, with increased risks of water-borne and food-borne diseases. 137 water points and 226 latrines, notably in Malanville, Kérou, Matéri and Coby, are contaminated. Children displaced by insecurity must be integrated into schools, where many pupils have lost their school equipment. lost
their

In 2024, the emergency response integrated and inclusion by providing gender-sensitive WASH facilities, targeted nutritional and health support for pregnant and lactating women, and inclusive education and child protection programmes, benefiting vulnerable groups, particularly women, girls, and displaced children. girls,

and

SUMMARY ANALYSIS OF PROGRAMME RESPONSE

HEALTH

During the first half of 2024, UNICEF continued to support strengthening the community health system. UNICEF supplied 1,741 bicycles to facilitate the mobility of community agents. This support enabled 1,931 individuals (26 women and 1,905 children) in the Banikoara, Bembèrèkè, Kalalé, Malanville, N'dali, Nikki, Parakou and Sinendé municipalities to receive primary health care (PHC). UNICEF also supplied medicines and equipment to health facilities in the north and pre-positioned essential items for caring for internally displaced persons, refugees and local populations.

In response to the increase of measles cases, the Ministry of Health, with the support of UNICEF, vaccinated 42,015 children (21,655 children between 6 and 23 months) against measles and rubella in Atacora and Alibori departments and 20,360 children in the targeted age group in Djougou and Bassila in the Donga department.

NUTRITION

From January to November 2024, UNICEF, in partnership with Health Zones (HZ) and the Benin Red Cross (BRC), achieved significant progress in addressing malnutrition, promoting child well-being and improving care delivery in vulnerable communities in northern Benin.

- 234,047 mothers of children aged 0-23 months received tailored Infant and Young Child Feeding (IYCF) advice in emergency settings across 27 communities in Atacora, Alibori, Borgou, and Donga departments. Nutritional supplies and services enabled therapeutic centres to treat 20,140 children under 5 (9,269 boys and 10,511 girls) with severe acute malnutrition (SAM).
- Four therapeutic nutrition centres were rehabilitated, and two new centres were established as satellites inpatient therapeutic structures in remote communes under security restrictions, improving care quality through 18 new hospital beds, kitchen equipment, and child stimulation kits.
- 808 children with moderate acute malnutrition (MAM) and 161 adults including pregnant and nursing mothers received ready-to-use supplementary foods.
- 1,077 children aged 0-17 years benefited from recreational activities in 25 child-friendly spaces (CFS) across 10 municipalities.
- UNICEF strengthened coordination by training members of communal consultation frameworks on food, nutrition, and health in six municipalities.

CHILD PROTECTION

In 2024, UNICEF and its partners enhanced child protection and psychosocial support, achieving significant results for safer, more resilient communities for children and families:

- 30,807 institutional actors (1,973) and members of school (11,835) and community (17,287) watch committees were trained on key CPIE topics such as MHPSS, PSEA, GBV/VAC, explosive ordnance risk education, CPIE coordination and data management, peaceful resolution of conflicts. As a result, 688,905 persons including 289,273 children and adolescents (3,345 displaced children) and 399,632 parents/caregivers, in Alibori and Atacora, received MHPSS support through safe spaces for adolescents, peer to peer education, 56 child friendly spaces and community dialogue sessions.
- Awareness raising activities for the elimination of discriminatory and gender social norms, active identification and referral of vulnerable children and for prevention of family separation and GBV/VAC reached 478,545 people in humanitarian situations through local medias and community dialogue sessions. 828,446 people (489,653 female including 410,241 girls) were informed through the same channels on PSEA particularly on how to safely report on sexual exploitation and abuse (SEA).
- 3,168 vulnerable children in humanitarian situations (1,984 girls, 205 refugees/IDPs, 933 GBV survivors) and 386 women survivors of GBV received individual case management services. This includes 347 unaccompanied/separated children, who benefited from alternative care, including through foster families. 6,571 displaced people (3,345 children) benefited from essential household kits.
- Fourteen child protection sub-committees in emergency coordination sub-committees, in Atacora and Alibori, held their statutory meeting to monitor the implementation of the CPIE response plan and conducted regular supervision field missions for quality assurance of humanitarian response interventions.
- UNICEF supported the government to implement an explosive ordnance risk education programme which reached 621,000 persons, in seven local languages, through local media and community dialogue sessions.
- Following the floods that devastated the country in 2024, supported the rehabilitation of pumps and the installation of autonomous solar-powered water stations in Alibori, Atacora, Borgou, Couffo, Donga and Zou, which ensured a reliable, climate-resilient and equitable water supply for 208,787 people (including 166,549 people in the northern departments).
- Rehabilitated 22 latrines in the most affected municipalities (Ségbana, Banikoara, Karimama, Kandi) benefiting 1,100 people including 572 women.
- Constructed 200 emergency latrines equipped with solar lamps and handwashing facilities to end open-air defecation in 41 rural localities in Atacora and Alibori departments (Tanguiéta, Matéri, Kérou, Cobly, Banikoara, Malanville) for 3,450 persons including 1,798 women.
- Trained around 1,000 people (hygiene officers, health police, social intermediation agents, Community health workers, locals hygiene and sanitation committees) on good hygiene practices to prevent illness and promote health.
- Supplied dignity kits and WASH supplies, enhancing hygiene and dignity for 94,836 peoples (including 25,975 women and 40,950 girls), including displaced populations and flood victims in vulnerable communities in Atacora, Alibori, Borgou, Couffo, Donga and Zou (including 3,470 people in the northern departments).
- In Atacora and Alibori, 26,819 children accessed safe and appropriate WASH facilities and hygiene services in learning centres and safe spaces in Atacora, Alibori, Borgou and Donga. This promoted improved health and well-being, and a supportive learning environment.

EDUCATION

In 2024, 7,050 children (3,372 girls) affected by emergencies in Alibori and Atacora benefitted from access to formal and non-formal education.

Key activities included awareness raising sessions on safe school approach, social cohesion and peace, and psychosocial support. In Matéri, Banikoara, and Lalo over 26,999 children (13,769 girls), including refugees, received school materials. Continuity to education for 5,000 students was further ensured in Alibori, Atacora and Borgou through pre-positioned materials and 11 tents for temporary learning spaces.

Additionally, a comprehensive life-skills programme reached 30,000 students, including 16,000 girls, addressing critical topics such as violence in and around schools, gender-based violence (GBV), menstrual hygiene management (MHM), and social cohesion and peace. A total of 3,843 children (1,780 girls) in crisis-affected areas benefited from lessons given by trained teachers on safe school approach, which bolstered both academic achievement and emotional resilience.

WASH

To foster a healthy environment for communities in need, UNICEF:

SOCIAL AND BEHAVIOUR CHANGE (SBC)

UNICEF significantly contributed to promoting social cohesion and child protection in displaced communities in northern Benin. From June to December 2024, targeted broadcasts through rural radios in Tanguiéta, Tounkoutouna, Kérou, Natitingou, Boukoumbè, and Banikoara reached 373,122 individuals (194,023 women and 179,099 men), bringing the total audience to 1,099,545 since January 2024.

Additionally, 148 community dialogues, facilitated by local leaders across Atacora, Alibori, and Donga, engaged 7,138 individuals (4,094 women and 3,044 men). These discussions addressed positive practices in community health, child protection and well-being, while promoting essential social services and encouraging the enrolment of displaced and refugee children in schools. As a result, 62,525 adults (33,597 women and 28,928 men) and 26,005 children (14,860 girls and 11,145 boys) relayed the information in their respective communities.

Altogether, 299,251 people participated in initiatives fostering social and behavioural change, promoting positive practices, and challenging harmful norms. Nearly 129,000 shared their comments and concerns with community actors during community activities. These included: the remoteness of social services, the absence of an internet network to stay informed, the demand for cash transfers for families who are very vulnerable due to their situation; the demand to be equipped with parental education for a better education of their daughters exposed to early pregnancies. This holistic approach effectively improved child protection, enhanced access to education and fostered long-term social cohesion in volatile regions.

SOCIAL INCLUSION

In 2024, UNICEF took significant steps to improve the living conditions of children, adolescents, displaced families, and strengthen the economic resilience of host communities in Benin.

Complementing the efforts of other humanitarian organizations, UNICEF designed an innovative, context-adapted cash transfer intervention tailored to various emergency scenarios, showcasing its unique value-added approach.

To ensure the programme's effectiveness, UNICEF conducted a rapid assessment mission that: evaluated the needs and preferences of the affected populations; collected critical data on market functionality; analyzed ongoing interventions to identify gaps; defined a complementary and impactful response strategy.

This comprehensive assessment laid the groundwork for an unconditional cash transfer initiative targeting populations affected by the Sahel security crisis. Although implementation has been deferred to 2025, this initiative represents a crucial step toward addressing immediate needs and bolstering resilience in vulnerable communities.

NON-FOOD ITEMS

In 20224, UNICEF successfully provided essential non-food items (NFIs) to 5,083 households, including refugees and internally displaced persons (4,798), internally displaced individuals (216), and local populations (69). This support reached vulnerable communities across Tanguiéta, Kérou, Toucountouna, Péhunco, Cobly, Natitingou (Atacora), and Karimama, demonstrating UNICEF's commitment to addressing critical needs in affected areas.

HUMAN INTEREST STORIES AND EXTERNAL MEDIA

- [Benin continues its efforts to provide access to drinking water in schools](#)
- [Supporting ambitions: the impact of the Youth for Peace project in the North](#)
- [Unicef's "Cash + Care" programme: More than 160,000 girls already impacted in the septentrion \(lanation.bj\)](#)
- [Natitingou: 200 girls from the four departments of northern Benin at summer camp - Lanatayaise](#)
- [After taking up his post last July: UNICEF Resident Representative meets partners in the North \(lematinal.bj\)](#)
- [In Banikoara, emergency medical kits save lives](#)

COTE D'IVOIRE

SITUATION OVERVIEW & HUMANITARIAN NEEDS

The deteriorating security situation in Burkina Faso, which led to an increase in the number of asylum-seekers in 2023, has continued in 2024. Since January 2024, 25,921 people (15,034 children) crossed the border from Burkina to Côte d'Ivoire, seeking asylum. As of November 2024, Côte d'Ivoire hosted an estimated 70,500 asylum-seekers from Burkina Faso, 65,962 of whom were registered. The majority of forcibly displaced persons in northern Côte d'Ivoire are women and children (82 per cent), while 41 per cent (around 28,995) are school-age children, and more than 19 per cent are under the age of five.

In these human mobility contexts, children are particularly vulnerable and exposed to risks that require professional case management

support (e.g. unaccompanied and separated children, child exposed to forced marriage, unregistered children/ without birth certificates) and many forms of violence and abuse and exploitation. Multi-sectoral assessments also revealed urgent needs in nutrition and water, hygiene and sanitation, as well as education.

Communities in Bounkani and Tchologo regions of Côte d'Ivoire struggle with access to basic social services and have lower economic development compared to the rest of the country. Scarcity of services exacerbates inequalities and tensions, while lack of economic opportunities increases vulnerabilities, especially for youth and women, to the Sahel crisis. The Country Office included essential supplies for women and girls in its procurement plan, which has helped to meet some of their needs.

In 2024, multiple incidents occurred along the northern borders of Côte d'Ivoire with Burkina Faso, including incursions by Non State Armed Groups (NSAGs) and armed forces into villages in the Téhini prefecture (Tchologo). Additional security incidents were reported in Mali's border areas, especially in Tengrela. The unrest in Mali has also triggered population displacement in the Folon region, exacerbating humanitarian needs.

Regarding the epidemiological situation, during 2024, 889 cases of dengue were notified and 887 confirmed cases of dengue fever were recorded, including 443 dengue type 1, 441 dengue type 3 and 3 non-typed.

On 24 July 2024, Côte d'Ivoire declared an epidemic of mpox. As of 16 December 2024, the country had recorded 484 suspected cases, including 107 confirmed cases in 34 health districts, of which 106 have been cured and one death has been reported. Children under the age of 15 account for 41.1 per cent of confirmed cases.

confirmed

cases. During 2024, Côte d'Ivoire faced heavy rains, often accompanied by

violent winds, causing flooding and landslides. In 2024, 19,266 people (9,470 children) have been affected in the country.

SUMMARY ANALYSIS OF PROGRAMME RESPONSE

HEALTH

COMMUNITY ENGAGEMENT

During 2024, UNICEF and its partner CIAUD provided support to 18 health centres of the Tchologo and Bounkani Regional Health Directorates to carry out outreach interventions to bring health services closer to the affected populations. With the support of UNICEF, 105 advanced strategies instances reached 13,991 people, including 2,740 boys, 4,353 girls, 2,877 men and 4,021 women. UNICEF and its partner CIAUD also provided five referral hospitals in the two regions with laboratory inputs to carry out biological examinations free of charge. A total of 1,058 people (host communities and asylum seekers) benefited from these free biological analyses.

From 17 to 23 June 2024, UNICEF provided technical and financial support to the Bounkani and Tchologo Health Department for the organization of a campaign to intensify vaccination against measles. This campaign reached 8,027 children aged 0-59 months from asylum-seekers and host communities. From January to November 2024, 31,483 children were vaccinated against measles during routine immunization, thanks to UNICEF support. As of November 2024, with UNICEF support, a total of 39,510 children were

vaccinated against measles in the two main regions hosting asylum-seekers.

As part of resilience interventions, UNICEF has supported the training of 50 health providers from 41 health facilities in the Bounkani and Tchologo regions in basic emergency obstetric and neonatal care, integrated management of childhood illnesses and management of post-partum hemorrhages. In addition, the Ouangolodougou referral hospital has been equipped with a [mother kangaroo care unit](#).

The supply chain was reinforced with sexually transmitted infection (STI) kits, contributing to HIV prevention among 33,159 adolescents and young people; and 85 health workers from Bounkani and Tchologo regions were trained in the prevention and management of HIV infection and survivors of sexual violence.

In response to mpox epidemic, UNICEF contributed to the development of the national mpox epidemic response plan, technically and financially supported the risk communication and community engagement (RCCE) activities and deployed four tents, equipped with infection prevention and control supplies, in two most affected health districts. These contributions enabled the country to keep the epidemic under control. UNICEF contribution to the response to epidemics in 2024, focused on epidemiological surveillance, and risk communication and community engagement.

NUTRITION

During 2024, UNICEF and its partners have continued to support the National Nutrition Programme (NNP) efforts to strengthen coordination at central and regional levels and maintain essential nutrition intervention services while enhancing diets and nutrition practices.

As for the prevention of malnutrition, 146,594 were supplemented with vitamin A in the health districts of the two regions (Tchologo and Bounkani) affected by the Sahel crisis, 14,275 children aged 6 to 23 months from the health districts of Bouna and Ouangolodougou have received multiple micronutrients powders (MNP) and 2,970 children aged 6 to 23 months from the district of Téhini benefited of Small-Quantity Lipid-Based Nutrient Supplements (SQ LNS) in addition to routine nutrition activities.

As for the management of acute malnutrition, a total of 4,111 severely malnourished children under-five received treatment. In order to enhance the quality of nutrition services, UNICEF has supported a round of in-site coaching sessions by the National Nutrition Programme in all health centres of the Tchologo and Bounkani regions. In addition, UNICEF and its partner CIAUD have also provided support to 18 health centres of the Tchologo and Bounkani regions, to carry out advanced strategies with a focus on at-risk and hard-to-reach communities. Around 73,105 children aged 6-59 months, were screened for acute malnutrition using the mid-upper arm circumference tool, in the two regions affected by Sahel crisis.

As for supply management, UNICEF has contributed to maintain the pipeline of therapeutic foods (RUTF and therapeutic milks F75/F100) and other nutrition supplies (Vitamin A etc) with a focus on northern and other most vulnerable areas of the country. Although there was no shortage of therapeutic foods in northern areas of the country, there are challenges in maintaining the pipeline, mainly financed on domestic funding, at national level. This issue will be further discussed with the Ministry of Health in 2025.

UNICEF has also continued to strengthen multisectoral nutrition community-based approaches (including SBC, protection, WASH, education, health), in collaboration with the National Nutrition Council and local NGO ARK. Four community-based multisectoral nutrition platforms (FRANC) have been established at the transit sites for

refugees/asylum seekers as well as in host communities in Nioronigué (Tchologo) and Timalah (Bounkani). Those community-based platforms play a critical role to further prevent malnutrition, promote optimal nutrition practices and monitor the nutrition situation in these areas. As a result, 2,021 children under five years and more than 700 pregnant and lactating women benefited from malnutrition screening services, nutrition counselling including cooking demonstration as well as early child development interventions and stimulation at community levels. Nutrition data and trends from northern areas, including from FRANC, are discussed during coordination meetings of nutrition partners under the lead of UNICEF, to guide decision-making and adjust the response.

CHILD PROTECTION

During 2024, UNICEF continued to strengthen social service workforce and community child protection mechanisms in the northern regions to prevent and protect children from violence, abuse and exploitation and to respond to their needs (including through MHPSS). With UNICEF support, the roster of social workers trained in Child Protection in Emergencies and in Mental Health and Psychosocial Support was operationalized and 21 social workers were deployed in the two priority regions (Bounkani and Tchologo) with the greatest needs. The deployment responded to the lack of qualified social workers in the two regions of Bounkani and Tchologo and provided direct support to case management, including psychosocial support for children both in host communities and among the asylum-seekers. Fifteen (15) child protection committees were set up by social workers and partner CIAUD in the Tchologo and Bounkani regions, two of them in the site hosting asylum-seekers, to assist in the identification and referral of cases but also in community mobilization on child protection. A further 232 members of child protection committees were strengthened alongside these activities.

As of 2024, in the northern regions, 56,423 people, including 17,105 children and 24,763 women had access to mental health activities and psychosocial support at community level, thanks to child protection committees supervised by social workers.

In these northern regions, 78,283 people (19,685 women; 20,118 men; 19,155 girls; 19,325 boys) were reached with information and tools on child protection (children's rights, GBV, protection against violence, abuse and exploitation, birth registration, child labour) with support from the fifteen child protection committees set up by social workers.

From January to December 2024, some 688 children requiring protection received individual case management (psychosocial care, followed by medical care, for child victims of sexual violence) through UNICEF and its partners (social workers).

Social workers and community level stakeholders as well as staff of other United Nations agencies and NGOs (10 women) were trained in principles of PSEA identification and referral mechanisms. They, in turn, conducted community sensitisation of PSEA prevention, detection and reporting. A PSEA evaluation of the site hosting asylum seekers was conducted in collaboration with UNHCR and as part of the joint UN PSEA action plan. The evaluation showed the risks and the low level of knowledge of the refugees on the prevention of sexual abuse and exploitation overall and of humanitarian workers in particular. Several recommendations were made to strengthen the protection of asylum seekers against sexual abuse and exploitation.

As part of resilience interventions, to promote and facilitate timely birth registration, all maternity hospitals and vaccination centres in the northern regions have been provided with birth registration registers. Around 1,126 health registers dedicated to civil registration in the northern regions were distributed for the benefit of registering

nearly 56,300 children born in public health centres in the north. In addition, in December 2024, all civil registration officers in the sub-prefectures and communes of Tchologo and Bounkani benefited from capacity building in the conservation of civil registration registers and archives. With the community awareness campaigns carried out monthly since 2023 to date, the two regions affected by Sahel crisis, are experiencing an improvement in their registration rate exceeding the average of 50 per cent with a considerable increase in Tchologo which recorded 60 per cent of under-1 registration in 2023 (data from 2024 not yet available).

EDUCATION



A school boy, browsing the "my school at home" platform

In 2024, UNICEF continued its support to the Ministry of Education to provide education to the children of asylum-seekers, through the creation of temporary learning spaces and distribution of learning materials in the regions of Tchologo (Ouangolodougou, Diawala) and Bounkani (Bouna, Doropo, Tehini).

To increase the capacity of learning spaces and accommodate more children, nine temporary learning spaces were built in the relocation sites, bringing the total number of temporary learning spaces to 24 compared to 15 in 2023. These learning spaces made it possible to register 545 children, who also received individual learning materials. From January to May 2024, 1,409 children seeking asylum attended the temporary learning spaces/classrooms set up with the support of UNICEF. In addition, 932 out-of-school children (463 girls) from the host community benefited from alternative education programmes. In 2024, a total of 2,341 children benefitted from access to the learning spaces and UNICEF was able to provide learning materials to 22,016 children (10,523 girls) - including 1,409 children affected by the Sahel crisis.

UNICEF worked closely with the Ministry of National Education to develop an offline version of the national e-learning programme "My School at Home". This version is intended for areas with poor internet access and will allow the continuity of education in case of school closures. The equipment was deployed and tested at a school in Ferkessedougou (Tchologo).

UNICEF supported also the Ministry of National Education to finalize the development of the "Resilient School" or "Safe School" manual, which provides guidelines on preparedness, response and recovery measures to address the different risks that schools could face. As part of the resilience activities, 132 teachers, including 29 women, have been trained in adapted teaching practices, and 218 community leaders have been trained in community mechanisms to encourage girls and boys to stay in school.

Concerning informal education, UNICEF provided technical assistance to the Ministry in charge of youth to update the civic and citizen module which was used to train 101 vulnerable female adolescents, to improve their employability and reduce their vulnerability.

WASH

During 2024, UNICEF supported the replacement of obsolete human-powered pumps in 19 villages in the Bounkani region, which allowed improved access to drinking water for around 7,600 people (1,953 men, 1,911 women, 1,860 girls and 1,876 boys).

To improve access to drinking water and thus the quality of care, four small water-supply systems powered with solar energy and two support tanks were built in six health centres in six localities hosting refugees/asylum seekers. In each locality, two taps were installed to enable around the community to improve their access to drinking water. These interventions enabled 4,177 people (1,499 men; 1,165 women; 745 girls and 768 boys ; including host families and refugees/asylum seekers) to access safe water, bringing the total number of people accessing to drinking water since the start of the year in these two regions to 11, 777 (3,897 men; 2,942 women; 2,451 girls and 2,487 boys).

As part of the resilience programme, 148 school principals and supervisors were trained in the 3-star WASH approach in schools ([Approche 3 Etoiles dans les Ecoles](#)) in two inspectorates in Ferkessedougou and Bouna, triggering the development of an action plan and the start-up of hygiene promotion activities. Also, 22 actors from the Tchologo regions were strengthened on issues related to environmental and social management in WASH interventions.

In 2024, 15 new positive boreholes have been drilled in 15 schools in the Bounkani region, on which 15 hand-pumps have been installed, with aim to improve access to drinking water for the children attending these 15 schools.

Regarding the hygiene component, in response to the urgent needs of asylum seekers and host communities, UNICEF and its partner CIAUD provided 500 hygiene kits to 3,057 people including 1,727 children in three villages of Téhini (Bounkani region). A total of 390 asylum-seeking households and 110 host community households benefits from this intervention. With UNICEF's support, 20 hygiene kits were provided to 20 health centres from Bounkani (10 centres) and Tchologo (10 centres) regions. Through the partnership with CIAUD, 26 hygiene and sanitation committees were set up in 26 localities of Bounkani and Tchologo, including transit sites. The 182 members (including 54 women) of these committees were strengthened and equipped to conduct interactive sessions to promote good hygiene practices within their community. The activities of these committees reached 972 people (host community and refugees/asylum seekers) including 694 women and 278 men. The awareness-raising themes focused on hand hygiene, wastewater management, solid waste management and toilet maintenance. To date, 5,559 people (including 2,189 women) were reached with hand-washing behaviour-change activities and 3,057 people (including 771 women) received hygiene kits, with UNICEF support.

SOCIAL AND BEHAVIOUR CHANGE (SBC)

Research conducted in 2023 on SBC and accountability to affected populations (AAP) in the refugee/asylum seekers crisis affected regions of Tchologo and Bounkani highlighted the following results:

- 95 per cent of the population surveyed indicated that they had not been involved in the planning and organisation of humanitarian aid.

- Only 38 per cent of the population claimed to have access to humanitarian services (host population such as asylum seekers).
- 46 per cent claimed not to have had received clear information on the humanitarian aid offered.
- At the level of the host population, 73 per cent do not know how to report cases of abuse and sexual exploitation.

Based on these findings, UNICEF started a partnership with a national NGO to implement SBC and AAP interventions in 70 localities of these two northern regions. These activities were implemented, as part resilience programme. With UNICEF's support 210 partners were trained on Human-Centred Design cocreation approach, especially to accompany the zero-dose vaccination strategy. In addition, UNICEF also approached 10 proximity radios in Tchologo which have expressed their engagement to utilize local media as tools for effective interaction between service providers and communities, for better community resilience and to improve adoption of peaceful coexistence and child rights related behaviours.

Using the Human Centered Design approach, community dialogues were held on the topics of vaccination and birth registration. A total of 96,000 people, including 46,800 women, reached by activities using the Human Center Design approach. Thus, following community dialogues, statistics for civil status in terms of birth registration increased from 1,817 in January 2023 to 2,451 in June 2024. During this same period, vaccination coverage for the Health program increased respectively from 93 per cent (PENTA3), 87 per cent (RR2), 26 per cent (HPV) to 97 per cent, 96 per cent, 62 per cent in the Tchologo region.

Community Engagement



Young ambassadors for peace and social cohesion – village Laleraba (Tchologo Region)

To contribute to social cohesion between asylum seekers and host communities, UNICEF supported the organization of 10 intergenerational dialogues in 10 cross-borders villages. Through the support of UNICEF, U-Reporters from North-Eastern regions led nine youth community actions U-Action to contribute to promote social cohesion and peace. These included training of over 454 adolescents and youth including 64 per cent of young girls on community engagement, leadership for peace. In addition, a cross-border pool of 1,015 adolescents and young people from Burkina Faso and Côte d'Ivoire has been established to foster peacebuilding and social cohesion.

As part of the resilience programme, the Girl Power initiative (vulnerable adolescent and young girl empowerment initiative) was strengthened enabling the enrolment of 200 young girls from Bounkani and Tchologo regions. The training covers essential

aspects such as functional literacy, life skills, civic and citizenship education, and initiation to income generating activities, while offering health services and psychosocial support adapted to needs specific to young girls. During, 2024, some 47 young people from Tchologo and Bounkani were trained in mobile journalism, blog writing, and digital content production. Their influence has reached 19,273 young people, promoting peace, social cohesion, and access to social services. UNICEF supported the training of 200 young peer educators in the Bounkani, Tchologo, Bagoue and Poro regions. These young people, with the help of adult allies, will lead citizen and intergenerational dialogues to strengthen youth participation.

During the reporting period, 2,538 young people engaged in reflective dialogue through community platforms and 32,198 people engaged in reflective dialogue through social media and digital platforms.

SOCIAL INCLUSION

At the onset of the increased refugee influx in Bounkani and Tchologo regions, UNICEF triggered the inclusion of social protection in the response plan and the revival of the cash working group. A minimum expenditure basket was discussed to ensure harmonization of cash intervention parameters by different partners.

UNICEF is leading the work with other partners to finalize the non-food items basket component of the Minimum Expenditure Basket (MEB). As chair of the social protection working group, UNICEF supported the development of a new social protection strategy, ensuring components of shock response are included for a more adaptive social protection system. In addition, to ensure expansion of the government cash transfer programme which currently targets about 2 million Ivorians, UNICEF led discussions with the Social Safety Nets Programme Management Unit to advocate for an increase in the number of beneficiaries in host communities. As part of its support to the social protection strategy, UNICEF launched the development of an internal cash transfer strategy. A mission was conducted in the Bounkani and Tchologo regions, which enabled to develop options for cash programming in response to the refugee/asylum seekers crisis. The results of this analysis will inform UNICEF's response in the coming years.

To ensure stronger community resilience and improve social cohesion, four communes in Bounkani and Tchologo regions have been supported to implement or scale up a participatory budgeting initiative, focusing on youth and adolescents. More than 80 youth in these communes have been engaged in discussions with local authorities and will have increased capacity in advocacy for inclusion of community and children's priorities in local budgets.

In order to increase resilience of families in the face of the Sahel crisis, UNICEF has initiated a partnership with CARE international, under the leadership of the Ministry of Solidarity, to support the development of cooperatives in the form of women saving groups and the establishment of income-generating activities for young girls and pregnant women or mothers of children under-five. This initiative will also support the development of economic activities in the nutritious food production value chain, in synergy with the nutrition first food initiative. Partnership activities started in quarter 4, 2024.

HUMAN INTEREST STORIES AND EXTERNAL MEDIA

[Community engagement in Sambakaha and Yediandekaha | UNICEF](#) : « *Through co-creations, communities find local solutions to keep latrines clean and promote birth registration* ».

[Josephine, class facilitator in the North | UNICEF](#) : « *I have*

completely shifted my career focus, but this new job suits me perfectly because I adore children and find great fulfilment in being around them. While language barriers can make communication challenging, I'm amazed at how quickly they learn and how motivated they all are . »

[Haoua, a community health heroine | UNICEF](#) : «*The community embraced me! The youth president even gave me a chicken as a gift for my efforts. The women listen to me a lot; I give them information from the health center. Even during campaigns, the chief asks for my opinion before the community receives care or vaccines. And that's what I try to do so that our trust is always renewed, but above all so that health is a reality in our village. Changes in the community reinforce my commitment. It used to be that pregnant women didn't seek medical advice until they were 7 months pregnant, and mothers didn't get their children's routine vaccinations on time. But today it's different: parents now have the reflex to have prenatal consultations and vaccinations for their children's well-being* ».



Awa Bamba, a 37 year old animator, at the FRANC space in Tomba, in the north of Côte d'Ivoire.

GHANA

SITUATION OVERVIEW & HUMANITARIAN NEEDS

to Ghana from Burkina Faso. An estimated 2,000 more asylum seekers crossed the border from Burkina Faso to Ghana from March to June 2024 bringing the total estimated asylum seekers to 17,000 in the Upper East, Upper West and Bono East Regions of Ghana.

The Bono Region is the latest to receive asylum-seekers in Ghana. The region particularly received asylum-seekers in the period July-August 2024. The number of new arrivals from Burkina Faso is expected to increase in line with deteriorating security there. The Government of Ghana has lifted the registration ban for asylum seekers outside the settlements. As a result, the Ghana Refugee Board with support from UNHCR registered 3,707 asylum seekers in host communities in the affected regions. In addition, 1,602 asylum seekers who relocated to Tarikom and Zini settlements were also registered bringing to 8,116 the total number of asylum seekers. Due to the prevailing insecurity and increased forced displacement in Burkina Faso, women and children continue to be exposed to serious human rights violations. Women and girls are exposed to risks of gender-based violence. Additionally, most asylum-seeker children in the host communities are not attending school, including separated and unaccompanied children. The host communities also

have their peculiar challenges with child protection issues.

In 2024, there was an outbreak of cholera in Ghana. The outbreak started in the Greater Accra Region and eventually spread to four other regions. As at the end of December 2024, 4,618 were suspected cases reported, including 398 confirmed and 37 deaths across the Greater Accra, Central, Eastern, Western and Ashanti regions.

Ghana experienced a dry spell in parts of the country between June and August 2024. During the assessment of priority areas impacted, it was found that 37 per cent of the communities reported cases of malnourished children, which increases to 86 per cent in Upper East and 75 per cent in North East. Before the dry spell, most of these communities were feeding children 3-4 times daily. This number dropped to 38 per cent according to the inter-agency rapid needs assessment.

SUMMARY ANALYSIS OF PROGRAMME RESPONSE

HEALTH

The Ghana Health Service was supported with capacity building, supplies of essential equipment and commodities to enhance outreach services in the prioritized districts and communities. Overall immunization services reached 84,666 children under 1 with the third dose of the pentavalent vaccine while 82,496 children living across the 26 districts of Ghana's Upper East and Upper West regions were reached with life-saving immunization against polio. Measles vaccine was administered to 80,708 children. The Country Office also provided support to the Ghana Health Service to respond to an ongoing cholera outbreak in the country. Technical support was provided to enhance risk communication and community engagement activities as well as support for the training and development of emergency preparedness and response plans on cholera for 10 districts in the Greater Accra region of Ghana. Support was also provided through the supply of 700,000 cholera vaccines to respond to the ongoing cholera outbreak that has seen 52 out of 261 administrative regions recorded confirmed cases.

The capacity improvement of the Ghana Health Service to reach out to communities is an example of an activity that addresses humanitarian needs of displaced persons. The strengthening of outreach services also achieves a long-term development objective of improving access to healthcare and reduces risk of conflict between persons displaced by conflict and the host communities.

NUTRITION

From January to December 2024, A total 16,133 children aged 6-59 months were screened for wasting through child welfare services, outpatient departments and outreach services across 44 districts in four regions of the country. Out of this number, 4,056 children 6-59 months with Severe Acute Malnutrition (SAM) were admitted for treatment and 3,571 (80.1 per cent) were successfully treated (cured) achieving the sphere standard of cure rate of more than 75 per cent. Additionally, 13,515 children under five years of age benefited from two doses of Vitamin A supplementation. 23,802 pregnant women received preventive iron supplements and 22,508 caregivers of children 0-23 months received Infant and Young Child Feeding (IYCF) counselling. 17,859 adolescent girls aged 10-19 years also benefited from the weekly combined Iron and Folic Acid (IFA) supplements for anaemia prevention.

The capacities of 23 people from multi-sectors were built in Nutrition in Emergencies (NiE) at the national level. Participants gained a common understanding of the situation in Ghana regarding nutrition preparedness, response, recovery, and coordination within the

context of emergencies, equipping them with the requisite knowledge and skills to effectively prepare and respond to the situation in northern Ghana. Following the national level training, plans are underway to cascade the training at the sub-national level especially the regions at risk of Sahel crisis outflow.

CHILD PROTECTION

UNICEF trained more than 250 people from Social Welfare, Health, Education, Civic Education, Disaster Management, Police, CSOs and FBOs on the Child Protection Minimum Standards, case management for unaccompanied and separated children, gender-based violence (GBV), Psychological First Aid (PFA), Mental Health and Psychosocial Support (MHPSS) and the prevention of sexual exploitation and abuse (PSEA). UNICEF supported the Government to expand the Integrated Social Services and the Primero-based Social Welfare Information Management System to all districts in Upper East, bordering Burkina Faso. As a result, 1,635 people (1,021 children, including 555 girls) affected by the Sahel crisis were reached by individual case management. Also, 45,391 people (17,170 women, 10,879 men, 9,179 girls, 8,163 boys) benefited from community messaging on GBV and PSEA risks, reporting mechanisms and helplines. Overall, 6,464 people benefited from community-based MHPSS services.

UNICEF is supporting the Government in developing government PSEA SOPs and new community engagement toolkits on Child Protection in Emergency (including explosive ordnance risk education and children in armed conflict), MHPSS and PSEA. The standard operating procedures and toolkits will be finalized in 2025.

EDUCATION

UNICEF enhanced emergency coordination at national and sub-national levels to improve preparedness and response efforts. At the national level, UNICEF and the Ghana Education Service (GES) engaged 30 Education-in-Emergency (EiE) group members, representing different agencies to develop strategies for emergency programming. Key challenges, such as the absence of school-level plans and procurement delays, were addressed by finalizing a preparedness and response tool now integrated into Ghana's national EiE contingency plan. Locally sourced education supplies were also identified to mitigate procurement issues.

At the sub-national level, UNICEF and GES trained 20 education directors and focal persons from seven flood-affected districts in emergency planning. These districts developed contingency plans to address learning losses with stakeholder collaboration.

UNICEF provided recovery support in flood-affected areas, distributing 656 school-in-a-box kits, 32 tents, five prefabricated classrooms, and 323 recreational kits, benefiting over 32,200 (15,942 girls) learners. Additionally, a climate scoping study was commissioned to guide climate-resilient education interventions, including emergency responses.

WASH

As part of an initiative to enhance resilience along the country's frontiers with the Sahel region through the improvement of essential social services, UNICEF upgraded water, sanitation, and hygiene (WASH) infrastructure in eight healthcare facilities in the Upper East and Upper West Regions of Ghana. The facilities covered included the Boya CHPS Compound and the Gbantongo Health Centre in the Bawku West District and the Gentinga CHPS Compound and the Mognori Health Centre in the Bawku Central District in the Upper East Region. In the Upper West Region support was provided to the Kpagtinga CHPS Compound and the Jang Health Centre in the Nadowli District, as well as the Nabulo Health Centre and the Wellebele Polyclinic in the Sissala East District. These healthcare

facilities were also provided with critical WASH/ Infection Prevention and Control (IPC) and waste management supplies, in addition to the training of key focal persons at the district and regional levels.

UNICEF upgraded the water supply system in the Banu community of the Sissala East District (Upper West Region), providing access to safe water to about 2,150 persons including 400 children displaced by the Sahel crisis. The intervention, which targeted the persons of interest, who live in a separate settlement within the community, also included WASH improvements at the Banu CHPs Compound, the local basic school and the host community to enhance resilience.

As part of support to the cholera outbreak UNICEF also supported implementation of risk communication activities, focussing mainly in six districts in the Greater Accra, Central and Western Region. Risk communication planning was coordinated internally with the Social and Behaviour Change (SBC) team to ensure efficiency of outcomes in communities and is estimated to have reached about 650,000 people, including about 330,000 females (about 260,000 children). To provide strategic technical backstopping and also enhance frontline WASH response capacity, UNICEF provided financial support for supportive supervision and fieldcoaching for 174 Environmental Officers in the most affected districts in the three regions. Chlorine, household water purification tablets (for an estimated 12,000 people, including about 5,000 children) and personal protective equipment (PPEs) were procured for hotspot districts to support effective infection prevention and control actions – household disinfection of households and isolation centres and safe burials.

CROSS-SECTORAL (HCT, SBC, RCCE AND AAP)

Social And Behaviour Change (SBC)

UNICEF SBC supported government and partners in applying Human-Centred Design (HCD) approaches to co-design key messages promoting services and positive behaviours on Health, WASH, Child Protection and Education as part of the Sahel Spillover response. HCD puts programme participants at the centre of unpacking their challenges and barriers, identifying drivers and opportunities and exploring ideas for interventions. Over 600,000 people in northern regions were reached with behaviourally informed lifesaving messages in local languages through community centres, markets, and radio. UNICEF SBC also supported a civil society partner to engage fathers and adolescents on Adolescent Sexual and Reproductive Health (ASRH), nutrition, and child safeguarding. Approximately 3,000 adolescents participated in ASRH and Nutrition interventions through theatre, sports and games as a medium. Additionally, the "Good Dad Campaign" engaged fathers from diverse communities on adolescent health issues as part of gender transformative programming in emergencies. 500 journalists and CSO partners were trained on evidence-based reporting skills to counter misinformation during emergencies. This extensive network of journalists and partners is crucial in disseminating accurate information. They are actively involved in addressing emerging topics, rumours, and misinformation. Through factsheets and other resources, they are engaged regularly to ensure the accuracy of their reporting.

In response to mpox and cholera public health emergencies, the UNICEF SBC team initiated social listening mechanisms to track online conversations, misinformation and disinformation, in support of the government led Misinformation Management Task Force. Two dashboards were established, data was analysed weekly and reports were disseminated widely among colleagues and government and non-government stakeholders. In partnership with the Advocacy and Communications team, UNICEF SBC supported a U-Report survey on mpox to better understand perceptions and misconceptions, engaging 806 U-Reporters. Cholera surveys were disseminated via

U-Report and Viamo platform to understand perceptions of cholera and inform emergency response interventions, engaging 1262 respondents to date. Findings are currently being used to facilitate discussions and define actions in cholera affected regions. Moreover, more than 600 young people sought information on cholera via the Agooshe+ digital platform. Finally, as co-lead, UNICEF supported the Risk Communication and Community Engagement (RCCE) Coordination mechanism at national and sub-national level.

SOCIAL INCLUSION - SOCIAL PROTECTION

With funding from USAID, UNICEF partnered with the National Health Insurance Authority (NHIA) to facilitate free health access to 54,910 people (35,118 female and 19,792 male) who were victims of the Lower Volta floods which occurred in October 2023, because of the spillage of the Akosombo Dam. The victims were offered free registration, renewal, and replacement of their National Health Insurance (NHIS) cards. This is made up of 16,142 new registrations and 38,768 renewals and/or card re-issuing between December 2023 and February 2024 in North Tongu, Central Tongu, South Tongu, South Dayi, Kpando, Keta and Ketu South districts of the Volta Region.

HUMAN INTEREST STORIES AND EXTERNAL MEDIA

The Akosombo Dam spill in Ghana caused severe flooding in a community called Fiaxor, forcing the Fiaxor School to close for two weeks. Many teachers were displaced, leaving only two dedicated staff members. To keep the school running, community leaders and parents collected a levy to pay volunteer teachers. The school is now open for students again.

The flooding had a significant impact on education and child protection. A nine-year-old boy at Agbetikpo Safe Haven shared that after the flood, his parents could not provide for his school needs. “I skip school to work on a banana farm to earn money for my family,” the boy said. There were also two other young girls living with their grandmother at the safe haven, who had not returned to school for over six months after the flood. The grandmother had them help in her palm kernel business.

Thanks to UNICEF support, District Social Welfare and Community Development officers visited remote communities and safe havens to identify and manage child protection cases. During a community awareness session, these cases were registered into the Social Welfare Information Management System (SWIMS) to digitally manage cases. After counseling and some financial assistance, caregivers and parents agreed to send the boy and girls back to school. The children are now back in the classroom.

These stories highlight the negative impact of the flood on children, including school-drop out and child labour. Immediate responses through dialogue and intervention with parents, schools, and stakeholders have helped prevent many child protection issues. With UNICEF support, the Department of Social Welfare and Community Development in seven districts affected by the flood has compiled a list of children at risk of dropping out and is working to provide them and their families with psychosocial counselling, educational, and livelihood support.



Community consultation session with young people who stay in Aveyime Camp in North Tongu District

TOGO

SITUATION OVERVIEW & HUMANITARIAN NEEDS

Togo continues to face a context of growing crisis exacerbated by climate change, with ongoing crises such as epidemics, floods, food insecurity and recurrent population displacements due to the spillover of the Sahel crisis. The security incidents, initially reported in the north-eastern part of the Savanes region (in the prefectures of Kpendjal and Kpendjal Ouest), have now spread to the prefectures of Tône and Tandjoaré. In 2024, 16 improvised explosive device explosions were recorded, thus limiting access to these areas for emergency actors. A total of 31 attacks and incursions by non-state armed groups were also recorded, which resulted in 49 deaths and created population displacements and had a negative impact on the living conditions of the populations. It is estimated that more than 1 million people will be in need of humanitarian assistance in 2025.

Regarding epidemics, 1,616 suspected cases of dengue fever (including five deaths), 879 suspected cases of measles and 281 suspected cases of cholera (18 deaths, including 11 deaths in the community) were reported in the country in 2024. Togo also experienced a bad rainy season in 2024 that led to flooding in the Maritime and Grand Lomé regions with 42,000 people affected.

According to the most recent published data in October 2024, 49,607 people are displaced in Togo, representing a slight increase of 4.5 per cent on the March data (47,507 displaced people). Among them, 39,436 are refugees including 23,662 children (12,225 girls), and 10,171 are internally displaced. Displaced people are hosted in 71 localities in the Savanes region that have limited access to basic social services (drinking water, sanitation, primary health care, child protection, psychosocial support, education, non-food items), hindering a safe and dignified life. Children become particularly vulnerable to several risks, including separation from families, violence and exploitation.

SUMMARY ANALYSIS OF PROGRAMME RESPONSE

Throughout 2024, UNICEF's humanitarian action in Togo was aligned with national priorities, the United Nations Sustainable Development Cooperation Framework 2023-2026 and the Core Commitments for Children. UNICEF is committed to the

institutionalization of emergency preparedness and response through the Emergency Programme for Strengthening Community Resilience and Security. UNICEF's integrated community approach in the northern regions (Savanes and Kara) affected by the Sahel crisis spillover focuses on fostering social cohesion by linking emergency responses with development initiatives. This approach emphasizes the inclusivity and resilience of basic social services – such as water, hygiene and sanitation, nutrition, health, education and child protection – benefiting host communities, refugees, and displaced populations. Additionally, it strengthens national and subnational capacities to anticipate, prepare for and respond to emergencies through active participation in humanitarian coordination, alongside technical and financial support to state structures. A particular focus is placed on enhancing UNICEF's programmatic and operational presence in the Savanes region. UNICEF has made an effective contribution to humanitarian coordination through the key sectors for which it provides the lead (WASH, Education, Child Protection), the co-lead (Nutrition) and participates actively in all sectoral actions and humanitarian coordination working groups.

HEALTH AND HIV/AIDS

Regarding epidemics, 1,616 suspected cases of dengue (including five deaths) occurred nationwide, and 879 suspected cases of measles in three regions (Savanes, Kara and Plateaux). UNICEF supported the response through epidemiological surveillance and effective immunization management of measles cases. In 2024, 69,363 children under two (35,375 girls) were vaccinated against measles and rubella in the Savanes region. The country has experienced three epidemics during the reporting period.

A cholera epidemic affected four districts in the Grand Lomé and Maritime regions, with 281 confirmed cases, including 66 in the community, and 18 deaths, 11 of which occurred in the community. As part of the response to the cholera epidemic, 69,876 households were sensitized to hygiene measures, chlorine water treatment and community surveillance to limit the spread of the epidemic and ensure a rapid response.

In the Savanes region, 387 community health workers (CHWs) were trained in Integrated Management of Childhood Illness (IMCI), bringing to 1,362 the number of CHWs implementing IMCI in the region. As a result, 80,717 cases of malaria, 8,556 cases of pneumonia and 3,197 cases of diarrhoea were treated in children under 5 by these CHWs.

Regarding the prevention of mother-to-child transmission of HIV, 251 pregnant and breastfeeding women were put on antiretroviral therapy in the Savanes region.

As part of the risk of an mpox epidemic, the country has developed a response plan under the coordination of the public health emergency operations center. Epidemiological surveillance has been set up, and no cases were reported by the screening actions in 2024.

NUTRITION

As part of the screening and treatment of severe acute malnutrition (SAM), 48,040 caregivers were trained to screen their own child under 5 years old using the Family MUAC approach, while an active screening campaign coupled with family MUAC was organized in the Savanes region to increase the scope of screening and enable referral when necessary. As a result, 57,865 children under five (29,685 girls) were screened and 10,598 cases of SAM (5,437 girls) were admitted and treated. UNICEF provided RUTF for the treatment of SAM, and no shortages were reported in 2024. In addition, 200 community health workers in the Kara and Savanes regions received anthropometric equipment to enable them to treat SAM.

As part of the prevention of acute malnutrition, 13,365 children aged 6-23 months received small quantity lipid-based nutrient supplements (SQ/LNS) in the Savanes and Kara regions, at a rate of one sachet per day for six months. This intervention was coupled with acute malnutrition screening and SBC nutrition messages. In addition, 60 health workers (21 women) were trained in infant and young child feeding (IYCF) counseling, and 566 CHWs (130 women) in Essential Nutrition Actions. With the establishment of 39 IYCF community support groups in the at-risk Savanes and Maritime regions, these activities raised awareness of IYCF among 188,617 primary caregivers of children aged 0-23 months (171,642 women), enabling them to improve their nutritional practices.

Regarding micronutrient deficiencies, 472,429 children aged 6 to 59 months received a dose of vitamin A supplementation out of the expected 504,261 (94 per cent coverage) in the Savanes and Maritime regions.

CHILD PROTECTION

In 2024, 24,223 people (11,484 women, 32 people with disabilities, 20,611 children) received psychosocial support through activities carried out in community Child-Friendly Spaces in the Savanes region. In addition, 5,466 displaced children (2,787 girls) were able to play, learn and interact with children from host communities, helping to overcome the stress experienced as part of the spillover of the Sahel crisis.

In this context, 55,588 people (41,573 women, 34,479 children) have benefited from gender-based violence risk mitigation, prevention and/or response services through a multi-sectoral approach taking into account water, sanitation, hygiene, education, and peace and citizenship building. This was achieved through awareness-raising and educational talks on the risks and consequences of gender-based violence, as well as promoting the reporting, referral and care mechanisms.

In addition, 140,792 people (72,574 women and 25,592 children) had access to safe and accessible channels for reporting possible sexual exploitation and abuse committed by staff assisting affected populations. This was achieved through the "allo 1011" green line, radio broadcasts and community awareness-raising activities.

A total of 1,798 children (826 girls) victims of violence or exploitation as part of the spillover of the Sahel crisis, including 193 unaccompanied or separated children (89 girls), received individual care (psychological, health and nutritional services, legal assistance, family tracing and reunification).

EDUCATION

In 2024, 26,858 students (12,804 girls) from 70 primary schools received school kits, while 7,000 teaching materials were distributed across 125 primary, lower and secondary schools, benefiting 65,242 students (30,757 girls). These materials supported student retention, and eased the financial burden on families in the Savanes region.

During the reporting period, 2,769 out-of-school children (1,335 girls and 138 children with disabilities) gained access to education through the distribution of teaching materials, the construction of six pre-primary classrooms, and teacher training initiatives in the Kara and Savanes regions. A total of 350 teachers (200 women) were trained to improve teaching quality, including 67 participants (16 women) who received specialized training in mental health and psychosocial support to better identify and assist students affected by trauma linked to violence from non-state armed groups.

As part of the promotion of science, technology, engineering, and mathematics, 4,266 children (2,038 girls) benefited from the

construction of two science labs and a computer room, as well as the renovation of two science labs. This has reinforced the interest and skills of students in these fields, particularly girls.

WASH

To date, 11,754 people (5,995 women) benefited from critical WASH kit enabling them to drink potable water, and to improve their hygiene practices to avoid associated diseases. In the Savanes region, 1,320, girls and women received menstrual hygiene kits and training to improve their menstrual hygiene and health managements. A total of 13,074 people (of whom 7,315 are girls and women) benefitted of critical WASH supplies (WASH and menstrual hygiene kits) through these interventions. The implementation of the community-led total sanitation approach has enabled 5,132 people (2,617 women) to gain access to sanitation services and therefore live in three urban communities free of open defecation.

As part of the Infection Prevention and Control (IPC), hand-washing facilities were built in 15 health centres. These structures benefited from IPC kits, while 60 health staff were trained in IPC. As a result, 73,286 people (37,376 women) attending these facilities had access to improved hand-washing practices, sanitation and hygiene conditions, and improved quality of care.

SOCIAL AND BEHAVIOUR CHANGE (SBC)

During the reporting period, risk communication and community engagement activities were carried out to promote the resilience of populations affected by or at risk of the spillover of the Sahel crisis, epidemics and floods. In response to these crises, 543,910 people (299,370 women) received information on access to available response services through door-to-door sensitization.

A total of 51,570 people (23,323 women, 10,091 children) took part in 994 community dialogue sessions on social cohesion, health, education, child protection, and water, hygiene and sanitation in the Kara, Central and Maritime regions. These dialogues have strengthened inclusive community participation and shock preparedness, while constituting a component of accountability to affected populations.

Although there is no systematic accountability mechanism yet in place, these dialogues have provided opportunities for feedback in the cantons benefiting from the non-food items assistance. This collected feedbacks were processed by local complaints management and feedback committees, before being forwarded to the National Civil Protection Agency (ANPC) for consideration in programming.

As part of the response to the measles epidemic in the Savanes region, 11,980 people (7,140 women, 3,610 children and 2,069 girls) benefited from awareness-raising activities led by clubs of champion mothers and fathers, giving them access to key information on services to tackle the epidemic.

SOCIAL POLICY

The Government notification suspending humanitarian cash transfer (HCT) activities until further notice remains. Despite the suspension, UNICEF maintains its efforts to support vulnerable populations, especially among internally displaced persons and vulnerable host communities. In this context, 232 people (142 women/girls) have benefitted from soft skills training aiming to empower them with valuable skills and create income opportunities. In addition to the soft skills training, the beneficiaries also received tools to implement financial generating activities, thereby contributing to their resilience. This approach helps reduce the risk of exposing these young individuals to negative coping strategies and meet their basic needs.

In the meanwhile, UNICEF has been positioning itself strategically to be able to contribute to the humanitarian response through the social protection system strengthening. More specifically UNICEF reinforced its partnership with the National Agency for Identification (ANID) as well as with the World Bank and more specifically agreed to contribute to the development and deployment of the Universal Social Registry of People and Households (RSPM) which remains a critical tool for HCT interventions.

NON-FOOD ITEMS

In 2024, 4,854 households (24,270 people, including 12,620 children) affected by flooding and forced displacement as a result of the Sahel crisis received assistance in non-food items (kitchen kits, sleeping and hygiene equipment) in collaboration with the National Civil Protection Agency (ANPC). This assistance was coupled with food distribution by the government and the WFP to ensure a synergic approach.

In 2024, UNICEF has strengthened the programmatic and operational functioning of the regional disaster risk reduction platform, as well as the operationalization of prefectural platforms in the Savanes region, to ensure effective coordination of actors for effective emergency preparedness and response. The definition of a community early warning mechanism in the context of the spillover of the Sahel crisis has been part of this process.

HUMAN INTEREST STORIES AND EXTERNAL MEDIA

HUMAN INTEREST STORIES



Awa, a 50-year-old Burkinabé refugee and mother of five

Non-food items distributed to flood victims.

Nearly 6,000 people affected by flooding in the Savanes region of Togo have received humanitarian assistance through the distribution of non-food item (NFI) kits.

By Adhelin Muzegekwa

Dapaong (Togo), 24 October 2024 – In the Savanes region of northern Togo, Onadja Awa, a 50-year-old Burkinabé refugee and mother of five, lives with her family in Tône Prefecture. Identified as a vulnerable household by the National Refugee Assistance Coordination (CNAR) in collaboration with United Nations High Commissioner for Refugees (UNHCR) and the National Civil Protection Agency (ANPC), Awa struggles to make ends meet while renting a small house. She earns a living doing household chores for

others.

"I lost all my household belongings after heavy rains," Awa shared. "When I returned home, the house had been flooded. Everything was gone-my food supplies, clothes, bedding, and kitchen essentials. I lost it all," she recounted.

The humanitarian situation in Togo remains challenging, exacerbated by the spillover of the Sahel crisis into the northern regions, particularly in Savanes. This has strained the socio-economic stability of local populations and worsened environmental vulnerabilities. According to available data, Togo hosts 47,597 displaced persons (including 25,693 children), comprising 37,917 refugees and asylum seekers and 9,680 internally displaced persons.

Compounding this crisis are the impacts of climate change and natural disasters, such as floods, which have further destabilized already fragile communities.

The Government of Togo, with support from UNICEF and other humanitarian organizations, has implemented a coordinated response addressing immediate needs while fostering long-term resilience. This approach aligns with the "triple nexus" strategy, linking peacebuilding, humanitarian aid, and development efforts.

As part of its 2024 Annual Work Plan, UNICEF collaborated with the Ministry of Security and Civil Protection to enhance operational and technical capacities. This included providing 3,000 NFI kits to support individuals affected by disasters and addressing the needs of women and children facing repeated crises. The initiative aligns with UNICEF's annual Humanitarian Action for Children appeal.

These efforts targeted vulnerable households affected by natural disasters, in the Savanes region.

"Today, I'm so grateful to be among those receiving assistance from the government and UNICEF through the National Civil Protection Agency (ANPC)," Awa expressed.

"This kit will help me replace household items lost during the floods. Now I can cook in my own pot instead of borrowing from neighbours. While it's impossible to recover everything, this kit will allow me to manage my daily household activities and protect my family from illnesses," she added.

This initiative was made possible through funding from the Government of Japan.

External Media

Telegram :

- <https://t.me/uniceftogo/787>
- <https://t.me/uniceftogo/852>
- <https://t.me/uniceftogo/1072>
- <https://t.me/uniceftogo/993>
- <https://t.me/uniceftogo/986>

X (ex Twitter):

- https://x.com/Unicef_Togo/status/1831575626840449051
- https://x.com/Unicef_Togo/status/1833931154996822249
- https://x.com/Unicef_Togo/status/1828695772780532123
- https://x.com/Unicef_Togo/status/1816870300975513659
- https://x.com/Unicef_Togo/status/1815373241290019091
- https://x.com/Unicef_Togo/status/1801536025765830767
- https://x.com/Unicef_Togo/status/1801315537978593497
- https://x.com/Unicef_Togo/status/1800484523400184212
- https://x.com/Unicef_Togo/status/1797670992946594300
- https://x.com/Unicef_Togo/status/1757790663670714751

Instagram :

- https://www.instagram.com/p/C_hoThIPkMZ/?utm_source=ig_web_button_share_sheet&igsh=MzRIODBiNWFIZA
- https://www.instagram.com/p/DECb4E9OXcB/?utm_source=ig_web_copy_link&igsh=MzRIODBiNWFIZA==
- https://www.instagram.com/p/C_yV3yjOj5Y/?utm_source=ig_web_copy_link&igsh=MzRIODBiNWFIZA==

Facebook :

- <https://www.facebook.com/share/1Aw1KnaXtz/>
- <https://www.facebook.com/share/p/19rxHU8TFK/>
- <https://www.facebook.com/share/v/13zeWTurHa/>
- <https://www.facebook.com/share/p/1UfjU9wX9S/>
- <https://www.facebook.com/share/p/1GQX6Z2BHe/>
- <https://www.facebook.com/share/p/1CzVJL5bex/>
- <https://www.facebook.com/share/p/15tSdnSuHy/>

LinkedIn :

- <https://www.linkedin.com/feed/update/urn:li:activity:7237346982850>
- <https://www.linkedin.com/feed/update/urn:li:activity:7263266235625>
- <https://www.linkedin.com/feed/update/urn:li:activity:7242448479497>
- <https://www.linkedin.com/feed/update/urn:li:activity:7239698796480>
- <https://www.linkedin.com/feed/update/urn:li:activity:7234459247336>

HAC APPEALS AND SITREPS

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

NEXT SITREP: 30 JUNE 2025

ANNEX A - PROGRAMME RESULTS

Consolidated Programme Results

Sector			UNICEF and IPs response		
Indicator	Disaggregation	Total needs	2024 targets	Total results	Progress*
Health and HIV/AIDS					
Children and women accessing primary healthcare in UNICEF-supported facilities	Total	-	47,900	85,410	▲ 178%
Children 0-12 months who received Penta 3 vaccine	Total	-	17,899	84,666	▲ 473%
Children vaccinated against polio	Total	-	28,845	82,496	▲ 286%
Individuals receiving treatment for cholera/acute watery diarrhoea in UNICEF-supported facilities	Total	-	3,000	11,546	▲ 385%
Live births that were delivered in health facilities in UNICEF-supported areas	Total	-	63,778	66,708	▲ 105%
Children vaccinated against measles, supplemental dose	Total	-	201,706	69,363	▲ 34%
Pregnant and lactating women living with HIV receiving antiretroviral therapy	Total	-	375	251	▲ 67%
Nutrition					
Children 6-59 months with severe wasting admitted for treatment	Total	-	29,712	38,905	▲ 131%
Primary caregivers of children 0-23 months receiving infant and young child feeding counselling	Total	-	211,254	269,137	▲ 127%
Children 6-59 months screened for wasting	Total	-	97,919	147,103	▲ 150%
Children 6-59 months receiving Vitamin A supplementation	Total	-	90,000	160,109	▲ 178%
Children 6-59 months receiving micronutrient powder	Total	-	20,000	23,802	▲ 119%
Child protection, GBVIE and PSEA					
Children, adolescents and caregivers accessing community-based mental health and psychosocial support	Total	-	215,499	131,666	▲ 61%
Women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions	Total	-	482,865	647,593	▲ 134%
People with safe and accessible channels to report sexual exploitation and abuse by personnel who provide assistance to affected populations	Total	-	806,313	643,838	▲ 80%
Children who have received individual case management	Total	-	10,500	6,723	▲ 64%
Education					
Children accessing formal or non-formal education, including early learning	Total	-	207,139	78,154	▲ 38%
Children receiving individual learning materials	Total	-	361,435	108,870	▲ 30%
Children and adolescents accessing skills development programmes	Total	-	7,800	8,062	▲ 103%

Sector			UNICEF and IPs response		
Indicator	Disaggregation	Total needs	2024 targets	Total results	Progress*
Teachers and facilitators trained in basic pedagogy and/or mental health and psychosocial support	Total	-	1,102	1,132	▲ 103%
Schools implementing safe school protocols (infection prevention and control)	Total	-	30	-	0%
Water, sanitation and hygiene					
People accessing a sufficient quantity and quality of water for drinking and domestic needs	Total	-	154,676	353,272	▲ 228%
Children using safe and appropriate WASH facilities and hygiene services in learning facilities and safe spaces	Total	-	41,000	29,175	▲ 71%
People accessing appropriate sanitation services	Total	-	97,176	99,663	▲ 103%
People reached with critical WASH supplies	Total	-	609,676	157,542	▲ 26%
People reached with hand-washing behaviour-change programmes	Total	-	205,000	119,037	▲ 58%
Women and girls accessing menstrual hygiene management services	Total	-	9,500	250	▲ 3%
Social protection					
Households benefitting from new or additional social assistance (cash/in kind) measures from governments with UNICEF-technical assistance support	Total	-	101,000	212,273	▲ 210%
Cross-sectoral (HCT, C4D, RCCE and AAP)					
Affected people (children, caregivers, community members) reached with timely and life-saving information on how and where to access available services	Total	-	4.8 million	2 million	▲ 42%
People engaged in reflective dialogue through community platforms	Total	-	2.3 million	357,508	▲ 16%
People sharing their concerns and asking questions through established feedback mechanisms	Total	-	420,000	3,946	▲ 1%
People engaged in reflective dialogue through social media and digital platforms	Total	-	32,053	32,855	▲ 103%
Households reached with UNICEF-funded humanitarian cash transfers across sectors	Total	-	6,000	-	0%
Rapid response					
Displaced, refugee and disaster-affected households receiving non-food items assistance	Total	-	3,540	4,854	▲ 137%

Sector			UNICEF and IPs response		
Indicator	Disaggregation	Total needs	2024 targets	Total results	Progress*
Health and HIV/AIDS					
Children and women accessing primary healthcare in UNICEF-supported facilities	Total	-	11,400	18,131	▲ 159%
Children vaccinated against measles, supplemental dose	Total	-	8,778	120,074	▲ 1368%
Nutrition					
Children 6-59 months with severe wasting admitted for treatment	Total	-	14,793	20,140	▲ 136%
Primary caregivers of children 0-23 months receiving infant and young child feeding counselling	Total	-	30,909	58,012	▲ 188%
Child protection, GBVIE and PSEA					
Children, adolescents and caregivers accessing community-based mental health and psychosocial support	Total	-	25,000	37,851	▲ 151%
Women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions	Total	-	300,000	436,020	▲ 145%
People with safe and accessible channels to report sexual exploitation and abuse by personnel who provide assistance to affected populations	Total	-	550,000	378,593	▲ 69%
Children who have received individual case management	Total	-	3,000	347	▲ 12%
Education					
Children accessing formal or non-formal education, including early learning	Total	-	20,250	7,050	▲ 35%
Children receiving individual learning materials	Total	-	20,250	26,999	▲ 133%
Children and adolescents accessing skills development programmes	Total	-	300	1,100	▲ 367%
Water, sanitation and hygiene					
People accessing a sufficient quantity and quality of water for drinking and domestic needs	Total	-	50,000	208,987	▲ 418%
Children using safe and appropriate WASH facilities and hygiene services in learning facilities and safe spaces	Total	-	30,000	26,819	▲ 89%
People accessing appropriate sanitation services	Total	-	10,000	-	0%
People reached with critical WASH supplies	Total	-	500,000	25,975	▲ 5%
People reached with hand-washing behaviour-change programmes	Total	-	100,000	-	0%
Women and girls accessing menstrual hygiene management services	Total	-	4,000	-	0%
Cross-sectoral (HCT, C4D, RCCE and AAP)					

Sector			UNICEF and IPs response		
Indicator	Disaggregation	Total needs	2024 targets	Total results	Progress*
Households reached with UNICEF-funded humanitarian cash transfers across sectors	Total	-	20,000	-	0%
Affected people (children, caregivers, community members) reached with timely and life-saving information on how and where to access available services	Total	-	1.6 million	845,094	▲ 53%
People engaged in reflective dialogue through community platforms	Total	-	160,000	299,251	▲ 187%
People sharing their concerns and asking questions through established feedback mechanisms	Total	-	320,000	-	0%

Cote d'Ivoire

Sector			UNICEF and IPs response		
Indicator	Disaggregation	Total needs	2024 targets	Total results	Progress*
Health and HIV/AIDS					
Children vaccinated against measles, supplemental dose	Total	-	70,000	39,510	▲ 56%
Nutrition					
Children 6-59 months screened for wasting	Total	-	80,000	73,105	▲ 91%
Children 6-59 months with severe wasting admitted for treatment	Total	-	3,000	4,111	▲ 137%
Children 6-59 months receiving micronutrient powder	Total	-	6,000	14,275	▲ 238%
Children 6-59 months receiving Vitamin A supplementation	Total	-	80,000	146,594	▲ 183%
Child protection, GBVIE and PSEA					
Children, adolescents and caregivers accessing community-based mental health and psychosocial support	Total	-	35,910	56,423	▲ 157%
Women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions	Total	-	29,730	28,433	▲ 96%
People with safe and accessible channels to report sexual exploitation and abuse by personnel who provide assistance to affected populations	Total	-	25,000	78,283	▲ 313%
Children who have received individual case management	Total	-	1,000	874	▲ 87%
Education					
Children accessing formal or non-formal education, including early learning	Total	-	6,000	2,341	▲ 39%
Children receiving individual learning materials	Total	-	25,000	22,016	▲ 88%
Children and adolescents accessing skills development programmes	Total	-	7,500	6,962	▲ 93%
Teachers and facilitators trained in basic pedagogy and/or mental health and psychosocial support	Total	-	190	132	▲ 69%

Sector			UNICEF and IPs response		
Indicator	Disaggregation	Total needs	2024 targets	Total results	Progress*
Schools implementing safe school protocols (infection prevention and control)	Total	-	30	-	0%
Water, sanitation and hygiene					
People accessing a sufficient quantity and quality of water for drinking and domestic needs	Total	-	25,000	11,777	▲ 47%
People accessing appropriate sanitation services	Total	-	20,000	-	0%
Children using safe and appropriate WASH facilities and hygiene services in learning facilities and safe spaces	Total	-	7,000	-	0%
People reached with hand-washing behaviour-change programmes	Total	-	30,000	5,559	▲ 19%
People reached with critical WASH supplies	Total	-	30,000	3,057	▲ 10%
Women and girls accessing menstrual hygiene management services	Total	-	500	-	0%
Social protection					
Households benefitting from new or additional social assistance (cash/in kind) measures from governments with UNICEF-technical assistance support	Total	-	1,000	-	0%
Cross-sectoral (HCT, C4D, RCCE and AAP)					
Households reached with UNICEF-funded humanitarian cash transfers across sectors	Total	-	11,000	-	0%
Affected people (children, caregivers, community members) reached with timely and life-saving information on how and where to access available services	Total	-	88,950	29,781	▲ 33%
People engaged in reflective dialogue through community platforms	Total	-	2,500	2,538	▲ 102%
People engaged in reflective dialogue through social media and digital platforms	Total	-	31,580	32,198	▲ 102%

Ghana

Sector			UNICEF and IPs response		
Indicator	Disaggregation	Total needs	2024 targets	Total results	Progress*
Health and HIV/AIDS					
Children 0-12 months who received Penta 3 vaccine	Total	-	17,899	84,666	▲ 473%
Children vaccinated against polio	Total	-	28,845	82,496	▲ 286%
Children and women accessing primary healthcare in UNICEF-supported facilities	Total	-	36,500	67,279	▲ 184%
Children vaccinated against measles, supplemental dose	Total	-	23,627	80,708	▲ 342%

Sector			UNICEF and IPs response		
Indicator	Disaggregation	Total needs	2024 targets	Total results	Progress*
Individuals receiving treatment for cholera/acute watery diarrhoea in UNICEF-supported facilities	Total	-	3,000	11,546	▲ 385%
Live births that were delivered in health facilities in UNICEF-supported areas	Total	-	63,778	66,708	▲ 105%
Nutrition					
Children 6-59 months screened for wasting	Total	-	10,000	16,133	▲ 161%
Children 6-59 months with severe wasting admitted for treatment	Total	-	4,000	4,056	▲ 101%
Pregnant women receiving preventative iron supplementation	Total	-	20,000	23,802	▲ 119%
Children 6-59 months receiving Vitamin A supplementation	Total	-	10,000	13,515	▲ 135%
Primary caregivers of children 0-23 months receiving infant and young child feeding counselling	Total	-	15,000	22,508	▲ 150%
Child protection, GBViE and PSEA					
Children, adolescents and caregivers accessing community-based mental health and psychosocial support	Total	-	131,250	13,169	▲ 10%
Women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions	Total	-	131,250	127,552	▲ 97%
People with safe and accessible channels to report sexual exploitation and abuse by personnel who provide assistance to affected populations	Total	-	131,250	46,170	▲ 35%
Children who have received individual case management	Total	-	5,000	3,704	▲ 74%
Education					
Children accessing formal or non-formal education, including early learning	Total	-	173,454	65,994	▲ 38%
Children receiving individual learning materials	Total	-	173,454	32,997	▲ 19%
Teachers and facilitators trained in basic pedagogy and/or mental health and psychosocial support	Total	-	772	650	▲ 84%
Water, sanitation and hygiene					
People accessing a sufficient quantity and quality of water for drinking and domestic needs	Total	-	10,000	30,478	▲ 305%
People accessing appropriate sanitation services	Total	-	10,000	1,650	▲ 17%
Children using safe and appropriate WASH facilities and hygiene services in learning facilities and safe spaces	Total	-	4,000	2,356	▲ 59%
People reached with hand-washing behaviour-change programmes	Total	-	75,000	113,478	▲ 151%
People reached with critical WASH supplies	Total	-	10,000	2,550	▲ 26%
Women and girls accessing menstrual hygiene management services	Total	-	5,000	250	▲ 5%

Sector			UNICEF and IPs response		
Indicator	Disaggregation	Total needs	2024 targets	Total results	Progress*
Social protection					
Households benefitting from new or additional social assistance (cash/in kind) measures from governments with UNICEF-technical assistance support	Total	-	100,000	212,273	▲ 212%
Cross-sectoral (HCT, C4D, RCCE and AAP)					
Households reached with UNICEF-funded humanitarian cash transfers across sectors	Total	-	10,000	-	0%
Affected people (children, caregivers, community members) reached with timely and life-saving information on how and where to access available services	Total	-	500,000	600,000	▲ 120%
People engaged in reflective dialogue through community platforms	Total	-	2.1 million	4,149	0%
People engaged in reflective dialogue through social media and digital platforms	Total	-	473	657	▲ 139%
People sharing their concerns and asking questions through established feedback mechanisms	Total	-	100,000	3,946	▲ 4%

Togo

Sector			UNICEF and IPs response		
Indicator	Disaggregation	Total needs	2024 targets	Total results	Progress*
Health and HIV/AIDS					
Children vaccinated against measles	Total	-	201,706	69,363	▲ 34%
Pregnant and lactating women living with HIV receiving antiretroviral therapy	Total	-	375	251	▲ 67%
Nutrition					
Children 6-59 months with severe wasting admitted for treatment	Total	-	7,919	10,598	▲ 134%
Children 6-59 months screened for wasting	Total	-	7,919	57,865	▲ 731%
Primary caregivers of children 0-23 months receiving infant and young child feeding counselling	Total	-	165,345	188,617	▲ 114%
Child protection, GBVIE and PSEA					
Children, adolescents and caregivers accessing community-based mental health and psychosocial support	Total	-	23,339	24,223	▲ 104%
Women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions	Total	-	21,885	55,588	▲ 254%
People with safe and accessible channels to report sexual exploitation and abuse by personnel who provide assistance to affected populations	Total	-	100,063	140,792	▲ 141%
Children who have received individual case management	Total	-	1,500	1,798	▲ 120%
Education					

Sector			UNICEF and IPs response		
Indicator	Disaggregation	Total needs	2024 targets	Total results	Progress*
Children accessing formal or non-formal education, including early learning	Total	-	7,435	2,769	▲ 37%
Children receiving individual learning materials	Total	-	142,731	26,858	▲ 19%
Teachers and facilitators trained in basic pedagogy and/or mental health and psychosocial support	Total	-	140	350	▲ 250%
Water, sanitation and hygiene					
People accessing a sufficient quantity and quality of water for drinking and domestic needs	Total	-	69,676	102,030	▲ 146%
People accessing appropriate sanitation services	Total	-	57,176	98,013	▲ 171%
People reached with critical WASH supplies	Total	-	69,676	125,960	▲ 181%
Cross-sectoral (HCT, C4D, RCCE and AAP)					
Affected people (children, caregivers, community members) reached with timely and life-saving information on how and where to access available services	Total	-	2.6 million	543,910	▲ 21%
People engaged in reflective dialogue through community platforms	Total	-	14,700	51,570	▲ 351%
Households reached with UNICEF-funded humanitarian cash transfers (including for social protection and other sectors)	Total	-	6,000	-	0%
Rapid response					
Displaced, refugee and disaster-affected households receiving non-food items assistance	Total	-	3,540	4,854	▲ 137%

*Progress in the reporting period 1 January to 31 December 2024

ANNEX B — FUNDING STATUS

Consolidated funding by sector

		Funding available			Funding gap	
Sector	Requirements	Humanitarian resources received in 2024	Other resources used in 2024	Resources available from 2023 (carry over)	Funding gap (US\$)	Funding gap (%)
Health and HIV/AIDS	5,472,400	1,754,525	141,092	3,861,407	-	0%
Nutrition	7,774,312	1,326,820	332,067	145,085	5,970,340	77%
Child protection	7,067,292	355,550	187,013	62,021	6,462,708	91%
Rapid Response	979,988	107,549	-	-	872,439	89%
Social Protection	5,183,930	-	222,043	-	4,961,887	96%
Education	13,686,906	468,730	436,142	140,860	12,641,174	92%
WASH	12,800,634	1,542,044	907,403	334,888	10,016,299	78%
Cross-sectoral	10,260,152	630,958	2,007,792	3,863,160	3,758,242	37%
Preparedness	1,850,000	101,186	-	-	1,748,814	95%
Total	65,075,614	6,287,362	4,233,552	8,407,421	46,147,279	71%

Funding available - funding available in the current appeal year to respond in line with the current HAC appeal.
Humanitarian resources– humanitarian funding commitments received from donors in the current appeal year.
Other resources– non-humanitarian funding commitments received from donors and/or funding repurposed in the current appeal year
Resources available from 2023 (carry over)– funding received in the previous appeal year that is available to respond in line with the current HAC appeal

Consolidated funding by office

		Funding available			Funding gap	
Office	Requirements	Humanitarian resources received in 2024	Other resources used in 2024	Resources available from 2023 (carry over)	Funding gap (US\$)	Funding gap (%)
Benin	15,543,000	1,460,127	501,495	1,781,286	11,800,092	76%
Cote d'Ivoire	13,647,680	1,535,760	1,753,245	1,712,869	8,645,806	63%
Ghana	20,360,949	793,427	1,978,812	4,443,911	13,144,799	65%
Togo	15,523,985	2,498,048	-	469,355	12,556,582	81%
Total	65,075,614	6,287,362	4,233,552	8,407,421	46,147,279	71%

Funding available - funding available in the current appeal year to respond in line with the current HAC appeal.
Humanitarian resources– humanitarian funding commitments received from donors in the current appeal year.
Other resources– non-humanitarian funding commitments received from donors and/or funding repurposed in the current appeal year
Resources available from 2023 (carry over)– funding received in the previous appeal year that is available to respond in line with the current HAC appeal

Benin

		Funding available			Funding gap	
Sector	Requirements	Humanitarian resources received in 2024	Other resources used in 2024	Resources available from 2023 (carry over)	Funding gap (US\$)	Funding gap (%)
Health and HIV/AIDS	603,000	381,587	141,092	1,494,175	-	0%
Nutrition	2,700,000	827,273	24,534	145,085	1,703,108	63%
Child protection	1,640,000	-	-	-	1,640,000	100%
Education	2,200,000	-	46,607	-	2,153,393	98%
WASH	2,500,000	185,632	289,262	-	2,025,106	81%
Cross-sectoral	5,600,000	65,635	-	142,026	5,392,339	96%
Preparedness	300,000	-	-	-	300,000	100%
Total	15,543,000	1,460,127	501,495	1,781,286	11,800,092	76%

Funding available - funding available in the current appeal year to respond in line with the current HAC appeal.

Humanitarian resources– humanitarian funding commitments received from donors in the current appeal year.

Other resources– non-humanitarian funding commitments received from donors and/or funding repurposed in the current appeal year

Resources available from 2023 (carry over)– funding received in the previous appeal year that is available to respond in line with the current HAC appeal

Cote d'Ivoire

		Funding available			Funding gap	
Sector	Requirements	Humanitarian resources received in 2024	Other resources used in 2024	Resources available from 2023 (carry over)	Funding gap (US\$)	Funding gap (%)
Health and HIV/AIDS	1,000,000	883,865	-	1,642,790	-	0%
Nutrition	1,000,000	8,509	307,533	-	683,958	68%
Child protection	1,380,000	-	187,013	-	1,192,987	86%
Education	2,833,750	12,290	370,902	38,693	2,411,865	85%
WASH	2,975,000	308,390	508,086	-	2,158,524	73%
Social Protection	3,183,930	-	168,435	-	3,015,495	95%
Cross-sectoral	775,000	221,520	211,276	31,386	310,818	40%
Preparedness	500,000	101,186	-	-	398,814	80%
Total	13,647,680	1,535,760	1,753,245	1,712,869	8,645,806	63%

Funding available - funding available in the current appeal year to respond in line with the current HAC appeal.

Humanitarian resources– humanitarian funding commitments received from donors in the current appeal year.

Other resources– non-humanitarian funding commitments received from donors and/or funding repurposed in the current appeal year

Resources available from 2023 (carry over)– funding received in the previous appeal year that is available to respond in line with the current HAC appeal

Ghana

		Funding available			Funding gap	
Sector	Requirements	Humanitarian resources received in 2024	Other resources used in 2024	Resources available from 2023 (carry over)	Funding gap (US\$)	Funding gap (%)
Health and HIV/AIDS	2,460,000	183,833	-	629,799	1,646,368	67%
Nutrition	1,680,000	-	-	-	1,680,000	100%
Child protection	2,382,188	158,566	-	51,671	2,171,951	91%
Education	6,663,960	-	18,633	-	6,645,327	100%
WASH	2,062,500	390,464	110,055	296,588	1,265,393	61%
Social Protection	2,000,000	-	53,608	-	1,946,392	97%
Cross-sectoral	1,612,301	60,564	1,796,516	3,465,853	-	0%
Rapid Response	500,000	-	-	-	500,000	100%
Preparedness	1,000,000	-	-	-	1,000,000	100%
Total	20,360,949	793,427	1,978,812	4,443,911	13,144,799	65%

Funding available - funding available in the current appeal year to respond in line with the current HAC appeal.
Humanitarian resources– humanitarian funding commitments received from donors in the current appeal year.
Other resources– non-humanitarian funding commitments received from donors and/or funding repurposed in the current appeal year
Resources available from 2023 (carry over)– funding received in the previous appeal year that is available to respond in line with the current HAC appeal

Including 131,830USD\$ of Humanitarian Resources available from 2023 (Carry-over) and 3,334,024 of Other Resources available from 2023 (Carry-over)

Togo

		Funding available			Funding gap	
Sector	Requirements	Humanitarian resources received in 2024	Other resources used in 2024	Resources available from 2023 (carry over)	Funding gap (US\$)	Funding gap (%)
Health and HIV/AIDS	1,409,400	305,240	-	94,643	1,009,517	72%
Nutrition	2,394,312	491,038	-	-	1,903,274	79%
Child protection	1,665,104	196,984	-	10,350	1,457,770	88%
Education	1,989,196	456,440	-	102,167	1,430,589	72%
WASH	5,263,134	657,558	-	38,300	4,567,276	87%
Cross-sectoral	2,272,851	283,239	-	223,895	1,765,717	78%
Rapid Response	479,988	107,549	-	-	372,439	78%
Preparedness	50,000	-	-	-	50,000	100%

Total	15,523,985	2,498,048	0	469,355	12,556,582	81%
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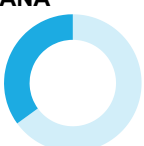
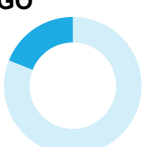
Funding available - funding available in the current appeal year to respond in line with the current HAC appeal.

Humanitarian resources– humanitarian funding commitments received from donors in the current appeal year.

Other resources– non-humanitarian funding commitments received from donors and/or funding repurposed in the current appeal year

Resources available from 2023 (carry over)– funding received in the previous appeal year that is available to respond in line with the current HAC appeal

ANNEX C — FUNDING GAP BY OFFICE AND SECTOR

% GAP (APPEAL SECTOR)					
% GAP (TOTAL)	HEALTH AND HIV/AIDS	NUTRITION	CHILD PROTECTION	EDUCATION	WASH
BENIN  76% gap \$11.8M	 -234% gap \$603K	 63% gap \$2.7M	 100% gap \$1.6M	 98% gap \$2.2M	 81% gap \$2.5M
COTE D'IVOIRE  63% gap \$8.6M	 -153% gap \$1M	 68% gap \$1M	 86% gap \$1.4M	 85% gap \$2.8M	 73% gap \$3M
GHANA  65% gap \$13.1M	 67% gap \$2.5M	 100% gap \$1.7M	 91% gap \$2.4M	 100% gap \$6.7M	 61% gap \$2.1M
TOGO  81% gap \$12.6M	 72% gap \$1.4M	 79% gap \$2.4M	 88% gap \$1.7M	 72% gap \$2M	 87% gap \$5.3M

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ENDNOTES

1. UNHCR: [https://data.unhcr.org/December 2024](https://data.unhcr.org/December%2024). Benin: 33,238; Cote d'Ivoire: 65,962; Ghana:17,000; Togo: 49,607
2. UNHCR - <https://data.unhcr.org/>. As of December 31st, 2024, here are the figures by country: Benin 33,238 displaced people (19,732 refugees or asylum seekers and 13,506 internally displaced, IOM data), Côte d'Ivoire 65,962 asylum-seekers, Ghana 17,353 refugees or asylum-seekers, Togo 49,607 displaced (25,693 children) including 39,436 refugees and 10,171 internally displaced persons.
3. Benin : Atacora, Alibori - Côte d'Ivoire : Folon, Bagoue, Poro, Tchologo, Bounkani, Gontougou - Ghana : Upper West, Upper East - Togo : Savanes
4. ACLED database (Armed Conflict Location & Event Data) as of 31st of December 2024
5. UNHCR, Multi country office, Dashboard de la Situation au Nord, Cote d'Ivoire, 31st of December 2024
6. UNHCR, Regional Bureau for West and Central Africa, December 2024, <https://data.unhcr.org/en/documents/details/113945>
7. ACLED database (Armed Conflict Location & Event Data) as of 31st of December 2024
8. UNHCR, Regional Bureau for West and Central Africa, December 2024, <https://data.unhcr.org/en/documents/details/113945>
9. According to IOM data
10. UNHCR, Regional Bureau for West and Central Africa, December 2024, <https://data.unhcr.org/en/documents/details/113945>
11. Ministry for National Cohesion, Solidarity and the Fight against Poverty
12. National Disaster Management Organisation, NADMO Ghana, After Action Review of Response to flooding following spillage of excess water from the Akosombo Dam, April 16th, 2024.
13. According to Regional platform for disaster risk reduction, Savanes Region. This platform is managed by the Agence Nationale de la Protection Civile (ANPC).
14. Based on the information provided by the Atacora and Alibori prefectures
15. Inter-agency rapid assessment (FAO-WFP-IWMI-IFAD-UNICEF), Assessment of Priority Areas Impacted by dry spell in Ghana, September 2024.
16. WHO, Multicountry outbreak of cholera as of 29 of december 2024. https://www.who.int/docs/default-source/coronaviruse/situation-reports/20241209_multi-country_outbreak-of-cholera_sitrep_21.pdf?sfvrsn=5dd738aa_3&download=true
17. <https://www.unicef.org/wca/media/9706/file/Gulf-of-Guinea-Joint-Response-Plan-Regional-Chapeau-Final.pdf> This is a humanitarian response plan that interacts with existing development interventions in the northern regions of Benin, Côte d'Ivoire, Ghana, and Togo.
18. Intersectoral Analysis Regional Group (GRANIT) Data
19. <https://data.unhcr.org/en/documents/details/113945>
20. IOM Data
21. Atacora, Alibori prefecture data
22. UNHCR Côte d'Ivoire, Situation Report on asylum-seekers in the North, 31st December 2024).
23. Tension entre la Côte d'Ivoire et le Burkina après l'incursion de plusieurs soldats burkinabés à la frontière
24. Vigile, Votre Bulletin Epidémiologique Hebdomadaire N°851/2024-Semaine 51, Health Ministry, December 2024).
25. Ministry for National Cohesion, Solidarity and the Fight against Poverty
26. <https://data.unhcr.org/en/documents/details/113945>
27. WHO, Multicountry outbreak of cholera as of 29 of december 2024. https://www.who.int/docs/default-source/coronaviruse/situation-reports/20241209_multi-country_outbreak-of-cholera_sitrep_21.pdf?sfvrsn=5dd738aa_3&download=true
28. Rapid assessment report (FAO, WFP, IFAD, IWMI and UNICEF. 2024. Ghana: Rapid assessment of the impact of dry spell and districts-level interventions priorities.