Madagascar

Prioritized Humanitarian Action for Children

Overview

PEOPLE IN NEED	4,720,000		
CHILDREN IN NEED	2,350,000		
PEOPLE TO BE REACHED	1,920,734	**PRIORITIZED PEOPLE TO BE REACHED**	1,534,734
CHILDREN TO BE REACHED	1,674,734	**PRIORITIZED CHILDREN TO BE REACHED**	1,338,135
FUNDING REQUIREMENTS (US$)	$46,370,000	**PRIORITIZED FUNDING REQUIREMENTS (US$)**	$41,370,000

Prioritized Humanitarian Strategy

Madagascar continues to face severe and overlapping humanitarian crises—including recurrent droughts, successive cyclones, disease outbreaks, and rising food insecurity. While the number of people in need remains unchanged, targets and funding levels have been adjusted to focus resources on the most urgent, life-saving interventions in line with the humanitarian reset approach. This reflects constrained funding, operational realities, and the need to maintain essential services in areas where children are most at risk.

The revised HAC concentrates on the highest-burden districts with overlapping multi-sector needs and critical access challenges, where health and nutrition services are under strain, WASH systems have been damaged, and education and protection services are disrupted.[1] To sustain coordination and oversight efforts, UNICEF will maintain its leadership role in the Nutrition and WASH clusters, co-lead the Education sector group, support coordination of Child Protection activities, continue to act as provider of last resort where critical gaps emerge. While the HAC prioritizes immediate, life-saving interventions, UNICEF will also draw on its extensive field presence and dual mandate to advance nexus programming. These complementary efforts will link emergency response to early recovery—helping communities rebuild services, strengthen systems, and address underlying vulnerabilities—ensuring that while the HAC delivers life-saving response, parallel initiatives lay the groundwork for longer-term resilience.

With the 2025–2026 cyclone season fast approaching, UNICEF will pre-position life-saving supplies, sustain emergency response capacity to rapidly reach children and families otherwise cut off during crises. Early warning systems, rapid deployment mechanisms, and the use of existing social protection platforms will ensure continuity of life-saving services during shocks. Strengthened risk monitoring and early-warning systems will guide anticipatory action and prioritization of response efforts to reach the highest-risk communities first.

While this prioritization safeguards the most urgent, life-saving services, it inevitably leaves some activities and areas with reduced support, creating a genuine risk of service gaps, erosion of previous gains, and deepening vulnerabilities among children and their families. The cost of this inaction could result in higher rates of malnutrition, disease outbreaks, and school dropouts in already fragile communities. UNICEF will rigorously track these effects and adjust programming wherever possible to minimize harm. UNICEF will continue to push for additional resources to ensure children's rights are protected and the most vulnerable communities receive uninterrupted, life-saving support before, during and after future emergencies.

[1]Ambovombe, Beloha, Tsihombe, Antanimora Sud et Bekily (Androy Region); Amboasary et Taolagnaro (Anosy Region); Betioky et Ampanihy (Atsimo Andrefana Region); Ifanadiana, Mananjary et Nosy Varika (Vatovavy Region); Ikongo et Manakara (Fitovinany Region).

Funding

Appeal sector	2025 HAC requirement (US$)	Prioritized 2025 HAC requirement (US$)	Funds available (US$)
Health (including public health emergencies)	5,130,000	4,688,161	196,695
Nutrition	16,510,000	14,593,714	9,641,187
Child protection, GBViE and PSEA	3,520,000	3,053,074	640,830
Education	3,180,000	3,061,200	140,385
Water, sanitation, and hygiene	9,950,000	9,812,514	2,967,058
Cross-sectoral (HCT, SBC, RCCE, and AAP)	8,080,000	6,161,337	682,009
Total	**46,370,000**	**41,370,000**	**14,268,164**

Prioritized Programme Targets

Sector	Indicators	Original 2025 Targets	Prioritized 2025 Targets
Health (including public health emergencies) 	children and women accessing primary health care	157,100	137,000
	pregnant women receiving 4 antenatal care appointments, alongside prevention of mother-to-child transmission of HIV and syphilis and malaria prevention.	7,900	5,900
Nutrition 	children screened for wasting	84,967	84,967
	primary caregivers receiving child feeding counselling	264,779	264,799
	children receiving vitamin A supplementation	1,234,734	1,134,734
	women receiving multiple micronutrients supplementation	114,000	16,861[2]
Child Protection, GBVIE, and PSEA 	people accessing SEA reporting channels	188,200	188,200
	children/caregivers accessing MHPSS	199,000	173,130
	women and children accessing GBV mitigation, prevention, response	188,200	188,200
Education 	children receiving individual learning materials	440,000	400,000
	children (224,400 girls) accessing formal or non-formal education, including early learning.	440,000	400,000
WASH 	people accessing safe water	492,000	480,000
	people accessing sanitation services	94,000	94,000
	people reached with WASH supplies	414,000	400,000
Social Protection 	households reached with UNICEF-funded humanitarian cash transfers (including for social protection and other sectors)	49,500	42,793
Cross-Sectoral 	people reached with information on available services	4,720,000	4,720,000

[2] The majority of the original target has shifted to the UNICEF Madagascar regular resilience programming. The remaining target concentrates on women in high-risk areas that are not covered by resilience programmes.