



Reporting period: 1 to 31 March 2020

Burkina Faso

Humanitarian Situation Report No. 2



Highlights

- Burkina Faso registered 34 security incidents in March, causing 139 civilian casualties, including four children. Notwithstanding the decrease in the number of incidents since the beginning of the year, the number of casualties is instead increasing, from 94 in January, to 116 in February and 139 in March (UNICEF Security).
- The number of internally displaced persons (IDP) reached 838,548 (CONASUR, 25 March 2020), out of which 61 percent children. According to the humanitarian OCHA's situation report of 27 February, 95 per cent of the IDPs live in host communities.
- On 9 March, the first case of COVID-19 was confirmed in the country, reaching 282 cases by the end of the month (Ministry of Health (MoH) COVID bulletin #34). As of 10 March, 2,521 schools in the country were closed due to insecurity, affecting 349,909 students (Ministry of national education, literacy and promotion of national languages (MENAPNL). On 14 March, the government decided the temporary closure of all schools in the country from 16 to 31 March due to COVID-19.
- As of 2 March, 1,649,398 people were lacking health and nutrition services as 135 health centers were closed and 140 operating at reduced capacity in six regions (MoH)

Situation in Numbers



1,300,000
children in need of humanitarian assistance



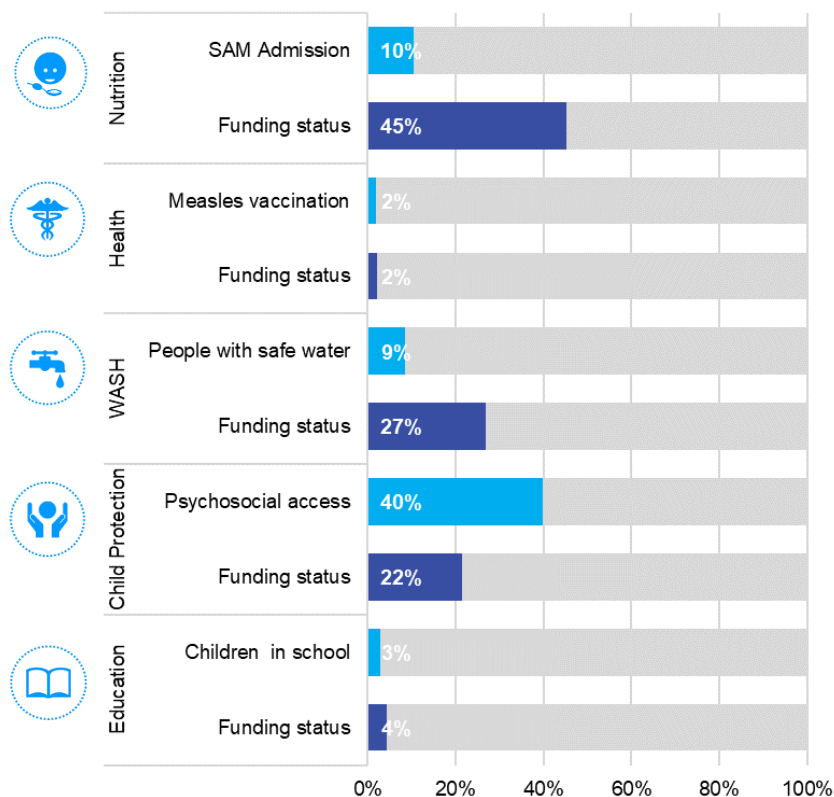
2,200,000
people in need (OCHA January 2020)



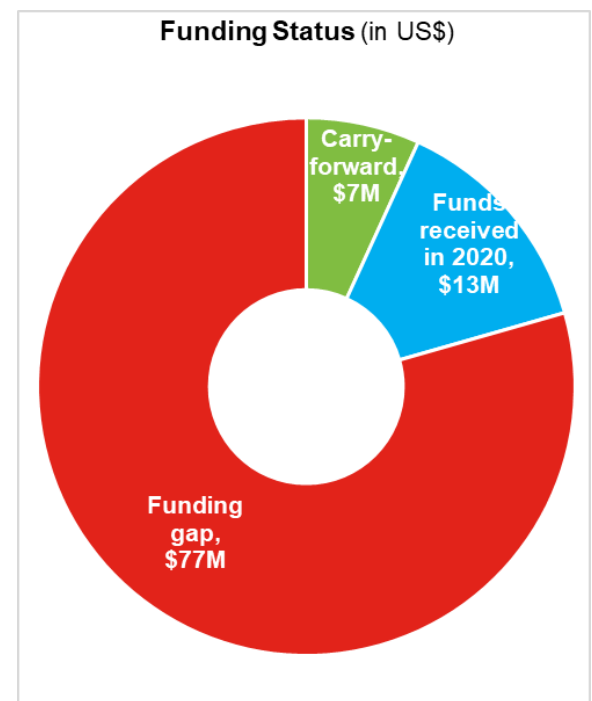
838,548
internally displaced persons (IDP) registered
510,791 children (61%) (CONASUR)

4,000,000+
children without access to education (all schools closed due to COVID-19) (Education Cluster)

UNICEF's Response and Funding Status



UNICEF Appeal 2020 US\$96.6 million



Funding Overview and Partnerships

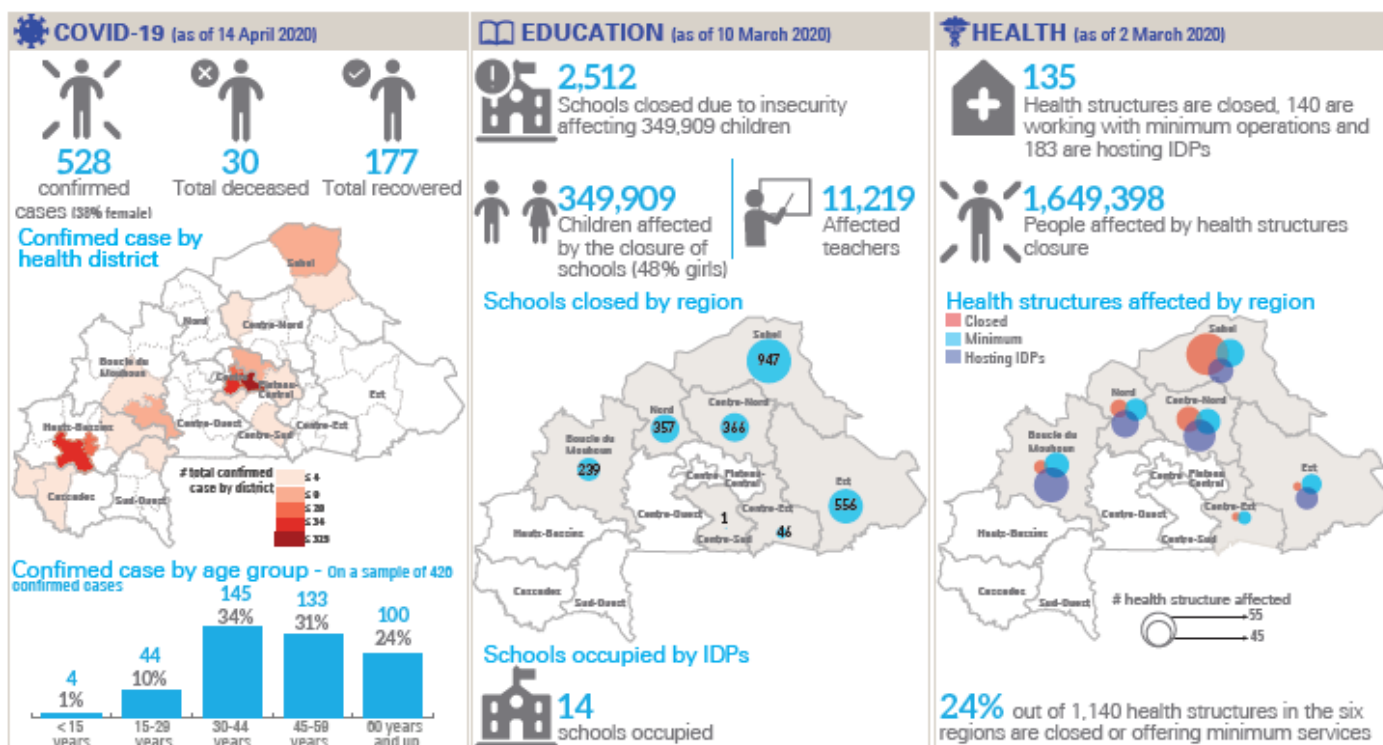
In line with the 2020 UNICEF's [Humanitarian Action for Children appeal](#) (HAC), the funding gap at the end of March 2020 was US\$76.8 million (79 per cent). During the reporting period, UNICEF-Burkina Faso received US\$5.7 million from Sweden, CERF Rapid Response and Japan and DFID to scale up the HAC 2020 response to IDPs and host communities. UNICEF Burkina Faso would like to recognize the generous contributions from these key partners, as well as those who have contributed US\$6.6 million in 2019 to the HAC 2020. UNICEF also recognizes the flexible and unearmarked funding received in 2020, including in March, through the Global Humanitarian Thematic Fund.

Situation Overview & Humanitarian Needs

According to the [Humanitarian Needs Overview 2020](#), 948,000 people are estimated to be in need of protection and 2.2 million people dependent on humanitarian assistance in Burkina Faso. The country is severely affected by a humanitarian crisis due to insecurity. Attacks by non-state armed groups (NSAG) dramatically increased in 2019 and maintained the same pace in the first three months of 2020, with more civilians being targeted or threatened. As a consequence, new waves of displacements took place in several regions. Registration of new IDPs is regularly conducted by the *Conseil national de secours d'urgence et de réhabilitation* (CONASUR), the government institution in charge of data collection and humanitarian response. As of [25 March](#), 838,548 IDPs had been registered in the country, including 510,791 children (61 per cent).

While all 13 regions of Burkina are hosting IDPs, the most affected one remain the Centre-Nord, hosting almost 50 percent of the IDPs, and the Sahel hosting 36.3 percent. As of [2 March](#), 135 out of 1,140 health centres (12 per cent) in six emergency-affected regions were closed. An estimated 1,649,398 people have no or limited access to nutrition and health services. The Sahel region continues to register the highest number of closed health centres, 79 out of 119 (66 per cent). As of [10 March](#), 2,512 schools were closed depriving 349,909 children of their rights to education and affecting 11,219 teachers.

On [9 March](#), the government of Burkina Faso officially declared the COVID-19 epidemic, in a context of ongoing humanitarian crisis with increasing population displacements due to insecurity. As of [31 March](#), the Ministry of Health confirmed 282 COVID-19 cases and 16 deaths in 8 out of the 13 regions of the country, including 2 out of the 5 regions affected by insecurity. The government has put in place several measures to prevent the spreading of the epidemic, including: the shutdown of the country's borders, the curfew from 7pm to 6am, school closures, the interdiction of all activities grouping more than 50 people, travel ban from and to Ouagadougou for all people, excluding goods. The containment measure required immediate action from humanitarian actors, including UNICEF, to mitigate the impact on the ongoing humanitarian response.



Source: UNICEF Burkina Faso

Summary Analysis of Programme Response

Nutrition

In March 2020, 4,620 children under the age of 5 suffering from severe acute malnutrition (SAM) were admitted into therapeutic feeding programmes. The completion rate for January and February 2020 had improved from the last SITREP of March 2020 (from 9,543 SAM children to 11,708) bringing the total number of children cared to 16,328 in the first quarter 2020 out of 147,131 annual target .

Performance rates were above the Sphere standard, with a recovery rate of 91.2 per cent, mortality rate of 1.7 per cent and the defaulter rate of 7.1 per cent. In terms of Infant and young child feeding (IYCF) promotion and support, 18,220 mother-to-mother support groups were set up and organized monthly sessions with 258,477 pregnant and lactating women (of which 128,116 in March 2020) since January 2020. They received counselling services on optimal IYCF practices in emergencies. UNICEF and its partner Save the Children continued to support breastfeeding corners to provide psychosocial support to lactating mothers affected by emergency in three health districts of Centre-Nord region.

COVID-19 ADAPTATION

Following the COVID-19 epidemic outbreak, the national nutrition cluster coordination held two meetings

- During the first meeting, health districts were prioritized according to the severity of nutritional situation to allow NGOs to orient their support depending on identified gaps on ongoing interventions.
- During the second meeting, nutrition partners discussed the adaptation of strategies to ensure continuity of nutrition programmes due to COVID-19. Four technical notes were developed: management of wasting in the context of COVID-19; promotion and support to IYCF in the context of COVID-19; guidance on nutrition of people affected by COVID-19 and a guideline on the adaptation of nutrition programmes, including protection and preventive measures against COVID-19. These technical notes are planned to be distributed in April 2020.

COVID-19 caused a delay in the implementation of some nutrition activities due to the need to integrate protection and preventive measures. Partner NGOs reported that they had to stop the already scheduled trainings and the supervision missions. The challenge for the cluster was to quickly define the minimum required protective measures to guarantee the continuation of service delivery to vulnerable populations.

Health

In March 2020, UNICEF supported the implementation of community-based interventions and improved primary health care, mainly through the implementation of the integrated community case management (iCCM) approach in emergencies, particularly in Centre-Nord and Sahel regions:

Sahel region

- 6107 children aged 0 to 23 months vaccinated against measles by community-based health workers (CBHW) in Djibo district
- 221 home deliveries, with 210 new-borns alive, with the support of traditional midwives trained in good practices of home care of mothers and new-borns. 13 mothers were referred to higher quality services for better care

Centre-Nord region

- 584 children under the age of 5 received treatment for three main diseases: 206 uncomplicated malaria, 181 for diarrhoea using oral rehydration salt out of which 34 children were referred to the health and social promotion centre (CSPS) of Barsalogo health district, and 197 for pneumonia
- 41 cases of SAM were referred to the CSPS of Barsalogo health district which provides referral health and prevention services for the community
- 97 educational talks reached 3,711 people on the six essential family practices¹ and other emerging themes.

It is very important to notice the deep commitment of the CBHWs in Djibo, one of the most affected districts in the country due to insecurity, to reduce the gap in the availability of health workers in the village. The monitoring by health workers and the district team remained a big challenge due to the insecurity

¹ The six essential family practices are: hand washing, exclusive breastfeeding and food supplements at 6 months, prenatal consultation, use of latrines, vaccination and prevention of mother-to-child transmission of HIV

According to the [epidemiological bulletin of week 13](#), 1,564 cases of measles were reported at national level, including 419 new cases in March. The most affected regions remain Boucle du Mouhoun (376 cases), Est (388 cases) and Hauts-Bassins (241 cases) regions.

COVID-19 ADAPTATION

The health cluster, under the lead of WHO, has set up a COVID-19 task force team to develop a roadmap whose purpose is:

- to analyze the humanitarian and COVID-19 situation nationwide, including in areas with precarious security
- to propose strategies for integrating COVID-19 into the provision of primary health care services in health facilities, mobile clinics and community-based activities.

To continue to support the health services in this new context, certain strategies have been adapted to integrate prevention measures:

- installation of hand washing devices in the health centres and CBHW points of care
- raising awareness on hygiene and distancing measures during care seeking, and awareness raising sessions.

UNICEF supports the provision of personal protective equipment and medico-technical materials for the detection and management of cases (thermometers, gloves, respirators) for health workers, and develop special COVID-19 CBHWs personal protective kits to ensure the continuity of community-based activities. Orders are placed and distribution is expected in May.

WASH

In March 2020, UNICEF and its implementing partners provided access to water for 5,500 people, and sanitation services for 8,700 people. In addition 17,330 people have improved their hygiene conditions through the distribution of hygiene kits and hygiene promotion campaigns. The progress rate towards annual targets is 9 percent for water, 2 percent for sanitation and 10 percent for hygiene.

The following activities were implemented during in March

- Centre-Nord region: water trucking at a rate of 60 cubic meters per day, construction of 40 latrines/showers, repair of five boreholes with hand pumps and the distribution of 1,000 hygiene kits².
- Nord: distribution of 332 hygiene kits
- Sahel region: rehabilitation of 11 boreholes with hand pumps.

Burkina Faso is facing the adverse effects of climate change. Thus, during the dry season, strong pressure is exerted by people on water resources, which become scarce. UNICEF, in collaboration with WASH partners, has developed a [Summer plan](#) (from January to May) to address this issue. As part of its implementation, UNICEF met with the National office of water and sanitation (ONEA) for the improvement of water distribution in Kaya, the capital city of the Centre-Nord region, which is particularly affected by water cuts.

In March 2020, WASH cluster members, including UNICEF, provided access to water services for 18,300 people, sanitation services for 20,236 people, and improved hygiene conditions through the distribution of hygiene kits and hygiene promotion campaigns for 37,759 people. The progress rate towards the annual targets is 7 percent for water, 4 percent for sanitation and 12 percent for hygiene. The progress is slow and will not be achieved unless the rhythm is significantly increased.

COVID-19 ADAPTATION

Although the sector funding is improving, the gap persists and represents one of the main challenges in the progress towards targets, together with insufficient capacity of stakeholders to face the gravity of the crises and fast increasing needs.

The COVID-19 epidemic also contributed to slowing down the response due to movement restrictions and adaptation of activities. Partners reoriented their efforts from regular humanitarian response towards COVID-19 fundraising and

² Hygiene kits are composed of 1 plastic bucket (20L), 2 plastic jerrycans (20L), 7 bars of soap (400gr), 1 plastic kettle (2L), 2 plastic cups (500mL), 1 potty

response. Cluster coordination efforts in March were totally dedicated to the COVID-19 preparedness, response and adaptation measure to maintain the humanitarian response.

Education

As of 30 March, UNICEF and partners Educo, Plan International and the MENAPLN conducted activities in Centre-Nord and Nord. It is within this framework that 144 teachers were trained in psychosocial support and peace education to the benefit of 9,864 students (including 4,551 girls) from displaced and most vulnerable host communities in emergency-affected areas. 8,997 children (4,588 girls) had access to formal and non-formal education, as well as educational alternatives for their protection³.

Since 2019, to strengthen its protective role of education, UNICEF, through its partner Plan International, has been setting up temporary community-based learning spaces for children affected by the crisis. In March, 3,064 children (1,509 girls and 1,555 boys) benefited from temporary supervision before being transferred to schools.

Additionally, 10,311 children (5,085 girls) received learning materials. Other activities included awareness-raising campaigns for 13,369 members of displaced communities and vulnerable host families on the importance of education, social cohesion and non-violence.

COVID-19 ADAPTATION

Education is one of the most COVID 19-affected sectors. Since [16 March](#), all the schools (more than 20,000) are closed down, affecting more than 4 million students due to the COVID-19 epidemic for several weeks to stop the spread of COVID 19/stop local transmission. In addition, 2,512 schools were closed because of the on-going humanitarian crisis that occurred before COVID 19.

Burkina Faso remains poorly internet-connected, with a large number of schools without access to electricity, leading to limited opportunities for distance learning (especially for children from poor households in rural areas and those affected by emergencies). Combined with high exposure to recruitment by NSAGs, child marriage and gender-based violence (GBV), the education cluster estimates that the impact of a long period of school closure could exacerbate these risks.

UNICEF has put in place some mitigation actions to adapt the humanitarian response to the consequences of COVID-19:

- radio education programmes are identified as the first option in conflict-affected areas, with the possibility of expansion to the rest of the country
- harmonized educational content was prepared by the MENAPNL to avoid a lost year for children
- the MENAPNL, in close collaboration with the local education group⁴ and the education cluster, is developing a COVID-19 response plan, based on three programmatic pillars: 1) Ensuring continuity of education (immediate response through online and offline learning); 2) Monitoring of implementation and collection of lessons learned and good practices⁵; 3) Plan for the reopening of schools.

In terms of coordination, all public coordination activities and meetings with cluster members or with partners were held remotely, in strict compliance with the instructions issued by the health authority of the country.

UNICEF adjusted response

- Scale-up the teaching by radio programme in all 13 regions in Burkina Faso. Currently, this programme is covering only 4 regions. Our adjusted strategy is to expand this initiative in additional 9 regions before the end of the year 2020.

³ Alternative education refers to all pedagogical approaches that differ from traditional pedagogy. In emergency situations, this form of education, essentially community-based and competency-based, and not content-based. It focuses on essential chapters and exercises (e.g. writing, arithmetic, reading) while offering psychosocial support (e.g. games, dance, songs) to children before their transfer to formal or non-formal education. Formal education: Teaching organized and delivered in school and explicitly designated as learning and usually leads to validation and certification. Non-formal education: Teaching of a particular subject, inside or outside school, which is integrated into planned activities that are not explicitly designated as learning activities but still have an important 'learning' element.

⁴ A forum of local technical and financial partners for regular programmes in the education sector.

⁵ As pandemic management is an almost new and challenging topic in schools, it is important that all good practices and lessons learned from interventions are documented to facilitate risk-sensitive planning for disasters, including pandemics such as CORONA-19.

- Introduce an innovation for monitoring of learning outcomes through SMS messaging for children attending the teaching by radio programme. We are about to sign an agreement with a telephone mobile company that is specialized in improving lives through mobile phone.

Child Protection

As of 31 March 2020, the geographical coverage of interventions and results were limited due to quarantine decisions, security and funding constraints.

- UNICEF and its partners reached 23,407 new children (13,014 girls). In the first trimester of 2020, a total of 78,465 children have been reached, representing 39.7 per cent of its annual target of 197,304 children affected by the emergency. However, this represents only 21 per cent of the children in need (367,117).
- UNICEF and child protection area of responsibility (CPAoR) partners reached 39,624 new children (17,363 girl) and 2,767 children living with disabilities (1,414 girls) with child protection services, such as psychosocial support in response to distress
- UNICEF and its partners provided child protection services to 1,505 children (505 girls) with specific needs (victims of exploitation, sexual abuse, physical or moral violence) using the case management approach
- 198 new unaccompanied (115 girls) and 474 new separated children (UASC), including 253 girls, were identified and referred to family tracing and reunification services
- 30 unaccompanied children (19 girls) benefited from reunification with their biological families and 8 children (4 boys and 4 girls) benefited from alternative care arrangements
- 1,752 children (914 girls) from 250 vulnerable households received cash transfers to respond to their basic needs. They were selected according to agreed criteria such as orphaned children, UASC, very vulnerable families and children living with disability.
- 6,932 children (3,480 girls) received non-food items⁶
- 6 children separated from armed groups are supported in the reintegration within their community
- Using focus groups, awareness-raising activities focused on prevention of family separation, violence against children and COVID-19 reached 49,529 people (16,000 women and 14,000 children)
- 2,830 women and girls attended awareness sessions on gender based GBV risk mitigation and prevention
- 72 professional animators and supervisors (52 women) of child friendly spaces were trained by UNICEF on the prevention of GBV, sexual abuse and exploitation, and COVID-19 in emergency situations.

COVID-19 ADAPTATION

In March 2020, UNICEF and partners were fully engaged in the response and preparedness on COVID-19:

- Guidelines on child protection in emergency adaptation measures on COVID-19 was developed and implemented by child protection partners.
- 1,512 people (901 women) were trained on COVID-19 and key messages to be delivered to children and families, in coordination with the health and communication for development sectors.
- 35 community-based child protection mechanisms are used as entry points to provide services at the household level by social agents (workers) in villages for their involvement in awareness-raising on COVID-19, and identification and referral of cases of children and families with special needs.
- UNICEF and partners continued to provide mental health and psychosocial support (MHPSS) to respond to the new stress related to the risk of contracting COVID-19 disease, contaminating others, its mode of transmission, the quarantine and socio-economic consequences, ect. 49,529 people including 14,000 children benefited from mental health and psychosocial support and COVID-19 related specific informations. .
- A new approach is used by UNICEF and partners for psychosocial activities consisting in working with groups of 50 children or less, In 35 communities in communes of Barsalogo, Pissila, Pensa, Namisigma, Dori of Sahel and



⁶ Non-food items: hygiene materials, games, toys, clothing, shoes, toothpaste + 5 toothbrushes and a set of 3 traditional fabric. One kit serves 5 children and 2 adults

Centre Nord region(s) full respect of barrier measures and physical distancing. Teenagers are also coaching younger children in the prevention of COVID-19. Under the supervision and guidance of partner's staffs, teenagers and communities' volunteers are working with groups of 50 children or less outside of the child friendly spaces which are currently closed. The approach permits to stay closer to children and families and timely identify and respond to their specific needs in term of informations and other child protection services related to COVID Pandemic.

Rapid Response Mechanism

On 23 March 2020, UNICEF and Danish Refugee Council, one of the 4 NGOs partners of the Rapid Response Mechanism (RRM) consortium⁷ distributed 235 kits of essential households, WASH and dignity items⁸ to 163 internally displaced households in Koungoussi (Centre-Nord region).



COVID-19 ADAPTATION

This distribution was done after the declaration of the COVID-19. Therefore, DRC made sure to comply with the COVID-19 prevention measures, such as physical distancing and the grouping of maximum 50 people. They also sensitized the beneficiaries to COVID-19 prevention, installed hand-washing devices at the entrance and exit of the distribution site, and distributed protective devices to their staff (masks, gloves and gel) before the distribution.

Communications for Development (C4D), Community Engagement & Accountability

UNICEF continued to support the promotion of good behavior messages and practices in health (newborn health, pregnancy and children immunization), as well as radio programmes, including humanitarian information, with a focus on the Centre-Nord region, the hotspot of the humanitarian crisis.

Working with the *Action communautaire pour le développement* (ACD) in the response to the humanitarian crisis, UNICEF achieved the following results in the Centre-Nord region:

- 12,000 people directly reached with messages on newborn health, pregnancy and children immunization through 20 public radio games in 20 villages of Bam and Namatenga provinces
- 750 people (mainly community leaders and key influencers) engaged through community dialogues in 25 villages. Traditional and religious leaders were committed to promote good practices and positive behaviors in their communities with focus on collective and social engagement
- 8 radios continued broadcasting radio programmes on child protection, WASH and nutrition targeting displaced people and host communities.

COVID-19 ADAPTATION

UNICEF led the development of the national Risk communication and community engagement ([RCCE](#)) plan in close collaboration with the MoH. In addition, UNICEF co-leads the RCCE commission with the MoH, within the National emergency response committee, and supported the establishment of the RCCE commission coordination mechanism.

Media and external communication

The media and external communication team reached out to international and national media to raise awareness of the humanitarian situation and response. The communication team responded to special requests from international media, including [Telegraph](#). The team accompanied a journalist of the Japanese newspaper [The Asahi Shimbun](#) to witness UNICEF's humanitarian activities in the field.

UNICEF also publicly condemned the attacks targeting civil populations, including children. This key message was delivered on UNICEF in social medias [[Facebook](#) [Twitter](#) [Instagram](#)] and published in [ONU Info](#), [Reliefweb](#), [All Africa](#) (among others).

⁷ The Rapid Response Mechanism (RRM) consortium is led by *Action Contre la Faim* (ACF) and includes Danish Refugee Council (DRC), *Solidarité Internationale* (SI) and *Humanité et Incusion* (HI). Each organization is in charge of the implementation of RRM activities in a specific region.

⁸ Mosquito nets, soap, water buckets, tarpaulins, kitchen items, blankets, plastic mats, solar lamps, kettles, slippers and traditional fabric

UNICEF produced a comprehensive communication package to raise awareness on the protection of children at school and the [Safe school program](#) in [FR](#) and [ENG](#).

COVID-19 ADAPTATION

The Country Office contributes to the efforts deployed by the national authorities in raising awareness on the epidemic. The communication team is actively participating to the national *Communication and media committee* and supporting the development of key messages used in several audiovisual contents including TV spots broadcast on mass media ([Spot 1](#) and [Spot 2](#)).

The communication team produced a music video clip [[Alerte CORONA | SMARTY | UNICEF](#)] involving famous artist Smarty and key influencers to increase its general audience on mass media and engagement with youth and via digital platforms. It resulted into a large media coverage: [ONU Info](#), [RFI](#), [RTS](#), [France Info](#), [Mondafrique](#), [TV5](#) among others.

The communication team emphasized the participation and engagement of [youth](#) and [U-reporters](#) in the crisis communication by supporting the [visibility](#) of a [chatbot](#) established by UNICEF. A chatbot is an artificial intelligence application that can imitate a real conversation with a user in their natural language. This “Coronavirus chatbot” enables communication via SMS and/or discussions with a group of U-reporters volunteers and trained on COVID-19 prevention.

A comprehensive package made up two information booklets was created including [child-friendly-content](#).

Humanitarian Leadership, Coordination, and Strategy

UNICEF Burkina Faso aims at addressing the most urgent needs of 1.5 million people, including 690,000 vulnerable children, affected by humanitarian crisis in the five most affected regions for the year 2020 is to scale-up UNICEF response to emergencies to reach the most disadvantaged children and families in the crisis-affected regions, while strengthening social cohesion and resilience as a mid-term strategy. UNICEF supports community-based interventions in areas where the government suspended basic social services or where insecurity severely restricted access to the most vulnerable population. This action is seen as an opportunity to strengthen the involvement of communities and local authorities in co-creating solutions to issues affecting children and families and to showcase the development-humanitarian-peace nexus.

With the drastic increase in IDPs, UNICEF presence increased to three field offices in Dori (Sahel region) and Kaya (Centre-Nord region), and since mid-February, in Fada N’Gourma (Est region). UNICEF is the lead agency for the WASH, nutrition, education clusters and child protection area of responsibility. UNICEF is also strengthening the coordination and information management capacities of the clusters through the recruitment of dedicated specialists at national and subnational levels.

Updated information on the clusters main activities can be found online:

Education cluster <https://www.humanitarianresponse.info/en/operations/burkina-faso/education>

Nutrition cluster <https://www.humanitarianresponse.info/fr/operations/burkina-faso/nutrition>

WASH cluster <https://www.humanitarianresponse.info/fr/operations/burkina-faso/water-sanitation-hygiene>

Child protection (AoR) <https://www.humanitarianresponse.info/en/operations/burkina-faso/protection-de-lenfant>

COVID-19 ADAPTATION

Following the COVID-19 outbreak in Burkina Faso, an inter-ministerial National Coordinating Committee (NCC) was set up under the lead of the MoH, for the planning, coordination, implementation and monitoring of COVID-19 preparedness and response. The NCC includes all the financial and technical partners. For cohesion purpose and rational use of available technical resources, the members of the health cluster are also members of this coordination mechanism.

UNICEF participates in 4 commissions established by the government:

- Coordination commission, where UNICEF plays a key role in the design of government response to COVID-19
- Case management commission, which holds daily meetings to assess the situation of new cases, challenges related to tests and treatments of those who are already infected

- Logistics commission, where UNICEF is providing support for the procurement of oxygen concentrators, protection masks, gloves of protection (covering 10% of the national needs), resuscitation devices, and hand sanitizer (gel)
- Risk communication and community engagement communication commission, where UNICEF is the co-lead with the MoH, to develop key messages to raise public awareness on the prevention of COVID-19. UNICEF also publishes press releases on the situation of the epidemic in Burkina Faso.

Next SitRep: 30 April 2020

UNICEF Burkina Faso Humanitarian Action for Children Appeal <https://www.unicef.org/appeals/files/2020-HAC-Burkina-Faso.pdf>

UNICEF Humanitarian Action for Children Appeal <http://www.unicef.org/appeals/index.html>

[UNICEF Burkina Faso Facebook](#) and [Twitter](#)

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Summary of Programme Results

Sector*	Cluster/Sector Response			UNICEF and IPs		
	2020 target	Total results	Change since last report ▲▼	2020 target	Total results	Change since last report ▲▼
Nutrition						
# children under the age of 5 with SAM admitted into therapeutic feeding programmes	147,131	16,328	▲4,620*	147,131	16,328	▲4,620*
# caregivers of children reached with infant and young child feeding counselling	560,950	258,477	▲128,116	560,950	258,477	▲128,116
Health						
# children aged 6 to 59 months vaccinated against measles				270,000	6,107	▲6,107
# children and women received primary health care in UNICEF-supported facilities				375,000	2,009	▲805
# people received long-lasting insecticide-treated nets				135,665	0	-
WASH						
# people accessed sufficient quantity of safe water for drinking, cooking and personal hygiene	985,000	66,743	▲18,300	310,000	26,474	▲5,500
# people accessed appropriate sanitation facilities	690,000	28,114	▲20,236	525,000	12,451	▲8,700
# people reached with handwashing behaviour change programmes	1,050,000	125,951	▲37,759	500,000	49,177	▲17,330
Child Protection						
# children accessed mental health and psychosocial support	268,000	96,736	▲39,624	197,304	78,465	▲23,407
# children and women accessed gender-based violence risk mitigation, prevention or response interventions	27,300	6,036	▲2,830	20,000	6,036	▲2,830
# unaccompanied and separated children accessing family-based care or appropriate alternative services	4,000	2,084	▲685	2,500	2,071	▲672
# children separated from armed groups including other at-risk girls and boys accessing reintegration support				40	06	▲6
# of children from vulnerable households affected by the crisis who have access to cash transfer for child protection				25,000	4,434	1,752
Education						
# children accessed formal or non-formal education	500,000	13,990	▲3,260	349,974	8,997	▲4,500
# children aged 3 to 17 years affected by crises receiving mental health and psychosocial support through strengthened capacities of teachers to	544,273	9,929	▲209	500,000	9,864	▲144

provide supportive care environments at school						
# girls and boys aged 3-17 years affected by crisis receiving learning materials	520,000	31,802	▲28,987	349,974	10,311	▲8,711
Rapid response						
# displaced persons, including the ones living with disabilities, provided with essential household items				70,000	1,141	NA
Communication for development						
# people in host communities reached with key life-saving / behaviour change messages on essential family practices				150,000	63,818	▲12,750

* This includes only the children admitted in March. In February there were 2165 additional children admitted but not reported on the previous SitRep.

Annex B

Funding Status**

Sector	Requirements	Funds available		Funding gap	
		Received Current Year	Carry-Over	\$	%
Nutrition	17,315,100	6,988,467	835,497	9,491,136	55%
Health	10,281,116	-	227,921	10,053,195	98%
WASH	25,263,857	3,394,108	3,402,948	18,466,801	73%
Child Protection	11,228,787	1,325,417	1,094,666	8,808,704	78%
Education	27,727,668	155,114	1,050,117	26,522,437	96%
Rapid response management and implementation	3,050,000	1,406,863	0	1,643,137	54%
Communication for development	1,800,000	-	0	1,800,000	100%
Total	96,666,528	13,269,970	6,611,149	76,785,409	79%

** As defined in Humanitarian Actions for Children (HAC) Appeal 2020 for a period of 12 months (January-December 2020)