



Mauritania

Humanitarian Situation Report

July – September 2019

224,978

Number of children in need of humanitarian assistance

559,915

Number of people in need

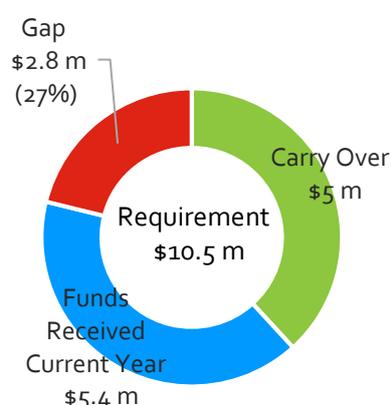
56,136

Number of Malian refugees, including 33,618 children (UNHCR August 2019)

UNICEF Appeal 2019

US\$ 10.5 million

Funding status 2019 (US\$)*



* Funds available includes funding received for the current appeal year as well as carry-forward from previous year

Highlights

- The 2019 SMART survey indicated that the national nutrition situation remains serious with 11.2 per cent of GAM and 1.8 per cent of SAM. Of the 56 districts, 23 are experiencing a nutritional emergency situation (GAM > 15 percent and/or SAM > 2 per cent). In addition to the 1,333 trained health workers in 2017-2018 another 117 was trained, thus representing 97% (1,450/1,498) of all health workers who were expected to receive training. UNICEF currently supports 739 outpatient and 20 inpatient therapeutic facilities (88 per cent of all health facilities) throughout the country. As part of the integrated community case management intervention in nutrition emergency districts, 234 children aged 0-5 years were treated for diseases (malaria, fever, diarrhoea and acute respiratory infection) during the reporting period in addition to 1,246 cases managed since the beginning of the year. Quality treatment was offered to 1,480 children with childhood diseases versus a target of 2,846 cases, to date.
- 11,361 people including 5,361 SAM children have access to safe drinking water through newly constructed water supply points and household water treatment. 5,000 children, including those affected by malnutrition, now have access to, and use adequate sanitation facilities in health centres.
- More than 3,260 people (from 7,260 persons in need of safe water) were provided with safe drinking water, in response to the floods in Guidimakha.
- 250 of the 350 health centres received WASH kits, and 20 health centres were equipped with adequate water- and sanitation facilities. 3,411 people living in host communities have discontinued open defecation and now use the newly constructed 481 latrines. 26,000 mother / child family units affected by malnutrition were sensitised to hygiene and essential family practices and received WASH Kits.
- In the M'Berra refugee camp and host communities, 466 new children were identified as a case of being at risk or being a survivor of violence, including 287 girls. A total of 2,959 children have been assisted with child protection interventions, since January 2019. 78 of 93 children – 84% obtained their primary school certificate at the M'Berra refugee camp. 38 (14 girls) of 141 children obtained their high school diploma. The community library was completed and equipped with more than 1,000 books in French, Arabic and English. 15,500 Malian school textbooks and 3,800 books for non-formal education were procured for the school year 2019-2020. 700 young people (388 girls) attended literacy courses at the camp while 758 young people (440 girls) attended literacy courses in the host communities of Bassiknou.

UNICEF's Response with Partners	UNICEF		Sector	
	2019 Target	Total Result*	2019 Target	Total Result*
Nutrition: Number of children under age five suffering from SAM admitted for treatment	26,930	16,225	26,930	16,225
Health: Number of children aged 6-59 months with common childhood diseases reached with appropriate and integrated management of childhood illness services.	2,846	1,480	2,846	1,480
WASH: Number of children accessing and using appropriate sanitation- and hygiene facilities in health and nutrition centres and schools in the refugee camp, host communities and villages with high SAM encumbrance	6,500	5,000	26,930	5,000
Child Protection: Number of refugee- and host community children reached with psychosocial support	8,500	2,959		
Education: Number of school-age boys and girls (3-17) in the refugee camp and in host communities affected by the humanitarian situation receiving learning materials.	17,000	20,521	17,000	20,521

* Cumulative results since the beginning of the year.

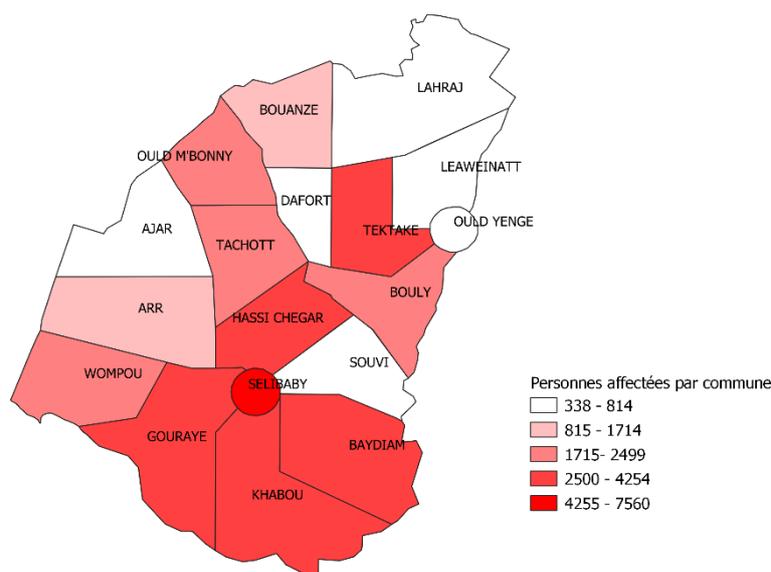
Situation Overview & Humanitarian Needs

Heavy 250 mm precipitation fell between August 24 and 26, 2019, in the Selibaby and the Guidimakha region, representing 31-50% of total yearly rainfall in that region. These heavy rains cause several damages, killing five people and leaving hundreds of families homeless. According to the evaluation report led by the technical working group of the regional crisis management, the floods have affected 5,371 households (or 7,560 people, of which more than 450 are now homeless). 174 water supply points, 48 schools and five health centres have been damaged. More than 150 cases of diarrhoea were reported in the first week. Other regions, such as Gorgol and Hodh El Gharbi have also been affected by floods, but to a lesser degree. Access to affected communities has been challenging due to bad road conditions, delaying the response to some extent. However, local coordination mechanism implemented under the leadership of regional authorities and the involvement of humanitarian actors made providing quick assistance to those affected especially those temporary related in schools possible.

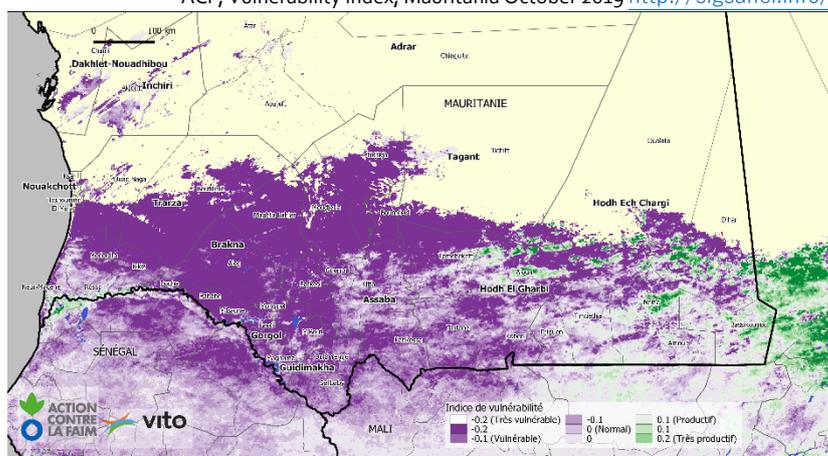
In March 2019, results from the Harmonised Framework (Cadre Harmonisé)¹ exercise led to an estimation that 375,891 people would be facing severe shortage of food in March and an expected 606,647 people would be facing severe food shortage during the 2019 lean season. An analysis of available data indicates that during the period of January to August 2019, the number of SAM cases registered was similar to that of 2018 (16,225 versus 16,806, respectively). The proportion of newly admitted SAM cases per month is about 12.5 per cent, similar to 2018: 2,028 / 16,225 versus 2,101/16,806. However, with only 77 per cent of reports completed by the end of August 2019, these figures might increase. Further, the proportion of newly admitted SAM cases has been higher in certain regions compared to same period in 2018, namely, Trarza (87 per cent), Guidimakha (30 per cent), Gorgol (29 per cent), Tagant (19 per cent), Adrar (7 per cent), Assaba (5 per cent). Projections of the Harmonised Framework (Cadre Harmonisé) indicate that over 606,647 people will be in a critical food shortage situation during the lean season in 2019, which is much higher than the average. Data from Assaba show an increase in service utilisation with 234 children under five having been treated for childhood diseases in July thanks to the ASC training and supervision provided. The situation remains particularly precarious with a high risk of further deterioration. Indeed, in 2019 the raining season was delayed by more than two months. At the end of August 2019, 71 per cent (51 / 72) stations were in rainfall deficit compared to the average cumulative rainfall over the same period. Further analysis showed that 11 of 13 regions now have a rainfall deficit over 50 per cent. The consequence of the delay and rainfall deficit includes low biomass development and delay in agricultural activities. The continuity of rainfall in October with a better spatial distribution is uncertain, and could lead to the following consequences: (i) high risk of a third consecutive year of drought; (ii) a need to revise the survival strategies developed so far by communities to cope with the last two years of drought; and (iii) acute vulnerability in the seven chronically affected regions (Hodh Chargui, Hodh El Gharbi, Guidimakha, Assaba, Tagan, Gorgol, Brakna).

Further analysis showed that 11 of 13 regions now have a rainfall deficit over 50 per cent. The consequence of the delay and rainfall deficit includes low biomass development and delay in agricultural activities. The continuity of rainfall in October with a better spatial distribution is uncertain, and could lead to the following consequences: (i) high risk of a third consecutive year of drought; (ii) a need to revise the survival strategies developed so far by communities to cope with the last two years of drought; and (iii) acute vulnerability in the seven chronically affected regions (Hodh Chargui, Hodh El Gharbi, Guidimakha, Assaba, Tagan, Gorgol, Brakna). Flooding in Gorgol and Guidimakha suddenly increased the vulnerability of communities, including: (i) limited physical access to consolidate the 2018 emergency response; (ii) destruction of crops and livestock; (iii) limited access to safe drinking water due to contamination of

Affected people by Commune



ACF, Vulnerability index, Mauritania October 2019 <http://sigsahel.info/>



¹ Cadre Harmonisé West Africa's version of the Integrated Food Security Phase Classification, March 2019 (Phase 3 to 5 food insecurity).

boreholes; and (iv) increased risk of morbidity (diarrhoea, malaria...) and acute malnutrition in children under 5 years of age.

Established in 2012 and located 30 kilometres from the Malian border, the M'Berra refugee camp currently hosts 56,136 refugees, including 33,618 children², and continues to depend on assistance from the Mauritanian government and external and humanitarian support, in addition to the generosity of local communities in the Bassiknou district. Currently, several initiatives are in place to address the needs of both refugee and host populations, to strengthen the humanitarian-development nexus, to improve the resilience of refugees and host communities and to ensure the sustainability of interventions in Bassiknou district, as well as in the Hodh Chargui region, which has been identified as one of the three convergence zones of the UN system from 2018 to 2022.

Estimated Population in Need of Humanitarian Assistance			
	Total	Male	Female
Total Population in Need ³	559,915	148,909	143,069
Children (Under 18)	224,978 ⁴	114,738	110,240
Children Under Five	77,089	39,315	37,774
Child refugees (UNHCR August 2019)	33,618	16,509	17,109

Humanitarian Leadership and Coordination

- The cluster system is not activated in Mauritania. UNICEF is leading the Nutrition sector and is co-leading an intersectoral Nutrition/Food Security Group together with WFP. Monthly sectoral or intersectoral meetings are held in order to monitor resource mobilisation and programme interventions, as well as identify gaps. As part of the monitoring and coordination mechanism, four coordination meetings of the nutrition sector were held, under the co-leadership of UNICEF and the Ministry of Health, in partnership with the food security sector led by WFP. These coordination meetings are extended to operational level with three multisectoral coordination meetings held in Guidimakha, Hodh El Gharbi and Hodh Chargui.
- Following the flood in Guidimakha region, UNICEF as the leader of the WASH sector quickly convened a meeting with WASH actors. Co-facilitated by the National Civil Protection Agency, this meeting updated the 3W (Who does what where), identified stock availability and set the ground for a rapid response. A UNICEF WASH Officer was deployed to Selibaby and the Nutritionist Consultant based in the Guidimakha was mobilised to assist the regional emergency cell (which comprised of the regional technical services, UNICEF, IOM, national and international NGOs under the leadership of regional authorities), to conduct rapid needs assessment and coordinate response. A daily situation update was compiled at field level and shared with the central level, where weekly meetings were held among UN agencies, the WB, BAD and NGOs. The UNRC office coordinated the preparation of three SitReps.
- UNICEF and UNHCR continue to lead the education technical group (GTE) in Bassiknou. Nonetheless, the cluster working modality has not been activated. The GTE is currently planning the Back to School campaign. With the arrival of new International NGOs such as Save the Children, RET and COOPI, a teacher professional development programme will also be discussed in the next quarter, along with supervision activities to be carried out by local education authorities. Within the framework of the Refugee Coordination Model, the terms of references for the GTE were finalised in order to strengthen coordination and clarity of roles and responsibilities of different members. A regional education analysis is currently conducted to identify priorities and provide recommendations to influence future investment in the sector, but also feed into the regional strategy for accelerated growth and shared prosperity which promotes the vision of improving access to early childhood and basic education services for both host communities and refugee children.
- Child Protection activities continue at the camp level with the various implementing partners under the coordination of the Child Protection Working Group (CPWG). During this reporting period, several meetings were held with community leaders, members of community networks / mechanisms, women's and youth groups to take inventory

² United Nations High Commission for Refugees, ProGRES Database, August 2019.

³ Ibid.

⁴ According to the Government of Mauritania Ministry of Health and SMART survey, July 2018; UNICEF Mauritania Integrated Management of Acute Malnutrition Database, November 2018; and a joint estimate by UNICEF and WFP in regard to the number of people in need and targets for 2019.

of the child protection situation in the M'Berra camp; to promote community participation and mobilisation in child protection; to strengthen community dialogue and promote child rights, and to identify community solutions and develop the basis for an action plan.

Humanitarian Strategy

As co-leader of the nutrition sector, UNICEF continues to work with partners to address the needs of populations affected by malnutrition in Mauritania using a multi-sectoral strategy to scale up the integrated management of acute malnutrition and to provide water, sanitation and hygiene (WASH) services. This includes life-saving service delivery through health centres, as well as community-based approaches to prevention that incorporate communication for development, screening, counselling for feeding infants and young children (IYCF) and for to teach early detection skills to mothers / caregivers at the country level. In order to ensure synergies between humanitarian action and development programming and to build resilience, UNICEF uses a cross-sectoral approach that accelerates access to basic services, including those for children with disabilities, while improving social cohesion in volatile contexts. This approach includes integrated interventions, monitoring, information management and coordination. Mobile, community-based service delivery will be employed to reach affected populations in hard-to-reach areas. Protection and education remain central to UNICEF's contribution to the Malian refugee response. Together with national and local authorities, these activities involve both immediate service provision to meet the needs of refugees and host populations, and the strengthening of systems to improve resilience, including teacher training, risk-sensitive planning and integrated community-based child protection services and mechanisms. Several initiatives are currently under development to address the needs of both refugee and host populations, strengthen the humanitarian-development nexus and improve the resilience of affected zones with the engagement of new actors, including the Peace Building Fund (PBF); US-Bureau of Population, Refugees and Migration, World Bank International Development Association (IDA 18).

Summary Analysis of the Programme Response



Nutrition

- Based on available reports, a total of 16,225 SAM cases were admitted for treatment throughout the country, representing 60 per cent of the 2019 caseload (n=26,930) and estimated at 51 per cent of the national burden (n=31,682). In the 23 emergency districts, 11,566 SAM cases have been treated, representing 55 per cent of the annual caseload (n=20,882) in districts affected by nutrition emergency. Programme performance analysis indicates that all three key indicators meet the SPHERE standards: an 86 per cent cure rate (> 75 per cent, SPHERE standard), a 0.5 per cent death rate (< 5 per cent, SPHERE standard), and a 12 per cent failure rate (< 15% per cent, SPHERE standard). In Guidimakha⁵, an additional 106 SAM cases were treated in basic health facilities by community health workers with a 100 per cent cure rate, zero per cent death rate and zero per cent defaulter rate. The mobile strategy of health care providers as well as the involvement of community health workers in the outpatient treatment programme are being scaled up throughout the country as part of the roadmap to introduce the simplified protocol. As part of the implementation of an integrated care package and preventive nutrition services, 117 health services providers and 314 community health workers were trained on nutrition counselling related to IMAM services at health facilities and at the community level. These activities contribute to scaling up the implementation of the IMAM / IYCF strategic options, which include early detection of malnutrition in children aged 6-59 months and their mothers / caregivers, involving community health workers in outpatient treatment programmes, the mobile SAM care, promoting optimal IYCF practices through mother-to-mother support groups, regular community dialogue, and a promotional monitoring system of exclusive breastfeeding and diet diversity. A total of 19,930 pregnant and lactating women and 1,551 children 0-23 months were reached with an integrated package of IYCF services. In addition, 2,202 mothers / caregivers of children aged 6-59 months were trained on early detection of acute malnutrition. As part of the community participation, 128 community diagnostics were carried out through focus groups, as well as a KAP survey that contributed to identifying key challenges and social barriers related to IYCF and child care and ensuring participatory planning to gradually address these points. In addition, three national workshops were held with the goal to: (1) elaborate the national roadmap to implement the simplified protocol; (2) to train 64 health workers from the Ministry of Health and NGOs on nutrition surveys (using SMART method); (3) to conduct an IMAM bottleneck

⁵ Data is currently only available for Guidimakha; we are expecting to get data from Hodh Chargui, Assaba, Hodh El Gharbi, Gorgol, Tagant.

analysis including end-user monitoring and the validation of the national plan to strengthen the quality of IMAM services. A total of three joint IMAM / IYCF services supervisions were provided by the Ministry of Health / UNICEF / NGO.

- As part of strengthening national nutrition surveillance, SMART survey was conducted from July 12 to 27, 2019. It indicated that the national nutrition situation remains serious with 11.2 per cent of GAM and 1.8 per cent of SAM; 23 districts of 56 are in nutrition emergency situation (GAM > 15 percent and / or SAM > 2 per cent). In addition, 585,122 children aged 6 – 59 months (or 87% of all children in the country) were screened for acute malnutrition during a national mass screening campaign integrating vitamin A supplementation and deworming from July 29th to August 1, 2019. SAM cases (MUAC < 115 mm) represent 0.3 per cent (1,750) of children aged 6 - 59 months referred for SAM treatment at the health facilities; MAM cases (MUAC between 115 mm and 125 mm) represent 2.6 per cent (15,237) of children aged 6 – 59 months were referred to be confirmed (MAM or SAM) with weight for height score to the health facilities.



Health

- As part of the integrated community case management intervention in the districts affected by nutrition emergency, 117 skilled community health workers in Assaba and Guidimakha (two regions among the most chronically affected by acute malnutrition during the lean season period) are now equipped and instated in their function through a participatory community approach. During the reporting period, 234 children aged 0-5 years were treated for disease (malaria, fever, diarrhoea and acute respiratory infection) in addition to the 1,246 cases managed since the beginning of the year. This allowed to reach 1,480 children with diseases versus of a target of 2,846 cases to date, with quality treatment.
- In the first half of 2019, nationwide coverage was 86 per cent in Penta3 and 78 per cent in Rubella / Measles (RR) with an average dropout rate of 2 per cent (Penta1-Penta3) and 18 per cent (BCG).⁶ However, the analysis shows that 24 of 57 districts had a less than 80 per cent Penta3 coverage, of which four districts had a less than 50 per cent coverage. In addition, 8,547 infants did not receive the first dose of Penta, including 1,830 in the three regions of Nouakchott. Of the 64,179 infants vaccinated with their first doses of Penta, 1,372 did not return for the 3rd dose, including 838 in the three regions of Nouakchott. A plan to improve vaccination coverage in Nouakchott was implemented in coordination with the National Expanded Programme on Immunisation, UNICEF C4D section, youth network to bolster awareness, training, training monitoring, supervision and advanced immunisation outlets, for three consecutive months (August, September and October).



WASH (Water, Sanitation and Hygiene)

- In response to the floods in the Guidimakha region, in addition to the technical support provided, 652 WASH kits and 11,250 boxes of water treatment products were distributed for 652 of the most affected households (particularly, families that lost their home and those who temporarily sought shelter in schools). As a result, 3,260 people had access to safe drinking water within the first 72 hours. This contributed to reducing the number of diarrhoea cases. Other supplies, including plastic sheeting and water removal pumps were quickly dispatched to bolster the response capacity of the regional emergency cell. Sector partners, such as the Mauritanian Red Crescent, ADRA, and ACF were active in the response by undertaking door-to-door hygiene promotion sessions, by demonstrating water treatment and by NFI distribution.
- As for WASH intervention in n zones most affected by food and nutrition insecurity, the construction of the 20 solar powered water supply systems is now completed, and all the facilities are now in use in 20 villages and 20 health / nutrition centres. 11,361 people, including 5,361 SAM children, have access to safe drinking water through newly constructed water points at community level and health / nutrition centres and household water treatments. 26,000 mother / child pairs affected by malnutrition were sensitised to hygiene and essential family practices and 4,361 others received water, sanitation and hygiene kits for household use. A total of 250 health- and nutrition centres received WASH kits to improve hygiene practices. Of these health and nutrition centres, 20 are now equipped with new sanitation facilities, including hand washing stations. A total of 5,000 children (beyond the target of 6,500) are also accessing and using adequate sanitation facilities in health / nutrition centres at schools and children in host communities and health centres. In addition, beside the construction of WASH facilities achieved in 20 Health centres, WASH facilities are under construction in 23 schools and six additional health / nutrition centres in the

⁶ Administrative PEV data June 2019

Bassiknou district, through a partnership agreement with ACF. Community led total sanitation is under implementation in Bassiknou district. 3,411 people living in 28 villages in host communities have already ended open defecation and use 481 newly constructed latrines.



Education

- 78 (37 girls and 56 boys) of 93 refugee children (84%) succeeded to get the Primary education certificate, while 21 children (7 girls and 14 boys out of 36 young people) obtained the High School Certificate (58%). For the 2018-2019 school year, 5,402 refugee children (2,614 girls and 2,788 boys) were enrolled in the six primary schools of the camp, and 369 children (119 girls and 250 boys) in high school education. The community library with more than 1,000 books in French, Arabic and English, opened its door to all children and youth in the camp. Equipped with solar panel, the library enables students to study after sunset. While schools were closed during the summer break, 780 young people (480 girls and 300 boys) benefitted from literacy courses and extracurricular activities. A total of 16 football matches took place, while more than 4,000 young people participated in debates on social cohesion, active citizenship and conflict management, in live performances, and singing competition. 98 school management committee members were trained to improve their understanding of their roles and responsibilities. In the host communities, 758 young people - who had either never attended school or dropped out (310 girls and 438 boys) completed literacy courses, while 303 out of school children started bridging classes with the goal of re-entering formal education. In addition, 396 younger children carried on their activities in one of the eight preschool community-based centres. A regional education analysis is currently conducted to identify priorities and provide recommendations to influence future investment in the sector, but also, to feed into the regional strategy for accelerated growth and shared prosperity which promotes the vision of improving access to early childhood and basic education services for both host communities and refugee children.
- In response to the floods in Guidimakha, 32,000 exercise books were provided to the regional education authorities to assist affected households, to support back-to-school efforts (including renovating of school buildings) and to prevent school dropout. Fortunately, the school year was started as planned. The national agency Tadamoun is preparing to rebuild the damaged classrooms and carry out maintenance works. Thanks to local NGO (AED) activity, a tent was set up to provide access to educational activities for 40 children affected by floods and psychosocial services were extended to 143 children (43 girls and 100 boys) aged 4-6 years old. Training of teachers on psychosocial support will be rolled out to detect, support and refer distressed children. Additional supplies were provided such as two adolescent kits, two recreation kits and two ECD kits and group activities organised to relieve children from stress and anxiety. Other supplies distributed to 21 affected schools include: seven tents, 21 recreational kits and ten school in-a-box kits.



Child Protection

- Since July, a total of 466 new cases of children, including 287 girls at risk or victims of violence, abuse and exploitation, were identified in the M'Berra refugee camp and host communities bringing total number of identified vulnerable children to 2,959 (including 1,511 girls and 60 survivors of gender-based violence). UNICEF partners (ADICOR, ESD, and two new partners FLM and COAN) are now accelerating response including social follow-up, psychosocial support through individual counselling and referral to services (birth registration, non-formal education, medical assistance or livelihood support). 729 people (445 women and girls) participated in the social mobilisation platforms for the elimination of female genital mutilation; while 582 men and 1,493 women were sensitised to children's rights and child protection.

Communication for Development (C4D), Community Engagement & Accountability

The Communication Unit conducted training for C4D focal points throughout the country. A new partnership has also been developed with local radio and television stations to raise public awareness, particularly, to emergency situations. As part of the response to the floods in Guidimakha, a partnership with the Ministry of Social Affairs of Childhood and Family allowed large scale dissemination of life-saving messages related to health and hygiene through local radio broadcasting.

Media and External Communication

In 2019, UNICEF highlighted its commitment to the rights and well-being of children affected by emergencies in Mauritania. UNICEF spoke out against violations of children's rights during the Youth Day (11 August) and the International Peace Day (21 September) in the M'Berra refugee camp and in its multimedia production, mainly emphasising the nutrition situation in the country, the refugee crisis and the flood. The use of digital media was expanded to increase visibility of the main donors (e.g. DFID, ECHO, USAID, USA-BPRM) reaching more than 26,000 followers on UNICEF Mauritania Facebook page. From 4 to 6 September, a high-level mission from the US Bureau for population, refugees and migration visited the refugee camp of M'Berra and the host communities of Bassiknou. The visit was a chance for monitoring activities and assessing outcomes of the UNICEF -BPRM project: 'Addressing the risks and effects of the Malian armed conflict on children in Mauritania: Funding gaps and priorities for the education and child protection sectors. ([Link 1](#) / [Link 2](#))

Security

While the ongoing military operations in Mali and the deployment of the G5 Sahel forces might impact the security situation in the region and in Mauritania, the security situation remained relatively calm, following the presidential election in June. Beyond Nema in the Hodh Chargui region, UN missions must be in convoy and with an armed escort. The availability and capacity of the escorts remains a challenge to follow up on project implementation, especially in the host communities. Several missions have been either cancelled or postponed.

Supply and Logistics

As of 30 September, the total expenses related to the purchase of goods and services was more than US\$ 6,4 million of which more than US\$ 1 million relate to humanitarian response support. A similar value is expected by the fourth quarter of 2019 but will depend on on-going discussions with donors and resource mobilisation efforts. As part of the emergency response in Mauritania, US\$ 850,673 worth of supplies were distributed across the country in the third quarter of 2019, comprised of Ready-To-Use Therapeutic Food and anthropometric items funded by ECHO and USAID / Food For Peace targeting 26,930 children (US\$ 444,757.28), along with educational items (US\$ 257,191). Relief items including WASH (US\$ 46,697) and Child Protection (US\$ 6,221) were distributed to the 5,371 households affected by flood in the Guidimakha region. Thanks to the mobilisation of various donors, UNHAS flights have been secured for the remainder of the year 2019. However, due to the deteriorated condition of the airstrip, air operations from Bassikounou are suspended until the airstrip is rehabilitated. Flights are diverted to Nema for safety issues. Passengers to and from Bassikounou board and disembark in Nema (three-hour drive from Bassikounou) with continuation by road under protection of escorts. The implications are critical especially in case of urgent medical or security evacuation. The situation is compounded by the limited availability of escorts to Bassikounou and from Nema. WFP is seeking USD 740,000 to carry out the necessary rehabilitation works and continue providing reliable air transport services to Hodh El Chargui region for the humanitarian community.

Funding

UNICEF Mauritania wishes to express its heartfelt gratitude to all public and private sector donors (particularly, BPRM, Dfid, ECHO, Food for Peace, Japan, OFDA, Sida and the Swedish Committee for UNICEF) the contribution and pledges received as part of the HAC 2018 and 2019. The HAC 2019 is currently funded at 73 per cent for interventions related to SAM response, education and protection in emergency as well as flood preparedness. Mauritania would especially like to thank donors who have contributed to 'unearmarked' funding. Unearmarked funding gives UNICEF essential flexibility to direct resources and ensure the delivery of life-saving supplies and interventions to where they are needed the most - especially in the form of longer-term and predictable funding and in strengthening preparedness and resilience-building. As UNICEF Mauritania embarked in the second year of its country cycle (2018-2022), it is important to note that 72 per cent of its other resources (OR) funding for 2019 have been secured. There is hope that the currently available resources will contribute to a greater emphasis on the humanitarian- developmental nexus.

Funding Requirements (Funding Requirements (as defined in the revised Humanitarian Appeal 2019))					
Applied to Sector	Requirements	Available Funds		Funding gap	
		Funds Received	Carry-Over	\$	%
Nutrition	5,300,000	1,386,659	2,046,314	1,867,027	35%
Health	750,000	108,860	0	641,140	85%
WASH	1,620,000	288,460	950,588	380,952	24%
Child Protection	1,610,000	1,088,649	824,614	0	0%
Education	1,230,000	1,679,403	1,221,408	0	0%
Total	10,510,000	5,361,320	5,042,924	2,889,173	27%

Next SitRep: 12/01/2020

UNICEF Mauritania on Twitter: twitter.com/UNICEF_MTA

UNICEF Mauritania on Facebook: www.facebook.com/unicefmauritanie

UNICEF Mauritania on Instagram @UnicefMauritania

UNICEF Mauritania Humanitarian Action for Children: <https://www.unicef.org/appeals/mauritania.html>

**Who to contact
for further
information**

Hervé Périès
Representative
UNICEF Mauritania
Tel: + (222) 42 78 31 00
E-mail: hperies@unicef.org

Judith Léveillée
Deputy Representative
UNICEF Mauritania
Tel: + (222) 42 78 34 00
E-mail:

Annex A – Summary of Programme Results

Indicators	UNICEF and IPs*			Sector Response**		
	2019 Target	Total Results*	Change since last report ▲ ▼	2019 Target	Total Results*	Change since last report ▲ ▼
NUTRITION						
Number of children under age 5 suffering from SAM admitted for treatment	26,930	16225	10723▲	26,930	16225	10723▲
Number of pregnant and lactating women reached with an integrated package of IYCF services	16,234	12704	3530			
HEALTH						
Number of children aged 6 to 59 months with common childhood diseases reached with appropriate and integrated management of childhood disease services	2,846	1,480	234			
WASH						
Number of children under treatment for SAM with access to safe water, cooking and hygiene through house water treatment	13,465	11,351	10,370▲	26,930	12,875	10,370▲
Number of children with access to and using appropriate sanitation and hygiene facilities in health and nutrition centres and schools in refugee camps, host communities and villages with high SAM burdens	6,500	5,000	250▲		5,000	250▲
CHILD PROTECTION						
Number of refugee- and host community children reached with psychosocial support	8,500	2,959	1,511▲			
Number of survivors of sexual- and gender-based violence reached with gender-based violence response interventions	150	60	60▲			
EDUCATION						
Number of school-aged boys and girls (aged 3 to 17 years) in the refugee camp and host community affected by humanitarian situations receiving learning materials	17,000	20,521 ⁷	1,889▲	17,000	20,521	1,889▲
Number of out-of-school boys and girls aged 3 to 17 years with access to education	4,950	6,140	3,054▲	4,950	6,140	3,054▲

* Total results are cumulative results.

** Note that the Cluster system has not been activated in Mauritania and that humanitarian action for children is not discussed in health sector meetings.

⁷ The overachievement of the education programme is due to higher funds mobilized compared to the planned budget.