Situation in Numbers

1.2 million children in need of humanitarian assistance
1.6 million people in need
(Government, October 2019)

5,609,103 people reached with key lifesaving and behaviour change messages on health, nutrition, water, sanitation, hygiene, child protection, and polio preventive measures

Angola Humanitarian Action for Children is underfunded by 75 percent.

UNICEF’s Response and Funding Status

Highlights

266,739 children under 5 years in humanitarian situations screened for malnutrition.

3,923,505 children aged 0 to 59 months vaccinated against Polio.

350,396 people accessing the agreed quantity of water for drinking, cooking and personal hygiene.

5,609,103 people reached with key lifesaving and behaviour change messages on health, nutrition, water, sanitation, hygiene, child protection, and polio preventive measures

Angola Humanitarian Action for Children is underfunded by 75 percent.

UNICEF’s Response and Funding Status

<table>
<thead>
<tr>
<th>Category</th>
<th>Children screened</th>
<th>Funding status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nutrition</td>
<td>40%</td>
<td>21%</td>
</tr>
<tr>
<td>Polio vaccination</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>Measles vaccination</td>
<td>64%</td>
<td></td>
</tr>
<tr>
<td>Access to safe water</td>
<td>100%</td>
<td>13%</td>
</tr>
<tr>
<td>PSS and GBV services</td>
<td>100%</td>
<td>37%</td>
</tr>
<tr>
<td>Access to Education</td>
<td>21%</td>
<td>15%</td>
</tr>
<tr>
<td>Behaviour change message</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

**UNICEF Appeal 2020**

US$ 15.8 million

**Funding Status (in US$)**

- Funds received, $3M
- Carry-forward, $1M
- Funding gap, $12M
Funding Overview and Partnerships
ACO humanitarian interventions are funded by 25 percent. Major contributions to ACO humanitarian funding, include CERF (OCHA), BFA, USAID-Food-for Peace and GPE. However, critical funding gaps remain to support screening and treatment of severe acute malnutrition (SAM); improved access to water and sanitation; health; education and child protection, including gender-based violence services; as well as support to refugees and displaced populations. Additional funding would allow ACO to meet the humanitarian needs of an estimated 1.2 million children and be able to programmatically deliver on ACO 2020 HAC targets for WASH, Health, Nutrition, Education, Child Protection and C4D results. ACO works in partnerships and support of Government priority interventions. Currently, ACO has active partnership agreements with World Vision Angola, ADRA and Lutheran World Federation (LWF). In addition, under the leadership and coordination framework of the Resident Coordinator’s Office, ACO works in close collaboration with UNFPA, FAO, and WHO in the implementation of drought emergency response.

Situation Overview & Humanitarian Needs
Southern Angola continues to experience exacerbated consequences of a prolonged drought with one of the worst climate shocks in recent years. Temperatures in 2019 were the highest in 45 years and the severe drought continues to push families to extreme vulnerability, driving increasing food insecurity and malnutrition. As of October 2019, drought was reported to have affected 1.6 million1 people in Angola, equivalent to 333,163 households in 488 locations most impacted by drought. Results of the integrated food security phase classification (IPC) assessment undertaken in August 2019 in Cunene, Huila, Cuando Cubango and Namibe provinces projected around 562,000 people in IPC phase 3 (crisis) or 4 (emergency) between October 2019 to February 2020. Floods, during the first quarter of the year resulting from significant rainfall has compounded humanitarian needs, limiting access to continuous health care, nutrition, education, child protection and water, sanitation and hygiene services, including access to food for communities most affected by drought. Until the emergence of the novel coronavirus, there had been considerable progress made to curb the polio outbreak through vaccination campaign. However, the Covid-19 situation has slowed humanitarian response (particularly non-covid emergency interventions, limited humanitarian access and worsened the livelihood capacity of the poor and most vulnerable.

Summary Analysis of Programme Response
Nutrition
From January to September 2020, UNICEF trained 445 frontline health workers (health staff and community health workers — CHW) from drought and Covid-19 in the most affected provinces to provide quality care to children suffering from severe acute malnutrition (SAM). A total of 266,739 children under five were screened for malnutrition, from which 23,829 were found with SAM and admitted for treatment between January and September 2020; a 77 per cent increase compared to the same period in 2019 (see graph above)2.

For celebrating World Breastfeeding Week from 1 to 7 August, UNICEF, the National Directorate of Public Health, Angolan Pediatric Society, Human Milk Bank and Provincial Health Departments of Luanda and Huíla joined forces to raise awareness of breastfeeding during Covid-19. A national campaign was rolled out in August with dissemination of media cards, IYCF pamphlets, Radio spots and TV shows reaching 13,260 people (42 per cent female).

UNICEF is supporting the Family led Mid-Upper Arm Circumference (MUAC) innovative approach in Luanda, Huíla, Cunene and Bie. MUAC tapes were procured and guidance manuals were printed and are currently being distributed to 15,525 mothers and caregivers to quick start MUAC screenings using Mother-Led MUAC approach in Huíla, Cunene, Bie and Luanda provinces. A total of 102 nutrition supervisors from targeted provinces and 52 community health workers from Bie and Cunene received training in September; MUAC tapes and PPEs to start training mothers on Mother-Led MUAC screenings were provided.

---
IYCF counselling cards for suspected or confirmed cases of COVID-19 were developed by UNICEF and Ministry of Health and 10,000 booklet cards are being printed to be distributed to 49 health posts of 5 COVID-19 most-affected municipalities of Luanda province.

**Health**

ACO humanitarian health interventions focused on Polio and Measles vaccination in response to outbreaks. From January to September, Angola continued to respond to confirmed outbreaks of circulating type 2 vaccine-derived poliovirus (VDPV2) disease. As of 25 September 2020, 7 outbreaks with 142 cases of VDPV2 of which, 124 circulating vaccine-derived poliovirus (cVDPV2). Outbreak response activities resumed in July with the implementation of a response round against cVDPV2 cases, using monovalent type 2 oral polio vaccine (mOPV2) vaccine, from 10 to 14 July in 31 municipalities from 5 provinces. A total of 1,085,271 (out of 1,191,563) children aged 0-59 months from the provinces of Huila, Huambo, Cunene, Namibe, Cuando Cubango were vaccinated using mOPV2 vaccine.

Justified by cVDPV2 circulation, and the Measles epidemiological situation, a nationwide integrated Inactivated Polio Vaccine (IPV)-Bivalent Oral Polio Vaccine (bOPV)-Vitamin A campaign was planned nationwide, with Measles-Rubella vaccination in some districts (with confirmed Measles outbreaks). The first round was implemented from 4-12 September 2020, covering the provinces of Bié, Benguela, Zaire, Cunene, Huila, Namibe, Huambo and Cuando Cubango. Measles-Rubella vaccine was administered in districts with confirmed Measles outbreaks) of Benguela, Bié, Huambo, Namibe and Zaire provinces. During this round, 3,923,505 children aged 0 to 59 months were vaccinated against Polio; 1,623,600 children aged 0 to 59 months with bivalent oral polio vaccine (bOPV), and 1,085,271 children aged 0 to 59 months with monovalent type 2 oral polio vaccine (mOPV2), and 1,214, 634 children aged 2 to 59 months vaccinated with Inactivated Polio Vaccine (IPV). In addition, 21,298 children aged 9 to 59 months were vaccinated against Measles and Rubella and 1,276,021 children aged 6-59 months were supplemented with Vitamin A.

**WASH**

From January to September 2020, UNICEF ACO reached an estimated 350,396 people with access to safe water and an additional 586,549 people with hygiene messaging in areas most affected by drought. UNICEF ACO also procured and delivered 21 Volanta handpumps and provided the same to the Provincial Government of Huila and Namibe for installation in water stressed areas as identified by local authorities. Through the implementation of the community-Led Total Sanitation approach, UNICEF reached 187,512 people with safe sanitation options. Furthermore, UNICEF is working to improve the resilience of schools, hospitals and Health care facilities most affected by drought through combined approaches including the introduction of rainwater harvesting technology when feasible. Up to date, UNICEF has installed 5m³ water pvc tanks in 10 schools and 40 communities including health facilities. To pursue efforts in schools, a new Programme Document with the local NGO ADRA has been finalized for the construction of 6 rainwater harvesting reservoirs combined with hygiene promotion for the prevention of Covid-19. Activities will be implemented in the Ombandja Municipality in Cunene and are set to start in early November 2020. The project will benefit 2,576 students and 3,989 community members. UNICEF also procured 2,000 family hygiene kits to support nutrition interventions in nutritional centers. A total of 6,000 boxes of water treatment pills, 2,000 plastic buckets with taps and 9,000 jerry cans were also procured and will be distributed to affected communities and selected health care facilities and schools to improve access to safe water, sanitation and hygiene. UNICEF is also in the process of procuring additional WASH NFIs and Personal Protective Equipment (PPE) as part of an upcoming ECHO funded response to COVID-19 in 5 Luanda Municipalities. The NFIs will be used to support Infection Protection and Control (IPC) in a total of 49 Health Care Facilities,15 Schools, 4 markets and other key institutions. The ECHO funded project will target a total of 655,749 people in Luanda.

**Education**

UNICEF’s education intervention seeks to provide quality education to 25,000 children and community-based early childhood development (ECD) to 450 children most affected by drought. UNICEF continues to work closely with the provincial and municipal education authorities to support the implementation of the Safe Haven Initiative in 10 school communities in Ombandja Municipality of Cunene province. The community based ECD approach TUPPI was initiated in Safe Haven communities with full support from all levels of government. The programme trained an initial 41 TUPPI (Todos Unidos Pela Primeira Infância) facilitators in a three-day training, of which 24 were selected to participate as facilitators in their neighborhoods. A refresher training on TUPPI methodology is planned for early November 2020,

---

9WASH has overachieved on this indicator due to government’s support with additional water hauling trucks for water distribution in targeted areas. UNICEF provided fuel through local arrangements.

4 https://www.rural-water-supply.net/en/implementation/proprietary-handpumps/volanta

5 https://www.unicef.org/angola/saneamento-total-liderado-pela-comunidade
which will facilitate the launch of community development and support activities for caregivers. These activities will be supported with the provision of ten ECD kits.

In early October 2020, refresher trainings on multi-class teaching were implemented in Ombadja in preparation for the full reopening of schools by October 26. The trainings built the capacity of three provincial education staff (2 females), 14 directors (6 female), 64 teachers (44 female), and 28 members of parents’ committees (24 females). Further support to the return to school was implemented through the provision eight school tents, which will function as temporary learning spaces. Moreover, and addition 11 tents will be provided to the Safe Haven and surrounding schools in the coming months. In addition, each Safe Haven school will receive a recreational kit and 5,400 individual learner kits will be distributed students in Safe Have and neighbouring schools. An additional 7,600 individual learner kits will be distributed to students in Cunene, Huila, Namibe and Cuando Cubango. In order to support access to education by children affected by emergencies, UNICEF conducted a training of trainers on education in emergencies in Huila, through which 30 trainers and 448 teachers were capacitated, which will benefit an estimated 18,000 students once schools reopen.

**Child Protection**

ACO Child Protection interventions helped mainstream quality case management and continuity of care, reaching children and women with prevention and risk mitigation measures of gender-based violence. UNICEF facilitated the training of birth registration brigades, resulting in the registration of 4,128 people in Cunene province, among them 3,403 children (1,676 boys and 1,716 girls). Birth registration services continue to be operational despite government lockdown, with control measures to mitigate the risks of Covid-19. In the province, the process of massification of registration continues, albeit with limited funds.

UNICEF continues to provide technical support to *Instituto Nacional da Criança* (INAC) for the development of Standard Operating Procedures for Family Tracing and Reunification and Alternative Care/Foster Care. The *Encontro Nacional sobre Procedimentos Administrativos e Judiciais para Adopção de Crianças* was convened on 25 September. The initiative, led by INAC, counted with UNICEF technical assistance and aimed to foster discussion around the adoption in the Angolan context (including intercountry adoption), with the participation of the Judiciary, Social Welfare and the Ministry of Justice and Human Rights. Training of Trainers (30 trainees) for national police on Child Protection has been delivered as per official request issued by Huila Provincial Government in sequence to allegations of several cases of abuse of authority by national police in the application of the COVID-19 restrictions. The training has been delivered on Tuesday 15th September and Wednesday 16th September, and it counted on technical support provided by National Institute for Children – INAC (national level), National Directorate for the Administration of Justice – DNAJ (Ministry of Justice and Human Rights) and UNICEF.

UNICEF has been supporting the Ministry of Justice and Human Rights in the development of this innovative one-stop-shop model for Justice for Children, from conceptualization to operationalization in four Provinces (Huila, Mexico, Luanda and Malanje). UNHCR, IOM and UNICEF have joined efforts and presented a Concept Note on Managing Mixed Migration Flows on a Protection-Sensitive Manner for the 2020 call of the United Nations Trust Fund on Human Security. The proposal is aimed at developing capacity of government and civil society on receiving, protecting and assisting mixed migration flows; while also ensuring those on the move remain well-informed and empowered to claim their rights. The proposed project also includes advocacy, technical assistance and financial support for the establishment of a National Mixed Migration Task Force; the adoption of nationwide referral mechanisms; as well as support to the Ministry of Interior’s Academic Center by means of trainings of trainers and the publication of a joint manual on management of mixed flows under a protection-approach. The proposal focuses on six target provinces, with emphasis on Cunene, Mexico, Lunda Norte and Luanda.

Regional trainings were established with INAC to address humanitarian and emergency contexts to be implemented in October and November. The training will be by regions: (1) Cunene, Huila and Namibe (2) Mexico and Kuando Kubango and (3) Lunda Norte and Luanda. Furthermore, UNICEF supported INAC on the implementation of a national hotline for reporting violence against children, SOS Criança, launched on 16 June. Support from UNICEF included training of frontline service providers and technical support to enhance coordination between national, provincial and municipal levels. There has been an immediate uptake of this new service, the hotline having received 9,805 reports during the first month. However, the number of calls has been increasing. From June 16 to September 30, the SOS hotline service received 401,598 calls. Of these, 75,804 received special attention and were referred to child protection services at the municipal level. Currently, UNICEF is supporting INAC in development of a comprehensive child protection protocol, to enhance the existing referral system by introducing different emergency scenarios the country may face, detailing roles and responsibilities, to be presented on 2 November.
Communication for Development (C4D), Community Engagement & Accountability

Following a partnership with ADRA and World Vision, UNICEF has reached 17,365 people (6,812 males and 10,553 females) with lifesaving and integrated key messages on nutrition, WASH, health, and child protection in selected municipalities of the provinces of Cunene and Huila during the period of August and September 2020. They were reached through multiple communication channels such as social mobilizers who have been trained and deployed to promote key positive practices. In order to optimize the impact of communication activities conducted by the social mobilizers, they were equipped with “Serial albums” which are contextualized, attractive and user-friendly printed materials containing nutritional and hygiene and sanitation key messages as well as megaphones. Local leaders have also been mobilized and involved in the promotion of key behaviours around nutrition, hygiene and sanitation at the community level. During Covid-19 times where there is a need to minimize close contact and observe safety measures such as social distancing, another approach has been also developed by conducting social mobilization activities through cars and motorbikes equipped with sound system. From January to September, 5,609,103 people have been reached in total with key lifesaving and behaviour messages in the targeted municipalities.

Humanitarian Leadership, Coordination and Strategy

ACO humanitarian leadership focuses on supporting harmonized interventions to humanitarian action through integrated programmatic actions on nutrition, health, water, sanitation, hygiene, education, child protection and communication for development. While there is no formal cluster system in Angola, UNICEF leads on sectoral interventions in WASH, nutrition and education and co-leads with WHO for health. UNICEF co-leads in child protection with UNHCR under the refugee response and UNFPA for the drought emergency response. Disaster management coordination happens at central level, under the leadership of the Civil Protection and with significant jurisdiction of the Ministry of the Interior. Coordination also happens at the UN level, through the disaster management team (DMT) chaired by WHO, the UNCT and at decentralized level with provincial governments, Civil Protection and the line provincial directorates. While continued efforts and coordination improvements are noticeable, coordination challenges remain, particularly in relation to the articulation of the different levels of government and partners (central and provincial) and within the UN community as well.

Human Interest Stories and External Media

Community screening save lives of malnourished children in Southern Angola

In September 2019, little Kuleny was admitted to the Caculuvale Health Center and showed signs of malnutrition. “She had a swollen body, her face and feet too, she didn’t eat” Says Kuleny's grandmother, Maria da Conceição.

In December 2019, Nilifa, who was just 1 year old, also entered the same centre, shortly after his mother's death, he was struggling to survive with the help of his 13-year-old sister and his grandmother.

5-year-old Kuleny and 1-year-old Nilifa, live in the village Oifidi, municipality of Cuanhama, about 20 kilometres from the centre of Ondjiva, Cunene Province. The village whose livelihood is livestock and the countryside has been severely affected by the scarcity of water which led to the worsening of the nutritional situation.

These children’s lives were in danger if it were not for the intervention of the agents responsible for the search for malnutrition cases in the community. The two children were identified by Maria Mwanheguange, a local Community Agent, during searches carried out under the program supported by UNICEF and implemented by the NGO World Vision, in the province of Cunene and other provinces in southern Angola.
The Outpatient Therapeutic Program for Patients with Malnutrition supported by UNICEF and implemented by the local Government aimed at children with severe Acute Malnutrition, like Nilifa and Kuleny. It has a strong involvement of the local community to ensure the early identification of children malnourished, their quick referral to a health unit, follow-up and subsequent follow-up at home. This is the job of Maria and more than 700 community agents trained with the support of UNICEF.

Maria, a 48-year-old peasant woman, goes out at least 3 times a week to monitor the approximately 12 children under her supervision and others who are in her jurisdiction.

One of its main working instruments is a simple plastic tape that measures the circumference of the child's forearm. "We always do the measurement on the children's arms. If the ribbon marks red it is a danger sign, we send it to the centre". Says Maria.

"When we first measured Nilifa and Kuleny, they were in the red area and that is why we sent the Caculuvale Health Center where they were attended by nurses". The community agent said.
"At the hospital we were well received, and they gave us the porridge for the child”, says Nilifa's grandmother, referring to the packages of Plumpy nut or also known as the Ready-to-Eat Therapeutic Product. It is a paste made of peanuts with enough calories, vitamins and minerals that contribute to the child's rapid recovery.

“They gave us about 20 packages to give the child,” says Kuleny's grandmother, who goes to the health centre weekly to pick up the amount needed for her granddaughter.

It took about 5 months for Kuleny’s situation to start to improve. "Now she is already playing, she is already singing and even her hair is already big", says the grandmother, happy with the recovery of her granddaughter, who should continue to receive monitoring from the Health Unit, community agents, and periodically eat the nutritional supplement.

Nilifa after 3 months of follow-up has fully recovered and no longer needs to continue consuming the nutritional supplement. The challenge now is to ensure his diet because, as the grandmother says, despite the rain has started in the region, they still do not have enough food for the family, and the diet is based on corn and pasta.
The two children thus enter the group of more than 7,873 children with severe acute malnutrition and referred for treatment in 28 units and 210 treatment programmes located in the municipalities targeted by UNICEF and partner interventions.

UNICEF developed a package of nutrition interventions aiming at strengthening the quality of health care provided by service providers and building resilience of local communities through integrated programmes with health, WASH and food security sectors, particularly in drought-affected areas of Huila, Cunene, Bié and Namibe provinces.

Stories:
- https://www.unicef.org/angola/historias/rastreio-na-comunidade-ajuda-salvar-vidas-de-crian%C3%A7as-desnutridas-no-sul-de-angola
- https://www.unicef.org/angola/comunicados-de-imprensa/unicef-apoia-o-combate-%C3%A0-desnutri%C3%A7%C3%A7%C3%A7%C3%A3o-nas-prov%C3%ADncias-afectadas-pela-seca
- https://www.unicef.org/angola/historias/lan%C3%A7ado-em-luanda-programa-de-transfer%C3%A7%C3%A3o-monet%C3%A1rias-para-reduzir-o-impacto-da-covid
- https://www.youtube.com/watch?v=8n10UsN18eM

External Media
- https://www.unicef.org/angola/comunicados-de-imprensa/unicef-disponibiliza-bens-e-assistencia-%C3%A9tnica-para-apoiar-respostas-a-desnutri%C3%A7%C3%A3o
- https://vanguarda.co.ao/politica/japao-apoia-unicef-a-combater-subnutricao-no-cunene-FL872564
- https://governo.gov.ao/pt_noticias/transferencias-monetarias-aumentam-as-condicoes-de-vida-de-milionarios-de-criancas/2020/7/20/transferencias-monetarias-aumentam-as-condicoes-de-vida-de-milionarios-de-criancas.html
- https://gov Angola.ao/pt_noticias/transferencias-monetarias-aumentam-as-condicoes-de-vida-de-milionarios-de-criancas/2020/7/20/transferencias-monetarias-aumentam-as-condicoes-de-vida-de-milionarios-de-criancas.html
- https://government.gov.ao/pt_noticias/transferencias-monetarias-aumentam-as-condicoes-de-vida-de-milionarios-de-criancas/2020/7/20/transferencias-monetarias-aumentam-as-condicoes-de-vida-de-milionarios-de-criancas.html
- https://gov Angola.ao/pt_noticias/transferencias-monetarias-aumentam-as-condicoes-de-vida-de-milionarios-de-criancas/2020/7/20/transferencias-monetarias-aumentam-as-condicoes-de-vida-de-milionarios-de-criancas.html
- https://government.gov.ao/pt_noticias/transferencias-monetarias-aumentam-as-condicoes-de-vida-de-milionarios-de-criancas/2020/7/20/transferencias-monetarias-aumentam-as-condicoes-de-vida-de-milionarios-de-criancas.html
- https://government.gov.ao/pt_noticias/transferencias-monetarias-aumentam-as-condicoes-de-vida-de-milionarios-de-criancas/2020/7/20/transferencias-monetarias-aumentam-as-condicoes-de-vida-de-milionarios-de-criancas.html
- https://government.gov.ao/pt_noticias/transferencias-monetarias-aumentam-as-condicoes-de-vida-de-milionarios-de-criancas/2020/7/20/transferencias-monetarias-aumentam-as-condicoes-de-vida-de-milionarios-de-criancas.html
- https://government.gov.ao/pt_noticias/transferencias-monetarias-aumentam-as-condicoes-de-vida-de-milionarios-de-criancas/2020/7/20/transferencias-monetarias-aumentam-as-condicoes-de-vida-de-milionarios-de-criancas.html
- https://government.gov.ao/pt_noticias/transferencias-monetarias-aumentam-as-condicoes-de-vida-de-milionarios-de-criancas/2020/7/20/transferencias-monetarias-aumentam-as-condicoes-de-vida-de-milionarios-de-criancas.html
- https://government.gov.ao/pt_noticias/transferencias-monetarias-aumentam-as-condicoes-de-vida-de-milionarios-de-criancas/2020/7/20/transferencias-monetarias-aumentam-as-condicoes-de-vida-de-milionarios-de-criancas.html
- https://government.gov.ao/pt_noticias/transferencias-monetarias-aumentam-as-condicoes-de-vida-de-milionarios-de-criancas/2020/7/20/transferencias-monetarias-aumentam-as-condicoes-de-vida-de-milionarios-de-criancas.html

Pic. 5 – Nilifa is already recovered after almost 3 months of treatment, he can now play and enjoy his childhood.
Next SitRep: 15 January 2021

UNICEF Angola: [https://www.unicef.org/angola](https://www.unicef.org/angola)

Who to contact for further information:

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>UNICEF Angola</th>
<th>Tel:</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ivan Yerovi</td>
<td>Representative</td>
<td>UNICEF Angola</td>
<td>+244 226 430 870</td>
<td><a href="mailto:iyerovi@unicef.org">iyerovi@unicef.org</a></td>
</tr>
<tr>
<td>Tito Bonde</td>
<td>Emergency Specialist</td>
<td>UNICEF Angola</td>
<td>+244 936 780 647</td>
<td><a href="mailto:tbonde@unicef.org">tbonde@unicef.org</a></td>
</tr>
<tr>
<td>Atul Kumar</td>
<td>Chief of Communication</td>
<td>UNICEF Angola</td>
<td>+244 927 666 070</td>
<td><a href="mailto:akumar@unicef.org">akumar@unicef.org</a></td>
</tr>
</tbody>
</table>
### Summary of Programme Results

<table>
<thead>
<tr>
<th>UNICEF and Implementing Partners Response</th>
<th>2020 Target</th>
<th>Total Results</th>
<th>Change since last report ▲▼</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>NUTRITION</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children under 5 years in humanitarian situations screened for malnutrition</td>
<td>379,907</td>
<td>266,739</td>
<td>▲</td>
</tr>
<tr>
<td>Children aged 6 to 59 months with severe acute malnutrition in humanitarian situations admitted into therapeutic treatment programmes</td>
<td>189,974</td>
<td>23,829</td>
<td>▲</td>
</tr>
<tr>
<td>Caregivers of children aged 0 to 59 months accessing counselling on early detection of malnutrition signs, positive infant and young child feeding and preventative health and hygiene practices</td>
<td>100,000</td>
<td>28,175</td>
<td>▲</td>
</tr>
<tr>
<td><strong>HEALTH</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children aged 0 to 59 months vaccinated against measles</td>
<td>100,000</td>
<td>21,298*</td>
<td>▲</td>
</tr>
<tr>
<td>Children aged 0 to 59 months vaccinated against Polio</td>
<td>150,000</td>
<td>3,923,505^</td>
<td>▲</td>
</tr>
<tr>
<td>Children aged 0 to 59 months with acute diarrhea received treatment</td>
<td>500</td>
<td>0^</td>
<td>▲</td>
</tr>
<tr>
<td>Women and children under 5 years accessing essential maternal and child health services</td>
<td>2,000</td>
<td>0^</td>
<td>▲</td>
</tr>
<tr>
<td><strong>WATER, SANITATION &amp; HYGIENE</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>People accessing the agreed quantity of water for drinking, cooking and personal hygiene</td>
<td>300,000</td>
<td>350,396*</td>
<td>▲</td>
</tr>
<tr>
<td>People reached with key messages on hygiene practices through face-to-face approaches</td>
<td>500,000</td>
<td>586,459*</td>
<td>▲</td>
</tr>
<tr>
<td>People accessing appropriate sanitation facilities.</td>
<td>150,000</td>
<td>187,512*</td>
<td>▲</td>
</tr>
<tr>
<td><strong>CHILD PROTECTION</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women and children reached with gender-based violence prevention and response interventions</td>
<td>1,300</td>
<td>9,805</td>
<td>▲</td>
</tr>
<tr>
<td>Unaccompanied and separated children identified and receiving protection services, including family tracing and reunification and placement in alternative care arrangements</td>
<td>600</td>
<td>190</td>
<td>▲</td>
</tr>
<tr>
<td><strong>EDUCATION</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children affected by emergencies accessing formal or non-formal primary education</td>
<td>25,000</td>
<td>5,305</td>
<td>▲</td>
</tr>
<tr>
<td>Children aged 0-5 years accessing community based early childhood development (ECD) interventions</td>
<td>450</td>
<td>0^</td>
<td>▲</td>
</tr>
</tbody>
</table>

---

*ACO supported emergency response to measles outbreaks in districts with confirmed Measles outbreaks.
*Both, behavior change, and polio results have exceeded planned target. This is partly because of the polio outbreak and higher number of people reached either through C4D or polio vaccination campaign.
*ACO did not support any emergency response to acute diarrhea in emergency.
*ACO did not support any emergency response including essential maternal and child health service package outside COVID-19 response.
*There are no new results to report for the month of September. WASH Section is planning new partnerships for the coming months to implement a new ECHO grant as well as agreed Cost extension activities of the BFA project.
*ACO has trained 41 TUPPI facilitators who will support the implementation of the ECD activities. Implementation was scheduled for March 2020 however, due to COVID-19 imposed lockdown, activities have been halted.
| People reached with key lifesaving and behaviour change messages on health, nutrition, water, sanitation, hygiene, child protection, including polio preventive measures through face-to-face approaches | 700,000 | 5,609,103\(^{14}\) |
## Annex B

### Funding Status\(^\text{15}\)

<table>
<thead>
<tr>
<th>Sector</th>
<th>Requirements</th>
<th>Funds available</th>
<th>Funding gap</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Received Current Year</td>
<td>Carry-Over</td>
</tr>
<tr>
<td>Nutrition</td>
<td>7,100,000</td>
<td>2,197,006</td>
<td>207,299</td>
</tr>
<tr>
<td>Health(^\text{16})</td>
<td>1,200,000</td>
<td>110,525</td>
<td>0</td>
</tr>
<tr>
<td>WASH</td>
<td>4,900,000</td>
<td>330,978</td>
<td>307,732</td>
</tr>
<tr>
<td>Child Protection</td>
<td>450,000</td>
<td>167,499</td>
<td>0</td>
</tr>
<tr>
<td>Education</td>
<td>1,800,000</td>
<td>268,724</td>
<td>8,634</td>
</tr>
<tr>
<td>C4D</td>
<td>350,000</td>
<td>365,580</td>
<td>69,974</td>
</tr>
<tr>
<td>PME/COMMS/Ops(^\text{17})</td>
<td>0</td>
<td>0</td>
<td>24,897</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>15,800,000</strong></td>
<td><strong>3,440,312</strong></td>
<td><strong>618,536</strong></td>
</tr>
</tbody>
</table>

\(^\text{15}\)Funding available includes funds received in 2020 and $618,536 carry forward from 2029

\(^\text{16}\) Health and C4D received significant ORR funds, a total of $5,352,440 ($2,248,109, $2,081,915, $681,531 and $340,884 respectively) to support Polio vaccination campaign.

\(^\text{17}\)No stand-alone funding requirements had been calculated. Therefore, carry forward amount is based on funding allocation made by programme sections to support PME, Comms and Operations.