**UNICEF’s Response and Funding Status**

<table>
<thead>
<tr>
<th>Sector</th>
<th>Tabulation</th>
<th>Funding Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health</td>
<td>Measles vaccination</td>
<td>19%</td>
</tr>
<tr>
<td>Nutrition</td>
<td>SAM admissions</td>
<td>12%</td>
</tr>
<tr>
<td>Child Protection</td>
<td>MHPSS access</td>
<td>19%</td>
</tr>
<tr>
<td>Education</td>
<td>Education access</td>
<td>22%</td>
</tr>
<tr>
<td>WASH</td>
<td>Safe water access</td>
<td>36%</td>
</tr>
<tr>
<td>Cash Transfer</td>
<td>SP cash transfer access</td>
<td>49%</td>
</tr>
</tbody>
</table>

**Highlights**

- The number of people displaced in Kayin, Kachin, Chin and Kayah has increased with the intensification of armed clashes between the Myanmar Armed Forces and ethnic armed organizations. A wave of improvised explosive device explosions has occurred resulting in the death of a 10 year old child and the injury of another child.
- A total of 54 children (47 boys, 7 girls) have been killed by security forces since the military takeover. Around 1,000 children and young people have been detained, although many of these have now been released.
- UNICEF and partners provided education on explosive weapons-related risk to 13,948 people.
- UNICEF conducted a rapid need assessment (RNA) in Mindat township, Chin State, which will provide data for advocacy, coordination, fundraising, and appropriate allocation of response funds.
- The humanitarian community is working on an Interim Emergency Response Plan for Urban Areas, which will constitute an Addendum to the 2021 Myanmar Humanitarian Response Plan.

**UNICEF Appeal 2021**

US$ 61.7 million

**Funding Status (in US$)**

- Funds received: $4.7 M
- Carry-forward: $7.3 M
- Funding gap: $49.6 M

**Situation in Numbers**

- 455,000 children in need of humanitarian assistance (HAC 2021)
- 1,000,000 people in need (HNO 2021)
- 336,000 internally displaced people (IDPs) (HNO 2021)
- 812 people killed including 54 children (As of 21 May 2021)
Funding Overview and Partnerships

UNICEF is appealing for US $61.7 million to support 424,000 people, including 224,000 children, to access essential basic services in water, sanitation and hygiene (WASH), nutrition, health, education, child protection, social protection and to improve hygiene practices to prevent COVID-19 infection.

These figures however reflect pre-February 2021 needs. The humanitarian needs in Myanmar have since increased due to the deteriorating situation across the country and reduced access to basic services due to the security situation, ongoing protests and agencies being forced to turn to costly alternatives in programme implementation. To date, a total of US$ 12 million has been received towards the UNICEF Myanmar 2021 Humanitarian Action for Children (HAC) appeal, including US$ 7.3 million from funding received in 2020 and US$ 4.7 million received from donors in 2021, including Denmark, ECHO, Japan, USA and OCHA. UNICEF expresses our sincere appreciation for the generous contributions of donors supporting this joint effort to respond to and mitigate the impacts on children due to the escalating humanitarian crisis in Myanmar.

Situation Overview & Humanitarian Needs

During the reporting period, there has been intensified fighting between Myanmar Armed Forces and ethnic armed organizations, particularly in Kachin, Kayin, northern Shan, Chin and Kayah states has resulted in the internal displacement of a total of 120,900 people (85,900 people displaced in the southeast, 15,000 people displaced in northern Shan, 10,000 people displaced in Kayin and 10,000 people hosted in sites on Chin state and Magway region) since February 2021 (UNOCHA). A wave of explosions of improvised explosive devices and other explosive devices have occurred in the vicinity of government facilities, schools, banks and other locations across the country.

On 14 May 2021, the State Administrative Council, the de-facto governing body of Myanmar, issued an order extending martial law in Mindat township, Chin state. Reports suggest that, in response to this development, numerous members of local communities fled to seek temporary refuge in churches, community spaces, forests and other surrounding locations. As of 21 May 2021, approximately 9,000-10,000 people had been displaced in Mindat township, Chin state and around 26,865 people had been displaced in Kayah state due to fighting.

Supplies are urgently required by affected populations include essential medicines, first-aid kits, shelters, non-food items (NFIs), foods and hygiene and sanitation items. Humanitarian access to these areas is challenging due to movement restrictions, insecurity and, in some areas, a lack of active implementing partners on the ground. Road access to affected areas is also unpredictable.

Summary Analysis of Programme Response

Nutrition

UNICEF partners in Rakhine reported that a total of 13,986 children under five years old and 3,965 pregnant and lactating women (PLW) were reached with preventive nutrition services in April. A further 255 children with severe acute malnutrition (SAM) were treated in the same month. In Kachin, UNICEF partners reached 161 PLW with multiple micronutrient supplementation.

UNICEF in partnership with World Vision International (WVI), Save the Children (SCI) and Terre Des Hommes (TDH) expanded the delivery of essential nutrition services to children under five years old and pregnant and lactating women (PLW) in Yangon and Rakhine. Nutrition supplies including multiple micronutrient powder (74,260 packages), multiple micronutrient tablets (1,384 packages), Vitamin A supplements (70 packages), ready to use therapeutic food (RUTF) (486 cartons), amoxicillin (69 packages), anthropometric equipment (26 sets) and nutrition bowls and posters (1,495 sets) were distributed. These supplies will benefit approximately 18,500 children and nearly 7,600 PLW in conflict-affected and emergency townships. UNICEF has also been coordinating with Première Urgence Internationale (PUI) to support nutrition interventions in 120 villages in Hlaingbwe and Kawkareik townships, Kayin state and an online orientation session for systematic data reporting and monitoring was organized.

Health

During the reporting period a total of 449 children aged between 9-18 months were vaccinated against measles, 5,504 affected people accessed primary health care services and 2,354 people were reached with messaging on COVID-19 prevention and services. Provision of community-based maternal, newborn and child health services was initiated with partners in Hlaing Tha Yar township of Yangon. The UNICEF-supported Bright Start telemedicine initiative is providing health promotion, primary care and treatment service options for children in two areas of Yangon that are currently under martial law (Hlaing Thar Yar and Shwe – Pi Thar). UNICEF has supported capacity building for general practitioners providing consultations in addition to other areas of support for this initiative. In Kayin, efforts are underway with partners
to support 10,000 displaced people, including distribution of basic supplies such as first aid kits and essential medicines. Health kits and other essential items are being deployed in Yangon, Kayin and Chin (Mindat).

**WASH**

Severe disruption to Myanmar’s banking sector and supply chains continue to affect the delivery of WASH services, especially in areas experiencing protracted humanitarian crisis. UNICEF partners are experiencing delays to programme implementation resulting from access restrictions and a lack of access to cash. Challenges are growing as tensions escalate in new areas. In Mindat township in Chin State, for example, an estimated 9,000 people were displaced during the past week.

UNICEF finalised a partnership with Terre des hommes to extend WASH services to an estimated 5,000 families with children under five years old and PLW in Hlaing Thar Yar township in Yangon. In addition, working with WaterAid, UNICEF will provide drinking water to 5,100 households during the summer season. UNICEF is also continuing to support a WASH response for an estimated 10,000 IDPs in Kayin.

In Rakhine, UNICEF partners continue to support the provision of at least 7.5 litres of water per capita per day to a total of 13,440 IDPs in Anauk Ywe Camp and Village and Kyein Nyi Pyin protracted camps in Pauktaw, by means of water boating. A total of 2,976 conflict-affected host community members in Buthidaung and Maungdaw towns were reached with sanitation services through 300 household latrines built through UNICEF partner Community & Family International Services.

According to the Early Warning Alert and Response System, there has been an increase in cases of acute watery diarrhoea since 26 April 2021 in Sittwe and Pauktaw IDP camps in Rakhine. A total of 2,000 cases were reported. To contain the situation, UNICEF has increased the frequency of clinic visits to hotspot camps and provided chlorination of drinking water sources, hygiene promoting activities, and environmental sanitation activities. The State Health Department and Township Medical Officer are monitoring and recording of morbidity cases including possible mortality cases and undertaking active case search and stool testing (cholera test and routine stool examination) and with bilateral results are shared with the frontline health partners.

Working with implementing partners Metta Foundation and Health Poverty Action (HPA), UNICEF supported a humanitarian WASH response providing safe and adequate drinking and domestic water, functional excreta disposal and basic hygiene items to 32 protracted IDP camps in seven townships in northern Shan State, reaching 8,920 people from 1,734 households. As a result of ongoing clashes, 12,641 people have been newly displaced since January. Of these, a total of 5,873 people from 1,474 households in Kyaukme, Hsipaw and Namptu townships remained in new displacement sites. UNICEF, together with WASH partners including ICRC/Myanmar Red Cross Society, supported emergency WASH support including construction of emergency latrines, installation of hand washing stations and provision of critical WASH supplies including hygiene items.

UNICEF, in partnership with HPA, continues to improve access to WASH services in Kachin. Two health care facilities were equipped with functioning water supplies and one healthcare facility was equipped with handwashing facilities and sex-separated functional toilets. UNICEF partner Karen Baptist Convention reached 24,370 people with access to safe sanitation services, 14,928 people with safe water services and 7,612 people with critical WASH supplies. A humanitarian partnership is being established with Karuna Mission Social Solidarity to reach 4,000 new IDPs with lifesaving WASH supplies. UNICEF partners in Kachin reached 21,183 people with COVID prevention and mitigation messages.

**Child Protection**

The escalation in violence across Myanmar has severely impeded the delivery of critical child protection services, hindering humanitarian access to children in need and compromising the safety and security of humanitarian personnel in the field. Facing multiple humanitarian crises across the country, UNICEF has had to readjust service delivery models and broker new alliances with diverse partners at local levels. During the reporting period, UNICEF delivered Mental Health and Psychosocial Support (MHPSS) to 9826 individuals, including 9,273 children (4475 girls, 4798 boys) and 553 parents (322 mothers, 231 fathers). The MHPSS Helpline received an increasing volume of calls, the majority from young people experiencing severe emotional distress. Of these callers, a total of 134 individuals received specialized counselling. Peer group sessions were piloted with 18 girls and 12 boys, teaching them how to cope with acute stress, practice relaxation and make use of breathing and stabilization techniques. These sessions will be expanded based on the positive feedback they have received from participants.

Since the military takeover, UNICEF legal partners have provided legal services to 141 children, 18 per cent of whom were girls, and 212 young people, 26 of whom were girls, who had been charged under Penal Code Section 505 (a) for participating in demonstrations against the de facto authorities. Among these children and young people, 8 children and 16 young people are facing trial in military courts in townships under martial law. UNICEF has convened child
protection case management workers, mental health psychosocial support practitioners and juvenile justice lawyers with
the aim of identifying more effective approaches to integrate case management services, focusing on effective referral
and timely care for children in conflict with the law. Following this meeting, the efficiency of referrals increased, and 20
per cent of children supported by legal aid service providers also received care, including health and medical treatment,
MHPSS, and family reunification services.

Education
The Ministry of Education, operating under the de facto authorities, announced that government schools in Myanmar
will open on 1 June, with enrolment week falling in the last week of May. Preliminary results from community
consultations conducted by Education in Emergencies (EiE) partners indicate that many parents remain unwilling to
send their children to government schools. In some areas, predominantly in Rakhine, there is a greater tendency for
parents to be supportive of school reopening. Reports indicate that many teachers are also unwilling to return to teaching
and this unwillingness has been met with retributive action. For example, In Chin, 66 per cent of teachers were
temporarily removed from staff lists, the highest rate in the country. One quarter of education staff, or 4,412 people,
across six townships in Kayin State, were temporarily dismissed from work due to absence without leave. UNICEF, in
collaboration with non-governmental organizations (NGOs), is working to ensure provision of alternative learning
opportunities for children. In mid-May, UNICEF signed a partnership agreement with Karen Baptist Convention to
support 25,513 children between 3-17 years old in Kayin, Ayeyarwaddy, Bago, Kayah and Tanintharyi for the next 12
months. Discussions with NGOs in other States and Regions continues. UNICEF continues to coordinate and
collaborate with other development partners in the sector to identify and support priority interventions to support
children’s safe learning in Myanmar. UNICEF, together with UNESCO and Save the Children, issued a joint statement
on 20 May calling for safe, appropriate and inclusive opportunities for children in Myanmar to continue their learning.

Social Protection
As part of a global initiative, UNICEF Myanmar has been rolling-out a mobile-based health micro-insurance initiative to
enhance demand from families – particularly those with children and pregnant women – for affordable health services.
As part of this initiative, a pilot to provide emergency health services has been initiated, targeting populations within
informal settlements in Yangon’s Hlaing Tha Yar and Shwe Pi Thar townships, which are currently under Martial Law.
The project aims to provide 10,000 beneficiaries with a package of services including i) health information (health
education material), ii) medical consultations with doctors on call, iii) outpatient referral and iv) cash subsidies to cover
costs for hospitalization. Coverage would last for a period of 12 months.

As reported in the previous Situation Report, the enrolment of beneficiaries for this pilot began on 19 April. After a period
of one month, the project has enrolled more than 1,000 beneficiaries, and is aiming to enrol an additional 3,000 in the
coming month. After enrolment, beneficiaries become immediately eligible to access services. The first cash subsidy
payments was paid in the week beginning 17 May.

Key challenges to the success of this initiatives have included I) the correct identification of beneficiaries: while pre-
evaluations were conducted between December and January, since the military take-over many members of target
communities have either relocated or become unavailable. UNICEF estimates that 70 per cent of pre-enrolled
beneficiaries cannot be reached for actual enrolment; II) ensuring safety and security of staff in project areas, which are
currently under Martial Law; III) weak or non-existent internet connectivity in project areas. The approach of providing
the service through a mobile-based app had to be reviewed and alternative, temporary ICT infrastructure had to be
developed.

Communication for Development (C4D), Accountability to Affected Populations (AAP)
UNICEF has just developed a HAC indicator for AAP this year and has been working to collect information and report
against this indicator. A simple data collection tool to track complaints and feedback from beneficiaries has been
developed. As a first step, UNICEF, working through its field offices, conducted consultations with partners from Kachin,
Rakhine and Chin States, seeking to understand partners’ existing AAP mechanisms. As most partners have their own
organisational accountability mechanisms, UNICEF was able to coordinate with them to obtain information on
complaints and feedbacks related to UNICEF programming, and fed this information into the data collection tool.
UNICEF has recorded 1,519 pieces of feedback from beneficiaries across Rakhine State. UNICEF will continue to
monitor and track feedback across other states in the coming months.
Humanitarian Leadership, Coordination and Strategy

Nutrition Sector Coordination
Nutrition partners have screened around 11,573 children aged 6-59 months and 3,201 PLW for acute malnutrition, resulting in a total of 637 children under five, and 56 PLW being admitted for treatment in Rakhine State. In terms of preventive nutrition services, partners have reached 14,302 children aged 6-59 months and 2,999 PLW in Rakhine, Kachin, and Shan (North). The nutrition sector has established two Technical Working Sub-Groups: (1) IYCF/IMAM and (2) Assessment and Information Management, with the objective of supporting partners to operate, scale-up and deliver life-saving nutrition activities in the evolving humanitarian environment in Myanmar. Some immediate priorities include the carrying out of nutrition-specific rapid assessments and development of training plans for partners.

Child Protection Sub Sector
The Child Protection Sub Sector has been focusing on strengthening evidence-based programming, situation and response monitoring. Data collection tools have been developed and reviewed and training has been carried out. The Emergency Preparedness Plan has been revised in line with developing needs and a contingency plan and capacity development assessment has been conducted as part of this process. Partners have extended resources to respond in new humanitarian areas including Mindat and Kyat with Child Protection kits, awareness raising and case management.

Situation monitoring shows that there is urgent need for CP partners to extend service coverage to new humanitarian locations in South East Myanmar and Chin. While child protection partners with capacity to extend coverage into new humanitarian areas are keen to do so, they lack funding to carry out basic child protection interventions including awareness raising for prevention and response of child protection violations, case management for children without appropriate care including in cases of gender-based violence, strengthening community response for prevention and response and MHPSS interventions.

Education in Emergency Sector
An additional 8,000 children were reached with home-based learning materials in 2021, bringing the total reached by the EiE sector to over 30,000 children. Home-based learning remains an important measure to continue engagement of children in learning – especially important for already disadvantaged children affected by conflict and crisis.

EiE partners have conducted consultations with communities across eight states and regions to develop more in depth understanding of support needs for continuity of children’s learning. The EiE Sector is conducting harmonized consultations with communities to understand the support they require for children to continue learning. Initial findings indicate that requests for support to learn within education spaces or at home vary widely by location.

WASH cluster
The WASH Cluster leads discussions on progress for WASH Myanmar Humanitarian Fund (MHF) envelope with US $1.75 M including US $350,000 being prioritised to the response in the southeast.

Most WASH partners are still facing cash shortages and banking challenges and could not be fully supported to conduct WASH activities, with the exception of life-saving activities. Cash shortages are predicted to affect planned water scarcity mitigation measures for the current season and next year, including the rehabilitation of ponds to reduce infiltration and increase safety, most of which must take place during water scarcity periods when ponds are dry. These rehabilitations and improvements are planned by several organizations working in Sittwe and Pauktaw, and Solidarity International is continuing to coordinate with them to identify suitable solutions.

Since February, WASH partners have continued to face challenges around obtaining travel authorizations (TA). In some cases, MoU recommendation letters have not been approved at Union level, while application at State level has not been possible. Some TAs have been delayed at State level due to state level council members being out of office.

Human Interest Stories and External Media

UNICEF Myanmar Press Releases:

Twitter Posts:
https://twitter.com/UnicefMyanmar/status/1388025478037004289
https://twitter.com/UnicefMyanmar/status/1389475041658683392
https://twitter.com/UnicefMyanmar/status/1390124246597349380
https://twitter.com/UnicefMyanmar/status/1390544941957500928
https://twitter.com/UnicefMyanmar/status/1392011708827377664
https://twitter.com/UnicefMyanmar/status/1392095319895154700
https://twitter.com/UnicefMyanmar/status/1392374237827145729
https://twitter.com/UnicefMyanmar/status/1393096905886928896
https://twitter.com/UnicefMyanmar/status/139309817387161600
https://twitter.com/UnicefMyanmar/status/1394204164649930753
https://twitter.com/UnicefMyanmar/status/1395045519827914758
https://twitter.com/UnicefMyanmar/status/1395618156979314690
https://twitter.com/UnicefMyanmar/status/1395746170249433092

Facebook Posts:
https://www.facebook.com/unicefmyanmar/photos/a.416623888405142/4101257099941784/
https://www.facebook.com/unicefmyanmar/photos/a.416623888405142/41121915255515008/
https://www.facebook.com/unicefmyanmar/photos/a.416623888405142/4121085734625587/
https://www.facebook.com/unicefmyanmar/photos/a.416623888405142/4133586230042204/
https://www.facebook.com/unicefmyanmar/posts/4134256223308538
https://www.facebook.com/unicefmyanmar/photos/a.416623888405142/413661933072967/
https://www.facebook.com/unicefmyanmar/posts/4142637142470446
https://www.facebook.com/unicefmyanmar/photos/a.416623888405142/4142754599125367/
https://www.facebook.com/unicefmyanmar/posts/4151946184872875
https://www.facebook.com/unicefmyanmar/posts/4161081920625966
https://www.facebook.com/unicefmyanmar/posts/4162391550495005
https://www.facebook.com/unicefmyanmar/photos/a.416623888405142/4164187780315382/
https://www.facebook.com/unicefmyanmar/photos/a.416623888405142/4165223760211784/
https://www.facebook.com/unicefmyanmar/posts/4165263893541104
https://www.facebook.com/unicefmyanmar/posts/4176813795719447
https://www.facebook.com/unicefmyanmar/posts/4179545438779616

Next SitRep: 28 June 2021

UNICEF Myanmar: https://www.unicef.org/myanmar/
UNICEF Myanmar Facebook: https://www.facebook.com/unicefmyanmar/

Whom to contact for further information:

**Alessandra Dentice**
Deputy Representative
Myanmar Country Office
Tel: (+95) 9405149612
Email: adentice@unicef.org

**Gisele Rutayisire**
Emergency Specialist
Myanmar Country Office
Tel: (+95) 9765491705
Email: grutayisire@unicef.org
Annex A:
Summary of Programme Results

<table>
<thead>
<tr>
<th>INDICATOR</th>
<th>UNICEF and IPs</th>
<th>Cluster Response</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2021 Targets</td>
<td>Total Results</td>
</tr>
<tr>
<td>NUTRITION</td>
<td></td>
<td></td>
</tr>
<tr>
<td># children aged 6-59 months with SAM admitted for treatment</td>
<td>15,406</td>
<td>857</td>
</tr>
<tr>
<td># children 6-59 months receiving multiple micronutrient powders</td>
<td>165,253</td>
<td>14,640</td>
</tr>
<tr>
<td># pregnant women receiving micronutrient supplementation</td>
<td>96,442</td>
<td>9,027</td>
</tr>
<tr>
<td># of pregnant or breastfeeding women receiving IYCF counselling</td>
<td>78,487</td>
<td>4,769</td>
</tr>
<tr>
<td># of caregivers of children (0-23 months) reached with messages on breastfeeding in the context of COVID-19</td>
<td>95,057</td>
<td>0</td>
</tr>
<tr>
<td>HEALTH</td>
<td></td>
<td></td>
</tr>
<tr>
<td># children 9 to 18 months vaccinated against measles</td>
<td>17,000</td>
<td>1,209</td>
</tr>
<tr>
<td># affected population accessing primary health care services</td>
<td>137,000</td>
<td>18,791</td>
</tr>
<tr>
<td># people reached through messaging on prevention and access to services (COVID)</td>
<td>105,000</td>
<td>22,099</td>
</tr>
<tr>
<td>WATER, SANITATION AND HYGIENE PROMOTION</td>
<td></td>
<td></td>
</tr>
<tr>
<td># people accessing a sufficient quantity of safe water for drinking, cooking and personal hygiene</td>
<td>303,500</td>
<td>109,394</td>
</tr>
<tr>
<td># people accessing appropriately designed and managed latrines</td>
<td>98,500</td>
<td>57,910</td>
</tr>
<tr>
<td># people reached with critical WASH supplies (including hygiene items) and services</td>
<td>423,500</td>
<td>125,004</td>
</tr>
<tr>
<td># children accessing appropriate WASH facilities and hygiene services in learning facilities and safe spaces</td>
<td>235,500</td>
<td>581</td>
</tr>
<tr>
<td># people reached with handwashing behavior-change programmes (COVID)</td>
<td>70,000</td>
<td>128,917</td>
</tr>
<tr>
<td>CHILD PROTECTION</td>
<td></td>
<td></td>
</tr>
<tr>
<td># children and caregivers accessing mental health and psychosocial support</td>
<td>135,000</td>
<td>25,389</td>
</tr>
<tr>
<td># women, girls and boys accessing GBV risk mitigation, prevention or response interventions</td>
<td>33,000</td>
<td>2,954</td>
</tr>
<tr>
<td># people with access to safe channels to report sexual exploitation and abuse</td>
<td>42,800</td>
<td>0</td>
</tr>
<tr>
<td># of girls and boys who have experienced violence reached by health, social work or justice/law enforcement services (adapted for delivery during the pandemic) [COVID]</td>
<td>n/a*</td>
<td>197</td>
</tr>
<tr>
<td># people accessing explosive weapons-related risk education</td>
<td>80,500</td>
<td>13,948</td>
</tr>
<tr>
<td>EDUCATION</td>
<td></td>
<td></td>
</tr>
<tr>
<td># of targeted girls and boys (3-10) supported to access quality and inclusive pre-primary/primary learning opportunities</td>
<td>25,800</td>
<td>17,013</td>
</tr>
<tr>
<td># of targeted adolescent girls and boys (11-17) supported to access quality and inclusive post-primary learning opportunities</td>
<td>6,500</td>
<td>5,327</td>
</tr>
<tr>
<td># of 3-17 years children who received learning materials to support access to education</td>
<td>21,800</td>
<td>2,125</td>
</tr>
<tr>
<td># of volunteer teachers/facilitators who have completed trainings to provide quality and inclusive education to children</td>
<td>860</td>
<td>230</td>
</tr>
</tbody>
</table>
**Annex B**

**Funding Status**

<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 Year 2021</td>
<td>Carry-Over</td>
</tr>
<tr>
<td>Nutrition</td>
<td>$11,908,936</td>
<td>$88,120</td>
<td>$1,364,812</td>
</tr>
<tr>
<td>Health</td>
<td>$6,062,000</td>
<td>$881,200</td>
<td>$1,088,757</td>
</tr>
<tr>
<td>WASH</td>
<td>$13,725,000</td>
<td>$181,278</td>
<td>$1,710,652</td>
</tr>
<tr>
<td>Child Protection</td>
<td>$13,000,000</td>
<td>$1,338,866</td>
<td>$1,500,303</td>
</tr>
<tr>
<td>Education</td>
<td>$3163015</td>
<td>$2,954,916</td>
<td>$1,428,272</td>
</tr>
<tr>
<td>Social Protection and Cash Transfer</td>
<td>$11,500,000</td>
<td>$0</td>
<td>$29,377</td>
</tr>
<tr>
<td>EmU (RRM and Cluster coordination)</td>
<td>$2,375,000</td>
<td>$51,403</td>
<td>$212,685</td>
</tr>
<tr>
<td>Total</td>
<td>$ 61,733,951</td>
<td>$ 4,702,703</td>
<td>$ 7,334,859</td>
</tr>
</tbody>
</table>

*No target is set for children reach by case managers. 100% of reported cases should be responded to*