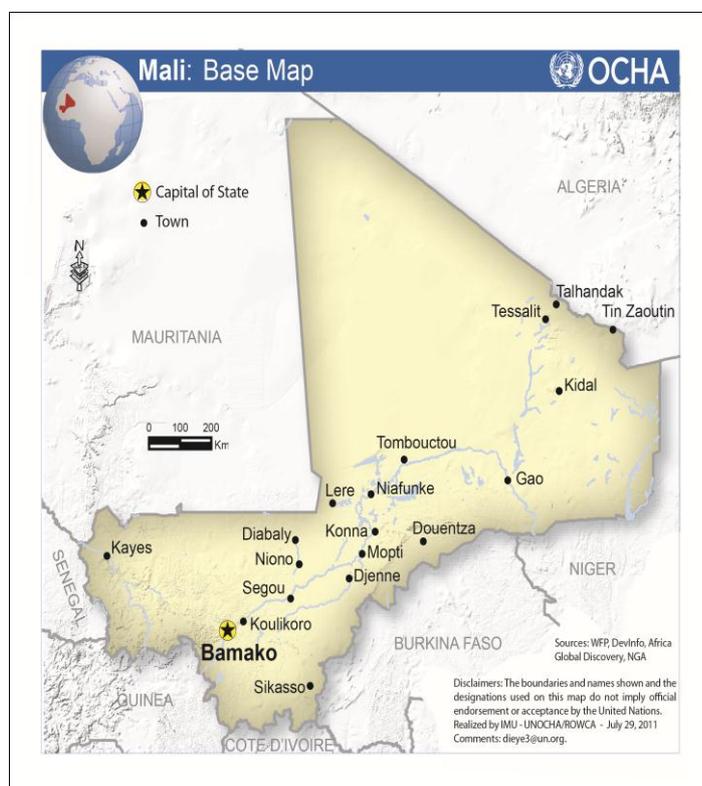




This report is produced by OCHA Mali in collaboration with humanitarian partners. It was issued by OCHA Mali. It covers the period from 27 February to 15 March 2013. The next report will be issued on or around 27 March.

## Highlights

- Despite improvements in humanitarian access, insecurity in the north remains a challenge. Security incidents, including acts of affecting civilians, continue to be reported. On 7 March, four civilians were killed in Timbuktu by armed men allegedly part of an armed group.
- New displacements continue to be observed. Approximately 3,500 people have been internally displaced persons (IDPs) over the last several weeks around Talhandak (Kidal region). Assessments conducted on site in late February and March reveal urgent needs in food, water and sanitation.
- As of 15 March, internally displaced persons (IDPs) were estimated at 270,765. Malian refugees in neighbouring countries are estimated at 176,777, including 75,019 in Mauritania; 53,841 in Niger; and 47,871 in Burkina Faso.
- About \$152 million is needed to respond to identified priority humanitarian needs over the next three months. These needs were identified following the escalation of the conflict in central and northern Mali in January 2013 and include some projects excerpted from the CAP.



Source: OCHA

**270,765**

Total estimated IDPs in Mali as of 15 March 2013

**33,919**

Malian refugees in neighbouring countries (30 Dec. 2012 – 15 March)

**176,777**

Total Malian refugees registered in neighbouring countries (15 March)

**386 mil**

Financial requirements outlined in 2013 Mali CAP

**15%**

Share of CAP requirements that have been funded (as of 15 March)

## Situation Overview

Humanitarian access continues to improve in central Mali and some parts of the north. Partners are conducting needs assessments and scaling up response activities in accessible areas.

About 190,000 persons –or 60 per cent of 260,000 people targeted by the food security cluster- have received monthly food rations in the three northern regions. The education cluster has distributed 1,500 school kits for the benefit of 30,000 children in the north and the south. Last week, the health cluster sent medicines and one ambulance to support Timbuktu health facilities. ICRC -which is not part of the cluster system-has provided the hospital of Gao with a generator. Members of the nutrition cluster have provided care to 22,800 children under 5 years both in the north and the south from 31 December 2012 to 3 March.

Security incidents continue to affect civilians in the north. On 7 March, armed men – allegedly members of armed groups – killed four civilians in Timbuktu.

New displacements observed since January can be explained by insecurity experienced by individuals and members of some communities accused of collaborating with armed groups. Ongoing insecurity continues to discourage some IDPs and refugees from returning home. In order to promote durable social cohesion and peace,

**+ For more information, see “background on the crisis” at the end of this report**

initiatives are required to promote reconciliation and fight impunity. On 6 March, the Government announced the creation of the “Dialogue and Reconciliation Commission” in order to seek reconciliation among all communities in Mali through dialogue. Some cautious returns of internally displaced people (IDPs) have been reported since the beginning of the military intervention in January. These returns are monitored by humanitarian actors in collaboration with authorities in order to identify related needs.

According to the sub-cluster on gender-based violence, as areas formerly occupied by armed groups in Timbuktu, Gao and Kidal regions have returned to Malian control, the hardships experienced by local people – especially women – during 10 months of occupation have come to light. In addition to human rights violations, several cases of physical, psychological and sexual violence, as well as lack of resources and services, were reported.

To date, IDPs are estimated at 270,765 persons. This figure includes 260,665 registered by the Population Movement Commission (CMP) as of 20 February and 10,100 IDPs (6,600 IDPs in Tin Zaoutin and 3,500 in Talhandak in Kidal region) reported by partners in the north.

The village of Talhandak at the Algerian border (150 km north-east of Tessalit in Kidal region) has hosted hundreds of displaced families over the last several weeks. Needs assessment missions were conducted by MDM-Belgium (20 to 26 February) and Solidarités (9 to 10 March). According to these assessments 3,500 people, are living in Talhandak. The assessments show urgent needs in food, water and sanitation.

The region of Timbuktu remains isolated, as the main supply roads from Algeria and Mauritania are still closed, and roads from the south (Douentza and Léré-Niafouké-Goundam-Timbuktu) continue to face security threats. Decreasing water levels on the Niger River have also reduced the potential to transport goods between Mopti and Timbuktu using *pinasses*.

The Assistant Secretary-General for Peacekeeping Operations, Mr. Edmond Mulet, is visiting Mali from 11 to 16 March. This mission follows a UN Security Council request to provide recommendations on the possible set up of a UN peacekeeping mission in Mali.

Humanitarian activities in central and southern Mali are continuing normally.

## Funding

As of 13 March, humanitarian actors had secured \$56 million (15 per cent) of total estimated humanitarian requirements in 2013 (\$386 million).

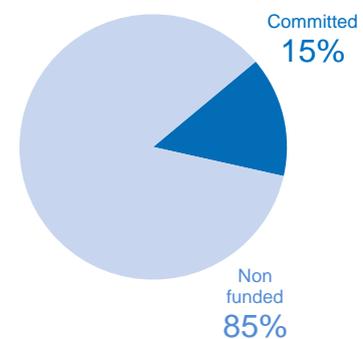
To date, seven out of nine clusters have received funding: emergency shelter and non-food items (40.6%), logistics (32.7%), Nutrition (7.5%), Protection (10.9%), food security (24%), health (6.1%) and emergency telecommunications (106.7%). Common services and coordination are funded at 49.9 per cent. WASH and education have not yet received funding through the CAP. In addition, around \$43 million has been allocated to projects not listed in the CAP.

Humanitarian actors have issued a new prioritization of humanitarian projects in the CAP to reflect urgent humanitarian needs identified in the north and Centre of the country since the beginning of the military intervention on 10 January. Overall, \$152 million is needed to cover the priority actions for the next three months. Link to the document: <http://www.unocha.org/cap/mali-2013-actions-prioritaires-et-analyse-des-besoins-humanitaires-suite-%C3%A0-lescalade-du-conflit-en>

\*Committed funds in the chart refer to \$26.6 million not yet allocated to CAP projects. All humanitarian partners, including donors and recipient agencies, are encouraged to inform OCHA's Financial Tracking Service (FTS - <http://fts.unocha.org>) of cash and in-kind contributions by e-mailing: [fts@un.org](mailto:fts@un.org)

### Consolidated Appeal – Mali – 2013

**\$386 million** required



## Humanitarian Response



Protection

### Needs:

- Verified reports confirm that members of some communities have recently left Timbuktu and do not intend to return out of fear of reprisals based on accusations of supporting armed groups. It is essential to rebuild confidence between communities for durable, peaceful co-existence.

- An IRC assessment (18 to 31 January) in Segou and Mopti identified 535 separated children and 135 unaccompanied children. There is need to ensure periodic follow-up visits to children, maintain contact with families, provide psychosocial support and education, and prevent exploitation and abuse.
- Save the Children produced a report on children associated with armed forces and armed groups in Mopti region. The study analyses the underlying causes for the recruitment and use of children. More in-depth analysis and proper response mechanisms are needed.
- Minimum standards must apply to all child protection programming, including recreational activities and child-friendly spaces.

### Response:

- From 6 to 8 March, the Internal Displacement Monitoring Centre (IDMC) of the Norwegian Refugee Council (NRC) and UNHCR organized a joint workshop on the protection of IDPs in Bamako. The objective was to strengthen the capacities of public structures and NGOs working on protection and assistance issues.
- UNFPA trained 32 members of the gender-based violence (GBV) sub-cluster and 20 members of the regional crisis committee of Segou on GBV.
- UNFPA provided the Ministry of Justice with 15 computers and 15 printers to support police services in investigations related to GBV and the management of victims' files.
- UNICEF supported the diffusion of 13,973 prevention messages on GBV in French, Bambara, Peulh, Sonrhai and Tamashek through 13 radios in Mopti. These broadcasts are intended to prevent GBV in the context of conflict. Some 1,300 reference cards directing GBV survivors towards care services have been produced for the areas of Mopti, Fatoma and Sokoura.
- An inter-agency template on "incidents" to be used for protection monitoring has been approved by the Protection cluster.
- One of the outcomes of the Child Protection Information Management System training was the consensus of child protection actors, both from civil society and the Government, to roll out a child protection case management system in Mali. Registration forms have been finalized.

### Gap and constraints:

- The weak availability of basic social services, including psychosocial and medical assistance to the victims of GBV, is a concern.
- Challenges persist in the collection, compilation and sharing of data on GBV – particularly rapes and sexual violence – due to limited access, lack of local coordination systems and weak monitoring.
- The lack of funding to support prevention of and response to GBV is a constraint.
- The fact that medical consultations are not free and therefore expensive for victims of GBV hinders access to services.



## Food security

### Needs:

- The main supply roads from Algeria and Mauritania are closed, and insecurity persists on roads between Timbuktu and southern Mali. This causes concern for food security. Decreasing water levels of the Niger River will soon reduce the capacity to transport supplies using *pinasses*.
- Families' food stocks are very limited in Kidal. IDPs living at the site of Talhandak urgently need food.

### Response:

- To date, over 3,300 metric tons of WFP food commodities have reached northern Mali, providing monthly rations to 190,000 beneficiaries in Timbuktu, Gao and Kidal. This represents 61 per cent of the more than 310,000 food insecure people targeted by WFP in these three regions. Distributions are ongoing with implementing partners CARE, Africare, Handicap International, ACTED, Solidarités International and Norwegian Church Aid. WFP is scaling-up deliveries in northern Mali as assistance is critical to avert an acute humanitarian crisis as the lean season approaches and local people exhaust their food stocks amid market disruptions.
- In parallel, provision of food assistance continues in southern Mali (Bamako, Mopti, Kayes and Koulikoro) for IDPs, host households and vulnerable populations in communities that were hard-hit by the drought last year. Cooperating partners are ACTED, CARE, ADR, World Vision, Reach Italia, CSPEEDA and Welthungerhilfe.

**190,000**

People are receiving monthly food rations in Timbuktu, Gao and Kidal.

- Over 24,000 people in Gao and Gounzoureye (in north-eastern Mali) have since 7 March been receiving food aid to cover their food needs for two months from the Mali Red Cross and the International Committee of the Red Cross (ICRC). Link to ICRC press release: <http://reliefweb.int/report/mali/food-aid-24000-people-gao-region>
- From 1 to 10 March, FAO organized trainings for 175 market-gardening producers in the communes of Koula and Teneni (cercle of San, region of Segou) declared vulnerable by the Early Warning System. These trainings sought to improve small farmers' production by providing agricultural inputs and to restore household resilience by teaching composting techniques and conservation techniques for vegetables through a solar method.
- Care continues its cash transfer activities in Segou and finalized this week the payment of the remaining 570 beneficiaries of the second and last round. The entire programme targeted a total of 1,200 people with payments worth 30,000 CFA (about \$60) per person.
- This week, Care paid 298 people in the region of Mopti (cercles of Bankass and Koro) through its cash-for-work project. The total amount distributed is estimated at 4.9 million CFA (approx. \$9,800). Beneficiaries of this programme were involved in sanitation activities.
- Welhungerhilfe (WHH) distributed food to 4,000 households in seven villages of Dabaly commune following their assessment in the area.

#### Gap and constraints:

- Limited access to the north remains a challenge.



#### Nutrition

#### Needs:

- On 25 February, the final report of the 2012 SMART survey conducted in the southern regions of the country was released. The results show that the prevalence of acute malnutrition (8.9%) and chronic malnutrition (29.1%) has reached the alert threshold at the national level according to WHO guidelines. The results reveal that 210,000 children under 5 years are at risk of severe acute malnutrition (SAM), and 450,000 at risk of moderate acute malnutrition (MAM).
- Since January, 13 rapid multi-sectoral assessments were conducted by NGO partners in the northern (Timbuktu and Kidal) and central (Mopti and Segou) regions. The results of these evaluations show a stable nutritional situation, the availability of essential nutrition inputs needed for care services in health facilities and the presence of trained health workers.

#### Response:

- Nutritional surveillance at national level continues and is being strengthened with the weekly transmission of data on new admissions in southern regions to the national authorities, National Health Directorate (DNS), Department of Nutrition (DN). Between 31 December 2012 and 3 March 2013, the accumulated data from the DNS / DN for the five southern regions and data from NGOs for the 3 northern regions, gave a total of 22,825 children under 5 years newly admitted in the different nutritional rehabilitation units (URENAM, URENAS and URENI). Of this total, 37% were in URENAS (for treatment of severe acute malnutrition). About 88% of the total of new admissions is recorded in the southern regions (vs 12% in the north).

**New admissions to nutrition treatment centres (weeks 1 to 8 of 2013)**

Type of new admission	South*	North*	Total
URENAM (for treatment of MAM)	11,611	1,844	13,455
URENAS (for treatment of SAM)	7,362	1,068	8,430
URENI (for intensive care)	855	85	940
<b>Total</b>	<b>19,828</b>	<b>2,997</b>	<b>22,825</b>

\*Sources: Data for the south come from the National Health Directorate and the Nutrition Division. Data from the north come only from NGOs working in the north: ALIMA-AMCP (Timbuktu), ACF-E (Gao) and MDM-B (Gao et Kidal). To date, no figure for the northern regions has been received by the cluster Nutrition

- At the 6 March nutrition cluster meeting, the DNS / DN - along with UNICEF - presented the new format for compiling monthly nutrition data that will be used at the national level by all health districts and regions. This new tool offers a better data compilation technique, especially those related to performance indicators, as well as harmonization of formats. NGO partners were asked to support health workers in using this new format.
- Between 25 February and 1 March, two meetings were organized by the cluster: "Nutritional surveillance" and "Coordination of Nutrition activities in the North". The meeting on nutritional surveillance focused on defining joint methodology for rapid nutrition surveys, while the coordination meeting brought together NGO partners working in the three northern regions to identify a coordination model and discuss the situation in these areas.

#### Gap and constraints:

- To date, only \$ 5.5million has been received out of \$73.7 million requested in the 2013 CAP.

## Education

#### Needs:

- To date, 209 schools in the regions of Timbuktu (69 out of 461 schools) and Gao (140 of 569 schools) have reopened with the support of 969 teachers. About 48,000 students out of a total of 217,000 in the two regions now have access to education. Assuring that both teachers and students in the north are provided with adequate resources to ensure a quality learning environment remains a priority.
- Given the challenging environment for education, it remains important to provide teachers working in emergency settings with appropriate training on psychosocial support, peace education, teaching large groups, remedial courses and mine risk education.

**48,000**

Out of 217,000 have access to education in the regions of Timbuktu and Gao.

#### Response:

- The Ministry of Education with support from UNICEF is in the process of training 3,000 teachers in psychosocial support. Combining with the contributions of all education cluster partners, over 4,190 teachers will have been trained in psychosocial support.
- With support from Save the Children, 163 teachers have been trained in Mopti and Segou on peace education and the prevention and reduction of violence in schools.
- To contribute to the reduction of the burden of poverty for parents and communities, cluster partners have distributed 1,500 school kits to conflict-affected students in the north and south. In total, 29,973 people have benefited from these kits.
- To ensure the ownership and sustainability of school feeding programmes, Save the Children has trained 178 school management committee members in food hygiene and school canteen management.

#### Gaps and constraints:

- Prioritizing the return of Government education authorities to the north remains critical in ensuring a sustainable sector response. The education cluster is actively working with the Ministry of Education on this issue.
- Funding shortfalls severely undermine the cluster's ability to ensure an effective response.



## Water, sanitation and hygiene

#### Needs:

- Water supply is an issue at the IDPs sites around Talhandak, where one borehole with low speed provides only 200 liters of water per day. This borehole is the only source of water for the site. The need for water, especially in the dry season, is essential for people staying at Talhandak.
- The WASH Cluster is assessing the gaps for cholera awareness messaging, the training of field workers (Community Communicators), and the pre-positioning of chlorine products. The mapping of WASH actors in healthcare facilities also shows that there are still large parts of the country that have experienced

cholera outbreaks in the past yet currently have no actors providing support for WASH in community health centres (CSCOMs).

- Assessment reports released after the beginning of the military intervention continue to show chronic needs for the WASH sector. For example, Islamic Relief's recent assessments in Douentza revealed communities walking 15 km a day to collect water and only a single functional water point for the entire population of Debere Commune (6,295 persons).

#### Response:

- UNICEF is working with the Regional Water Directorate (DRH) in Mopti to provide chlorine and training on water treatment to support six water systems for a period of three months. This will ensure safe water for 100,000 people.
- ICRC, which is not a member of the WASH cluster, has delivered fuel to the power stations in Gao, Kidal and Timbuktu. In Gao, ICRC has purchased a generator for the hospital. In Tin Zaoutin (Kidal), ICRC has rehabilitated wells and has distributed 73,000 sachets of PuR and 1,500 jerry cans to 1,200 families. ICRC is currently carrying out an assessment of water needs and infrastructure between Mopti and Douentza.
- OXFAM is undertaking a multi-sectoral assessment for a possible joint programme with Solidarités to provide coverage to communities not based along the river.
- IRC has completed WASH activities in nine community health centres (CSCOMs) in Koulikoro and is currently working on WASH programmes in six CSCOMs and ten schools in the cercles of Ansongo, Menaka and Gao.
- Islamic Relief has just completed a comprehensive WASH assessment of 58 villages of 8 communes in Douentza (Mopti region). Another comprehensive assessment in Gourma-Rharous (Timbuktu) is ongoing.
- Handicap International is continuing the distribution of hygiene kits and hygiene promotion in Timbuktu.
- Solidarités has recently completed WASH activities in 18 CSCOMs in Timbuktu. In Kolokani (Koulikoro region), Solidarités is improving WASH facilities in 10 schools damaged during the 2012 floods.
- ACTED is rehabilitating 20 wells in Tominian (Segou region).
- ACF has recently completed the distribution of hygiene kits in Gao in addition to a WASH and Nutrition assessment in Koulikoro.
- The first meeting of the Cholera Task Force was held on 7 March 2013, chaired by the National Health Directorate. The meeting included a review of cholera epidemiology over the last 12 years, a presentation of the National Cholera Prevention and Response Strategy and a mapping of partners able to take part in prevention and response activities.

#### Gaps and constraints:

- The WASH Cluster has requested an additional \$4 million on top of the 2013 CAP to respond to immediate needs following the military intervention. The WASH Cluster continues to strongly emphasize the need for \$54 million in 2013 to respond to the WASH needs of IDPs, 1.56 million people living in areas at risk of cholera, and 1.72 million people living in the areas affected by the conflict.



## Health

#### Needs:

- The unsanitary conditions in which IDPs are living in Talhandak (Kidal region) could result in diseases such as diarrhoea, conjunctivitis and measles. In addition, the area is prone to sandstorms, which can be a vector for acute respiratory infections.
- Health facilities in Timbuktu which are not supported by humanitarian organizations face difficulties in obtaining medications, equipment, qualified personnel and ambulances.

#### Response:

- In partnership with the Ministry of Health, WHO has delivered anti-retrovirals, anti-diabetes medicine and other medicines for the benefit of health facilities in Timbuktu that are not yet supported by humanitarian actors.
- The measles vaccination campaign was largely a success despite a difficult security environment. The campaign vaccinated 16,111 children (aged 6 months to 15 years) to reach a vaccination rate of 98.2 per cent. Four stationary teams and 12 mobile vaccination teams enabled these vaccinations, organized by joint efforts of the Regional Health Directorate, Social Development the Regional Directorate, the referral health centre of Gao and MDM-Belgium.

- UNICEF sent an Inter-Agency Emergency Health (IEH) kit to partner MDM-France to the cercle of Tenenkou in Mopti region last week. This kit will benefit 10,000 people over a period of three-months.
- A rapid assessment of the capacity of health facilities in conflict affected areas is in progress with the technical support of WHO Geneva.
- Humanitarian assistance missions were deployed to the regions of Gao, Timbuktu, Mopti and Segou to strengthen the health system.

### Gaps and constraints:

- It is necessary to strengthen epidemiological surveillance in the north.



### Logistics

- Following the 28 February evaluation mission to Timbuktu, the Logistics cluster shared recommendations with UNDSS and *Emergency Telecommunication Cluster* and identified possible locations for mobile storage units to provide immediate solutions for humanitarian partners' common storage needs.
- Although an over-flight restriction was imposed in northern Mali for all civilian flights on 28 February, UNHAS managed to obtain a waiver through the Ministry of Humanitarian Affairs. From now on, in addition to the regular civil-military coordination structures, Agency for Air Navigation Safety in Africa and Madagascar (ASECNA) and Civil Aviation (ANAC) must also be informed 24 hours in advance of any flight that is to be operated.
- UNHAS Mali is now flying to five domestic destinations: Bamako, Kayes, Mopti, and the recently opened Timbuktu and Gao (awaiting security clearance), and to one international destination: Niamey (Niger).
- There has been a joint request by users (NGOs) for UNHAS to operate flights to smaller destinations. This would entail the addition of another aircraft (short take-off and landing LET 420) to the Mali fleet and an increased budget. A user group committee meeting is to take place in the coming days to discuss the matter.
- An Information Manager has been requested to further reinforce the cluster's capacity. Information on the cluster's activities is available on the cluster webpage [www.logcluster.org](http://www.logcluster.org) and is updated regularly.



### Emergency Telecommunications (ETC)

- Thanks to funding from the Central Emergency Response Fund, the ETC cluster is purchasing more equipment for deployment to the North, in line with the planned UN gradual re-establishment. The planned sites for future deployment are Timbuktu, Gao and Kidal depending on the security situation.
- The ETC response is functional in Mopti, where the communications centre is being manned by two radio operators. Three additional radio operators are to be recruited for this location.

## General Coordination

- Information on all regular coordination meetings and contacts of all clusters are available on [mali.humanitarianresponse.info](http://mali.humanitarianresponse.info).
- The next OCHA-organized general information meeting is scheduled for 15 March.
- Sub-clusters on child protection and GBV have been created in the region of Segou.
- The nutrition sub-cluster will be launched in Mopti on 14 March.
- OCHA has launched humanitarian coordination meetings in Timbuktu. These meetings are held twice a month.

#### For further information, please contact:

**Fernando Arroyo**, Head of Office, OCHA Mali, E-mail: [arroyof@un.org](mailto:arroyof@un.org), Tel: +223 7599 3204

**Katy Thiam**, Public Information Officer, OCHA Mali, E-mail: [thiamk@un.org](mailto:thiamk@un.org), Tel: +223 7599 3497

**Ulrike Dassler**, Public Information Officer, OCHA Mali, E-mail: [dassler@un.org](mailto:dassler@un.org), Tel: +223 7599 4004

**Guido Pizzini**, Information management Officer, OCHA Mali, E-mail: [pizzini@un.org](mailto:pizzini@un.org), Tel: +223 7599 3203

**Hadija Diakite**, Executive Secretary of OCHA Mali Head of Office, E-mail: [diakiteh@un.org](mailto:diakiteh@un.org), tel: +223 7599 55 77

**Quentin Levet**, Humanitarian Affairs Officer, OCHA NY, E-mail: [levet@un.org](mailto:levet@un.org) Tel: +1 646 266 4410

For more information, please visit:

<http://mali.humanitarianresponse.info> or [www.unocha.org/mali](http://www.unocha.org/mali)

To be added or deleted from this Situation Report mailing list, please email [ochamali@un.org](mailto:ochamali@un.org)

- An Internews' assessment team is visiting Mali from 10 to 20 March to assess the impact of the current conflict and humanitarian crisis on the local media landscape in Mali, particularly of the radios in the central and north parts of the country; and liaise with humanitarian actors to assess the humanitarian situation and identify potential opportunities to strengthen current humanitarian communication initiatives.

**Background on the crisis**

In January 2012, a rebellion erupted in northern Mali led by a Tuareg separatist movement, the Mouvement national de libération de l'Azawad (MNLA). The secular MNLA allied with several armed Islamist groups, and their early territorial gains led to a military coup in Bamako on 22 March. Under international pressure, the coup leaders quickly ceded power, but some continued to interfere with decisions of the new civilian Government. Amid political uncertainty in the capital, the rebellion captured the three northern regions of Kidal, Gao and Timbuktu – a mostly desert area slightly larger than France – within several days. They then announced the end of hostilities and proclaimed the independent state of “Azawad”, which was rejected by the international community. The situation along the de facto north-south dividing line remained calm until the end of 2012, when Islamist groups seized power from the MNLA. These groups professed less interest in an independent north than in imposing strict Islamic law on the country.

ECOWAS moved to create an African force (AFISMA) to help Malian authorities restore the country's territorial integrity. The UN Security Council authorized this force on 20 December 2012, with an additional mandate to ensure security for humanitarian assistance and the voluntary return of displaced people. Shortly afterwards, rebel groups launched an offensive moving south, capturing the town of Konna on 10 January 2013. The Government of Mali subsequently requested immediate military assistance from France, which began rapidly. The current conflict started in the midst of a Sahel-wide food and nutrition crisis that further eroded the resilience of millions of people already suffering from chronic poverty. Despite a good harvest in 2012, millions continue to suffer, and the new fighting is creating additional humanitarian needs.