



Southern Africa El Niño/La Niña

The 2015–2016 El Niño phenomenon resulted in the worst drought in 35 years for much of southern Africa. For millions of people across the sub-region, particularly children, the impact on food security has been catastrophic. In the eight most-affected countries (Angola, Lesotho, Madagascar, Malawi, Mozambique, Namibia, Swaziland and Zimbabwe), an estimated 16.1 million people will require assistance between December 2016 and March 2017, including some 5 million children who will require urgent humanitarian assistance.¹ In addition, more than 4 million children need support to remain in school.² In 2017, more than 207,757 children under 5 will require treatment for severe acute malnutrition (SAM) across southern Africa.³ The region is also experiencing wider humanitarian needs due to water scarcity, poor hygiene, frequent child illnesses, reduced access to HIV prevention and treatment services, low school attendance, increased risk-taking behaviour among adolescents and the departure of primary caregivers, including breastfeeding mothers, from the home in search of water. These issues continue to aggravate the situation of children in most countries in southern Africa. The drought is overwhelming national response capacities and has compounded existing vulnerabilities. The impact of the higher than average La Niña rains may lead to displacement, infrastructure damage and cholera and other disease outbreaks in some countries.

Humanitarian strategy

UNICEF will continue the response to the drought in southern Africa by supporting government-led responses to provide life-saving services and support to address the needs of the most-affected populations. UNICEF's strategy will be delivered through sectoral responses in health, nutrition, child protection, education, HIV/AIDS, social protection and water, sanitation and hygiene (WASH), supported by various communication and community engagement strategies. In preparation for the La Niña rains, UNICEF will enhance inter-agency emergency preparedness planning, including pre-positioning relief supplies in flood-prone zones and capacity building for governments and partners to strengthen flood response mechanisms. Ongoing dialogue and planning with at-risk communities will strengthen preparedness actions at the household level. By applying a risk-informed lens to programming, UNICEF will prioritize recovery actions and interventions to help break the cycle of recurrent droughts in southern Africa. UNICEF will promote inter-agency implementation of resilience-building actions aligned with the UNICEF Regional Office strategy for resilient development and the Regional Interagency Standing Committee for Southern Africa Plan of Action. Risk analysis, assessments, monitoring, reporting and strengthening of coordination mechanisms will also be key elements of UNICEF's 2017 humanitarian strategy in southern Africa.

Results from 2016

As of 31 October 2016, UNICEF had received US\$27.7 million against the seven country-specific appeals totalling US\$111.7 million (25 per cent funded).⁵ Despite limited resources, UNICEF was able to scale up its response to the El Niño drought. Since January 2016, UNICEF has delivered life-saving assistance to populations affected by drought, food insecurity and diarrhoeal disease outbreaks, including cholera. UNICEF supported more than 542,545 people with access to safe water through borehole drilling, rehabilitation of piped water schemes and hygiene promotion interventions, including in health centres and schools. Through multi-country community management of acute malnutrition, UNICEF distributed ready-to-use therapeutic foods that treated 83,995 children with SAM, reaching 45 per cent of the 184,896 target, largely due to delayed funding for scale up. UNICEF also supported more than 396,005 women and children affected by the El Niño crisis to access health care services. There remains a growing gap between needs and assistance levels due to limited resources. For example, in Madagascar, UNICEF provided safe water to more than 204,520 people in 2016 but more than half a million people are still in need. Failure to further scale up the humanitarian response in these countries will have detrimental consequences for millions of children.

Humanitarian Action for Children

unicef 

Total people in need:

16.1 million

Total children (< 18) in need:

5.2 million

Total people to be reached in 2017:

7.2 million

Total children to be reached in 2017:

3.8 million⁴

2017 programme targets

Angola

- 48,700 children aged 6 to 59 months treated for SAM
- 100,000 people reached with clean water (7.5–15 litres per person per day) for drinking, cooking and personal hygiene

Lesotho

- 17,000 people reached with clean water (7.5–15 litres per person per day) for drinking, cooking and personal hygiene
- 310,000 people reached with information on prevention, care and treatment of HIV/AIDS

Madagascar

- 35,000 children aged 6 to 59 months treated for SAM
- 850,000 people reached with clean water (7.5–15 litres per person per day) for drinking, cooking and personal hygiene

Malawi

- 64,826 children aged 6 to 59 months treated for SAM
- 214,200 children aged 6 to 59 months immunized against measles

Mozambique

- 34,000 children aged 6 to 59 months treated for SAM
- 145,040 people reached with clean water (7.5–15 litres per person per day) for drinking, cooking and personal hygiene

Namibia

- 180,000 additional children have access to water (7.5–15 litres per person per day) for drinking, cooking and personal hygiene
- 6,800 children aged 6 to 59 months treated for SAM or moderate acute malnutrition

Swaziland

- 1,058 children aged 6 to 59 treated for SAM
- 50,000 people reached with information on prevention, care and treatment of HIV/AIDS

Zimbabwe

- 14,873 children aged 6 to 59 months treated for SAM
- 55,500 children, adolescents, pregnant and lactating mothers retained on HIV treatment

		Cluster 2016 target	Cluster total results	UNICEF targets (Jan-Dec 2016)	UNICEF total results (Jan-Oct 2016)
NUTRITION					
Children in humanitarian situations aged 6 to 59 months affected by SAM who are admitted for treatment	Angola	37,835	11,513	37,835	11,513 ^j
	Lesotho	3,500	1,800	2,445	1,800
	Madagascar	35,416	12,000	35,416	12,000 ⁱⁱ
	Malawi	65,931	44,939	65,931	44,939
	Mozambique	27,500	8,102	27,500	8,102 ⁱⁱⁱ
	Swaziland	1,058	537	1,058	537
	Zimbabwe	24,554	15,215	14,711	5,104 ⁱⁱ
Caregivers of children in humanitarian situations accessing infant and young child feeding counselling	Angola	707,765	148,640	707,765	148,640 ^{iv}
	Madagascar	137,500	55,380	137,500	55,380 ⁱⁱ
	Mozambique	150,000	0	150,000	0 ^v
	Zimbabwe	240,051	78,375	240,051	78,375 ⁱⁱ
HEALTH					
Children in humanitarian situations vaccinated against measles	Angola			672,377	51,777 ^{vi}
	Lesotho			32,070	32,262
	Malawi			453,500	286,483
	Swaziland			35,000	40,252 ^{vii}
	Zimbabwe			50,000	70,544
Children and women in humanitarian situations provided with access to health care services	Lesotho			210,000	106,668
	Madagascar			95,000	13,000 ^{viii}
	Malawi			276,500	260,937
	Swaziland			47,000	15,400 ^{ix}
WATER, SANITATION AND HYGIENE					
People in humanitarian situations accessing water for drinking, cooking and personal hygiene	Angola	120,000	24,000	120,000	24,000 ^x
	Lesotho	300,000	132,208	300,000	132,208 ^{xi}
	Madagascar	765,000	204,520	765,000	204,520 ^{xii}
	Mozambique	300,000	221,275	120,000	23,960 ^{xiii}
	Swaziland	64,000	30,709	64,000	30,709
	Zimbabwe	853,000	205,108	325,000	127,148
People in humanitarian situations received critical WASH-related information to prevent child illness, especially diarrhoea	Angola			45,000	108,790 ^{xiv}
	Lesotho			100,585	80,000
	Madagascar	850,000	204,520	665,000	204,520 ^{xii}
	Malawi	775,000	418,309	400,000	403,029
	Mozambique	300,000	114,399	120,000	23,960 ^{xiii}
	Swaziland			320,000	55,634 ^{xv}
	Zimbabwe	1,415,000	323,503	400,000	224,952
CHILD PROTECTION					
Children in humanitarian situations accessing psychosocial support	Angola			20,000	0 ^{xvi}
	Lesotho			206,666	50,012 ^{xvii}
	Madagascar			4,900	168 ^{xviii}
Children in humanitarian situations accessing appropriate care and services	Angola			1,000	0 ^{xvi}
	Malawi	3,000	2,276	3,000	2,276
	Swaziland	2,400	0	2,400	0 ^{xix}
	Zimbabwe	31,000	23,944	31,000	23,944
EDUCATION					
Children aged 3 to 18 years in humanitarian situations accessing formal or non-formal basic education	Angola			16,000	1,720 ^{xx}
	Lesotho			310,000	120,000 ^{xxi}
	Madagascar	25,000	3,120	25,000	3,120 ^{xxii}
	Malawi	41,600	12,346	25,000	12,346 ^{xxiii}

Results are through 31 October 2016 unless noted. Namibia did not have a Humanitarian Action for Children appeal in 2016.

(i) Angola emergency nutrition needs were 43 per cent funded as of the end of October 2016; (ii) Nutrition funding for scale up secured in early October 2016; (iii) Mozambique emergency nutrition needs were 44 per cent funded as of the end of October 2016; (iv) Challenges with capacity, multiple emergencies (yellow fever) and Angola emergency nutrition needs were 43 per cent funded as of the end of October 2016; (v) UNICEF has not yet received information on coverage estimates for infant and young child feeding activities; (vi) Angola emergency health needs were 0 per cent funded as of the end of October 2016; (vii) This includes Expanded Programme on Immunization routine immunization; (viii) Madagascar emergency health needs were 2 per cent funded as of the end of October 2016; (ix) Swaziland emergency health needs were 0 per cent funded as of the end of October 2016; (x) Focus of intervention on drilling and rehabilitating of boreholes; delays were experienced in securing parts due to the non-availability of parts locally; (xi) Initial challenges with scaling up response capacity experienced; (xii) Madagascar emergency WASH needs were 18 per cent funded as of the end of October 2016; (xiii) Mozambique emergency WASH needs were 21 per cent funded as of the end of October 2016; (xiv) Increased social mobilization capacity for WASH; (xv) Swaziland emergency WASH needs were 43 per cent funded as of the end of October 2016; (xvi) Angola emergency child protection needs were 0 per cent funded as of the end of October 2016; (xvii) Lesotho emergency child protection needs were 0 per cent funded as of the end of October 2016; (xviii) Madagascar emergency child protection needs were 0 per cent funded as of the end of October 2016; (xix) Swaziland emergency child protection needs were 0 per cent funded as of the end of October 2016; (xx) Angola emergency education needs were 0 per cent funded as of the end of October 2016; (xxi) These children were reached using regular programme resources; (xxii) Madagascar emergency education needs were 20 per cent funded as of the end of October 2016; (xxiii) Malawi emergency education needs were 2 per cent funded as of the end of October 2016.

Funding requirements

In line with the Regional Inter-Agency Standing Committee (RIASCO) action plan,⁶ UNICEF is requesting US\$103,245,000 to meet the humanitarian needs of children in the most-affected countries in southern Africa. Without additional funding, UNICEF will be unable to support the multi-sectoral response that includes HIV and AIDS, nutrition, child protection, education, social protection and WASH. Concerted efforts are required to minimize the continuing impact of the El Niño crisis (and the likelihood of enhanced La Niña rains), through multi-sectoral interventions to provide urgent assistance to communities and implement effective recovery strategies that contribute to building resilience among the most vulnerable.

Country	2017 requirements (US\$)
Angola	19,675,000
Lesotho	1,661,000
Madagascar	31,400,000
Malawi	22,593,000
Mozambique	7,931,000
Namibia	2,722,000
Swaziland	2,737,000
Zimbabwe	13,526,000
Regional coordination	1,000,000
Total	103,245,000

	Health	Nutrition and HIV/AIDS	Water, sanitation and hygiene	Child protection	Education	Social protection	Cluster / sector coordination	Total (US\$)
Angola	11,451,000	3,724,000	1,500,000	1,500,000	500,000	0	1,000,000	19,675,000
Lesotho	536,000	300,000	400,000	145,000	280,000	0	0	1,661,000
Madagascar	5,500,000	5,700,000	11,200,000	2,100,000	3,400,000	3,000,000	500,000	31,400,000
Malawi	2,750,000	14,816,000	2,345,000	400,000	2,282,000	0	0	22,593,000
Mozambique	150,000	2,406,000	4,625,000	350,000	400,000	0	0	7,931,000
Namibia	853,000	272,000	1,033,000	303,000	261,000	0	0	2,722,000
Swaziland	270,000	419,000	1,906,000	65,000	77,000	0	0	2,737,000
Zimbabwe	2,617,000	3,125,000	2,500,000	1,550,000	1,000,000	2,734,000	0	13,526,000
Regional coordination	0	0	0	0	0	0	1,000,000	1,000,000
Total (US\$)	24,127,000	30,762,000	25,509,000	6,413,000	8,200,000	5,734,000	2,500,000	103,245,000

¹ Regional Inter-Agency Standing Committee, 'RIASCO Action Plan for Southern Africa: Revised regional response plan for the El Niño-induced drought in southern Africa', December 2016-April 2017, <http://reliefweb.int/sites/reliefweb.int/files/resources/riasco_action_plan_dec2016.pdf>, accessed 29 December 2016.

² Ibid.

³ Angola (48,700 children); Lesotho (2,500 children); Madagascar (35,000 children); Malawi (34,000 children); Mozambique (64,826 children); Namibia (6,800 children); Swaziland (1,058 children); and Zimbabwe (14,873 children).

⁴ Based on United Nations Children's Fund country office response plans for 2017, whose targeted populations are shown below:

	Total people to be reached in 2017	Total children to be reached in 2017
Angola	1,412,000	780,000
Lesotho	130,000	78,888
Madagascar	950,000	446,500
Malawi	2,500,000	1,105,000
Mozambique	309,249	170,817
Namibia	400,000	180,000
Swaziland	175,000	74,000
Zimbabwe	1,702,000	1,021,200
Total	7,269,000	3,856,405

⁵ Available funds included funding received against the current country appeals and funds carried forward from the previous years as follows: Angola (US\$4.1 million); Lesotho (US\$3.8 million); Madagascar (US\$6.3 million); Malawi (US\$5.5 million); Mozambique (US\$3 million); Swaziland (US\$1.2 million); and Zimbabwe (US\$3.8 million).

⁶ RIASCO action plan runs through March 2017 and additional needs are as per the UNICEF country office emergency response plans running through December 2017. Swaziland (https://www.humanitarianresponse.info/system/files/documents/files/swaziland_hrp_16dec2016.pdf) and Zimbabwe (https://www.humanitarianresponse.info/system/files/documents/files/zimbabwe_hrp_final_20sept2016.pdf) also have inter-agency humanitarian response plans running through March 2017.

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