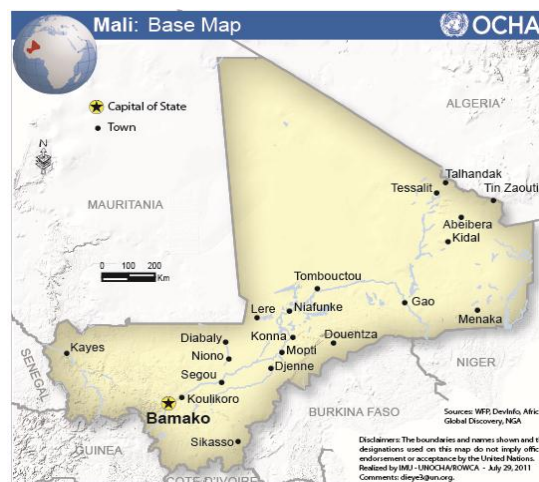




This report is produced by OCHA in collaboration with humanitarian partners. It was issued on 25 April 2013 and covers the period from 11 to 25 April 2013. The next report will be issued on or around 8 May 2013.

Highlights.

- Food insecurity remains a major concern in the northern regions (Gao, Timbuktu and Kidal), where at least one household in five faces severe food shortages.
- Cholera outbreaks often occur during the rainy season, and could be worse this year without sufficient investment in prevention.
- Internal population movements continue from north to south and vice versa. Displacements from north to south represent 62% of the total of 37,900 people censused in both directions between 12 January and 31 March.
- Internally displaced people (IDPs) are estimated at 282,548 by the Commission of Population Movement. UNHCR estimates that 173,779 Malian refugees are living in neighbouring countries.
- Humanitarian Appeal (CAP) for Mali is 26 per cent funded. Around \$107 million has been mobilized of the total \$409.7 million required. Humanitarian partners are preparing the mid-year review of the appeal.



Source: OCHA. The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.

282,548

Internally displaced people living in Mali as of 20 March (Population Movement Commission)

173,779

Malian refugees in neighbouring countries as of 24 April (UNHCR)

\$409.7 million

Humanitarian requirements in the 2013 Mali Consolidated Appeal (CAP)

26 per cent

Of funding received by 24 April

Situation Overview

The security situation in the north is marked by fighting in some areas, the presence of mines and various acts of violence. However, humanitarian actors are active in the three northern regions (Timbuktu, Gao and Kidal). Activities also continue in the rest of the country without security challenges.

Deteriorating food security remains a concern as the lean season begins, especially in northern regions already past the crisis threshold (IPC 3). Currently, at least one in five households in the north is facing a severe food shortage. In Abeibara and Tessalit districts (Kidal region), at least one in five households is facing an extreme lack of food, surpassing the emergency phase (IPC 4). Figures on the number of people affected by food insecurity in the north are not yet available. Food aid continues to be delivered, but insecurity and lack of resources remain serious challenges.

Access to basic social services (water, education, health) remains limited in the north because of the low return of civil servants, the destruction of infrastructure and the lack of material to support basic services. In education, schools continue to open in Gao and Timbuktu regions, with 321 of 1,030 schools in the regions working. A measles epidemic continues in Gao and Timbuktu, and vaccinations are ongoing in Kidal, where 70 % of the population is already reached. With the approach of the rainy season, humanitarian actors fear a serious cholera epidemic if preventive measures are not taken immediately.

Partners continue to observe the movement of people from north to south and vice versa. According to IOM, 14,408 people were observed moving from south to north between 12 January and 31 March. In addition, 23,501 people were observed moving from north to south. Food insecurity, precarious economic conditions, lack of basic services and violence are mostly the reasons for the movements from north to south. As of 30 March, the Commission on Population Movements estimated that 282,548 IDPs were living in Mali. This figure does not

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

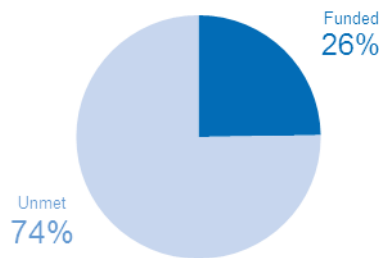
include around 10,000 IDPs in the sites of Tin Zaoutin and Talhandak, Kidal region. UNHCR estimated that 173,779 Malians were living in neighbouring countries as of 24 April.

Funding

As of 24 April, the CAP for Mali had received approximately \$107 million, or about 26 per cent of the \$409.7 million requested. Seven out of nine clusters have received less than 50 per cent of their requirements, and four have less than 20 per cent. In addition, about \$89.2 million has been allocated to humanitarian projects outside the CAP.

Mali - Consolidated Appeal 2013

\$409.7 million requested



Funding by sector (in million US\$)

Sector	Funded (US\$ million)	Unmet (US\$ million)	% Covered
Food Security	144	0	0%
Nutrition	74	19	19%
Water, Hygiene and Sanitation	55	7	7%
Health	29	19	19%
Protection	60	25	25%
Shelters	16	32	32%
Education	19	18	18%
Logistics	4	99	99%
Emergency Telecommunication	2	110	110%
Common Services and Coordination	7	43	43%

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

Humanitarian Response



Food Security

Needs:

- According to food security partners, food insecurity has worsened in the north as of late March. Figures on the number of people affected are not yet available.
- The current food situation in the northern regions (Timbuktu, Gao and Kidal) is considered a crisis (IPC Phase 3), meaning that at least one in five households is facing a severe food shortage. However, Tessalit and Abeibara districts of Kidal have reached emergency levels (IPC Phase 4), where at least one in five households is facing extreme food shortages.

Response:

- In March, WFP and its partners (CARE, World Vision-Mali) provided emergency assistance to over 278,000 people in Mali, including 125,700 in conflict-affected areas of Timbuktu and Gao, and over 152,300 IDPs and host communities in the south. The distribution of assistance is ongoing in Kidal to 34,500 people following the delivery of a stock of 1,000 tons of food during the last weeks. As the lean season begins, WFP continues to increase assistance in Timbuktu, Gao and Kidal regions and in areas hosting IDPs across the country.
- As part of the start-up activity 5,000 market gardens were settled in the sahelian belt; FAO in collaboration with ICCO visited the region of Segou, San and Tominian to debrief districts targeted by the project on the findings of participative revue analysis. The project will rehabilitate 25 gardening plots, the distribution of agricultural inputs to 2,500 beneficiaries of whom 60% are women, and activities to improve the nutritional status of lactating women and children.
- In Timbuktu region, Islamic Relief distributed over 21 tons of food to 264 people in Gourma Rharous circle and transferred cash to 316 operators for the development of an irrigated area in the municipality of Serere Gourma Rharous district.
- World Vision-Mali plans to assist 1,400 IDP households through cash transfers in Bamako and in the municipality of San and Segou over a period of five months. CARE Mali is continuing its cash transfers and has assisted 2,727 displaced households in Segou and Mopti.

Gaps & Constraints:

- Persistent insecurity continues to disrupt the local economy and the provision of humanitarian assistance, with negative consequences for food security in the North. The low level of funding slows the activities of the cluster planned for 2012-2013.


Education
Needs:

- According to the Education Cluster, schools in Gao and Timbuktu regions continue to open, with 321 schools working out of a total of 1,030 in the regions. An estimated 76,667 students are being taught by 1,561 teachers in these schools. Providing teaching and learning materials and relevant teacher training on education in emergencies remain critical priorities for conflict-affected schools in the north.
- With over 173,000 refugees in neighbouring countries, it is critical to ensure that school-age Malian refugees are provided with accessible, quality educational programming.

321

Schools out of a total 1,030 are functional in Gao and Timbuktu

Response:

- To date, the Education Cluster has distributed school kits to 38, 251 crisis-affected children in Mali for the 2012-2013 school year.
- To date, the Education Cluster has trained 2,720 teachers working in conflict and post-conflict settings on education in emergencies.
- In partnership with the Ministry of Education, UNICEF led a mission to Malian refugee camps in Niger and Burkina Faso to support the educational needs of school-age Malian refugees.
- WFP is assisting 28,100 school children in 128 schools in Gao through school canteens. This activity will be extended to 76 schools in Timbuktu in coordination with the Education Cluster.
- To support conflict-affected students in Segou region, Plan-Mali is distributing 1,950 school kits there. Plan-Mali has additionally provided school kits to 45 conflict-affected schools in Segou region. To support teachers working in conflict-affected communities, Plan-Mali has trained 150 teachers in Segou region in psychosocial support, pedagogy of large groups and remediation classes. Save the Children has trained 195 teachers in the conflict-affected commune of Diabaly in Segou region in psychosocial support.
- UNICEF, in partnership with Plan-Mali, has completed the construction of 10 Early Childhood Development Centres in Segou region. These centres are currently supporting 50 children.
- 3,564 parents participated in a UNICEF-led community outreach programme focused on supporting the developmental needs of host communities and displaced persons affected by the food and nutrition crisis.

Gaps & Constraints:

- Lack of funding through the humanitarian appeal limits the cluster's ability to conduct an effective response.


Protection
Needs:

- According to the Child Protection Sub-Cluster, the following areas should be clarified regarding children and armed groups: handover process to all concerned parties, finalization and signature of the Protocole d'Accord (currently under negotiation) by Government authorities, plan for strengthening capacities in conflict-affected regions for appropriate transitional care.
- Stronger community-based protection mechanisms are needed to prevent and reduce the risk of retaliation or discrimination against demobilized children.
- Evaluating and monitoring pre-existing child protection issues (early marriage, worst forms of child labour and child trafficking) are required, given that these are likely to have been exacerbated by the current context.
- A multi-sectoral assessment in Youwarou and Tenenkou has emphasized risks associated with IED, security and an increase of negative coping mechanisms such as early marriage and sexual exploitation.
- The Gender-Based Violence Sub-Cluster has raised concern about the increase of prostitution in areas closed to armed forces' bases in the regions of Mopti, Timbuktu and Gao and further exploitation of women.

Response:

- The Protocole d'Accord regarding children associated with armed forces and armed groups is at its final review stage and should be signed by the Malian Government shortly. Two transit centres, one in Bamako and one in Mopti, are now operational and ready to receive demobilized children.
- The Malian organization Avenir Enfance Sahel organized a workshop in early April intended to engage local militias on the issue of children associated with armed forces or groups.
- A mission conducted by Norwegian Church Aid in Gao drew attention to the increase in prostitution in the area. The mission found that many of the prostitutes are from Mopti and were forced to engage in prostitution by bar owners. The NGO has emphasized the urgent need to strengthen awareness about the dangers of prostitution.
- Family Care International, in partnership with UNICEF, has identified 66 displaced women engaged in prostitution in bars in Mopti, 43 of whom are being assisted. According to Family Care International, the women were forced into prostitution by procuresses.
- UNICEF is funding a six-month project to prevent gender-based violence in Mopti, Socoura and Fatoma through a cash transfer programme with Family Care International and Catholic Relief Services.
- UN Women has started to assist women who were victims of GBV during the fighting in Konna (Mopti). The 11-month project targets 2,100 women and will be implemented by the NGO Odi Sahel.
- The National Department of Health has launched a one-month family planning campaign in areas hosting IDPs. The programme includes assistance to rape victims and prevention and treatment of sexually transmitted diseases, including HIV/AIDS.
- UNHCR continues to advocate the provision of identity cards for Mauritanian refugees. A verification exercise of the population of refugees will be conducted simultaneously with the delivery of identity cards. A joint UNHCR and National Commission for Refugees mission travelled to Kayes from 9 to 11 April, and continues to work on regularizing thousands of Mauritanian refugees who do not have birth certificates. A simplified registration procedure is in place to facilitate access to vital documents.

Gaps & Constraints:

- Lack of access, incomplete data and the overall lack of presence of specialized child protection staff remain huge constraints all affected areas. In general, a lack of sufficient data on the protection issues for northern regions remains a key constraint.
- More funding for the child protection sector is needed to allow cluster members to respond to needs.
- Robust coordination among child protection actors based in refugee-receiving countries together with child protection actors in Mali is required to ensure a harmonized response.

**Health****Needs:**

- In the north and in areas hosting IDPs, the need to support health facilities and trained personnel persists.
- The epidemiological situation in the north is characterized by the outbreak of measles in Gao and Kidal (38 cases, 0 deaths in weeks 14 and 15) and the prevalence of malaria (uncomplicated and severe).

Response:

- Médecins du Monde-Belgium (MdM-B) has started a campaign in Kidal to vaccinate against measles, provide vitamin A supplementation and immunize against polio (10 to 16 April 2013). This campaign vaccinated 38,276 people (6 months to 29 years) against measles, 15,415 children aged 0 to 59 months against polio and provided vitamin A to 15,200 children aged 6 to 59 months. In Kidal, the overall coverage rate is 70 per cent (with 59 per cent in Kidal, 85 per cent in Tessalit, 83 per cent in Tin-Essako and 70 per cent in Abeibara).
- In the north, the Ministry of Health and the Health Cluster have developed a plan to resume activities and facilitate the return of personnel. A detailed needs assessment is underway in health facilities.
- The 5th mission of the National Council of the Order of Doctors (NCOD) supported by WHO and that started on 5 March in Mopti, Segou, Gao and Timbuktu ended on 4 April. A total of 16,119 medical consultations and 314 surgical procedures were performed by 74 health workers in collaboration with the partners involved in the field.
- A vaccination campaign against polio will take place from 26 to 29 April in 47 health districts in the south including those hosting IDPs.

Gaps & Constraints:

- Health care personnel (nurses, aides, midwives) have not yet returned to the north, thus limiting access to basic health services.



Water, Sanitation and Hygiene

Needs:

- According to the WASH Cluster, the number of people affected by this year's cholera season (June – Sept 2013) could be significantly greater than previous years (2012, 2011 and 2008). Evaluations show that more and more people are collecting water from contaminated sources due to conflict damage, looting (particularly of solar panels, pumps and fuel), reduced access to spare parts, fuel shortages, and a continued prolonged drought. These factors exacerbate the year-long absence of qualified water system operators or mechanics and of Government technical and institutional support.
- WASH Cluster surveys of more than 150 health-care facilities across the country show that over half are unprepared to treat cholera cases (lack of water, soap, hand washing stations, cleaning materials, chlorine, personal protective equipment, latrines).
- IDPs in Mopti, Segou and Bamako continue to put extreme pressure on existing water points. Price increases continue to put basic WASH commodities like soap outside of the reach of the most vulnerable.

Response:

- Work continues in five community health centres (CSCOMs), where boreholes are being drilled and WASH facilities installed by IRC. Similar work in 11 referring health centres (CSREF) in Koulikoro has been finalized by IRC.
- In Gao, IRC is constructing WASH facilities in four community health centres and three schools. IRC distributed 1,600 NFI kits, trained 165 community volunteers and disseminated 6,000 radio ads as part of cholera prevention activities.
- Mercy Corps distributed food and WASH supplies (aquatabs, soap) to 1,300 families in Gao. ACF is carrying out activities in 12 CSCOMs in Gao, Bourem and Ansongo and distributing hygiene kits. In Kayes the rehabilitation of 30 latrines and water points is ongoing.
- Mobile teams from Agronomes et Vétérinaires Sans Frontières (AVSF) have returned to Timbuktu and Bourem and restarted their activities on 12 March. The activities include distribution of family hygiene kits and the rehabilitation and support of water systems.
- ICRC is supporting the hospital and water station in Gao and Kidal by providing 7,700 litres of fuel per month. In Tinzawaten (Kidal region), ICRC is working in three IDP sites to distribute hygiene kits, construct latrines and rehabilitate eight water points. The construction of two boreholes is planned for a fourth site. ICRC is also planning to rehabilitate the water networks in Douentza and Konna.
- ACTED activities in Ségou include promoting hygiene and distributing materials in two schools in Diabaly. Also training on conducting evaluations continues for staff of the Civil Protection. In Mopti, ACTED activities include training in hygiene promotion in 10 villages, rehabilitation of 20 traditional wells, WASH in Nutrition in 5 CSCOMs and distributing hygiene kits in health centres.

Gaps & Constraints:

- WASH Cluster partners are concerned and have highlighted the lack of funding and interest in the sector. The situation is becoming critical as activities for cholera prevention need to start soon.
- The WASH Cluster is revising its strategy, target groups and key activities to take into account activities completed over the last few months.



Nutrition

Needs:

- According to the SMART 2012 survey results, 210,000 children under age 5 may suffer from severe acute malnutrition (SAM), and 450,000 from moderate acute malnutrition (MAM) in 2013.
- Improved security conditions in Gao have created a window of opportunity to conduct a SMART survey there in the coming weeks. Lack of access in the north limited the implementation of SMART methodology in 2012, which has somewhat limited the ability to analyse trends in the north.

44,709

Children newly admitted to treatment centers from January to 14 April 2013

Response:

- From 1 January to 14 April, 44,709 children under 5 were admitted to nutrition treatment centres in Mali (south: 36,834 / north: 7,875). About 8 per cent of all children admitted suffered from SAM with complications. Reporting from the north comes only from NGOs (see table).

New admissions to nutrition treatment centres (weeks 1 to 13 of 2013)				
Type of new admission	South*	North*	Total	
URENAM (for treatment of MAM)	22,336	4,936	27,272	
URENAS (for treatment of SAM)	13,123	2,725	15,848	
URENI (for intensive care)	1,375	214	1,589	
Total	36,834	7,875	44,709	

*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).

- In Kayes and Yélimané health districts, the Malian and French Red Cross screened 101,189 children under 5, of whom 6,688 children (7 per cent) were identified as suffering from SAM.
- Several partners have started to re-habilitate or construct Intensive Units for treatment of SAM with complications (URENI), including: Médecins du Monde-Belgium in health centres (CSREF) in Ménaka and in Gao, IRC in Kati in Koulikouro and Terre des Hommes-Lausanne in Markala in Segou.
- The Nutrition Cluster, in collaboration with the Government Nutrition Division, continues to support coordination activities. A mid-term review of the regional nutritional cluster in Kayes was held from 8-14 April, focusing on analysis of 2012 nutritional results, planning for 2013, use of new compilation tools and integrated aspects such as WASH in nutrition and community-based care. This week, the Nutrition Cluster and Government counterparts are in Sikasso to assess the need to establish a regional sub-cluster there.
- In order to harmonize nutrition assessment forms, the cluster is working on guidelines based on Mid-Upper Arm Circumference (MUAC).

Gaps & Constraints:

- Despite high requirements (\$73.7 million), the level of funding for CAP projects remains low. To date, only \$12.3 million has been received, or 16.7 per cent.

**Needs:**

- The security situation in the north is hindering the return of displaced people. IDP households' financial means risk eroding substantially with the prolonged time of displacement. IDP debts, arrears (on rent, etc.) and the risk of eviction will gradually become a more important concern.
- Many IDPs are living in overcrowded rented houses and or in crowded situations with host families. If this situation persists, it will contribute to a general deterioration of the situation of IDPs.

Response:

- UNHCR signed an agreement with NRC to implement a cash transfer programme to cover housing costs and income-generating activities for 1,500 families in Bamako, Segou and Mopti for 8 months.
- The Malian Red Cross and Intersos are distributing NFIs and tents in Mopti region to cover the needs of newcomers from the north.
- A Task Force, comprised of three NGOs, two UN agencies and the General Directorate of Civil Protection (DGPC) was created to review and approve the cluster strategy.

Gaps & Constraints:

- There are only few humanitarian actors in particular in the field of cash transfers to help with housing costs (70 to 75% of IDPs renters).
- There is no support for the improvement of IDPs' host families living conditions (separation of rooms, sanitation).



Emergency Telecommunications

Response:

- ETC will be conducting an assessment mission to Gao from 23 to 26 April to identify the need for deployment of telecommunication services.
- ETC provided two BGAN terminals that will be located and used in Timbuktu and Gao. Additional ETC equipment has also arrived in Bamako.
- The recruitment of additional radio operators for the communication centre in Mopti is ongoing.
- ETC continues to provide the humanitarian community in Bamako and Mopti with Data/Voice network, technical support, installation and programming of handheld and vehicle radios.



Logistics

Response:

- The new UNHAS online booking system is being rolled out in Mali. All users will be able to book their tickets directly online as of May after having received training.
- Weekly UNHAS rotations to Gao have started since 23 April. So far, only special flights had been organized to Gao. UNHAS Mali continues to operate flights to Mopti, Kayes, Timbuktu and Niamey (Niger) from Bamako.
- In the first quarter of 2013, UNHAS doubled the number of passengers transported on a monthly basis (more 500 passengers per month) compared to the 2012 average. UNHAS has also already flown as much cargo as in all of 2012 (10 metric tons).
- The Logistics Cluster continues to serve as a platform for information consolidation and sharing among humanitarian partners. Information remains available at all times on the Logistics Cluster's Sahel Operations webpage at http://www.logcluster.org/ops/sahel_crisis_2012. The new dedicated Logistics Cluster coordinator will be joining the Mali operation this week. The next coordination meeting will take place on 25 April.

General Coordination

On 20 April, OCHA trained 600 Malian soldiers in the military camp of Koulikoro on the civilian-military framework on humanitarian principles. On 19 April, OCHA Mopti led an inter-agency mission in the previously occupied area of Douentza (Mopti). Preliminary findings highlight needs in the following sectors: protection, food security, nutrition, health, education, shelter, water and sanitation and coordination. Information on all regular coordination meetings and contacts of all clusters are available on the site <http://mali.humanitarianresponse.info>

OCHA organizes a meeting every Friday to share information for the humanitarian community. The next meeting is scheduled for Friday, 26 April 2013 at 11:00.

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.

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