Highlights

- Burkina Faso registered 35 security incidents in August, causing 33 civilian casualties, including 6 children.
- The number of internally displaced persons (IDP) reached 1,034,609 (CONASUR, 8 September 2020), out of which over 60 percent are children.
- On 9 March, the first case of COVID-19 was confirmed in the country, reaching 1,370 cases by the end of August (Ministry of Health (MoH)).
- According to the education in emergency technical secretariat of the Ministry of national education, literacy and national languages promotion (MENAPLN), the baccaleureate examination (high school diploma) took place from 3 to 21 August 2020. A total of 125,805 candidates (49 per cent girls) were registered, out of which 121,586 participated in the exams and (96.6 per cent), including 32,219 from regions affected by the security crisis (26.4 per cent). Out of the 47,840 candidates admitted, 23,432 (48.9 per cent) were from crisis-affected regions.
- The results of a nutritional rapid survey in 11 municipalities hosting IDPs showed a very high (>15%) GAM prevalence in 2 municipalities, and high in 4 communes (between 10% and 15%).

UNICEF’s Response and Funding Status

<table>
<thead>
<tr>
<th>Category</th>
<th>SAM admission</th>
<th>Funding status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nutrition</td>
<td>35%</td>
<td>52%</td>
</tr>
<tr>
<td>Health</td>
<td>3%</td>
<td>7%</td>
</tr>
<tr>
<td>WASH</td>
<td>39%</td>
<td>34%</td>
</tr>
<tr>
<td>Child Protection</td>
<td>110%</td>
<td>28%</td>
</tr>
<tr>
<td>Education</td>
<td>62%</td>
<td>5%</td>
</tr>
</tbody>
</table>

UNICEF Appeal 2020
US$96.6 million
Funding Status (in US$)

Situation in Numbers

- 1,700,000 children in need of humanitarian assistance
- 2,900,000 people in need (OCHA August 2020)
- 1,034,609 internally displaced persons (IDP) registered
- 624,674 children (60%) (CONASUR)
Funding Overview and Partnerships

In line with the 2020 UNICEF Humanitarian Action for Children appeal (HAC) appeal, the funding gap at the end of August 2020 was US$71.15 million (74 per cent). During the reporting period, UNICEF Burkina Faso received US$1 million from the German government. UNICEF Burkina Faso would like to recognize this generous contribution, as well as those of other key partners who have contributed US$18.9 million in 2020 and US$6.6 million in 2019 to the HAC 2020. UNICEF also recognizes the flexible and unearmarked funding received in 2020 from the Global Humanitarian Thematic Fund.

Situation Overview & Humanitarian Needs

According to the revised Humanitarian Response Plan 2020 (HRP), an estimated 2.1 million people are in need of protection and 2.9 million people are dependent on humanitarian assistance in Burkina Faso. The country is severely affected by a humanitarian crisis due to insecurity. Attacks by non-state armed groups (NSAG) dramatically increased in 2019 and maintained the same pace in the first months of 2020, with more civilians being targeted or threatened. Consequently, new waves of displacements took place in several regions.

Internally displaced persons

Registration of new IDPs is conducted by the Conseil national de secours d’urgence et de réhabilitation (CONASUR), the government institution in charge of data collection and humanitarian response. As of 8 September, 1,013,234 IDPs had been registered in the country (60 per cent children). Centre-Nord and Sahel remain the regions hosting the highest percentage of displaced populations (41 and 33 per cent respectively).

As of 25 August, 95 out of 1,064 health centres (9 per cent) in five emergency-affected regions were closed and 199 health centre (19 per cent) operating partially. An estimated 1.7 million people have no or limited access to nutrition and health services. The Sahel region continues to register the highest number of health centres closed, 55 out of 133 (42 per cent).

As of 10 March, 2,512 schools were closed due to insecurity depriving 349,909 children of their rights to education and affecting 11,219 teachers. All the schools closed down on 16 March due to COVID-19.

On 9 March, the government of Burkina Faso declared the COVID-19 epidemic. As of 31 August, the MoH confirmed 1,370 cases of COVID-19 (474 females, 896 males), 1,075 recovered and 55 deaths in 12 out of the 13 regions of the country, including 4 out of the 5 regions affected by insecurity. Nine of these regions still have active cases. The average age of confirmed cases is 40.5 years and 64.6 years for deaths.

Figure 1: Evolution of COVID-19 in Burkina Faso from 9 March to 31 August 2020

Source: Ministry of Health

Floods

The rainy season began in April and is believed to be the worst in over a decade. Torrential rains and violent winds caused extensive damage to households and infrastructure across the country. According to CONASUR, as of 10 August, 1,064 health centres (9 per cent) in five emergency-affected regions were closed and 199 health centres (19 per cent) operating partially.

1 Japan, SIDA – Sweden, UNOCHA – CERF, Luxembourg, European Commission – ECHO, KS Relief and British government – DFID
2 USAID – Food for Peace, Denmark, USA BPRM, UNOCHA – CERF, SIDA – Sweden, Austria, European Commission – ECHO, Japan
3 Several donors
4 Humanitarian Response Plan 2020 (HRP) https://www.humanitarianresponse.info/operations/burkina-faso/document/burkina-faso-plan-de-r%C3%A9ponse-humanitaire-r%C3%A9vis%C3%A9-
5 Sahel, Est, Centre-Nord, Boucle du Mouhoun, and Nord regions
6 Schools closed as of 10 March. All the schools are closed as of 16 March
7 http://drive.google.com/file/d/1AeW_p19gkFD87y9VFCG91yJW0Ow/x/view
8 Declaration of COVID-19 https://reliefweb.int/sites/reliefweb.int/files/resources/integration_du_covid-19_dans_la_r%C3%A9ponse_humanitaire.pdf
9 MoH Sitrep #185 http://drive.google.com/file/d/1GJR5auB2Od9n6NizgreGa2rjUWOodOwH/view
10 Boucle du Mouhoun, Cascades, Centre, Centre-Est, Centre-Sud, Haute-Bassins, Nord, Sahel and Sud-Ouest
11 CONASUR, Inondations 2020, Rapport de situation N°17 https://drive.google.com/file/d/1f98bJDVeg6vE3Om6y1nZBO2ysPTV/view
September, 71,341 people have been affected, out of which 13 killed, 50 injured, and 563 households left without shelter. The floods affected all 13 regions cutting off bridges and roads, and causing extensive material damage.

UNICEF and partners provided emergency multisectoral assistance to children and their families in the most affected regions, Centre-Nord and Sahel:

- UNICEF supported the construction of 11 latrines and 11 showers in Kongoussi and 28 latrines in Dori to improve living conditions of 638 affected people on relocation sites, in partnership with the regional directions of water and sanitation.
- 772 children received psychosocial support by mobile teams in the relocation site in Kongoussi
- 1,900 tarpaulins have been distributed to 950 families who had lost or had their shelter damaged in Kaya, in partnership with the regional direction of social affairs.

**Figure 2: Flood situation overview in 2020**

**Summary Analysis of Programme Response**

**Nutrition**

- 4,958 children suffering from severe acute malnutrition (SAM) were admitted into therapeutic feeding programmes across the country in August 2020. This brings the total number of SAM new admissions since the beginning of the year to 54,647 (37.14 per cent of the annual target). Reporting completeness remains low (< 70%), and measures such as weekly data reporting are being developed to improve completeness.
- The screening of acute malnutrition carried out during the second round of the malaria seasonal chemoprophylaxis (CPS) campaign reached 3,684,050 children aged 6 to 59 months against a target of 3,289,192, out of which 31,104 with moderate acute malnutrition (MAM) and 10,189 SAM. Out of the 10,189 SAM children screened, 2,717 were new cases and have been referred to nutrition services, while the other SAM children were already admitted in the treatment program.

UNICEF and WFP supported the Ministry of Health through ONG Davycass to conduct a **nutrition survey** in the 11 municipalities in the Centre Nord, Nord, Sahel, and Est regions, which are hosting 56 per cent of the IDPs of the country.

The main results include:

- two municipalities have a very high global acute malnutrition (GAM) prevalence (>15%): Barsalgho IDP site (16.1 per cent GAM and 4.3 per cent SAM) Centre-Nord region, Gorom-Gorom (18.4 per cent Global Acute Malnutrition (MAG) and 6 per cent Severe Acute Malnutrition (SAM), Sahel region
- four municipalities have a high GAM rate (between 10 per cent and 15 per cent)

---

12 Relocation sites - sites identified by local authorities to allow floods-affected people to settle in
13 Municipalities surveyed: Barsalgho, Bourzanga, Djibo, Dori, Fada NGourma, Gorgadji, Gorom-Gorom, Kaya, Kongoussi, Madiacoali and Ouahigouya
14 According to the WHO threshold classification
15 Fada NGourma (12.5% GAM), Dori (13% MAG), Gorgadji (13.2% MAG) and Bourzanga (13.6% MAG and 4.4% MAS)
five municipalities have a moderate prevalence of GAM (<10%)\textsuperscript{16}

children aged 6-23 months are more vulnerable to GAM than children 24-59 months, as the rates are higher in that age group\textsuperscript{17}

infant mortality rates in all communes and on the site are below the emergency threshold of 2 per cent. However, the results show that the situation is worry some in Barsalogho (1.3 per cent) and in the municipality of Gorgadjii (1.7 per cent), where mortality rates have reached 1 per cent\textsuperscript{18}.

In terms of IYCF activities, the results include:

- 3,575 new mother-to-mother support groups were set up during the reporting period, for total of 22 680 mother-to-mother support groups since January 2020. 51,974 pregnant and lactating women (PLW) were reached by counseling on IYCF practices, for a total of 342,750 for 2020 (61.10 per cent of national target of 560,950).

Nutrition cluster

In August, the cluster carried out an analysis of the partner mapping through the 5W tool. The analysis shows an optimal geographic coverage, but the target coverage is low. This low coverage is mainly due to weak referral system of screened malnourished children to nutrition facilities, and a reduced access to health centres in some insecure areas. The completion rate of nutrition information is around 60-70 %, which means that all SAM children treated in the program are not notified. Following actions are planned to strengthen the response and improve target coverage:

- promote alternative strategies/approaches\textsuperscript{19} to ensure continuity of nutrition services in insecure areas according to the directives of the Ministry of Health (MoH)
- implement an integrated multisectoral Nutrition package that include food security, health and WASH activities targeting especially the Health Districts that have been identified in priority phase according to the Nutrition cluster classification
- Strengthen the follow up of implementation of nutrition response at the health district level and implement corrective actions to address identified bottlenecks.

The members of the cluster commit to strengthen the screening activities during the CPS campaigns, and the referral of cases of acute malnutrition detected.

To improve data collection, UNICEF and partners support the MoH to put in place a weekly reporting mechanism of three indicators\textsuperscript{20} on community management of acute malnutrition (CMAM). The month of August was marked by the beginning of workshops at the regional level on the proposed model to be used: the reporting schedule, the agents to be involved and the indicators to be collected.

Health

As of the end of August, in the framework of the Integrated Community Case management (ICCM) programme, UNICEF and partners reached the following results:

- 26,708 children under the age of 5 (including 10,683 cases of malaria, 6,194 cases of diarrhea and 9,831 cases of pneumonia) were treated at community level in the five regions affected by the humanitarian crisis. 85 percent of notified cases of malaria, 90 percent of diarrhea and 95 percent of pneumonia, were managed by community-based health workers (CBHW). This shows once again the relevance of strengthening community interventions in areas affected by humanitarian crisis
- In the health district of Barsalogho and Djibo, UNICEF continues to support community volunteers with monthly allowances, as well as their supervisions by health workers. This support allowed CBHWs to reach 589 children under the age of 5 for malaria, pneumonia and diarrhea, under the regular supervision of health workers
- 9,165 people benefited from health education talks on essential family practices and on COVID-19 prevention
- the community support has been extended to Pensa (a hard-to-reach municipality in the Centre-Nord region), where 38 volunteers have been recruited. Their training is ongoing on the provision of health care to women and children.

To respond to the emergency in the health sector, package of minimum care services, including gender-based violence, has been developed by the MoH and various partners, which is meant to address challenges linked to access to health care in insecure areas.

A guide for continuity of care in the context of COVID-19 was also developed by the MoH to increase the level of offer and demand for care, which has declined during the pandemic.

\textsuperscript{16} Kongoussi (8.6%), Ouahigouya (9.2%), Kaya and Maliacouli (9.4%) and Barsalogho (9.6%)

\textsuperscript{17} 10.1% of GAM for 6 to 23 months vs 7.8% of GAM for 24 to 59 months

\textsuperscript{18} The WHO emergency threshold is 1/10,000/day for children

\textsuperscript{19} Simplified approaches: Prevention and treatment of acute malnutrition using one admission criteria, the MUAC and one treatment product, ready-to-use therapeutic food (RUTF) https://drive.google.com/file/d/1Oq8B4TPoQSiLJgdpGm7JLnaK86sl-F/view

\textsuperscript{20} The 3 indicators are: new weekly SAM admissions, number of deaths and number of stock-out day of ready-to-use therapeutic food (RUTF)
WASH
In August 2020, UNICEF and its partners achieved 32 percent of the annual water targets, 12 percent of the sanitation target and 76 percent of the hygiene target, including the distribution of hygiene kits.

The following activities (non-exhaustive) were implemented:
- Centre-Nord region. Construction of six boreholes and rehabilitation of eight boreholes, guaranteeing access to drinking water to 7,000 people, and the distribution of 1,125 hygiene kits to 7,875 people
- Sahel region. Rehabilitation of 4 boreholes guaranteeing access to drinking water to 2000 people through the and the construction of 141 latrines for 2800 people

The main constraints in the implementation of activities are the inaccessibility of some localities for security reasons and the beginning of the rainy season which makes some sites inaccessible for drilling and slows down the construction of latrines.

WASH cluster
In August 2020, WASH cluster members, including UNICEF, provided access to water services to 64,151 people, to sanitation services to 64,153 people and improved hygiene conditions for 75,182 people. The progress rate towards the annual targets is 36 percent for access to water, 27 percent for access to sanitation and 56 percent for access to hygiene. The cumulative results refer to data reported by 33 organizations members of the cluster and not only to the 25 organizations which have projects registered in the HRP. While the sector funding situation is improving, the gap is still high and represents one of the main challenges in the progress towards targets, together with insufficient capacity of the sector stakeholders to face the gravity of the crises and the rapidly increasing needs.

Education
In August 2020, UNICEF reached 217,984 children (106,043 girls/48.7%) with formal, non-formal and informal educational support in the five regions in emergency, reaching 62.2 per cent of the annual target. The result is the same as July because of the school holydays (except for children in exam classes, who partially attended school between June and August) and because there are no new beneficiaries reported in the informal learning radio programme being broadcasted since April. This radio programme has reached 191,960 children (92,943 girls/48.4%) aged 10 to 16 years, and who have already completed at least 4 years of primary,

UNICEF plans to increase support to formal and non-formal education activities in the coming months as schools are scheduled to open on 1 October as the beginning of the school year 2020 - 2021. To strengthen the quality of learning, 8,217 teachers (2,454 women/29.8%) from 1,020 schools in the North, Centre Nord, Sahel East regions were trained on various technical areas, such as psychosocial support and conflict disaster risk reduction (CDRR).

Child Protection
- In August, UNICEF, in coordination with the United Nations System, maintained advocacy toward the government to end and prevent grave violations against children, in accordance with international standards. A technical review of the handover protocol with government entities and other partners was completed. The technical validation is scheduled before the end of September 2020.
- UNICEF conducted a second training on monitoring and reporting of child rights violations for 26 child protection actors from national and international NGO and UN institutions. In total, 51 actors were trained and contributed to the reporting, under the umbrella of the child rights violations technical working group.
- UNICEF is supporting the Ministry of Women, National Solidarity, Family and Humanitarian Action (MFNSFHA) to reinforce the information and management system by creating a new version child protection information management system (CPIMS+ 1.6) which integrate both emergency and development contexts. The process of revision and harmonization of the national child protection case management procedures, data collection and reporting tools was completed. This new version is a step forward to take into account the management of various children concerns such as unaccompanied and separated children (UASC) associated with armed groups, children on move, etc. Its implementation is ongoing in the two pilot regions (Centre-Nord and Sahel).
- The MFNSFHA validated a training toolkit for the child protection community-based mechanisms. Consultations were conducted with stakeholders in the Centre-Nord and Sahel regions for the capacity building process using the new training tools.
- UNICEF, in coordination with the MFNSFHA and its implementing partners, carried out an assessment of the results related to child protection in emergency indicators. The objective is to generate evidence to measure the reality, effectiveness and quality of child protection services, to identify bottlenecks and to define appropriate strategies to achieve more sustainable results for children and families.
- UNICEF took the prevention of sexual exploitation and abuse (PSEA) orientation prior to the implementation of two humanitarian program documents (HPD) on gender-based violence (GBV) prevention and response in the context of COVID-19 in Sahel and East regions. UNICEF also trained of implementing partner on internal

21 Hygiene kits are composed of 1 plastic bucket (20L), 2 plastic jerrycans (20L), 7 bars of soap (400gr), 1 plastic kettle (2L), 2 plastic cups (500mL), 1 potty
22 Some WASH cluster members revised the previous months reporting, which explains the reduction in the cumulative results.
23 The first session of training for 25 child protection actors from national and international NGOs was held from 14 to 17 July 2020.
procedure to report sexual exploitation and abuse. In addition, UNICEF completed the process of PSEA risk assessment for 16 implementing partners. Follow up is ongoing for the PSEA compliance for implementing partners classified as high risk.

Communications for Development (C4D), Community Engagement and Accountability

- UNICEF continued to provide support, alongside OCHA, to the interagency community engagement and accountability to affected populations (CEAAP) working group. UNICEF has planned a second-round of community dialogues and interactive radio programmes as feedback mechanisms to support social cohesion and peace promotion effort, and engage communities in the humanitarian response
- UNICEF, through its partner Action Communautaire pour le Développement (ACD), continue broadcasting radio programmes, including live dialogues sessions, radio theatres and games, to provide lifesaving messages and information on access and availability of services, mainly targeting affected populations from affected regions (Centre Nord and Sahel)
- UNICEF and ACD also trained 300 community relays in the Centre-Nord on humanitarian response (WASH, health, nutrition, child protection and education) including lifesaving messages. The objective is to engage communities and promote positive, healthy and protective practices.
- UNICEF facilitated the training of 25 media workers on humanitarian principles and standards, humanitarian information and sectoral response to the emergency in the Centre-Nord. This training aimed to improve media content and production, as well as to reach affected people with appropriate messages to address their information needs and feedbacks.
- UNICEF continues to provide support to the MoH in the round 1 of the polio campaign in 36 health districts of seven regions with a focus on communication for social and behaviour change/social mobilization, including training sessions, radio and TV programmes, door-to-door visits and town criers. The campaign will take place 18 to 22 September.
- COVID-19. UNICEF continues to provide support to the national risk communication and community engagement response. UNICEF reinforced its interventions to address the continuity of health services and demand in the COVID-19 context. UNICEF developed new partnerships with Plan International and the Centre pour l’Éducation, la Réinsertion Sociale et l’Éducation des Enfants (CERESSE) to prevent and control community outbreaks among IDPs in the Centre-Nord and the capital Ouagadougou. This Programme will be implemented mainly through: Interpersonal communication including door to door sensitization, group discussion, community dialogue, radio programs and training on COVID 19 prevention for community relay and volunteers

Media and external communication

The media and external communication team reached out to media to raise awareness on the humanitarian situation and response, focusing on the implementation of humanitarian activities in times of COVID-19.
- The growing insecurity depriving 1.2 million people of access to basic healthcare was reported on Facebook, Instagram and Twitter, as well as the growing number of IDPs, half of whom are children on Facebook, Twitter (here and here)
- The thematic of psychological support for children affected by the crisis was reported on Facebook, Instagram and Twitter (here and here), including credits and thanks to donors and implementing partners
- On World Humanitarian Day on 19 August, UNICEF commemorated humanitarian workers killed and injured in the course of their work on Facebook, Instagram (here and here) and Twitter (here and here)
- UNICEF deplored and condemned the killing of six children by an improvised explosive device Twitter, Facebook
- UNICEF Goodwill Ambassador Smarty visited the IDP site of Louda to raise awareness on their situation (Facebook here and here, Twitter here and here)

Humanitarian Leadership, Coordination, and Strategy

In 2020, UNICEF Burkina Faso aims at addressing the most urgent needs of 1.5 million people, including 690,000 vulnerable children, affected by humanitarian crisis in the five most affected regions by scaling up its response to emergencies while strengthening social cohesion and resilience. The bottom line is to ensure continuity and high coverage of services to children and families in crisis-affected regions, in accordance with UNICEF’s Core Commitments for Children (CCC) engagements.

UNICEF humanitarian action is guided by guided by 3 principles:
- Continuity of services in the context of COVID-19 and beyond (as part of Stay and deliver24)
- Acceleration of service coverage within the framework of the nexus humanitarian-development-peace/sustaining peace agenda
- Staff safety/security/wellbeing in the high-risk zones

UNICEF supports community-based interventions in areas where the government suspended basic social services or where insecurity severely restricted access to the most vulnerable populations. This action is seen as an opportunity

---

24 Stay and deliver: the 2011 concept on policy and operations in highly insecure environments provides advices and recommendations to practitioners on critical issues, such as risk management, responsible partnerships, adherence to humanitarian principles, acceptance and negotiations with relevant actors.
to strengthen the involvement of communities and local authorities in co-creating solutions to issues affecting children and families, and to showcase the development-humanitarian-peace nexus.

With the drastic increase in the number of IDPs, UNICEF increased its presence by setting up field offices in Dori (Sahel region) and Kaya (Centre-Nord region), and since mid-February, in Fada N’Gourma (Est region). UNICEF is the lead agency for the WASH, nutrition, education clusters and Child protection area of responsibility. UNICEF is also strengthening the operational and information management capacities of the clusters though the recruitment of dedicated specialists at national and subnational levels.

Updated information on the clusters main activities can be found online:

Education cluster https://www.humanitarianresponse.info/en/operations/burkina-faso/education
Health cluster https://www.humanitarianresponse.info/en/operations/burkina-faso/health
Nutrition cluster https://www.humanitarianresponse.info/fr/operations/burkina-faso/nutrition
WASH cluster https://www.humanitarianresponse.info/fr/operations/burkina-faso/water-sanitation-hygiene
CPAoR https://www.humanitarianresponse.info/en/operations/burkina-faso/protection-de-lenfant

COVID-19 adaptation

Following the COVID-19 outbreak in Burkina Faso, an inter-ministerial national coordinating committee (NCC) was set up under the lead of the MoH for the planning, coordination, implementation and monitoring of COVID-19 preparedness and response. The NCC includes all the financial and technical partners. For coherence purpose and rational use of available technical resources, the members of the health cluster are also members of this coordination mechanism.

UNICEF participates in four commissions established by the government to design, implement, monitor and coordinate the response to COVID-19:

- Coordination commission, where UNICEF plays a key role in the design of government response to COVID-19
- Case management commission, which holds daily meetings to assess the situation of new cases, and challenges related to tests and treatments of those who are already infected
- Logistics commission, where UNICEF provides support for the procurement of oxygen concentrators, protection masks, gloves of protection (covering 10 per cent of the national needs), resuscitation devices, and hand sanitizer
- Risk communicaction and community engagement commission, where UNICEF is the co-lead with the MoH, to develop key messages to raise public awareness on the prevention of COVID-19. UNICEF also publishes press releases about the epidemic in Burkina Faso (here and here).

CLUSTER COVID-19 useful links

Education https://drive.google.com/drive/folders/1Tq4I3VCoAeBVJw5mnyv400NDB4k_qTtW?usp=sharing
Nutrition https://drive.google.com/drive/folders/1zyVA-Me0A8umE7MdcAxw9k2cVX5P3Ory?usp=sharing
WASH https://drive.google.com/drive/folders/1g063M4QgnsvivzdWOJVD9m4kKVC79-YH?usp=sharing
CPAoR https://drive.google.com/drive/folders/1nV3yI4Gsj-LxpQpfW_J9JHLZ6hrBF8y3

Next SitRep: 30 September 2020
UNICEF Burkina Faso Facebook and Twitter

Who to contact for further information?

Sandra Lattouf
UNICEF Burkina Faso
Tel: +226.25 491 101
Email: slattouf@unicef.org

James Mugaju
UNICEF Burkina Faso
Tel: +226.25 491 105
Email: jmugaju@unicef.org

Hadrien Bonnaud
UNICEF Burkina Faso
Tel: +226.66 93 31 32
Email: hbonnaud@unicef.org
## Summary of Programme Results

<table>
<thead>
<tr>
<th>Sector</th>
<th>Cluster/Sector Response</th>
<th>UNICEF and IPs</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2020 target</td>
<td>Total results</td>
</tr>
<tr>
<td><strong>Nutrition</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td># children under the age of 5 with SAM admitted into therapeutic feeding programmes</td>
<td>147,131</td>
<td>54,647</td>
</tr>
<tr>
<td># caregivers of children reached with infant and young child feeding counselling</td>
<td>560,950</td>
<td>342,750</td>
</tr>
<tr>
<td><strong>Health</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td># children aged 6 to 59 months vaccinated against measles</td>
<td>270,000</td>
<td>8,499</td>
</tr>
<tr>
<td># children and women received primary health care in UNICEF-supported facilities</td>
<td>375,000</td>
<td>180,195</td>
</tr>
<tr>
<td># people received long-lasting insecticide-treated nets</td>
<td>135,665</td>
<td>31,000</td>
</tr>
<tr>
<td><strong>WASH</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td># people accessed sufficient quantity of safe water for drinking, cooking and personal hygiene</td>
<td>985,000</td>
<td>356,204*</td>
</tr>
<tr>
<td># people accessed appropriate sanitation facilities</td>
<td>690,000</td>
<td>189,594*</td>
</tr>
<tr>
<td># people reached with handwashing behaviour change programmes</td>
<td>1,050,000</td>
<td>585,892*</td>
</tr>
<tr>
<td><strong>Child Protection</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td># children accessed mental health and psychosocial support</td>
<td>268,800</td>
<td>240,636</td>
</tr>
<tr>
<td># children and women accessed gender-based violence risk mitigation, prevention or response interventions25</td>
<td>27,300</td>
<td>21,926</td>
</tr>
<tr>
<td># unaccompanied and separated children accessing family-based care or appropriate alternative services</td>
<td>4,000</td>
<td>2,628</td>
</tr>
<tr>
<td># children separated from armed groups including other at-risk girls and boys accessing reintegration support</td>
<td>250</td>
<td>6</td>
</tr>
<tr>
<td># children from vulnerable households affected by the crisis who have access to cash transfer for child protection</td>
<td>25,000</td>
<td>22,872</td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td># children accessed formal or non-formal education</td>
<td>500,000</td>
<td>249,669</td>
</tr>
<tr>
<td># children aged 3 to 17 years affected by crises receiving mental health and psychosocial support through strengthened capacities of teachers to provide supportive care environments at school</td>
<td>544,273</td>
<td>32,018</td>
</tr>
<tr>
<td># girls and boys aged 3-17 years affected by crisis receiving learning materials</td>
<td>520,000</td>
<td>31,802</td>
</tr>
<tr>
<td><strong>Rapid response</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td># displaced persons, including the ones living with disabilities, provided with essential household items</td>
<td>70,000</td>
<td>9,99926</td>
</tr>
<tr>
<td><strong>Communication for development</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

25 July data under cross-checking to remove possible double counting  
26 This result seems low compared to the target because funds dedicated to multisectoral response have been prioritized for multipurpose cash transfer which will benefit 4000 households, equivalent of 28,000 persons which will receive 3 monthly cash transfer.
# people in host communities reached with key life-saving / behaviour change messages on essential family practices

<table>
<thead>
<tr>
<th></th>
<th>150,000</th>
<th>488,000</th>
<th>▲3,000</th>
</tr>
</thead>
</table>

* Including retroactive correction of data from July 2020 which had been previously incorrectly reported by a member NGO.

** Including retroactive reporting of some UNICEF implementing partners regarding the results obtained in previous months.

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</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Current Year</td>
<td>Carry-Over</td>
</tr>
<tr>
<td>Nutrition</td>
<td>17,315,100</td>
<td>8,108,069</td>
<td>835,497</td>
</tr>
<tr>
<td>Health</td>
<td>10,281,116</td>
<td>494,163</td>
<td>227,921</td>
</tr>
<tr>
<td>WASH</td>
<td>25,263,857</td>
<td>5,167,676</td>
<td>3,402,948</td>
</tr>
<tr>
<td>Child Protection</td>
<td>11,228,787</td>
<td>2,022,615</td>
<td>1,094,666</td>
</tr>
<tr>
<td>Education**</td>
<td>27,727,668</td>
<td>469,245</td>
<td>1,050,117</td>
</tr>
<tr>
<td>Rapid response management and</td>
<td>3,050,000</td>
<td>2,579,815</td>
<td>0</td>
</tr>
<tr>
<td>implementation</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Communication for development</td>
<td>1,800,000</td>
<td>62,885</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>96,666,528</strong></td>
<td><strong>18,904,468</strong></td>
<td><strong>6,611,149</strong></td>
</tr>
</tbody>
</table>

* As defined in Humanitarian Actions for Children (HAC) Appeal 2020 for a period of 12 months (January-December 2020)

**The education sector benefitted from additional funding, not against this HAC (US$ 789 570 as of September), from Education Cannot Wait and Global Partnership for Education, which contributed to the achievement of the HAC results.