



BURUNDI

Humanitarian Situation Report No. 4 2020



Reporting Period: 01 January to 31 December 2020

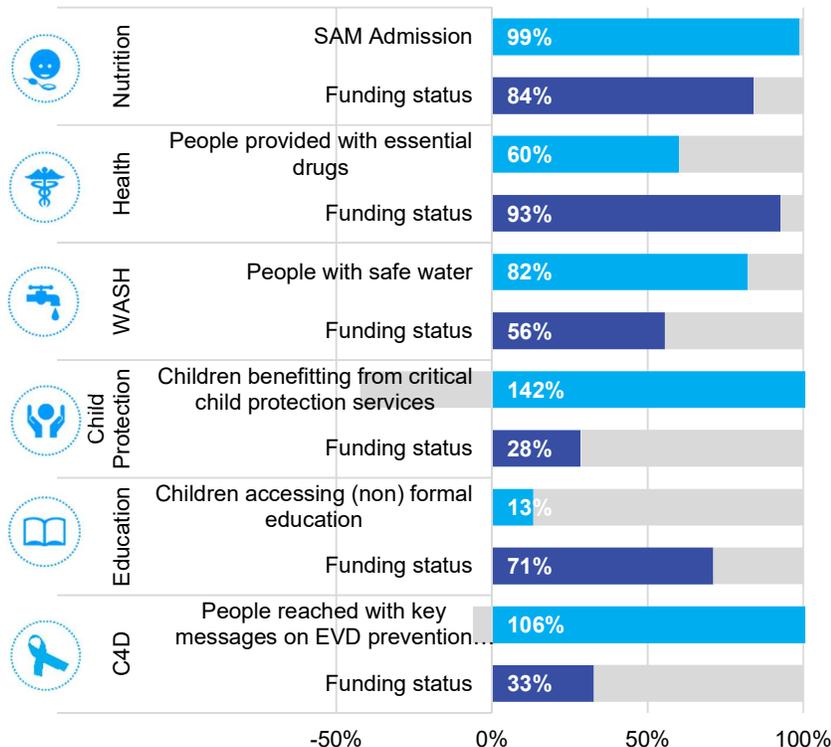
Highlights

- The **epidemiological situation** in Burundi has remained a focus throughout 2020 with episodes of cholera, a relatively high incidence of malaria and measles cases. The COVID-19 pandemic has hit the country in March and while trends have been relatively low, a worrying increase in the number of cases has been reported at the end of the year.
- The number of **internal displacements** increased for the first time since 2018 as a result of the **floods** that severely hit the country in the first half of the year, further causing human and material damages to those affected.
- UNICEF and its partners have provided a **multidisciplinary response** to the 25,000 people in temporary displacement sites and have continued to support the Ministry of Health (MOH) in responding to health emergencies.
- More than 44,000 children received treatment for severe acute malnutrition, 227,000 were provided with critical protection services and 136,681 were reached with hygiene messages.
- UNICEF has **mobilized 60 per cent** of the 2020 Humanitarian Action for Children (HAC) funding to address the most essential needs of children and women in Burundi.

Situation in Numbers

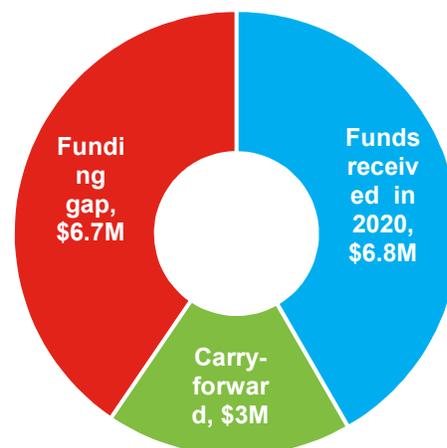
- 976,170** children in need of humanitarian assistance
- 1.74 million** people in need (HNO 2020)
- 127,832** Internally displaced people in 18 provinces (IOM DTM September 2020)
- 120,494** people repatriated from Tanzania, including approx. 40,000 in 2020 (UNHCR December 2020)

UNICEF's Response and Funding Status



UNICEF Appeal 2020 US\$ 16.5 million

Funding Status (in US\$)



Funding Overview and Partnerships

UNICEF's appeal for Burundi stands at US\$ 16.5 million to sustain the provision of life-saving services for women and children affected by humanitarian crises, for which 60 per cent has been mobilised as of 31 December 2020.

Through the support provided by the Governments of Japan and of the United Kingdom, WASH and health teams have been able to deploy emergency response to the cholera and malaria epidemics. The US Fund for UNICEF and the German National committee for UNICEF have responded to the urgent appeal for assistance in January for those affected by the heavy rains and floods in Bujumbura and other provinces. The contribution of the German Government during the third quarter complemented these efforts with respect to displaced persons at risk of COVID-19. The US Agency for International Development (USAID) renewed its support for the fight against child malnutrition (through Food For Peace) and together with the UK extended assistance to prepare for the Ebola Virus Disease (EVD) epidemic in the format of a consortium with other UN sister agencies with UNICEF designated as the lead agency. Thanks to the financial contribution of the Swedish International Development Cooperation Agency (SIDA), one of UNICEF's key humanitarian partners in Burundi and the Central Emergency Response Fund (CERF), UNICEF has been able to provide multidisciplinary assistance in response to urgent crises affecting children and their families. ECHO supported the birth registration campaign for undocumented children in provinces registering high number of returnees. Finally, in December, the Government of Korea provided its support to better respond to emergencies and to prepare the education sector to deal with emergencies affecting children in Burundi.

One of the most underfunded sectors in 2020 is the WASH sector, even though it is an essential component of the response to the crises Burundi is facing, particularly when it comes to assistance to people affected and at risk of epidemics and natural disasters. This low level of resource mobilization has impacted the capacity of UNICEF to respond sufficiently to flooding and public health emergencies through the promotion of hygiene and access to safe drinking water. With the increase of COVID-19 cases in Burundi, hygiene promotion will be even more important in 2021 and will lead – even beyond COVID-19 –to children growing up much healthier. UNICEF is counting on its partners to substantially support this critical area in 2021.

UNICEF expresses its sincere gratitude to all public and private donors for the contributions received this year as well as in 2019 and carried forward in 2020, despite the challenging context due to the COVID-19 pandemic. Much effort will have to be maintained in 2021 on many fronts and UNICEF is counting on its partners to continue providing the necessary assistance and services to Burundi's children and their families in order to meet the many challenges ahead.

Situation Overview & Humanitarian Needs

The year 2020 began with **episodes of heavy rain, wind and landslides** that were repeated throughout the first half of the year and caused considerable material and human damage. UNICEF and its partners were present from the first days to respond to the most urgent needs to approximately 100,000 people affected but also to support the recovery phase.

While **cholera and malaria** diseases persisted in the country, efforts were deployed to prevent the risk of **Ebola** spill-over from the Democratic Republic of Congo before the epidemic was declared over. The **COVID-19 pandemic** hit Burundi on March 31, 2020. A mass testing campaign was organized from July to October. Despite relatively low trend of cases, an increase has been observed at the end of 2020 bringing the total of cases to 882 out of 85,431 people tested and two deaths as of December 31st. A response plan was developed by the MoH, together with partners in March. The public health emergency operation centre was made operational in September making it possible to strengthen the coordination of response services.

Finally, since the May 2020 elections, the expected gradual **return of Burundians**, including those who had found refuge in Tanzania and Rwanda, was confirmed with the arrival of 34,347 returnees during the second semester. A tripartite agreement was signed in August between Burundi, Rwanda and UNHCR to organize the process of voluntary repatriation. Since that date, almost 8,000 Burundians have been able to return from Rwanda. The process with the Democratic Republic of Congo has also resumed in September.

Summary Analysis of Programme Response

Nutrition

The nutrition sector succeeded in maintaining critical services to save children's lives in 2020 despite the pandemic. A total of 100% of district hospitals (53 inpatient facilities (IPF)) and 83% (602 outpatient therapeutic programmes (OTP) out of 725) of health facilities offered **therapeutic nutrition care** for children under five with severe acute malnutrition (SAM). From January to November 2020, 44,466 children with SAM (23,567 girls and 20,899 boys) were admitted and

treated in the twelve most vulnerable provinces and those hosting IDPs and returnees targeted in the Humanitarian Response Plan (HRP)/Humanitarian Action for Children (HAC) appeal. The trend in SAM admissions in 2020 is similar to the two previous years (2019 and 2018). Community management of acute malnutrition (CMAM) performance indicators are within SPHERE standards with 90 per cent cured. Government successfully organized two rounds of Vitamin A supplementation campaigns in July and December 2020. The first round using community-based distribution reached 99.5% of targeted under five children.

In response to the COVID-19 pandemic, 5,330 Community Health Workers (CHW) and 889 Health providers were trained and equipped with Personal Protective Equipment (PPE) and about 938,000 people were sensitized on breastfeeding in the context of COVID. An acute Integrated Food Security analysis conducted in August indicates a comfortable situation but predicted a worsened food security situation by December 2020 with 11% of the population in Phase 3 (crisis) compared to 6% in August. The factors at the base of this deterioration highlighted by the analysis are mainly the **coming lean season, the socioeconomic impact of COVID-19, the pressure of the flow of returnees which can explain the deterioration of the nutrition situation of children revealed by 2020 nutrition survey**. UNICEF plans within the framework of HAC 2021 to pre-position nutritional inputs in at-risk districts and to strengthen access to WASH services in water-deficit areas. Preliminary results of the SMART survey indicated a slight increase in Global Acute Malnutrition (GAM) prevalence from 5.1% to 6.1% (national figure) with 30 Health Districts classified in medium situation (GAM >5%-9%) and one District with GAM at 10.9% and classified high on the WHO new classification.

Health

As of end December (week 52), a total of **1,879 cases of measles** were reported in 41 out of 47 health districts of the country. Children below 5 years old account for 54% of those affected. UNICEF supported a reactive mass vaccination campaign against measles in April 2020 in 6 districts affected and those most at-risk, as well as the vaccination of 51,290 children over the year. The number of new infections has reduced significantly from week 18 (last week of April) to week 28 (first week of July). However new infections have emerged in other districts and the number of cases increased to 95, 96 and 132 respectively in weeks 46, 47 and 50. A mass vaccination campaign targeting 570,466 children aged 6 to 59 months took place in 14 health districts from December 14th to 18th and the results are awaited. The campaign was funded by the Outbreak Response Fund (ORF) which is managed by the Measles and Rubella Initiative (M&RI) following a proposal developed by the country with the support of UNICEF and WHO.

The **situation of cholera** has improved compared to last year with 139 cases since the beginning of the year of which 22 cases were notified from week 48 to 50, after 8 weeks with no reported case. UNICEF continues to support the MoH's efforts to strengthen the decentralized surveillance system. Interagency emergency health kits (IEHK)/acute watery diarrhea (AWD) kits have also been pre-positioned at the central drug store.

On **malaria**, weekly cases have varied in 2020, with more than 120,000 cases per week at the beginning of the year, decreasing then to 60,000 cases around the 35th week; increasing with the onset of the rains, to 131,000 cases by week 48 (29th November 2020); and followed by a light decrease although remaining superior to 100,000 cases, until the end of the year. A total number of 4,713,699 Malaria cases were reported in 2020, including 2,712 deaths (CFR 0.058%), which are much lower figures than the ones reported for the same period in 2019 (8,889,466 cases and 3,289 deaths - CFR 0.037%). Although there are fewer cases of malaria in 2020, the fatality rate is of concern and needs to be closely monitored. By the end of December 2020, outbreaks were declared in nine health districts in seven provinces. Using funding from the UK and Japan Governments, UNICEF is currently procuring malaria drugs, in line with the new protocol on first line treatment, drugs for intermittent preventive treatment for pregnant women, bed nets, as well as supporting capacity building and supervision activities on the new guidelines for treatment.

WASH

Since the beginning of 2020, UNICEF and its partners – the INGO Gruppo di Volontariato Civile (GVC), the Civil Protection and the Burundian Red Cross - provided WASH services to **people affected by floods and those affected or at risk of cholera outbreak** in the provinces of Bujumbura Mairie, Bujumbura rural and Cibitoke. During the past three months UNICEF has increased its water capacity supply to provide 7.5 litres per person per day to people affected by floods in Gatumba. In total, 82,137 people (22,846 girls, 21,950 boys, 19,044 women and 18,297 men) have been reached. Hygiene promotion and hygiene kit distribution have been extended to host communities to reach a total of 136,681 persons (37,83 girls, 36,346 boys, 31,808 women and 30,561 men). Emergency sanitation facilities have been provided to 10,200 persons (2,913 girls, 2,799 boys, 2,289 women and 2,199 men) in IDP sites in Gatumba.

In support to the MoH and in collaboration with the World Health Organization (WHO) for **Ebola preparedness and COVID-19 response**, UNICEF supported the construction of additional 20 latrines, 20 showers, incinerators in three health facilities and supported the training of 47 hygienists. In total, 126 health workers were trained on infection

prevention and control (IPC) and WASH this year. UNICEF has also provided WASH services to 24 entry points and contributed to improving IPC/WASH in 14 healthcare facilities, which has benefited an average of 22,119 patients per month.

Towards the end of the year 2020, UNICEF started the drilling of two boreholes to reinforce and extend the drinking water supply system in the Gatumba area in general and in the **IDP sites** in particular, but the project has not yet finished due to the administrative constraints of the availability of the drilling site; the Ministry of Hydraulics is working on finding a solution.

In five flooded schools in Gatumba which affected 6,118 children (including 3,128 girls and 2,990 boys), a project for the construction of latrines adapted to climate change has been prepared and is currently ongoing. A cholera prevention program began during the two last months of 2020 in the commune of Nyanza Lac by restoring a drinking water supply system damaged by the heavy rains, which can serve 4,476 people in the Nyanza-Lac commune (1,512 women, 1,432 men and 1,532 children).

Education

In 2020, UNICEF supported 8,004 **displaced, returnee and refugee children** (including 3,515 girls) to reintegrate schools through a catch-up programme, in collaboration with NGO partners, including Jesuit Refugee Service, the Association for the Rehabilitation of victims of disasters and Hundreds of Original Projects for Employment (HOPE 87), in the provinces of Cankuzo, Kirundo, Makamba, Rutana, Rumonge, Ruyigi and Muramvya.

As part of the **EVD preparedness**, UNICEF and the Ministry of Education in collaboration with the Ministry of Health trained 1,954 teachers (including 853 women) to disseminate awareness raising on prevention and protection behaviors, resulting in 104,146 pupils (including 72,484 girls) being reached with the sensitization messages in the provinces of Cankuzo, Kayanza, Kirundo, Muramvya, Muyinga, Rumonge, Rutana and Ruyigi.

UNICEF in collaboration with its partners (including Fondation Terre des Hommes, War Child, Right to Play, Human Health Aid Burundi), supported the continuity of schooling and/or smooth return to school for **children affected by the floods** in the provinces of Bujumbura Mairie, Bujumbura Rural, Cibitoke and Bubanza, and provided school materials to 14,681 children (including 6,678 girls). In response to the aftermath of the flood in Gatumba, Bujumbura Rural, UNICEF also assisted the Ministry of Education to reintegrate 2,000 children to school through the provision of 1,000 school desks and teaching materials to 68 teachers (including 35 women).

In partnership with three NGOs Jesuit Refugee Service, Association Communautaire pour la Promotion et Protection des Droits de l'Homme and War Child Holland, UNICEF trained 2,629 teachers and School management committees members (including 898 women) on **education in emergencies** in the provinces of Muyinga, Ruyigi, Kirundo, Rumonge, Cankuzo, Makamba and Rutana in order to build capacities on disaster risk reduction which also included a specific module on the prevention of gender-based violence in a crisis context.

Child Protection

In 2020, despite the COVID-19 pandemic challenges, UNICEF and its partners were able to support access to protection services for **227,886** vulnerable children (including 115,871 girls) affected by humanitarian crises.

Out of these, **167,221 children** (including 78,486 girls) benefited from recreational activities and psychosocial support, including **17,453 children** (10,471 girls) displaced in Gatumba **due to flooding**. These interventions were put in place through 145 community-led child friendly spaces in Rumonge, Bubanza, Cibitoke, three drop-in centres in Bujumbura and child friendly spaces in Gatumba's provisional sites.

Children regularly attending child friendly spaces as well as other children identified by community-based child protection mechanisms including children victims of violence were referred to other services when needed. Therefore, 1,288 children, including 686 girls were referred for medical care; **1,831** separated and unaccompanied children (including 873 girls) were documented and benefited from alternative care, family reunification and follow-up; whilst **11,352 children**, 6,911 girls, benefited from **school and socio-economic reintegration**, including through the contribution of solidarity groups (community self-help initiatives). In addition, **1,071** children including 256 girls were released from detention and assisted by child protection partners. These results were achieved with the participation of various NGO partners¹ in collaboration with the local administration, as well as through the contributions of members of 426 child protection committees, and the capacity building of 402 social workers (including 186 women).

¹ FVS-Amade, Fondation Stamm, PPSM, Giriyoja, War Child, UCBUM, Fondation Terre des Hommes, AFJB and Sopaje.

UNICEF and partners have throughout the year put a strong incentive towards awareness raising on COVID-19 and reinforcing GBV risk prevention in all child protection interventions.

In addition, with EU Humanitarian Aid, amongst other donors, **128,283** children (61,922 girls) benefited from birth certificates in Ruyigi Province which hosts the highest number of **returnees from Tanzania**, as well as in Makamba, Rutana, Rumonge, Cibitoke, Bubanza.

Communication for Development (C4D), Community Engagement & Accountability

In 2020, UNICEF implemented various behaviour change interventions in **prevention to the Ebola Virus Disease** (EVD), COVID-19, cholera, malaria epidemics and flooding affecting the population in various provinces. With its partners (The MOH, CONCERN Worldwide, Red Cross of Burundi, World Vision, Caritas Burundi, and Population Center Media of Burundi, Inter-Religious Council of Burundi, World Vision), UNICEF's interventions reached 3,963,096 people. Their knowledge was strengthened on **lifesaving behaviours and referral to essential services** (including but not limited to hygiene promotion, immunization, severe acute malnutrition, measles treatment, etc.) through 20 local radio and TV and interpersonal communication. Key messages validated by the MOH were delivered in Kirundi, French and Swahili. Assessments conducted through U-Report on COVID-19 reported an increase in the level of knowledge about preventive measures among U-Reporters from 68% in March 2020 to 91% in June 2020. As a result of sensitization activities, data from the rapid assessment conducted in May 2020 showed that 61% of respondents had built tippy tap devices in their households as an additional mean to encourage handwashing and to protect themselves against COVID-19.

Furthermore, as part of the **prevention and response to COVID-19**, a socio-anthropological research study was undertaken to better understand the social determinants and barriers to healthier behaviours against Ebola and COVID-19 in households and communities. The validated report revealed the persistence of norms such as funeral rites, family ceremonies with the sharing of drinks and food, and poor handwashing practice and social distancing measures. The main recommendations are related to the promotion of large-scale community engagement (including young people) in social and behavioural change interventions. These findings were used to reorient behaviour change messages related to rumours and social norms. Following school club activities, 18,239 schoolchildren have been engaged as change agents to promote good behavioral practices in their families. Although much of the communication focused on COVID-19, the impact on positive hygiene behaviours is likely to have a positive effect on other diseases related to poor hygiene. A partnership with the Inter-Religious Council of Burundi and other INGOs resulted in the training of 7,463 community leaders (3,806 women and 3,657) and 1,836 community relays (450 women; 1,080 men; 306 youth) for the dissemination of good behavioral practices. The COVID-19 hotline was activated, and U-Report was used to provide on-demand information on COVID-19, allowing 167,156 people to share their concerns and ask about available services.

The 12 most affected health districts were targeted for the communication on the **new protocol for malaria treatment**. These messages reached 394,830 persons and their families as well as 100 community leaders were trained on signs and symptoms of malaria / cholera and other related topics to further spread key messages in their villages.

To date, 83,639 adolescents (44,074 girls; 39,565 boys) at school and out of school were empowered and became community agents of change with skills that enhance a greater sense of **social cohesion and peace**, as well as developing self-reliance.

COVID-19 response

In line with the MOH's Contingency Plan and as the co-lead of the **Risk Communication and Community Engagement** (RCCE) pillar, UNICEF provided a guiding framework and coordinated approach for COVID-19 pandemic response. The rapid resource mobilization allowed to implement RCCE interventions swiftly. UNICEF supported the mass communication campaigns through radio and TV spots, reaching more than 9 million people across the country. A total of 860,036 people were also reached through community engagement activities, including through the strong implication of religious leaders and community platforms in the promotion of good behavioral practices and the promotion of feedback mechanisms. In total, 68% of respondents on a U-report poll in July 2020 reported an increase in the use of soap in hand washing compared to the previous month. In addition, 5,340 schools were provided with information/education/information materials, reaching 2.2 million children and teachers with COVID-19 awareness messages and activities focusing on barrier measures and practices aimed at the continuation of learning. Adolescents in and out of school have also been of a focus and involved to become agents of change in their community and families through peer education and family dialogues.

As part of **infection prevention and control** interventions (IPC), a private-public partnership reducing by 50% the price of soap benefited to an estimate of 2 million people whilst behaviour change efforts towards regular use of soap were maintained. A total of 12,938 healthcare facilities staff and community health workers were provided with personal

protective equipment of which 12,283 were trained to better implement IPC procedures. UNICEF will also maintain its support in 2021 for the establishment of longer-term triage units in 30 communal health centres.

To reduce the negative impact of the pandemic on the Burundian population, UNICEF, as lead of sectoral groups for Education, Nutrition, WASH and Child Protection (sub-group), supported sectoral contingency planning to facilitate the **continuity of essential services**. For instance, 971,707 people accessed essential healthcare services and as nutrition services are integrated to health services, continuity of activities allowed access to therapeutic care for 92% of the children suffering from severe acute malnutrition (SAM) reaching 55,534 children from 6-59 months. In addition, 6,009 children and parents received psychosocial support through mobile teams of psychologists, that were also giving support to the functioning of the child helpline. Finally, UNICEF contributed to monitor the socio-economic impact of the COVID-19 pandemic and is advocating to at least maintain the level of social sector budgets, in addition to expanding the coverage of social protection.

Humanitarian Leadership, Coordination and Strategy

UNICEF actively participates in the Humanitarian Country Team (HCT) and intersectoral meetings that lead the strategic and cross-sectoral coordination of the humanitarian response in Burundi. UNICEF currently leads with its governmental counterparts the water, sanitation and hygiene (WASH), nutrition and education sectors, leads the child protection sub-cluster and co-leads the health sector. UNICEF also participates in the in-country interagency gender-based violence (GBV) sub-group and the Prevention of Sexual Exploitation and Abuse (PSEA) Task Force. Sectors under the coordination of OCHA also work with the National Platform for Risk Prevention and Disaster Management to respond to natural disasters regularly affecting the country.

UNICEF continues to provide technical support as a key stakeholder of the COVID-19 response, participates in the sub-committee for WASH/infection prevention and control, led by the MoH with support from WHO and co-leads the sub-committee for Risk Communication and Community Engagement (RCCE).

Human Interest Stories and External Media

In 2020, the Communication, Advocacy and Partnerships team focused on Ebola and COVID-19 responses besides other emergencies such as floods. UNICEF became UN focal point for crisis communication on COVID-19, opening its [official twitter account](#) and creating tools to centralize key prevention messages approved by the government for sister agencies and NGOs. A [new website](#) was launched and documents [human interest stories](#) on Ebola and COVID-19, [COVID-19 prevention videos](#), [call for support](#), [photo essays](#), fundraising videos and call to action on severe floods.

Together with the Government, UNICEF launched the [Blue Soap Initiative](#) documented [on Forbes](#), a [video](#) and other [related publications on social media](#). The Child-Friendly Media Network and the Ministry of Communication and Media supported the initiative with a prevention campaign on mass media over 3 months: a radio spot aired for two months on 20 radio stations, a media Synergy on COVID-19, articles/posts were published on print and digital media and billboards installed in all provinces.

Jimbere Magazine and Yaga, UNICEF partners, amplified the communication campaign generating 1,489,450 interactions on their Facebook and Twitter pages. A [special edition on handwashing and good hygiene practices](#) was distributed in all 119 communal education directorates reaching [more than 600,000 school children](#).

Next SitRep: 31 March 2021

UNICEF Burundi website: <https://www.unicef.org/burundi>

UNICEF Burundi Humanitarian Action for Children Appeal: <https://www.unicef.org/appeals/burundi.html>

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Annex A

Summary of Programme Results

Sector	Cluster/Sector Response			UNICEF and IPs		
	2020 target	Total results*	Change since last report ▲▼	2020 target	Total results*	Change since last report ▲▼
Nutrition						
Number of children aged 6 to 59 months affected by SAM admitted for treatment	45,000	44,466	15,895	45,000	44,466	15,895
Number of children assessed for acute malnutrition through mass screening				550,000	646,616	199,353
Health						
Number of children vaccinated against measles				50,000	51,290	0
Number of people, at least half of them children, provided with essential drugs				250,000	150,000	91,058
WASH						
Number of people accessing sufficient quantity of safe water for drinking, cooking and personal hygiene	490,025	117,458	22,119	100,000	82,137	22,119
Number of people in cholera and Ebola high-risk areas reached with key messages on hygiene practices	422,794	410,258	294,932	320,000	136,681	22,119
Child Protection						
Number of children accessing critical child protection services, including mental health and psychosocial support	200,000	232,843	81,648	160,000	227,886 ²	81,648
Number of children and women accessing gender-based violence risk mitigation, prevention or response interventions				80,000	65,622	9,353
Education						
Number of school-aged girls, boys and adolescents accessing	65,000	8,147	3751	60,000	8,004	3,751

² This including PSS, victims of violation, UASC, birth registration, in detention, children and adolescents benefited from critical CP services.

formal and non-formal education opportunities						
Number of education duty bearers trained on education in emergencies and risk reduction	9,000	2,925	675	6,500	2,629	675
Number of school-aged girls and boys reached with Ebola preparedness messages				500,000	140,046	0
C4D/AECR						
Number of people reached with key lifesaving/ behaviour change messages on Ebola prevention and control				1,700,000	1,804,707	0
Number of people reached with information on access to basic services in emergency situations				165,000	167,156	136,912

Annex B

Funding Status*

Sector	Requirements (US\$)	Funds available (US\$)		Funding gap	
		Received Current Year	Carry-Over	US\$	%
Nutrition	3,700,000	1,463,674	1,648,556	587,770	16%
Health	1,600,000	1,284,177	198,186	117,637	7%
WASH	4,000,000	1,961,211	260,476	1,778,313	44%
Child Protection	3,500,000	701,185 ¹	295,394	2,503,421	72%
Education	1,500,000	736,428	330,258	433,314	29%
C4D	1,700,000	419,076	137,829	1,143,095	67%
Cluster Coordination	500,000	310,000	73,000	117,000	23%
Total	16,500,000	6,875,751	2,943,699	6,680,550	40%

* As defined in Humanitarian Appeal of 01/01/2020 for a period of 12 months

¹ The fund received includes the support through solidarity groups managed by the social protection section.