

Situation Overview and Humanitarian Needs

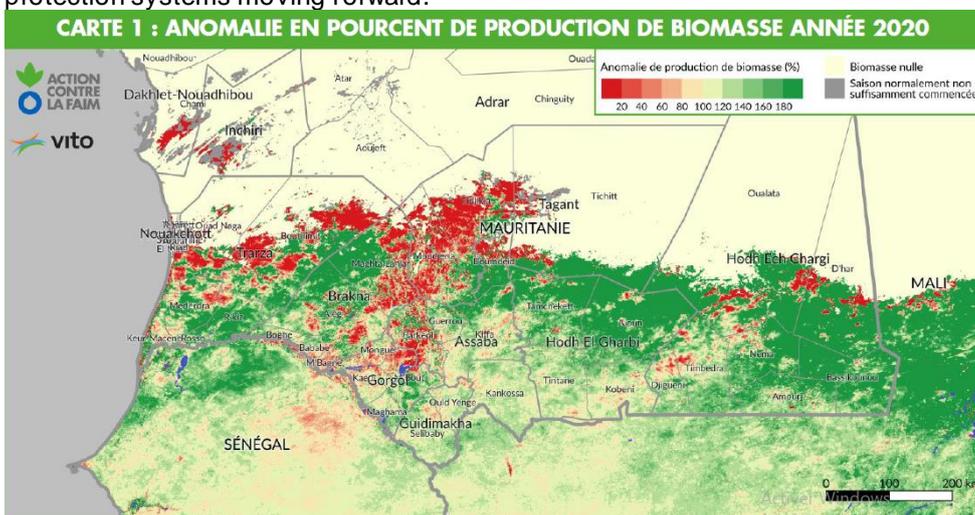
Since March 13, 2020, Mauritania has been facing the COVID-19 pandemic. As of November 15, 7,952 confirmed cases were registered, including 7,524 recoveries and 165 deaths; and a total of 95,389 tests were performed. After lifted all restrictions and closed all the containment centre for asymptomatic patients in place, the Government has developed the new strategy of cohabitation with COVID-19. These decisions continue to be interpreted by a large part of the population as the end of the pandemic in Mauritania, leading to a lack of respect for barrier measures and a very low level of alerts. However, in the world and in some neighbouring countries, there is a resurgence of cases, raising fears of a second wave for Mauritania. Meanwhile, the Government continues reminding to populations the preventive measures respect. Dedicated efforts continue to be initiated by the Government and partners to strengthen the healthcare system, community ICP and RCCE interventions. Since October 1, Assaba, Tagant, Brakna and Hodh El Gharbi region are affected by Rift Valley Fever cases. This fever has touched 378 sensitive camels, 68 human cases and 26 deaths. The current trend shows a decrease in the number of confirmed cases. The occurrence of this epidemic has resulted in the movements restriction in the affected areas. This may hinder all interventions, including prevention and response to COVID-19 in the affected areas. In a recently published report, the World Bank alerted about the macro-economic and social impact of COVID-19 in Mauritania, as well as the impact on food security. Based on their scenario, the poverty rate could increase from 5,5% in 2019 to 6% (or 6.3%) in 2020, pushing 25,000 (or 42,000) additional people to fall into extreme poverty. This impact would be felt more by women and girls through, for example, a withdrawal from the education system to take care of their family members at home and the increase in gender-based violence². ACF's report³ on biomass production in 2020 analysis and 2021 perspective notices locally negative biomass production in western Mauritania (Tagant, Brakna and Trarza) and difficult economic context due to movement restrictions due to COVID-19 pandemic. The Government multi-sectoral plan for cohabitation with COVID-19 and economic recovery have been finalized. UNICEF, jointly with WFP, will support the Government to provide critical social assistance support in the short and medium term, while contributing to strengthened national social protection systems in the medium to longer term. Immediate support will be provided responding to the needs generated by the pandemic, as well as helping to strengthen overall national capacities to adapt and build more shock-responsive, nutrition- and child-sensitive social protection systems moving forward.

Situation in Numbers

 7,952 COVID-19 confirmed cases
165 deaths

 867,593 Children affected by COVID-19 school closures

 17M US\$ required



The support provided to the Government by the United Nations and the humanitarian and development partners is coordinated through the Incident Command System (ICS). UNICEF ensures the lead of the “Risk communication and community engagement” (RCCE), including community watch, and “Infection Prevention and Control” (IPC) pillars. In accordance with the INFORM COVID-19 Risk Index, Mauritania shows high health and humanitarian impacts risks from COVID-19 that could overwhelm current national response capacity, and therefore lead to a need for additional international assistance.

¹ Fièvre de la Vallée de Rift en Mauritanie, Sitrep Semaine 45, 10 Novembre 2020

² Analyse préliminaire de l'impact socio-économique de la COVID-19 en Mauritanie, World Bank, Juin 2020

³ Production de biomasse en 2020 Analyses et perspectives pour 2021, ACF, 2020

UNICEF's COVID-19 response

Health/Nutrition

In the Hodh Chargui region, as part of its intervention against malnutrition, UNICEF with its partners Action Contre la Faim (ACF) and Adicor carried out several activities:

- (i) Training of 3 797 mothers on the PB-mere use and the screening of 9 670 children from 6 to 59 months;
- (ii) Organization of 72 groups of 1074 lactating women and 40 groups of 597 pregnant women beneficiaries under the GASPA⁴ model for learning and practices follow-up on infant and young child feeding;
- (iii) Mobile clinics set-up in 15 villages far from health care facilities in order to improve health care access to vulnerable populations which benefitted for the reporting period to 192 pregnant women and 864 children under 11 for immunization and finally;
- (iv) Integrated management of children's illnesses at community level (malaria, diarrhoea, acute respiratory infection and severe acute malnutrition) through basic health units which benefitted to 237 children from 6 to 59 months.



Lactating mother sensitization in Bassiknou.

WASH and IPC

As part of its programs follow-up, UNICEF conducted a supervision mission to WASH in schools and health care facilities interventions in M'Berra camp and Fassala host community (in Hodh Chargui) for quality check and assess if necessary hygiene conditions are gathered for a COVID-19 sensitive back to school offering safe and secure access to WASH facilities. The activity was held with ACF implementing partner and a representative of the local authorities of Fassala and allowed to meet school's headmasters and check a total of 41 latrines, 31 handwashing facilities, 16 paper incinerators and 12 menstrual hygiene management facilities. UNICEF asked ACF to review some details in the interventions for more sustainability and dignity in the access.



Latrines assessment visit in Bassiknou.

UNICEF and its private partner SASEBIL accomplished its work on the 13th solar water posts which should be finally received in the coming days in collaboration with the hydraulic and sanitation regional director for Hodh Chargui region. UNICEF held the monthly WASH coordination meeting where all the stakeholders shared their contribution to the 3W matrix for the sector and update of activities and discussed about the planning of the celebration of the international toilet day which will be postponed to the end of November due to several ongoing activities and availability of local authorities of hydraulic and sanitation. In Nouakchott, 52 people of the staff (12 trainers, 20 service providers and 20 hygiene and safety personnel) of "Mere –Enfant" Center received training on the proper management of patients with COVID-19 and efficient protection measures.

RCCE/C4D

UNICEF continues leading the Risk Communication and Community Engagement (RCCE) intervention pillar. In Nouakchott, two briefings were organized in Nouakchott for journalists and imams supporting the school return in the respect of barriers gestures against COVID-19. More than 50 journalists were able to relay the prevention messages in the written press and other media. The of imam network and oulemas, partners of UNICEF benefited also from the briefing to contribute in awareness reinforcement through sermons in mosques. In Bassiknou, ACF and ADICOR carried sensitization of 378 community workers on COVID-19 pandemic. On social media, publications including those related to COVID-19, reached a total of 47,800 people from 20 October to 19 November and 1575 were engaged to interact or share information and adopt barriers measures.

⁴ Groupe d'apprentissage et de suivi des pratiques d'alimentation du nourrisson et du jeune enfant : Infant and young child feeding practices learning and monitoring group



At the Youssouf school in Dar Naim (Nouakchott), students go back to school by rigorously applying barrier gestures in order to protect themselves from COVID-19.

Education

Alongside UNHCR and the education local authorities from Hodh Chargui (at regional and district levels), UNICEF and its partner for primary and secondary education ESD contributed to the organization of the BAC exams for Malian refugees from 19 to 22 October with a specific attention to the respect of COVID-19 barrier measures such as masks distribution and wearing, handwashing devices next to classes and physical distancing between participants.

139 (102 B, 37 G) out of 176 (123 B, 53G) registered candidates undertook the exams, including all students who were enrolled in the camp' schools during the 2019/2020 academic year and who had benefited from distance education during school's closure through radio, WhatsApp and exercise books. The remaining levels had also passed the final exams for the 2019/2020 academic year during the same period with an attendance rate of 77% for primary education and 70% for secondary.

Adaptations on ongoing UNICEF programmes

Nutrition

UNICEF, in close collaboration with the Ministry of Health and partners, continues to support the prevention and the treatment of SAM children, with a focus on the districts affected by nutrition emergency (GAM > 15 per cent and / or SAM > 2 per cent). A total of 23,126 SAM cases were admitted for treatment throughout the country from January to September representing 103% of the annual target (22,470) and 87% of the burden (26,435). Among them 18,380 cases were admitted in the 21 emergency districts. UNICEF continues supporting the scaling up of the mobile strategy and involvement of community health workers in the outpatient programmes as part of the roadmap for introducing the simplified approach. Regarding waste prevention, 54,444 primary caregivers of children aged 0-23 months received counselling through facilities and community platforms. In addition, 21,816 children 6-23 months were reached with micronutrients powder distribution to ensure their home food fortification in eight emergency districts (Aioun, Bababe, Bogue, Ghabou, Kaedi, Kankossa, Ould Yenge, Selibaby). To date, 172,404 children were systematically screened in health care facilities, resulting in the detection of 13,989 SAM children and

education where success rate was 66% and 87% respectively. By mid-November, Malian authorities of education shared that 100% of regular candidates and 96% of irregular ones have succeeded in DEF⁵ exams.

Child Protection

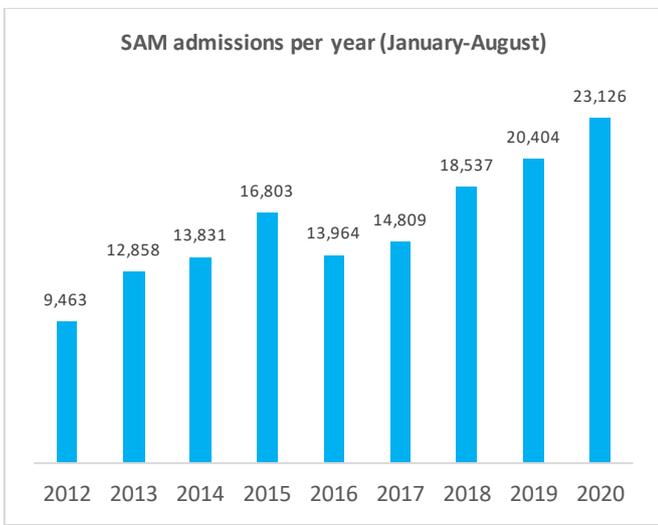
Child protection sensitization activities continued to be carried out by child protection actors, including youth clubs and religious leaders. Messages on preventive measures in targeted regions reached 40,766 persons (2,125 for the reporting period) including 14,830 children reached nationwide. Since May, 273 victims of FGM were identified, 56 victims of child marriage and 135 children below 15 involved in child labour, including 24 victims of worst forms of child labour identified and followed-up. The Child Helpline supported by UNICEF registered 600 calls (27 for the reporting period) with rape cases, domestic violence and harassment dealt with by operators with 77 (18 for the reporting period) victims of sexual violence supported.

Supply

The supply plan for COVID-19 focuses on securing Personal protection equipment, RUTF and other lifesaving items. The orders for COVID-19 supplies placed represented US\$ 332,565. Supplies worth US\$ 287,694 were received and donated to the Government. Movement of humanitarian goods into the country has not been affected despite restriction and border closure. However, these restrictions at global level have an impact on international supply chain and the delivery of programme supplies.

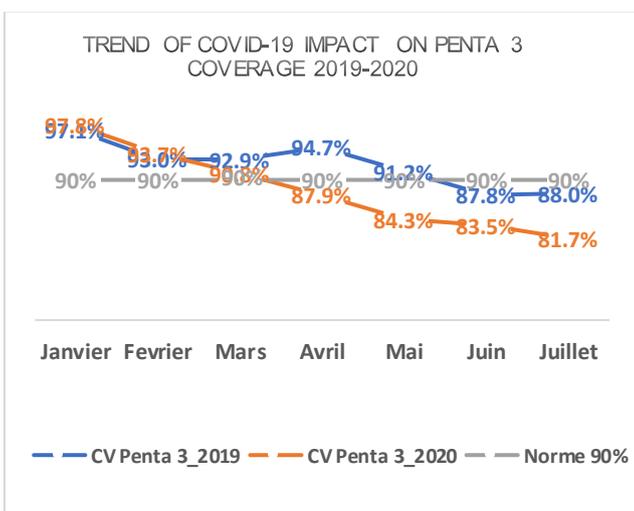
28,410 MAM children). SAM admissions increased by 13% compared to last year (23,126 versus 20,404) but due to the low proportion of reports completed (72%) between May and September, this proportion of SAM cases admitted could be higher. Despite the challenges, the performances of the integrated management of acute malnutrition programme remain in the recommended standards with 90 % cured rate 0.3 %, death rate and 8,7%, defaulter rate. Furthermore, UNICEF jointly with the Ministry of Health and other partners are preparing the child survival days campaign which is an opportunity to provide an integrated health and nutrition key activities to the under five children old, nationwide in November, with strict compliance with the COVID-19 barrier measures. This national mass campaign will integrate screening acute malnutrition, vitamin A supplementation, deworming, immunization as well as the promotion of birth registration.

⁵ Diplôme d'études fondamentales (9th grade primary school)



Health

UNICEF supported the Ministry of Health to forecast vaccines for 2021. 449,000 doses of Polio vaccine (VPI), 69,000 doses of Pneumococcal vaccine (PCV13) and 30,000 doses of Rotavirus vaccine (ROTA) were procured. As part of prevention, UNICEF directly supported immunization programme in three regions (Hodh Chargui, Guidimakha, Assaba) where: 22,409 (80%) children aged 0-11 months received their third dose of pentavalent vaccine, 22,501 (80%) PCV13 with 3% defaulter and 22,716 their measles-rubella dose with 9% defaulter. The development of EPI activities report was ensured and included an analysis of the effect of COVID-19 on immunization services. Preliminary results indicate a decline in coverage for routine vaccination (see for example, the trend of Penta3 coverage below). This analysis was used during the GAVI Multiparty Dialogue held in November 2020, to draw-out short and medium-term solutions to improve immunization coverage.



WASH

The completion level of drinking water supply and solar water points is finalized in the Hodh Chargui region and more than 80% in the Guidimakha and Assaba regions. These water points should cover an estimated population of 24,000 people. The promotion of Community Led Total Sanitation (CLTS) activities continues in all the targeted regions, under the supervision of the regional authorities.

Education

As part of its support to the 2020/2021 back to school and improvement of learning conditions in Hodh Chargui, UNICEF and its local partner ESD:

- (i) reopened their five alphabetization classes and received 293 students (141 G, 152 B);
- (ii) distributed non-food items (soap, bleach, broom, bucket, mats, blackboard etc.) and school supplies for non-formal education in Mahadras;
- (iii) prepared the school supplies stock to be distributed after the back to school. UNICEF participated with all education stakeholders to the launch of the new academic year at M'Berra camp on 16 November and overseen that all the conditions were gathered for the wellbeing of children and COVID-19 prevention measures.

UNICEF and its partner AED prepared the 12 pre-primary education classes. The 24 educators in charge of children's learning and supervision were assessed in effort to improve learning quality for this specific age group. The construction of 10 new infrastructures and the recruitment of 20 new educators were also initiated. An extraordinary coordination meeting was called to ensure information sharing and avoid duplication. Participants seized the opportunity to talk about their strengths and weaknesses and explored options to enhance the coordination and support offered to children.

Child Protection

Implementation of child protection activities continues in the nine targeted regions. A close follow-up is ensured for the 103 children deprived of liberty, and the follow-up on-going of the 64 children released since the beginning of the pandemic, including ten released during the reporting period. UNICEF is pursuing its advocacy efforts to prevent the detention of children; during a meeting with UNICEF Representative, the newly appointed Minister of Justice announced that minors' cases would be prioritized by judicial authorities. With UNICEF technical assistance, the Ministry of Social Affairs, Childhood and Family completed the recruitment process for professionals dedicated to child protection, to be deployed at regional level.

Social Protection

Jointly with WFP, UNICEF will provide immediate support to respond to the needs generated by the pandemic, as well as helping to strengthen overall national capacities to adapt and build more shock-responsive, nutrition and child-sensitive social protection systems moving forward. The project will deliver essential cash transfers to vulnerable people affected by the socio-economic fallout of COVID-19. Its targeting process has already begun and started with a compilation of lists of people with disabilities.

Supply and Logistics

As part of the emergency response, US\$ 1,877,143.55 worth of supplies were distributed across the country from January to November 2020, including RUTF, WASH and educational kits.

Funding Overview and Partnerships

US\$ 18,800,000 is estimated to be needed to respond to the COVID-19 epidemic in Mauritania in addition to the chronic humanitarian situation. UNICEF Mauritania has mobilized only 9 per cent of funding out of a total of US\$ 18.8 million funding requirements. UNICEF Mauritania wishes to express its heartfelt gratitude to all public and private sector donors (particularly BMZ, Denmark, GPE, Sida, USAID, US Embassy, UN COVID-19 Response and Recovery Multi-Partner Trust Fund-UN COVID-19). The ability of the office for achieving many of the results presented in the summary table of program results is largely due to the flexibility of some donors to use non-humanitarian sources of funds to carry out actions to prevent the spread of the pandemic.

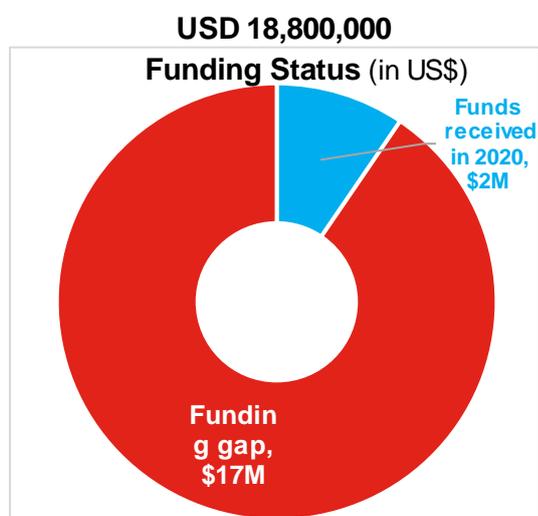
External Media:

<https://www.facebook.com/UNICEFMauritanie/posts/2710425279199565>
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Annex A

Summary of Programme Results

Sector	UNICEF and IPs Response	
	2020 target	Total results*
Risk Communication and Community Engagement		
Number of people reached by COVID-19 prevention messages	1,677,243	1,800,215
Number of people engaged on COVID-19 through RCCE actions	168,900	162,514
Number of people sharing their concerns and asking questions/clarifications for available support services to address their needs through established feedback mechanisms	1,200,000	1,521,017
WASH and IPC		
Number of people reached with critical WASH supplies (including hygiene items) and services	50,000	10,850
Number of healthcare facilities staff and community health workers provided with Personal Protective Equipment (PPE)	5,000	6,048
Number of healthcare facility staff and community health workers trained in Infection Prevention and Control (IPC)	2,000	334
Health		
Number of healthcare providers trained in detecting, referral and appropriate management of COVID-19 cases including among children, pregnant and breastfeeding women	300	168
Number of children and women receiving essential healthcare services, including immunization, prenatal and postnatal care, HIV care and Gender-Based Violence (GBV) response care in UNICEF supported facilities ⁶	8,200 children 3,280 women	72,398 children 4,772 (2434 G;2338 B) treated for childhood disease; 22,409 children aged 0-11 months - third dose of pentavalent vaccine; 22,501 PCV13; 22,716 measles and rubella vaccine 962 women
Number of primary caregivers of children aged 0-23 months who received YCF counselling through facilities and community platforms	29,220	54,444
Nutrition		
Number of children 6-59 months admitted for treatment of severe acute malnutrition (SAM)	22,470	23,126 (12,104 girls; 11,022 boys)
Education		
Number of children supported with distance/home-based learning	150,000	23,675 children; (10,643 girls, 13,032 boys); Pre-school: 524 girls, 476 boys; Primary: 7124 girls, 9819 boys; Secondary: 126 girls, 284 boys; Out of School Children: 2,869 girls; 2,453 boys
Child Protection and GBV		
Number of children without parental or family care provided with appropriate alternative care arrangements	200	48
Number of children, parents and primary caregivers provided with community-based mental health and psychosocial support	10,000	625
Number of children and adults that have access to a safe and accessible channel to report sexual exploitation and abuse	900	413

⁶ "This indicator monitors the number of consultations and services provided to children and women; hence there may be significant double counting".

Annex B Funding Status

Sector	Funding requirements	Funds available	Funding gap \$	Gap %
C4D/ RCCE	2,300,000	517,969	1,782,031	77%
WASH & IPC	6,500,000	450,985	6,049,015	93%
Nutrition	3,000,000	250,000	2,750,000	92%
Health	4,000,000	220,000	3,780,000	95%
Child Protection	1,000,000	145,185	854,815	85%
Education	1,000,000	165,000	835,000	84%
Data collection, coordination, technical support and operational costs	1,000,000	35,000	965,000	97%
Total	18,800,000	1,784,139	17,015,861	91%