

Situation Overview and Humanitarian Needs

The first confirmed case of Covid was registered in the Islamic Republic of Mauritania on 13 March 2020. As of 10 June, 1284 confirmed cases were recorded, including 142 recoveries and 71 deaths. The restrictive measures in place since mid-March have been partially eased on 6 May, with the reopening of shops and markets, and easing of the curfew. Furthermore, the schools reopening has been announced for 1 July for examination classes, repatriation of Mauritians from abroad is ongoing, and a national response coordinator was appointed on 26 May.

On 7 May, the Government adopted a multisectoral response plan to COVID-19 encompassing the preexisting response plan from the Ministry of Health and completed with the response to the economic and social impact of the pandemic. 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.

The helpline set up to provide information 24 hours/7 days a week has treated more than 582.576 calls since 18 March 2020. An average of 1145 alerts/week were reported in the last fortnight.

According to 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. The country is ranked 27th at the world level and 8th at the regional level.

UNICEF’s COVID-19 response

Health

As a result of the fast increase of cases since 14 May, new treatment sites have opened in Nouakchott. As part of IPC actions to improve the conditions of the treatment centre located at the University, further discussion is ongoing to develop a Program Cooperation Agreement with French Red Cross to support the continuity of care of asymptomatic COVID19 patients under quarantine suffering from chronic disease (high blood pressure, diabetes or psychotic disorder), through staff training and medication supply.

WASH and IPC

The upgrading of IPC standards continues at the university's isolation centre in Nouakchott under the supervision of the Public Hygiene Department. Equipment, training, health infrastructure were provided. Additional support is being prepared to further strengthen the IPC in this site and in the centre recently opened at the Olympic Stadium in Nouakchott. The summary of the assessment carried out by the Covid-19 environmental and biomedical waste management committee in the main hospitals of Nouakchott and the INRSP was shared, proposing the implementation of a set of urgent actions to improve IPC practices and sustainable and efficient management of biomedical waste in these structures. Pillar partners have expressed their support for this action plan, in particular with the purchase of an incinerator and the provision of personal protective

equipment. As part of a nascent partnership with the mayors of Nouakchott's communes, UNICEF supports the setting up of communal disinfection brigades. The training of these brigades is currently being planned as well as the equipment of these units. UNICEF ensures the lead of the “Infection Prevention and Control” (IPC) response’ pillar. Two co-coordination meetings were held during the reporting period. The IPC action plan was reviewed to integrate a new result related to hygiene and sanitation campaign in containment sites and public places being introduced. A new strategy towards a community-based IPC to access patients at home and prevent the spread of the disease in the neighbourhood is currently under development, in line with new direction taken by the Government to confine and monitor asymptomatic patients at home.

RCCE/C4D

UNICEF is supporting the COVID-19 helpline. More than 582.576 calls have been handled by the call centre since its opening. The extension of the centre is effective and allows for increased processing of calls, which have risen sharply since the upsurge of cases in the country. New communication materials, particularly on the wearing of masks, have been developed and broadcast on national channels and stations. On Facebook, the publications reached 971,600 people from 28 May to 9 June 2020. UNICEF ensures the lead of the “Risk communication and community engagement” (RCCE) response’ pillar. The initial results of the joint rapid assessment on the level of knowledge of the population on COVID-19, indicate that 99% of the sample has heard about the pandemic. The main sources of information are community radio

Situation in Numbers



1284 COVID-19 confirmed cases
71 deaths



867,593 Children affected by COVID-19 school closures



17.3M US\$ required

(38%), followed by social networks (30%) and the community (19.5%). Among children aged 14-18, the majority consulted social networks to get information about COVID-19. Among those over 18, the main source of information on the disease is community radio.

Education

The Ministry of Education just announced the start of the new school year on the 1 September 2020 while remedial courses will be taken place from the month of July. The distance education program carries on through television, radio and internet programs. UNICEF and its partners will now support jointly with the Local Education Group the MoE COVID-19 education response plan just released including all measures for a safe start of the new school year. UNICEF is also supporting the preparation of a study carried out by the National Office for Statistics to understand the access to the distance education programs implemented by the MoE. Concerning the refugee camp of M'Berra and the host community of Bassiknou, education radio programs are broadcasted daily while textbooks have already been distributed. Parental education programs and follow-up (for homework) are still implemented through WhatsApp groups.



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Pupil from Guidimakha region following distance learning using radio and teaching material he has received.

Child protection

Child Protection actors carry on the sensibilization of population and children in targeted regions, in partnership with some 70 OCB/ONG. In Hodh El Chargui, region accommodating most of the refugees originating from neighbouring Mali, 2,032 parents (including 1,018 women) were reached since the beginning of the pandemic including 1,049 in host communities and 983 in the refugee camp of M'Berra. Specific attention is being given to children leaving without parental care, including in contact with Koranic schools. The child rights violations monitoring is ongoing, with an increase of violence registered in HEC during the past two weeks. Cases of sexual violence have particularly impacted the population morale. To increase the awareness of law enforcement, the protection group is approaching both the Ministry of Interior and the Ministry of Defense to assess their interest in the dissemination of sensitization among their agents deployed in urban areas and border points. The referral pathway established between the helpline run by the Ministry of Health and the Child Help Line is functional allowing a direct referral of protection related cases, including sexual and gender-based violence. Reputable psychiatrists are now supporting respondents of both helplines in order to help them cope with the stress and provide them with additional tools and knowledge to better assist the population. Planning for the set-up of dedicated units to accommodate families and isolated children in the confinement sites is in progress. Three emergency shelters, two in Nouakchott and one in Nouadhibou, set-up by the Ministry of Social Affairs with a joint IOM, Save the Children and UNICEF assistance are operational. Assistance to victims of SGBV continued with four cases recorded during the reporting period. Given the restriction of access to detention and reintegration centres decided by the penitentiary administration, advocacy is on-going to enlarge remote contacts with families using new technologies.

Supply

The supply plan for COVID-19 focuses on securing PPEs, RUTF and other lifesaving items. The orders for COVID-19 supplies placed is \$332,565. Supplies worth \$121,502 was received and donated to the Government. Movement of humanitarian goods into the country has not been affected despite current restriction and border closure. However, these restrictions at global level have an impact on international supply chain and the delivery of programme supplies. The provision of essential items such as personal protective equipment (PPE) is limited, due both to the growing demand and restrictions to export these products. School supplies are heavily dependent on China and delivery time will be longer than usual due to production delays at Chinese suppliers. The delivery of nutritional products and of some key WASH products, such as water purification tablets, are generally shipped by sea freight (i.e. less exposed to air freight disruptions).

Adaptations to ongoing UNICEF programmes

Nutrition:

UNICEF, in close collaboration with the MoH and partners, supported 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 8,555 SAM cases were admitted for treatment throughout the country since January, including 5,677 cases in 21 emergency districts. Mobile strategy and involvement of community health workers in the OPT programme are being scaled up throughout the country as part of the roadmap to introduce the simplified approach. As part of prevention of wasting, 23,206 primary caregivers of children aged 0-23 months received IYCF counselling through facilities and community platforms. For the first quarter of the year, 76,267 children were systematically screened in the health care facilities, resulting in the detection of 5,560 SAM children and 12,234 MAM children. 8,555 cases of SAM were admitted for treatment, i.e. 38% of the annual target (22,470) and 32% of the burden (26,435). SAM

WASH:

Implementation of WASH activities at health facilities level continues in the regions of Guidimakha, Hodh El Gharbi and Hodh Chargui. The facilities are being connected to water networks and drinking water supplies are set up. The construction of latrines in schools is also ongoing, despite the closure of schools.

The activities related to the drinking water supply network being set up in the regions of Guidimakha, Assaba and Hodh Chargui are continuing normally.

Education:

In the M'Berra refugee camp and the host community of Bassiknou, UNICEF effort to support education access and quality during the COVID-19 is moving forward. Candidates for the final examinations (DEF and Baccalaureate) continue to take distance courses. So far, they have benefited from learning kits (courses and exercises) with the support of parents/teachers' associations and Koranic education teachers' association. 166 learning kits (94 DEF 72 Bac) were distributed. Courses for exam subjects continue to be delivered for 78 students (50 boys and 28 girls) through WhatsApp groups. The construction work for the 7th school at the M'Berra camp is ongoing. The school should be ready by the start of the new school year. The education radio programme continues to be delivered thanks to the community radio station of Bassiknou. Families with radio stations are sensitized in order to facilitate children's access to distance courses. In addition, textbooks were distributed to children of the M'Berra camp for the 4th, 5th, and 6th grades, and face to face lessons for small groups are still delivered reaching a total of 821 students (435 G/386 F). At the pre-k level in the refugee camp, 552 (297 girls, 255 boys) out of 600 students participated in face to face courses organized in little groups by the preschool community teachers. 491 younger children (277 girls, 214 boys) out of 600 students from the host community have followed these courses. 450 solar radios were distributed mainly to sixth graders at the camp and in the host community. At the refugee camp, 402 students, including 180 girls, have now direct access to education radio programs. In the host community, 1,578 candidates for final exams have also access to radio education programs.

Child protection:

2,997 vulnerable children (1704 girls) were sensitized on COVID-19 and respect for barrier gestures during the reporting period. This increases to 27,117 vulnerable children (16,359 girls) sensitized on COVID-19 since the beginning of the response. UNICEF and its partners provided various responses to children, including social monitoring and psychosocial support (87 children, including 44 girls). Among these children 5 (including 2 girls) are disabled, 23 girls were victims of FGM, 6 girls victims of child marriage and 53 children (13 girls) in work situation including 12 boys victims of worst forms of work in COVID period. The Child protection working group met on 5 June 2020 to better orient its intervention strategy in relation to the COVID-19 prevention campaign and responses to vulnerable children and families. In this framework, alternative options are being developed to protect street children, including those associated to unofficial religious centres/Mahadras. In the framework of our partnership with the Ministry of Justice, one vehicle from our partner TDH-L has the authorization to move in all three regions of Nouakchott during curfew-time allowing for timely responses to children who may enter in contact with law enforcement agents or who may require emergency assistance. Three out of seven Centres for the Protection and Social Integration of Children converted into emergency centres are now operational in Nouakchott and Nouadhibou regions. Following UN joint advocacy efforts, 40 children have been realised from detention and reinsertions centres since early March and benefit from close social follow-up thanks to UNICEF partners. The penitentiary administration

admissions are up 4% from last year (8,555 versus 8,218) but due to the low proportion (67%) of reports completed this proportion of SAM cases admitted could be further high. 3 regions of the country recorded more than 20% increase in SAMs compared to 2019 (Gorgol (21%); Hodh El Gharbi (31%); Tagant (56%). 89% recovery; 0.4% deaths and 10% abandonment are recorded. This increase in the number of cases reinforces the dynamics of the upward review of the country's need for nutritional inputs. 10100 boxes of RUTF (DFID 2020 fund) are in UNICEF stock after a distribution of 8,900 boxes (FFP 2019 fund), 10,000 boxes (CERF) are expected to arrive shortly.

Health:

Along with SAM, efforts are put in providing care to sick children and pregnant women and medical products have provided to that end to Assaba, Hodh Chargui and Guidimakha regions.



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for restricting access to non-essential personnel and professionals operating in the centres, advocacy is in progress to at least allow for the intervention of a psychologist to assist the 48 minors still deprived of liberty and affected by the current pandemic.

Supply and Logistics



UNICEF staff members support the delivery of vaccines at the International Airport of Nouakchott. US\$ 1,128,172.03 worth of supplies were distributed across the country since the beginning of the year as part of the emergency response, including RUTF and anthropometric items targeting 22,470 children (US\$ 1,063,181.95), along with educational items (US\$ 64,990.08). For the purpose of vaccines stock-out mitigation, a charter cargo flight delivered 51,580 doses of vaccines worth \$294,282 to support routine immunization.

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. According to risk analysis in Mauritania and considering the evolution of current trends at the regional and global levels, the epidemic risks in the country appears to be very high, therefore mobilizing adequate level of funding will be critical to support the Government in its efforts to contain the outbreak. UNICEF Mauritania wishes to express its heartfelt gratitude to all public and private sector donors (particularly BMZ, Denmark, GPE, Sida, USAID, The UN COVID-19 Response and Recovery Multi-Partner Trust Fund- UN COVID-19 MPTF). Mauritania would especially like to thank donors who have contributed to “unearmarked” funding.

External Media

<https://web.facebook.com/watch/?v=2908160285900623>

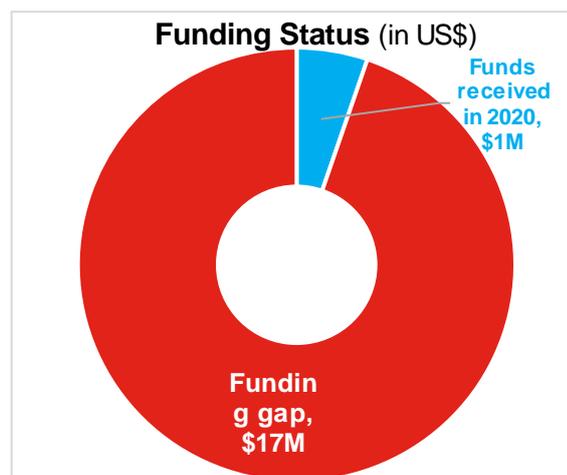
<https://web.facebook.com/watch/?v=786889868381742>

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USD 18,800,000



Annex A

Summary of Programme Results

Sector	UNICEF and IPs Response	
	2020 target	Total results*
Risk Communication and Community Engagement		
Number of people engaged on COVID-19 through RCCE actions	12,026	5,386
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	582,576
WASH and IPC		
Number of people reached with critical WASH supplies (including hygiene items) and services	50,000	600
Number of healthcare facilities staff and community health workers provided with Personal Protective Equipment (PPE)	5,000	5,058
Number of healthcare facility staff and community health workers trained in Infection Prevention and Control (IPC)	2,000	192
Health		
Number of healthcare providers trained in detecting, referral and appropriate management of COVID-19 cases including among children, pregnant and breastfeeding women	300	112
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	8,200 children 3,280 women	9,962 children (4783 girls, 5179 boys) 962 women
Number of primary caregivers of children aged 0-23 months who received IYCF counselling through facilities and community platforms	29,220	23,206
Nutrition		
Number of children 6-59 months admitted for treatment of severe acute malnutrition (SAM)	22,470	8,087 (4100 girls, 3987 boys)
Education		
Number of children supported with distance/home-based learning	150,000	16,558 (6,951 girls, 9,607 boys) Pre-school: 524 girls, 476 boys Primary: 6425 girls, 8926 boys Secondary: 126 girls, 284 boys
Child Protection and GBV		
Number of children without parental or family care provided with appropriate alternative care arrangements	200	45
Number of children, parents and primary caregivers provided with community-based mental health and psychosocial support	10,000	110
Number of children and adults that have access to a safe and accessible channel to report sexual exploitation and abuse	900	196

Annex B

Funding Status

Sector	Funding requirements	Funds available	Funding gap \$	Gap %
C4D / RCCE	2,300,000	387,969	1,912,031	83%
WASH & IPC	6,500,000	450,985	6,049,015	93%
Nutrition	3,000,000	80,000	2,920,000	97%
Health	4,000,000	220,000	3,780,000	95%
Child Protection	1,000,000	15,000	985,000	99%
Education	1,000,000	110,000	890,000	89%
Data collection, coordination, technical support and operational costs	1,000,000	35,000	965,000	97%
Total	18,800,000	1,298,954	17,001,046	93%