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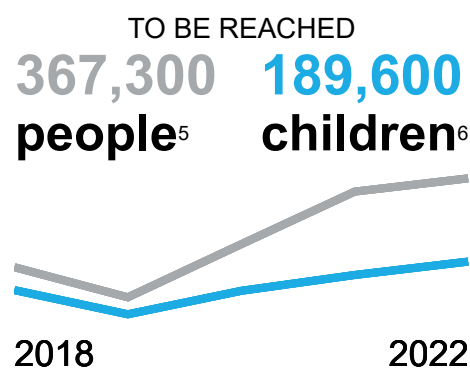
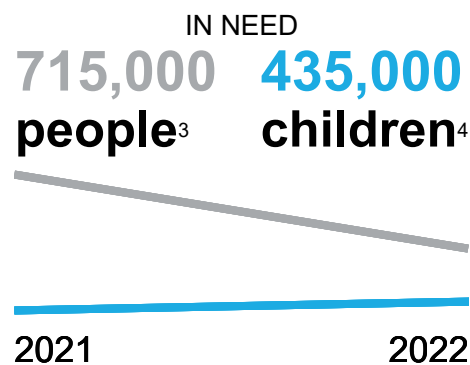
## Humanitarian Action for Children

Moments after birth, a midwife helps a mother to breastfeed her baby. UNICEF supports breastfeeding within the first hour of a baby's life in health facilities.

# Mauritania

### HIGHLIGHTS<sup>1</sup>

- In Mauritania, one in four children lives in absolute poverty, 80 per cent of children experience at least one form of violence, and 3 in 10 children are exposed to drought, floods or suffer from severe acute malnutrition.<sup>2</sup> The COVID-19 pandemic and polio outbreaks have exacerbated the situation and hampered the development of a protective environment for children.
- UNICEF is committed to guaranteeing children's well-being through an evidence-based, integrated and multi-sectoral humanitarian-development nexus approach, while increasing the accountability and ownership of national stakeholders. The inclusion of gender equality and disability and the scaling-up of community-based mechanisms and innovations are prioritized in order to reach more children.
- In 2022, US\$18.9 million is required to meet the humanitarian needs of children in Mauritania, 40 per cent of which is needed for the COVID-19 response. This includes US\$6.4 million to provide an integrated response to health and malnutrition.



### KEY PLANNED TARGETS



**27,400**  
women and children  
accessing gender-based  
violence  
mitigation/prevention/response



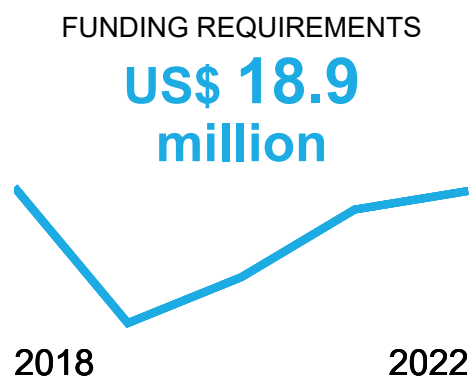
**119,553**  
people with access to safe  
and accessible channel to  
report sexual  
exploitation/abuse



**70,000**  
household reached with  
cash transfers through  
government system with  
UNICEF support



**391,283**  
people reached through  
messaging on prevention  
and access to services



## HUMANITARIAN SITUATION AND NEEDS

Despite sustained economic growth, Mauritania's wealth is distributed inequitably, with social sectors and the most vulnerable people, especially children, having the least access to it. Mauritania is facing the dire consequences of climate change,<sup>7</sup> with severe droughts and seasonal flooding affecting the availability of safe drinking water and the use of adequate sanitation practices,<sup>8</sup> and endangering peaceful coexistence and social cohesion among communities. This is especially true in the Hodh ech Chargui (HeC) region, which continues to face the consequences of armed conflict in Mali, ongoing since 2012. The country hosts the largest Malian refugee population in the Sahel region, with more than 67,466 Malian refugees living in and around the M'Berra camp.<sup>9</sup>

Approximately 27 per cent of children (472,000) live in absolute poverty and 6 per cent (106,000) live in a situation of severe or extreme deprivation that has an impact on their physical, mental and emotional development.<sup>10</sup> Precarious living conditions, combined with socioeconomic disparities, result in limited access to basic social services such as education, with 163,228 children out of school.<sup>11</sup> Distance learning programmes included in the Ministry of Education's COVID-19 response plan remain irregular throughout the country.

The COVID-19 pandemic and other disease outbreaks, such as measles, polio and Rift Valley Fever severely threaten the population's resilience and development.<sup>12</sup> This epidemiological situation is expected to continue in 2022 (with only 556,073 people having been fully vaccinated against COVID-19, representing 21 per cent of the national target).

The nutritional context in Mauritania has also deteriorated since the start of the pandemic. In 2021, a total of 1,385,278 people faced food insecurity. Among them, 11.3 per cent suffered from severe forms of food insecurity.<sup>13</sup> Nationally, the global acute malnutrition rate is 11 per cent and the severe acute malnutrition (SAM) rate is 1.9 per cent.<sup>14</sup> Twenty-one out of 55 districts are experiencing a nutrition emergency.<sup>15</sup> The Ministry of Health estimates that 136,254 acutely malnourished children, including 32,740 cases of SAM, will require urgent care in 2022.

Since the start of the COVID-19 pandemic, different forms of violence, including gender-based violence, have been exacerbated.<sup>16</sup> An estimated 71 per cent (350,262) of children aged 1 to 4 years are victims of violence, while 84 per cent (422,510) of children aged 5 to 14 years are subjected to at least one form of psychological or physical punishment by members of their household.<sup>17</sup> The registration of children under 5 years of age in the civil registry remains alarmingly low (46.2 per cent).<sup>18</sup>

## SECTOR NEEDS



**340,080**  
people in need of  
nutrition assistance<sup>19</sup>



**346,361**  
people in need of  
health assistance<sup>20</sup>



**84,200**  
people lack access to  
safe water<sup>21</sup>



**900,312**  
children in need of  
protection services<sup>22</sup>



**380,713**  
children in need of  
education support<sup>23</sup>

## STORY FROM THE FIELD



Hasseniya is a victim of early marriage. At the age of 16 years, she is already expecting her first child. When she learned that she was pregnant, she joined the Infant and Young Child Feeding Best Practice Monitoring and Learning Groups (GASPA). Through these groups, young women receive advice in nutrition, health, protection and positive education.

"The community dialogue sessions helped me a lot. I was made aware of the importance of having pre-natal consultations every three months and breastfeeding my baby immediately after birth."

[Read more about this story here](#)

UNICEF engaged with key community influencers in dialogue and communication campaigns to support efforts to end child marriage.

## HUMANITARIAN STRATEGY

UNICEF is committed to guaranteeing a protective environment for disadvantaged children, youth and women facing humanitarian crises in Mauritania. The COVID-19 pandemic, which has aggravated pre-existing deprivations and inequalities, has forced UNICEF to readapt its humanitarian strategy and to integrate COVID-19 response actions into all of its programmes. In 2022, UNICEF will address the most urgent needs of 715,000 people in Mauritania, including 435,000 disadvantaged children.

UNICEF's humanitarian action will be guided by an evidence-based, integrated and multi-sectoral approach. It will ensure social cohesion and the continuity of basic social services, while increasing national stakeholders' accountability and ownership. This participatory approach will strengthen the link between humanitarian interventions, development programmes, and peace and resilience-building efforts, especially in and around the M'Berra refugee camp. Cash transfer programmes will support 140,000 children from 70,000 vulnerable families.

Capacity-building and innovation will continue to shape UNICEF's action to ensure equitable access to quality education for refugees and host community children in protective environments. Education personnel will improve their capacities in peacebuilding, conflict-sensitive education, disaster risk reduction, and the prevention of gender-based violence. The ongoing development of distance learning programmes and digital learning platforms will ensure pedagogical continuity in the COVID-19 context.

Recognizing the roles that families and communities play in children's well-being, UNICEF will work to implement multi-sectoral community-based approaches for accelerating access to basic social services. To build communities' resilience to shocks, nutrition, WASH and health services will be strengthened. This will be done through prevention, early detection and treatment of malnutrition, access to safe drinking water using solar pumps, management of newborn care and childhood illnesses. Access to quality primary health care and immunization will also be supported and facilitated by strengthening the preparedness of local health systems.

UNICEF will expand community engagement and risk communication through innovations, such as chatbots and voice recordings, to equip communities with the skills to develop protective practices and to engage duty-bearers more effectively. Feedback mechanisms, including social listening from media platforms, U-Report and call centers will be improved to address community concerns, guide decision-making and to guarantee the effective inclusion of gender, disability and youth priorities in all programmes.

Communal child protection systems and mechanisms will be strengthened to improve the identification, referral and treatment of children in need of protection. The newly developed case management protocol will be contextualized to better respond to humanitarian needs and to guarantee the adequate care of survivors of all forms of violence, including sexual and gender-based violence, as well as that of children on the move and children with disabilities.

## 2022 PROGRAMME TARGETS



### Nutrition

- **27,829** children aged 6 to 59 months with severe acute malnutrition admitted for treatment<sup>24</sup>
- **149,272** primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling<sup>25</sup>



### Health

- **90,900** children aged 6 to 59 months vaccinated against measles<sup>26</sup>



### Water, sanitation and hygiene

- **14,200** people accessing a sufficient quantity of safe water for drinking and domestic needs
- **84,200** people reached with hand-washing behaviour-change programmes<sup>27</sup>
- **20,000** children use safe and appropriate WASH facilities and hygiene services in learning facilities and safe spaces<sup>28</sup>



### Child protection, GBViE and PSEA

- **24,500** children and caregivers accessing mental health and psychosocial support
- **27,400** women, girls and boys accessing gender-based violence risk mitigation, prevention or response interventions
- **119,553** people who have access to a safe and accessible channel to report sexual exploitation and abuse by aid workers<sup>29</sup>



### Education

- **98,653** children accessing formal or non-formal education, including early learning
- **98,653** children receiving individual learning materials



### Social protection

- **70,000** households reached with cash transfers through an existing government system where UNICEF provided technical assistance and/or funding



### Cross-sectoral (HCT, C4D, RCCE and AAP)

- **391,283** people reached through messaging on prevention and access to services<sup>30</sup>
- **150,000** people engaged in risk communication and community engagement actions
- **250,000** people with access to established accountability mechanisms

Progress against the latest programme targets is available in the humanitarian situation reports: <https://www.unicef.org/appeals/mauritania/situation-reports>

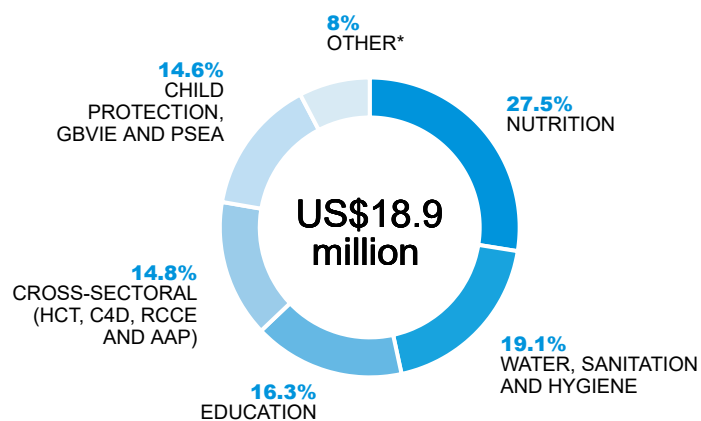
This appeal is aligned with the revised Core Commitments for Children in Humanitarian Action, which are based on global standards and norms for humanitarian action.

## FUNDING REQUIREMENTS IN 2022

UNICEF Mauritania requires US\$18.9 million to strengthen its humanitarian response, guarantee the continuity of its programmes, and meet the urgent needs of disadvantaged children, adolescents and women. Due to the socioeconomic impact of the COVID-19 and polio epidemics, high rates of food insecurity, and potential for further instability and conflict in the HEC region, the country's needs and financial requirements have slightly increased compared to 2021.

Forty per cent of the requested funds will enable UNICEF to respond to the COVID-19 emergency through an integrated assistance package focusing on health, communication for development and WASH. The instability in the HEC region will be addressed through joint education and child protection interventions aimed at promoting social cohesion and children's rights. UNICEF will also continue expanding its social protection and cash transfer programming to meet the multi-sectoral needs of the most disadvantaged households, including those of children living with disabilities.

Without adequate and timely funding, UNICEF and its partners will be unable to address the critical humanitarian needs of 189,600 children and adolescents in Mauritania.



Sector	2022 requirements (US\$)
Nutrition	5,200,597
Health	1,248,144
Water, sanitation and hygiene	3,600,000
Child protection, GBVIE and PSEA	2,760,000 <sup>31,32</sup>
Education	3,080,000 <sup>33</sup>
Social protection	200,000 <sup>34</sup>
Cross-sectoral (HCT, C4D, RCCE and AAP)	2,800,000
<b>Total</b>	<b>18,888,741</b>

\*This includes costs from other sectors/interventions : Health (6.6%), Social protection (1.1%).

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## ENDNOTES

1. UNICEF's public health and socio-economic COVID-19 response, including programme targets and funding requirements, is integrated into the standalone country, multi-country and regional Humanitarian Action for Children appeals. All interventions related to accelerating equitable access to COVID-19 tests, treatments and vaccines fall under the Access to COVID-19 Tools Accelerator (ACT-A) global appeal.
2. Cartographie des vulnérabilités en Mauritanie (UNICEF 2015) <https://www.unicef.org/mauritania/rapports/element-cartographie>.
3. Figure represents 714,969 rounded up to 715,000. This was calculated using the following data to avoid double counting: 1) 280,000 people in poor households targeted by the social register as being in need of cash transfer support (source: Taazour, government agency reporting to the prime minister, 2016-2021); 2) 95,686 children aged 6 to 59 months in need of measles vaccination (calculated based on intervention target and demographic projections for 2015-2025, Office of National Statistics, [http://ansade.mr/images/RGPH2013/Projections-demographiques-Mauritanie-Mai-2015\\_01072016-1.pdf](http://ansade.mr/images/RGPH2013/Projections-demographiques-Mauritanie-Mai-2015_01072016-1.pdf)); 3) 120,750 children aged 0 to 23 months at risk of malnutrition (source: National nutritional Survey, Ministry of Health 2021); 4) 218,533 people in need in the education sector (source: Plan de riposte de l'Éducation en réponse à la pandémie du COVID-19, Ministry of Education, May 2020, <https://www.education.gov.mr/IMG/pdf/planripostecovid19.pdf>).
4. This was calculated using the following data to avoid double-counting: 1) 95,686 children aged 6 to 59 months in need of the measles vaccine (Cible d'intervention et données démographiques 2015-2025); 2) 120,750 children aged 0 to 23 months at risk of malnutrition (National Nutritional Survey, Ministry of Health 2021); 3) 217,485 children in need of education services (Plan de riposte de l'Éducation en réponse à la pandémie du COVID-19, Ministry of Education, May 2020 <https://www.education.gov.mr/IMG/pdf/planripostecovid19.pdf>, Demographic Projections, 2015-2025, Office of National Statistics, 2015, [http://ansade.mr/images/RGPH2013/Projections-demographiques-Mauritanie-Mai-2015\\_01072016-1.pdf](http://ansade.mr/images/RGPH2013/Projections-demographiques-Mauritanie-Mai-2015_01072016-1.pdf)). The figures for 2021 come from different sources depending on the sectors and cannot be compared with those for 2020, which came exclusively from the cadre harmonisé.
5. Total people to be reached figure includes: 149,272 primary caregivers targeted for infant and young child feeding counseling, 90,900 children targeted for measles vaccination, 98,653 children targeted for education services and 28,394 adult males who have access to safe channels to report cases of sexual exploitation and abuse. UNICEF is committed to needs-based targeting, which means covering the unmet needs of children; and will serve as the provider of last resort where it has cluster coordination responsibilities.
6. Total children to be reached figure includes 90,900 children targeted for measles vaccination and 98,653 children targeted for education services.
7. Changement climatique en Mauritanie (Ministère de l'Environnement et du Développement Durable 2021) : [http://www.environnement.gov.mr/fr/images/ressources/Rapport\\_de\\_la\\_4ieme\\_communication\\_nationale\\_sur\\_le\\_changement\\_climatique.pdf](http://www.environnement.gov.mr/fr/images/ressources/Rapport_de_la_4ieme_communication_nationale_sur_le_changement_climatique.pdf).
8. According to MICS 2015 data ([http://ansade.mr/images/mics/MICS5\\_rapport.pdf](http://ansade.mr/images/mics/MICS5_rapport.pdf)), in Mauritania, 38 per cent of the population has access to an improved drinking water source, 48 per cent of households use improved sanitation facilities and 38.8 per cent of the total of population still practices open defecation. Only 20 per cent of households have a specific place for handwashing.
9. According to the M'Berra Dashboard of August 2021 (UNHCR 2021), among the 67,466 people, 54 per cent are girls and women and 58 per cent are children.
10. Cartographie des vulnérabilités en Mauritanie (UNICEF 2015), <https://www.unicef.org/mauritania/rapports/element-cartographie>.
11. These children do not attend any traditional or modern school. Cartographie des vulnérabilités en Mauritanie (UNICEF 2015), <https://www.unicef.org/mauritania/rapports/element-cartographie>.
12. As of 11 October 2021, there were 36,414 confirmed cases of COVID-19 and 785 deaths, <https://www.who.int/countries/mrt/>.
13. Cadre Harmonisé Mars 2021 (Commissariat à la Sécurité Alimentaire de la Mauritanie 2021), [https://reliefweb.int/sites/reliefweb.int/files/resources/CH\\_Regional\\_Acute\\_Food\\_and\\_Nutrition\\_Insecurity\\_2021MarAug.pdf](https://reliefweb.int/sites/reliefweb.int/files/resources/CH_Regional_Acute_Food_and_Nutrition_Insecurity_2021MarAug.pdf).
14. National Nutritional Survey, Ministry of Health 2021.
15. With global acute malnutrition rates exceeding 15 per cent and severe acute malnutrition rates above two per cent.
16. Impact de la COVID-19 sur les violences basées sur le genre en Mauritanie, Rapport Final, septembre 2020, page 25 (UNFPA).
17. Child Protection Factsheet (UNICEF 2018), <https://www.unicef.org/mauritania/media/2236/file/Factsheets%20prot.pdf>.
18. Mauritania Multiple Indicator Cluster Survey (UNICEF 2015), [http://ansade.mr/images/mics/MICS5\\_rapport.pdf](http://ansade.mr/images/mics/MICS5_rapport.pdf).
19. 1) 186,590 primary caregivers of children aged 0 to 23 months who need infant and young child feeding counseling; 2) 32,740 severely malnourished children needing treatment; 3) 120,750 children aged 0 to 23 months at risk of malnutrition (National Nutritional Survey, Ministry of Health 2021).
20. Cible des interventions et données démographiques (CIDD) 2015-2025, Ministry of Health, Dec 2019.
21. UNICEF estimate based on the 2020 Annual Report, the West and Central Africa Regional Office's COVID-19 indicator, and monitoring data from the WASH in school programme.
22. Children in need of protection services. Multiple Indicator Cluster Survey, 2015.
23. 1) Children in need of support in formal or non-formal education, including early learning (217,485) (Plan de riposte de l'Éducation en réponse à la pandémie du COVID-19, Ministry of Education, May 2020, <https://www.education.gov.mr/IMG/pdf/planripostecovid19.pdf>); 2) Children out of school (163,228), <https://www.unicef.org/mauritania/rapports/element-cartographie>.
24. National Nutritional Survey, Ministry of Health 2021.
25. National Nutritional Survey, Ministry of Health 2021.
26. Cible des interventions et données démographiques (CIDD) 2015-2025, Ministry of Health, December 2019.
27. UNICEF estimate based on the 2020 Annual Report, the West and Central Africa Regional Office's COVID-19 indicator and monitoring data from the WASH in school programme.
28. This is a UNICEF estimate based on the average number of children affected by moderate and acute malnutrition, the population of affected pregnant and lactating women, and people affected by flooding.
29. This figure is calculated on the basis of 10 per cent of the targets for each section: • Health/nutrition: Primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling = 149,272\*10% = 14,927 people • Protection = Sector total 51,900\*10% = 5,190 people • WASH: Sector total 84,200 \*10% = 8,420 people • Education: Sector total: 98,884\*10% = 9,888 people • Social protection: Sector total 420,000 \*10% = 42,000 people • C4D: Sector total 391,283 \* 10% = 39,128 people Total = 119,553 people
30. The population targeted is higher than the total number of people/children to be reached because the target includes mass media outreach.
31. This includes US\$1.7 million for child protection interventions (US\$600,000 for gender-based violence in emergencies interventions and US\$460,000 for prevention of sexual exploitation and abuse interventions).
32. The funding requirement for 2022 is similar to 2021 but will reach more children. Through the improvement of the municipal protection system and the strengthening of the capacities of our partners, we can have more beneficiaries with the same funding.
33. The level evidenced in Mauritania and the cost of implementing the activities should allow us to reach our targets.
34. The social protection target includes people to be reached by the on-going shock-responsive cash transfer support, which is fully funded for 2022.