

MALI

Humanitarian Situation Report No. 2 1st March-30th April 2022



Situation in Numbers



5,100,000 children in need of humanitarian assistance (HNO January 2022)



7,500,000 people in need (HNO January 2022)

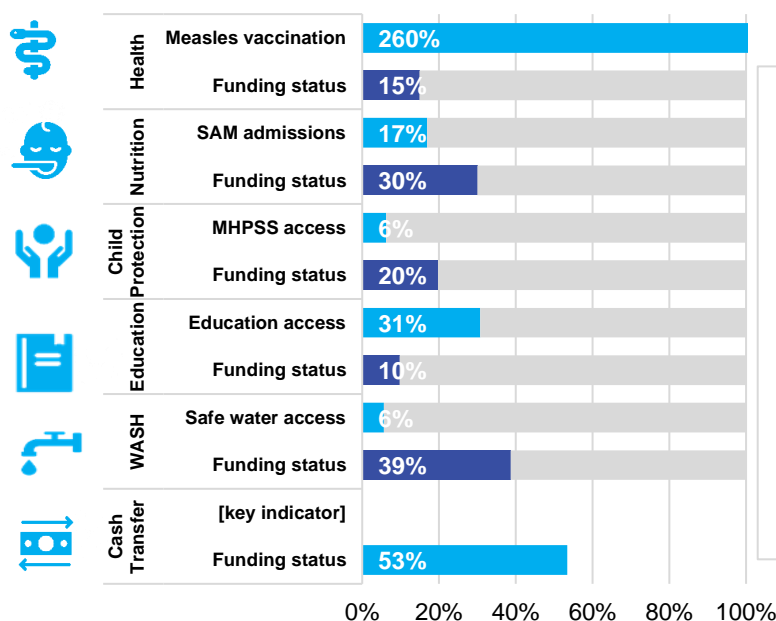


362,907 Internal Displaced Persons
(National Directorate of Social Development – DNDS Commission Movement de Populations (CMP) Report, February 2022)

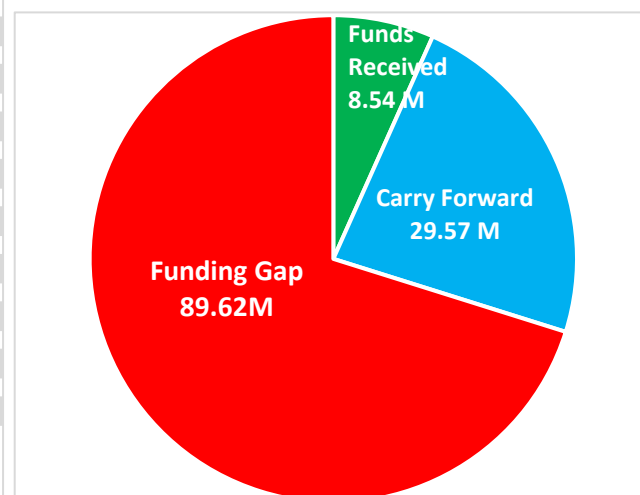
Highlights

- The center and north of Mali continue to be affected by constant insecurity due to attacks by non-state armed groups against civilians, intra- and inter-community conflicts, banditry. The region of Menaka has particularly been affected as recent clashes between armed groups and attacks on civilians in several localities which have caused population displacement and fragilized even more children.
- As of 30th of April 2022, the COVID-19 outbreak has affected the 20 regions of the country, with a total of 30,833 confirmed cases, of which 732 deaths.
- UNICEF provided short term emergency distribution of household water treatment and hygiene kits as well as sustainable water supply services to 51,653 people (31,505 for temporary access and 20,148 for sustainable access) in Kayes, Mopti, Menaka, Tombouctou, Gao and Kidal regions as of 30 April 2022,
- 33,366 children aged 6-59 months, including 17,880 girls and 15,486 boys were admitted and treated for severe acute malnutrition from January to April 2022.
- 47,709 children (including 22,723 girls) have had access to quality formal and non-formal education through UNICEF and its implementing partners assistance.

UNICEF's Response and Funding Status



UNICEF Appeal 2022 US\$ 127,7 million



Funding Overview and Partnerships

In 2022, UNICEF is appealing for US\$ 127.7 million to respond to the humanitarian needs of children caused by conflict or natural disasters while facilitating access to quality basic social services for crisis-affected populations in the north and Center of the country. As of 30th of April 2022, US\$ 8,54 million were received in addition to the US\$ 29,57 million carry-forward for a total of US\$ 38,12 million available, representing 30 per cent of the total appeal.

The funding gap is US\$ 89.62 million (70 per cent of the appeal), and far from covering the needs in several sectors including Nutrition, WASH, Child Protection and Education.

The Governments of the USA (USAID- OFDA), Spain, the Czech Republic, Sweden, Romania, Denmark, Austria, Canada, USA (State), Switzerland (Swiss Agency for Development), Germany and the United Kingdom (DFID, -FCDO), Japan, the Spanish, German and Norwegian Committees for UNICEF, UNICEF-China, SIDA, the European Commission /ECHO, USAID/Food for Peace, Education Cannot Wait Fund, GAVI /The Vaccine Alliance Global, the CERF have positively reacted and generously contributed to UNICEF Mali humanitarian response. UNICEF expresses its deep and sincere gratitude to all public and private donors for the contributions receive.

Situation Overview & Humanitarian Needs

Mali faces a persistent insecurity in the north and center of the country characterized by attacks by non-state armed groups against civilians, intra- and inter-community conflicts, banditry. 362,907 internal displaced persons fleeing this insecurity are reported¹ half of whom in central Mali. This insecurity has spread over the past months to several localities in the south of the country. As of 30th April 2022, 1,731 schools were closed due to insecurity mostly in the central and northern regions, preventing 500,000 children from accessing education.²

In the region of Menaka, clashes between armed groups and attacks on civilians in several localities have caused population displacement. Cases of separated children (131) and unaccompanied ones (08) are also reported. UNICEF and its partners are deploying a multisectoral response in a context marked by very difficult access to populations in need.

The conflict compounded with the effects of the Covid-19 contributed to the deterioration of the humanitarian situation: 7,5 million people are in need of humanitarian assistance 52 per cent of whom are women and 56 per cent children.³ The main humanitarian needs today include the protection of women and children, nutritional and health assistance, access to drinking water and emergency education services.

By 30 April 2022, the Ministry of Health reported 30,833 confirmed cases and 732 deaths of the Covid-19 as the (death rate :2.37%)⁴ the COVID-19 outbreak affects all the 20 regions in Mali, with. Mali continues to record measles with 218 confirmed cases during the first month of 2022.

The economic and diplomatic sanctions (closure of land and air borders; suspension of all commercial and financial transactions) adopted by the ECOWAS following the 2018 coup d'état and the prolongation of the transition are in application since January 2022.

Summary Analysis of Programmatic Response

Nutrition

During the reporting period 26,551 children aged from 6 to 59 months, suffering from severe acute malnutrition were admitted and treated in health and community facilities in Mali. Since the beginning of the year 33,366 children aged 6-59 months, including 17,880 girls and 15,486 boys, were treated since January 2022. This represents 17% of the 197,671 targeted this year by UNICEF and its partners.

¹ DNDS-CMP Mali, February 2022

² Education Cluster Mali, 2022

³ HNO/HRP 2021

⁴ Ministry of Health Mali, daily report N° 789 of 30 April 2022

Mopti region recorded the highest number of admissions with 9,738 new SAM admissions (5,209 girls). The data completion rate remains very low in the Taoudenit and Menaka regions due to the unavailability of internet network.

On prevention side, 114,010 primary caregivers of children aged 0 to 23 months (88,450 women) received counselling on infant and young child feeding within the country, this represents an increase of 69 905 caregivers reached during March and April.

In late April, UNICEF and its partners launched the NAFANA project which is a five-year project aimed at improving the nutritional status of women, girls and children under-five living in highly vulnerable situation in Mali. The project is funded by the Government of Canada for 5 years (2022-2027) and target 1.4 million beneficiaries in 300 villages of Mopti, Segou, Timbuktu and Taoudenit regions.

Also of note was the visit of the UN Under-Secretary General, coordinator of the SUN movement, to Mali for the meeting of the national nutrition council and the presentation of the multisectoral nutrition action plan 2021-2025.

In response to the security crisis registered in March, that has led to massive population displacements in the Ménaka region which is already under a nutrition emergency (global acute malnutrition rate of 17.9%), UNICEF has stepped up its humanitarian response in partnerships with health districts and NGOs through mobile clinics, strengthening stocks of intrants, and strengthening competencies of medical staff and community based health workers (CHW) in innovative approaches of prevention and treatment of acute malnutrition.



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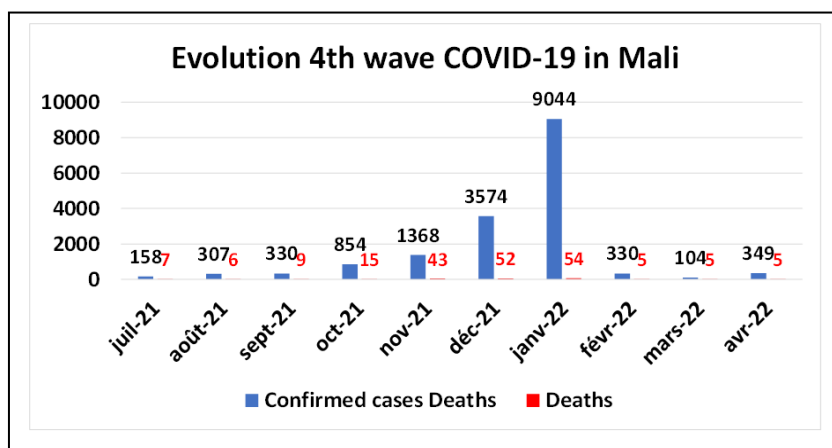
Ceremony to launch the National Multi-Sectoral Nutrition Action Plan with the presence of representatives of UNICEF, WFP and the Under Secretary General of the United Nations, coordinator of the SUN movement

Health

During the reporting period (March & April 2022), no case of measles as well as of wild poliovirus and circulating vaccine-derived poliovirus (cVDPV2) was reported in the country. In relation to the 56 confirmed cVDPV2 cases in 2021 across the country, a series of campaigns is being organized to be held in the third quarter of 2022.

As of 30th April 2022, the COVID-19 outbreak has affected the 20 regions, with a total of 30,833 confirmed cases, of which 732 deaths. There was an increase in cases in April, with 349 confirmed cases and 5 deaths, compared to 104 confirmed cases and 5 deaths in March 2022, an increase of 335%.

Regarding the COVID-19 vaccination campaign organized by the Government and supported by UNICEF and WHO, as of 30th April, 1,070,735 people benefited from a full immunization schedule in Mali (around 10.7% of the population target and 5% of population total in Mali).



To strengthen the Government's response, UNICEF supported the Ministry of Health to facilitate the delivery of vaccines to the central and southern regions of the country and helped reinforce the cold chain equipment to accommodate Pfizer vaccines. UNHAS services were utilized for the delivery in the most remote areas of the country. In addition, UNICEF financed the survey on the perceptions of the population on vaccination against covid-19 in Mali, carried out by the National Institute of Statistics. 2,759 people (including 1,650 women) took part in the 6 communes of Bamako. Findings of this study revealed that 94 per cent of the population in Bamako had heard about the availability of the COVID 19 vaccines in the country. The most used communication channels were television (76.6 per cent), radio (61.5 per cent), social media (26 per cent) and health workers (19.2 per cent). Finally, 93 per cent of respondents are confident that the COVID-19 vaccine is effective in protecting people from COVID-19 infection.



© UNICEF/UN0579698/Keita
A state nurse vaccinates a 9-month-old child against measles, yellow fever and meningitis in the presence of his mother at a Community Health Centre

WASH

From January to April 2022, 31,505 people, (8% of the target) including 16,934 children of which 4,707 for March and 19,740 for April received WASH assistance (through the distribution of hygiene kits consisting of water treatment and storage products as well as the distribution of water-by-water trucking) as a response to the various humanitarian shocks that they face including the COVID-19 pandemic in Mopti, Gao, Menaka and Timbuktu regions. 20,148 people of them (25% of the target) including 10,830 children benefited from sustainable access to potable water through the construction of water points in Kayes, Mopti and Kidal regions⁵.

Key challenges faced in the WASH Sector include difficulties in the delivery of emergency supplies in hard-to-reach areas e.g in the region of Menaka which contributes to the increased cost of operations in this region.

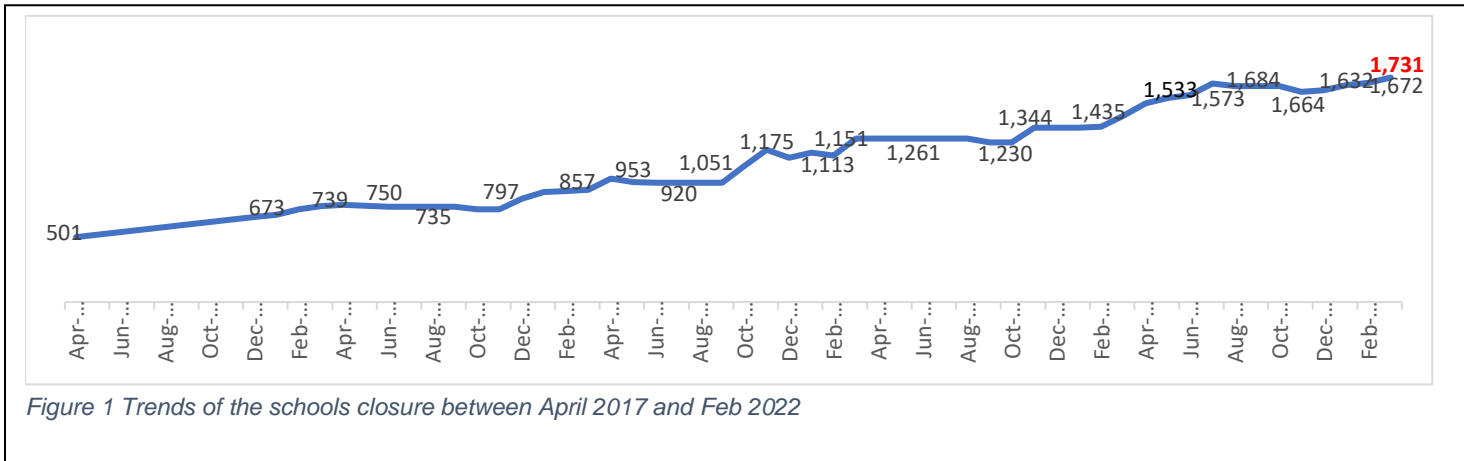
The WASH cluster has completed a WASH Severity Classification which is a new inter-agency initiative led by the Global WASH Cluster, UNICEF, and IMPACT Initiatives. This tool reveals that all regions and circles in Mali are in need of a WASH assistance (severity phase of 3 or more) with the exception of the southern regions (Kayes, Bamako and Sikasso) which are classified in phase of stress (stage 2). Nine circles in the regions of Gao, Kidal and Ménaka are in a critical phase (phase 4), 22 circles in the regions of Ségou, Mopti and Timbuktu and the entire region of Koulikoro are in a crisis phase (phase 3). No region or circle is in classified in catastrophic phase (phase 5) in the country. This analysis is useful in the targeting and prioritization of the areas of interventions in a context of limited resources.

A total of 14 actors (ACTED, ACF, HELP, SI, Mercy Corps, Oxfam/Stop Sahel, CICR, CAMR, AEN, PUI, Aide au Sahel Mali and UNICEF, GLOBQL Charity, CECI), reported WASH interventions to the cluster, in complementarity with UNICEF efforts, that benefited to 282,580 people (including 160, 576 children) affected by the various humanitarian crises in Mali.

⁵ These results were achieved in partnership with the Regional Directorates of Hydraulic, Regional Directorates of Social Development and Solidarity Economy, Regional Directorates of Civil Protection, and NGOs including NRC (Norwegian Refugee Council), IMADEL (Initiative Malienne d'Appui au Développement local) and GARDL.

Education

As of March 2022, the number of schools (1,731) closed due to insecurity is the highest ever recorded in the country. This represents one of the most important challenges for all educational partners impacting the implementation of activities and communities / parents' commitment to support the education of their children.



However, over 155,000 children targeted, 46,931 children (including 22,723 girls) were assisted in March and April by UNICEF and its implementing partners (IEDA-Relief, NRC⁶...), in Gao, Menaka, Tombouctou, Mopti, San and Segou regions to access to quality formal and non-formal education in a safe and protective learning environment. These results have been obtained through supports to volunteer teachers (when schools are closed and to maintain schools opened), rehabilitation and establishment of Temporary Learning Spaces (TLS), rehabilitation of classrooms, identification of Out of School children and their insertion / reinsertion into formal schools,

In addition, 73 schools (Medersa, Fundamental 1 and 2) were supported to implement COVID-19 prevention and control protocol in Mopti and Timbuktu regions, through distribution of materials, protocols and posters and establishment of hygiene and sanitation material in each school in partnership with IEDA and NRC.

UNICEF continued to support the Ministry of Education in the development / introduction of Technology of Information and Communication in education system. The implementing partner Proman is proceeding with an inventory of available resources and is working with the Ministry to validate the resources that will be integrated into a digital platform / Learning Management System.

As part of the implementation of the Multi-Year Resilience Program (MYRP) in the Central Sahel, the Education Cluster participated in advocacy activities at the regional level, including: 1. the regional advocacy workshop for the mobilization of additional MYRP resources (topics to be developed: - Support for volunteer teachers to ensure continuity of education in crisis areas; - Respect for national law in the recruitment and deployment of teachers and - Systemic scaling up of mobile schools in crisis-hit areas); 2. Sharing Mali's contributions for the meeting with donors held in Dakar. Of the \$41.6 million being sought, Mali has benefited to date from \$21 million, approximately 51%.

The Cluster supported the finalization of two studies conducted in the country, notably the study on humanitarian financing in Mali with a 2020 reference year, and the study on barriers to education for internally displaced and refugee children in the central Sahel. In addition, a 2022 planning workshop was held.

Finally, two training sessions were conducted for national and international NGO partners and UN agencies on the use of the new revised 5/3W tool in collaboration with the Global Cluster and other countries in the central Sahel.



© UNICEF Mali /Fatoumata Hamadoum/2022
Visit to the school in Tassinak, Tova commune, Timbuktu region, rehabilitated with UNICEF

Social Inclusion

From March to April 2022, payments of the different ongoing cash transfers operations haven't been delivered due to the strengthening of risk management mechanisms, with the set-up of the risk matrix for all transfers programs, and the signing of the letter relating to the accountability of the DNPSES⁷ based on cash transfer operations and risk management.

UNICEF also provided technical support to DNPSES in the elaboration of the ToR and the launching recruitment of Financial Services Providers to ensure cash transfers delivered. Once these improvements made, payment shall start again normally in June.

Child Protection

In March and April 2022, 7,879 children (43% of girls) have been assisted by UNICEF and its implementing partners, in 7 Regions in the north and the Centre of Mali (Kidal, Menaka, Mopti, Segou, Gao and Timbuktu) as well as in the district of Bamako). 93 *Children Associated with Armed Groups and Forces* (14% of girls) were reunified and benefitted from socioeconomic reintegration and 123 *Unaccompanied and Separated Children* (UASC) (34% girls) were identified, while 7,663 children (44% of girls) affected by the conflict received psychosocial support, through (mobile and fixed) child friendly spaces.

UNICEF continued to support the Government in preventing and addressing grave child rights violations through the *Monitoring and Reporting Mechanism* (MRM). In March 2021, UNICEF and MINUSMA held a joint training of protection actors on the six grave violations in Mopti region. Twenty-five (25) people participated in the training (17 men and 8 women).



© ATDED Community based psychosocial activity for children attended by ATDED in Gao

In April, UNICEF and MINUSMA facilitated a capacity strengthening workshop for justice system actors on the Hanover Protocol for children associated with armed forces and groups, in Bamako. The workshop brought together 25 participants (3 women) including judges and prosecutors of the Anti-Terrorism Court, and representatives of the Special investigation brigade of the Malian Security Forces, the National Directorate for the Advancement of the Children and Families, and the Interim care centers for children separated with armed groups.

Following the Child Protection Area of Responsibility advocacy, US\$ 4,3 million from the Humanitarian Fund were allocated to the Child Protection sector for the implementation of *Child Protection in Emergencies* (CPIE) interventions in all Mali regions affected by armed violence and other humanitarian crises. Key challenges in the Child Protection Area of Responsibility remain i) the limited number of quality partners; ii) humanitarian access constraints in the center and northern Mali ; (ii) the short lifespan of funds which does not ease the implementation several interventions especially of long-term reintegration programme for children associated with armed forces and groups.

⁷ Direction Nationale de la Protection Sociale et de l'Economie Solidaire

Social Behaviour Change (SBC)

In March and April, UNICEF, in close collaboration with its implementing partners, intensified its communication and community engagement activities to support the Government in its campaigns against COVID-19, reaching around 14,000 people (including 1,594 women).

Activities were held in the regions of Kayes, Bamako, Sikasso, Mopti, Gao, Menaka and Kidal. Key messages were delivered through door-to-door sensitization and interpersonal communication, thanks to the involvement of community leaders, youth associations and religious dignitaries who played a major role in disseminating messages using their platforms through markets and places of worship.



UNICEF staff at a radio event on the Covid-19 pandemic, April

Humanitarian leadership, coordination and strategy

Humanitarian action coordination is led by the Ministry of Health and Social Development, The Ministry of Humanitarian Affairs with the support of the Humanitarian Country Team. UNICEF is leading three clusters, WASH, Nutrition and Education and the Child Protection Sub-Cluster. UNICEF co-led clusters are all part of the Inter-Cluster Working Group (ICWG) led by OCHA at the national and sub-national levels. UNICEF also participates in the in-country interagency PSEA Task Force and interagency Gender Task Force.

UNICEF Humanitarian strategy is aligned with the 2022 inter-agency humanitarian response plan (HRP) which aims to save lives and protect affected populations. UNICEF continues to address urgent needs of the most vulnerable populations in crisis-affected in north and central regions, while strengthening the linkages between humanitarian action and development programming and prioritizing community-based approaches.

Human Interest Stories and External Media

During the reporting period, UNICEF social media content earned 67,000 impressions on Twitter and 88,000 reach on Facebook.

At the same time, two press releases have been shared [JOINT PRESS RELEASE: Canada pledges one of the largest ever single contributions to a UNICEF Office, to fight malnutrition in Mali: The grant aims to improve the health, nutrition and wellbeing of women, girls, and children under five across Mali by 2027 through innovative approaches and multi-sectoral action.](#)

[Joint press release: Two thirds of households with children have lost income and 40 per cent of children weren't learning during pandemic: UNICEF-World Bank report finds that the lost earnings have left adults in 1 in 4 households with children going a day or more without food.](#)

Other UNICEF activities have been covered and highlighted:

[« The help I received changed my outlook on life » - Aliou* spent three years with an armed group in northern Mali. Thanks to the efforts of UNICEF and its partners, the teenager was released from the group and is now receiving vocational training.](#)

[Living with the weight of taboo - In Timbuktu, 98 survivors of sexual violence like Fanta* received medical, psychological and economic support in 2021 thanks to UNICEF and its partners.](#)

Next SitRep: 30 June 2022

UNICEF Mali Facebook: <https://www.facebook.com/unicefmali/>

UNICEF Mali Twitter: <https://twitter.com/unicefmali>

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

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Annex A - Summary of Programme Results

			UNICEF and IPs Response			Cluster/Sector Response		
Sector		Total needs	2022 target	Total results	Change* ▲▼	2022 target	Total results	Change* ▲▼
Indicator	Disaggregation							
Health								
# children aged 6 months to 15 years m vaccinated against measles	girls		200,000	127,797	0			
	boys			122,787	0			
# children aged 0 to 59 months vaccinated against polio	girls		352,064	0	0			
	boys			0	0			
Nutrition								
# children aged 6 to 59 months with severe acute malnutrition admitted for treatment	girls		197,671	17,880	14,264	197,671	17,880	14,264
	boys			15,486	12,287		15,486	12,287
# primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling	Women		492,527	88,450	47,109	509,617	88,450	47,109
	Men ⁸			25,560	13,796		25,560	13,796
Child Protection								
# children and caregivers accessing mental health and psychosocial support	girls	1,600,000	372,733	11,799	3,461	1,035,370	13,601	11,683
	Boys			11,587	4,466		13,541	
# children who have exited armed forces and groups provided with protection or reintegration support	girls		700	33	56	1,000	33	56
	Boys			187			187	
# unaccompanied and separated children accessing family-based care or a suitable alternative	girls		1,200	104	123	1,500	113	138
	boys			222			228	
# Women, girls and boys accessing gender-based violence risk mitigation, prevention or response intervention			40,400	0	0	40,400	0	0

# people who have access to a safe and accessible channel to report sexual exploitation and abuse by aid workers		1,500,000	124,000	0	0	124,000	0	0
Education								
# children accessing formal or non-formal education, including early learning	girls	2,900,000	155,000	23,052	22,723	197,946	329	329
	boys			24,657	24,208		449	449
# children receiving individual learning materials	girls		430,000	0	0	1,077,258	329	329
	boys			0	0		449	449
# schools implementing COVID-19 -19 protocols (infection prevention and control)			2,500	2,389	73	5,000	0	0
WASH								
# people accessing a sufficient quantity of safe water for drinking, cooking and personal hygiene	girls	1, 615, 000	482,000	14,373	6,802	1,200,000	38,273	15,695
	boys			14,979	7,089		39,887	16,357
	women	2, 223, 500		11,363	5,377		30,259	12,409
	men			10,938	5,176		29,128	11,945
# people use safe and appropriate sanitation facilities	Men		50,000	0	0	100,000	8,447	2,865

	Women			0	0		8,344	2,981
# people reached with critical water, sanitation and hygiene supplies (including hygiene items) and services	Women	3,646,000	390,000	3,518	3,518	814,000	19,034	12,283
	Men			3,543	3,543		18,723	12,084
Social Protection								
# households reached with humanitarian cash transfers across sectors	Households		25,000	0	0			
# households reached with cash transfers through an existing government system where UNICEF provided technical assistance and funding	Households		30,000	0	0			
SBC								
# people participating in engagement actions for social and behavioural change	Women		800,000	5,762	1,522			
	Men			9,065	4,033			
# people sharing their concerns and asking questions/clarifications to address their needs through established feedback mechanisms	Women		250,000	0	0			
	Men			13,583	5,853			

Annex B

Funding Status*

Funding Requirements (as defined in 2022 Humanitarian Appeal)					
Appeal Sector	Requirements	Funds available		Funding gap	
		Funds Received Current Year	Carry-Forward	\$	%
Nutrition	27,544,695	4,952,734	3,302,365	19,289,596	70%
WASH	19,200,598	2,376,894	5,040,646	11,783,058	61%
Health	10,432,800	432,000	1,124,509	8,876,291	85%
Child Protection	22,884,613	0	4,524,014	18,360,599	80%
Education	20,168,798	0	1,960,712	18,208,086	90%
Social Inclusion	22,880,121	0	12,226,682	10,653,439	47%
C4D	2,381,400	432,000	800,000	1,149,400	48%
Emergency Coordination	2,256,737	355,054	598,945	1,302,738	58%
Total	127,749,762	8,548,682	29,577,873	89,623,207	70%