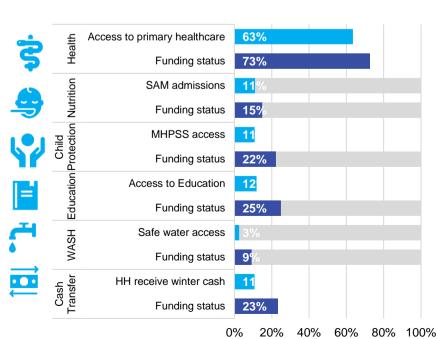


Reporting Period: 1 – 29 February 2024

Highlights

- In 2024, 23.7 million people (12.4 million children) are in need of humanitarian assistance. In addition, approximately 180,000 people are at risk of natural disasters (54 per cent of them children).
- The Integrated Phase Classification (IPC) projections for the period November 2023 to March 2024 highlighted a deterioration in food security, with the number of people in IPC phase 3 or above likely to rise to 15.8 million (36 per cent of the total population).
- In February, a total of 1,041,809 children under the age of five years were screened for acute malnutrition at 3,300 fixed and mobile health facilities supported by UNICEF across the country. Out of those screened, 43,051 children with severe wasting (57 per cent girls) were admitted for treatment.
- In February, more than 6 million people were reached with essential health services in UNICEF-supported health facilities.

UNICEF's Response and Funding Status



Afghanistan

Humanitarian Situation Report 1 – 29 February 2024 Report # 2



for every child

Situation in numbers



23.7M

People in need of humanitarian assistance (HNRP 2024)



12.3M

Children in need of humanitarian assistance (HNRP 2024)



857,000

Children under 5 expected to need treatment for severe acute malnutrition (HNRP 2024)

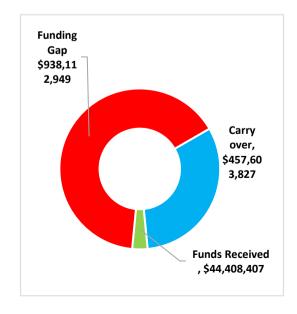


17.9M

People in need of humanitarian health assistance (HNRP 2024).

UNICEF Appeal 2024

US\$ 1,440,125,182



Funding Overview and Partnerships

UNICEF Afghanistan expresses its sincere gratitude to all public and private sector donors for the contributions received. The USD 1.4 billion Humanitarian Action for Children (HAC) appeal for 2024 is 35 per cent funded as of 29 February 2024. This includes flexible emergency funding from both public and private partners, which will continuously enable UNICEF to respond to rising and sudden humanitarian needs. UNICEF is grateful to Norway and UNICEF's extensive family of National Committees for contributions received in February 2024. UNICEF will continue to partner with donors to ensure sufficient resources are mobilized to address the needs of children and communities in Afghanistan.

Situation Overview & Humanitarian Needs

Afghanistan is highly prone to intense and recurring natural hazards, such as flooding, earthquakes, avalanches, landslides, and drought, due largely to its mountainous terrain and environmental degradation. Based on the findings of the 2024 Humanitarian Needs and Response Plan (HNRP), approximately 180,000 people are at risk of natural disasters (54 per cent of them children). It is expected that severe and unpredictable weather events, like summer floods, will increase in 2024 and beyond due to the impact of climate change, with severe knock-on effects on infrastructure and agriculture, and contributing to displacement. As harsh winter conditions begin to ease, the risk of heavy rains and flooding increases. Afghanistan is also prone to earthquakes. Earthquake tremors from 4.6-5.0 magnitude were reported in Takhar, Balkh, Kunduz and Badakhshan provinces in February. While the impact was minimal, there is a risk of larger-scale earthquakes in these, and other, regions.⁴

The risk of drought is prevalent in Afghanistan. The Integrated Phase Classification (IPC) projections for the period November 2023 to March 2024 highlighted a deterioration in food security, with the number of people in IPC phase 3 or above likely to rise to 15.8 million (36 per cent of the total population¹), including about 3.6 million people in IPC phase 4 (Emergency), and about 12.3 million people in IPC Phase 3 (Crisis)². Although cumulative precipitation from October 2023 through February 2024 was below average across the country, deficits declined following good precipitation in late February 2024. It is expected that average precipitation from March to May 2024 will further reduce cumulative deficits across the country and support wheat production in the spring³.

Afghanistan is also susceptible to epidemic-prone diseases. The epidemiological curve of suspected measles cases demonstrates a rising trend since the third week of November 2023. This could be explained by increased community transmission exacerbated by the winter season and low immunization coverage. Between 18 and 24 February 2024, a total of 1,190 suspected cases and 5 measles-associated deaths were reported. This is the highest number of suspected cases reported in a week since week 26 of 2022 (1,574 cases). Since the beginning of 2024, a total of 7,179 suspected measles cases and 29 deaths (CFR = 0.4 per cent) were reported. Among the suspected measles cases, 5,782 (81 per cent) were under-five children, and 3,301 (46 per cent) were females.

The epi curve shows an increase in acute respiratory infection (ARI) cases since the 3rd week of September 2023 which could be linked to cold weather across the country. During week 8 of 2024, a total of 38,948 cases of ARI/pneumonia and 81 associated deaths were reported. Since 1 January 2024, a total of 325,095 ARI/pneumonia cases and 749 associated deaths were reported from 34 provinces. Out of the total cases, 205,585 (63 per cent) were under-five children and 160,657 (49 per cent) were females. Out of the total deaths, 653 (87 per cent) were under-five children and 333 (45 per cent) were females. The current number of cases is higher than the average number of cases reported during the three preceding years (2020-2022). The higher number of cases in 2023 and 2024 could be attributed to the improvement in reporting due to the enhancement of the surveillance system⁴.

According to the Access Monitoring and Reporting Framework managed by OCHA, 136 access incidents were reported by humanitarian partners in February, compared to 109 incidents reported during the same period of February 2023, indicating a 25 per cent increase due to the physical access constraints throughout the period of winter. Interference in the implementation of humanitarian response remains the main driver of access constraints. UNICEF continues to

¹ Flowminder 2024 national population estimate.

² Afghanistan IPC Acute Food Insecurity Analysis: October 2023 – March 2024 (Published on December 14, 2023).

³ FEWSNET: Afghanistan Food Security Outlook, February - September 2024.

⁴ Afghanistan Infectious Disease Outbreaks Situation Report | Epidemiological week # 08-2024.

work through the inter-agency coordination mechanisms and provincial-level engagement through its network of zonal offices to negotiate solutions to challenges and secure exemptions ensuring principled aid delivery.

Summary Analysis of Programme Response

Health

In February, UNICEF continued to support the delivery of basic and essential healthcare services at the primary, secondary, and tertiary levels in all 34 provinces through 2,406 static health facilities. As a result, more than 6 million people were reached with essential health services in UNICEF-supported health facilities, of which more than half were children under five. To provide health services in remote and hard-to-reach areas, UNICEF supports 16 mobile health and nutrition teams (MHNTs), reaching over 19,000 people (50 per cent children under five). And to ensure continuity of health services, UNICEF provided salaries to 27,306 healthcare workers (38 per cent females) across the country.

To enhance the capacity of healthcare workers and community health workers (CHWs) to manage acute respiratory infections, pneumonia, and hypothermia, UNICEF supported the training of 285 healthcare workers in the northern, eastern, and central regions. The trained healthcare workers will cascade the training at the provincial level in the coming weeks as part of the winterization preparedness and response programme. With UNICEF support, CHWs treated over 94,000 ARI cases and referred over 54,000 ARI and 20,000 diarrhoea cases for further management at the health facility levels. In addition, CHWs conducted 65,793 antenatal care and 40,733 postnatal care home visits to assess and improve the quality of care.

UNICEF continued to respond to the influx of returnees in the eastern and southern regions (Torkham and Spin Boldak border points). During the reporting period, UNICEF, through partners, provided 1,517 returnees with health services and 500 children with immunization services.

UNICEF also supported mobile health and nutrition teams (MHNTs) with medical supplies, enabling the continuation of health services for returnees. As part of its support to routine immunization activities, UNICEF reached 107,412 children with measles vaccination services, and 123,315 children were provided with Pentavalent 3 vaccines. In addition, 401,343 people were vaccinated against Covid-19.

In February 2024, UNICEF staff and extenders conducted monitoring visits to 677 health facilities to assess their functionality and quality of service. The monitoring visits revealed that 95 per cent of the health facilities provided maternal and child health services, and 96 per cent provided nutrition services. In addition, 96 per cent of the facilities provided expanded immunization services. However, only 75 per cent of the health facilities had sanitation facilities, 82 per cent of those had gender-segregated sanitation facilities. Continuous monitoring through staff and extenders ensures regular reporting as well as tracking of corrective measures for identified gaps.

Nutrition

In February, a total of 1,041,809 children under the age of five years were screened for acute malnutrition at 3,300 fixed and mobile health facilities supported by UNICEF across the country. Of the children screened, 43,051 with severe wasting, (57 per cent girls), were admitted for treatment. Although there was a 10 per cent decrease in the number of children admitted for treatment compared to February 2023, this reduction was caused by the decreased reach of mobile health and nutrition teams due to operational challenges. In the southern region, UNICEF expanded nutrition services to 14 mobile and fixed health facilities. A total of 244,174 children aged 6 to 59 months received a 6-month supply of multiple micronutrient powder (MNP) sachets in February.

UNICEF provided counselling services on maternal, infant, and young child nutrition (MIYCN) to 202,757 caregivers of children aged 0 to 23 months since the beginning of the year. UNICEF trained 94 health workers (medical doctors, nurses, midwives, and nutrition counsellors) on maternal, infant and young child nutrition (MIYCN) in the northern region. In the eastern region, UNICEF resumed support for the Urban Nutrition Programme with the deployment of 152 additional staff (nurses, nutrition counsellors, and community screeners), who were previously trained on the integrated management of acute malnutrition (IMAM) guidelines and screening.

Education

In February, UNICEF supported a total of 561,454 children (64 per cent girls) access to education through 17,927 community-based education (CBE) classes. Nine classes, supporting a total of 445 students (84 per cent girls) were registered into the CBE Information Management System during the reporting month. UNICEF also supported 104,080 public school students (42 per cent girls) in 4 provinces through the distribution of teaching and learning materials (TLMs). Distribution of TLMs and textbooks is ongoing in preparation for the start of the new academic year in late March.

The ban on secondary school girls' education is still in place. UNICEF continues to support training of female teachers, who are essential in ensuring girls participate in school, especially adolescent girls. In the reporting month, UNICEF supported 1,178 female students with teacher training and professional development through the Girls' Access to Teacher Education (GATE) programme.

Child Protection, GBViE and PSEA

In February, 216,979 children and caregivers (50 per cent girls and women) including 4,030 children with disabilities accessed prevention, risk mitigation and response services. UNICEF provided 123,741 children and caregivers⁵ with mental health and psycho-social support (MHPSS) key messaging and structured MHPSS through child-friendly spaces, health facilities, transitional care centers and schools. Furthermore, 8,964 vulnerable children (2,282 girls and 6,682 boys) were reached with case management services, including family tracing and reunification of 2,929 unaccompanied and separated children. Financial assistance was provided to 1,946 children, vocational skills training to 54 children, referral for integration into education services to 3,135 children and livelihood support services to 50 children across all regions.

The risk of explosive ordnances continues to pose a significant danger to children, resulting in a high number of child casualties. UNICEF and partners reached 35,361 children and community members⁶. Provision of services to gender-based violence (GBV) cases continued to be a challenge with the restrictions on the movement of women and girls and the ban on female workers. Despite the challenges, UNICEF and partners were able to reach out to 24,269 people⁷ with GBV prevention, risk mitigation and response services.

Water, Sanitation and Hygiene (WASH)

In February, 686 families received hygiene kits and 507 winter kits. In addition, 125 cubic metres of water was trucked to the people at the Torkham Border (zero-point, transit center and reception center) during the month. 11,932 people (5,937 males and 5,995 females) were reached with messages on handwashing, latrine use, use of safe drinking water and household water treatment options. UNICEF also provided safe drinking water to 59,946 people in 8 provinces ⁸ through the repair and construction of boreholes, rehabilitation and installation of solar-powered water supply systems and household connections. Furthermore, 9,328 people accessed gender-sensitive sanitation facilities, out of which 1,460 persons were reached with emergency sanitation facilities and 7,868 people were reached through community mobilization and engagement for the construction and use of household latrines.



Permanent handwashing and drinking water distribution point at 'zero point', Torkham border. ©UNICEF

Since the beginning of the year, UNICEF reached 102,350 people¹⁰ through hygiene promotion and awareness sessions focusing on handwashing with soap, personal hygiene, management of safe water at household levels, boiling water,

⁵ 33,355 girls, 38,895 boys, 24,468 women and 27,023 men.

⁶ 2,023 girls, 14,067 boys, 3,897 women, and 5,374 men.

⁷ 8,646 girls, 7,607 boys and 8,016 women.

⁸ Jawzjan, Hirat, Uruzgan, Farah, Maidan Wardak, Samangan, Kandahar and Badghis.

⁹ 2,146 women; 2,046 girls; 2144 men and 2,612 boys.

¹⁰ 18,253 women; 20,634 girls 18,252 men and 22,221 boys.

clean sanitation facilities and the transmission of diarrhoeal diseases in seven provinces¹¹. In addition, 37,953 people¹² in eight provinces received essential WASH supplies which include family hygiene and consumable kits, water treatment products, buckets, and jerricans¹³. The supplies helped affected people to practice positive behaviours and prevent diarrhoeal diseases. UNICEF also supported the rehabilitation of water supply, sanitation, and handwashing facilities in 14 schools. The WASH in schools' projects benefited approximately 7,882 school children and teachers¹⁴ through the installation of handwashing stations, taps, the construction and rehabilitation of sanitation facilities and hygiene promotion interventions.

Since the beginning of the earthquake response in October 2023, UNICEF has provided WASH services to over 119,350 people with water (26,092 individuals), sanitation (24,236 individuals), and hygiene (69,022 individuals) services and supplies. UNICEF continued to provide life-saving WASH support in earthquake-affected areas in the Western region of Afghanistan. UNICEF has provided safe drinking water, basic sanitation, hygiene promotion, and the distribution of critical WASH items to the earthquake-impacted people in 52 villages in Zinda Jan, Injil, Rabat Sangi, and Ghoryan districts in Herat province.

An assessment conducted by UNICEF implementing partners and WASH cluster partners in the earthquake-effected districts revealed that of the 852 water points assessed, 55 per cent (468 water points) were non-functional due to the earthquake. The remaining 384 water points were non-functional due to other factors (drought, flooding, etc.). The highest number of assessed non-functional water points were reported in Zinda Jan district (63 per cent). As part of the recovery and rehabilitation of water supply systems in these villages, the survey and design of 68 water supply projects has been completed and the procurement and contracting for the rehabilitation work is ongoing.

Social and Behaviour Change (SBC) and Accountability to Affected People (AAP)

In February, UNICEF reached an estimated 2.2 million people through national media campaigns as well as information, education, and communication materials. Additionally, UNICEF engaged with more than 141,000 individuals through face-to-face interactions focusing on the prevention of malnutrition, promotion of immunization services, mental well-being, acute watery diarrhoea prevention, safe handling and treatment of drinking water, avoiding open defecation, and practicing of personal and household hygiene.

As part of Accountability to Affected People (AAP), UNICEF documented feedback and complaints from 13,757 individuals through complaints and feedback mechanisms. The feedback was collected through 129 community engagement and feedback centres, community structures, a UNICEF-supported call centre and other mechanisms put in place by UNICEF and partner organizations. The feedback was directed to the relevant UNICEF programme sections and clusters for further action and to ensure the closure of the feedback loop.

UNICEF actively worked to prevent Acute Respiratory Infections by engaging over 110,000 individuals in high-risk areas to equip them with lifesaving information on preventive and protective behaviours. UNICEF extenders conducted 111 supportive missions in targeted provinces to monitor the ARI response. Support for people affected by the earthquake in Herat continued with 124,400 community members receiving life-saving information. Furthermore, 1,274 people including CHWs, school management shuras, youth networks, influencers, nutrition counsellors, community development committee members, local elders, teachers and community volunteers in Herat were trained on the essentials of maternal and newborn health during emergencies. In addition, the community engagement and feedback center at the Torkham border point received 107 visitors who were seeking information and providing feedback on the services provided during the reporting period.

Gender and Adolescent Development and Participation

In February, UNICEF provided 11,092 women and girls with an integrated package of critical information and services, including health, nutrition, hygiene, menstrual health, and hygiene (MHH), and GBV information and referral services.

¹¹ Hilmand, Hirat, Balkh, Ghazni, Bamyan, Logar, Paktika and Maidan Wardak.

¹² 8,729 women; 9,868 girls 8,729 men and 10,627 boys.

¹³ Hirat, Balkh, Kandahar, Ghazni, Bamyan, Logar, Paktika and Maidan Wardak.

¹⁴ 250 girls; 7,493 boys; 5 female teachers; 134 male teachers.

These services were provided through community-based women and girls' safe spaces operated by organizations focused on women and girls. This approach enabled them to access the information and services they require safely while overcoming the social isolation created by mobility restrictions, helping them maintain their social networks. A further 4,416 women, girls, men, and boys were reached through community dialogues on gender norms facilitated by trained local facilitators. These dialogues focused on tackling harmful gender norms, raising awareness of positive gender norms, and promoting the value of women and girls at household and community levels. Dialogues are key to promoting the acceptance of the safe spaces and engaging men and boys as allies for women and girls' continued access to services.

Social Protection and Humanitarian Cash Transfers (HCT)

In February, UNICEF provided multi-purpose cash assistance for one month, complemented by a one-off top-up to 2,865 households in Khenj and Bazarak districts of Panjshir province as part of its winter response. The targeted households include those with heads of households with a disability, households with pregnant and lactating women (PLW), households with children under the age of two, and female-headed households. The winter response is designed to ensure families have access to essential services, including warm clothing and blankets for the well-being of children, and to offer temporary financial support to offset harmful coping mechanisms stemming from economic hardships, such as high levels of household debt, child labour, early marriages, and school dropouts.

Humanitarian Leadership, Coordination, and Strategy

During February, the nutrition cluster admitted 43,980 children for Severe Acute Malnutrition (SAM) treatment and admitted 70,366 Moderate Acute Malnutrition (MAM)children (aged 6-59 months) into the programmme. The total number of children admitted to the MAM programme during the first two months of the year is now 168,508. Additionally, 51,286 pregnant and lactating women (PLW) were enrolled in the treatment programme in February, bringing the total number of PLW admissions to 110,948.

The policy environment for education cluster partners is still challenging. During the reporting month, the education cluster requested the Humanitarian Coordination Team (HCT) to assist with advocacy efforts focusing on the transition of CBE classes from international to local NGOs rather than to the provincial education directorates. The cluster also requested the Humanitarian Coordinator (HC) to propose that the humanitarian community review the CBE transition guidelines that are being developed by the MoE before they are enacted.

Collaborative efforts among WASH partners and clusters resulted in 416,121 people being reached through various interventions including the provision of water, sanitation, and hygiene promotion services by 22 partners¹⁵. A report hub training was delivered to 25 WASH Cluster personnel in the southern region. In addition, the WASH cluster supported joint Multi-Sector Rapid Assessment Tool (MRAT) assessments across six districts of Kandahar province as well as joint assessments for returnees in Ghazni and Paktika provinces in the southeast region.

In February, the Child Protection Area of Responsibility (CP AoR) reached 122,927 children with structured MHPSS and messaging to 44,827 parents/caregivers. A total of 1,042 children were referred for specialised mental health services. A total of 4,431 children (3,034 unaccompanied and separated children) were provided case management services. In addition, cash assistance was provided to 2,109 families. The national CP AoR conducted a Child Protection, Information Management Training (CPIMS+) Training of Trainers (ToT) for 22 case workers (5 females) from 11 NGOS to improve documentation and service delivery. To date, 110 staff are registered in the system. 60 cases were documented in CPIMS+ by partners in February. The last phase of the national ToT for inter-cluster is planned for the month of April. The training aims to improve multi-sectoral referral to services.

External Media, Statements & Human-Interest Stories

Social media

• Video: With support from @ADB HQ, UNICEF trained 9,500 midwives and community health workers last year.

¹⁵ This figure represents partners that reported.

- Article: With support from @JapanGov @USAIDSavesLives @eu_echo @WorldBankSAsia @CanadaDev @ADB HQ, this is how UNICEF provided therapeutic food to help children recover.
- Video: With supported for the World Bank, UNICEF brings healthcare, medicine and trained professionals to millions of children and women across Afghanistan.
- Photo Essay: <u>Profile of one of 30,000 @UNICEF supported Community Health Workers in Afghanistan,</u> bringing healthcare closer to people's doorsteps.
- Video: Community health workers are a lifeline for communities in remot areas where the nearest health centre is miles away.
- Article: With support from the @WorldBankSAsia, UNICEF has prepositioned medical supplies and heating materials in health facilities, ensuring swift care for the people affected.
- Article: After harrowing journeys across borders on his own, UNICEF safely reunited 12-year-old Matiullah with his family in Afghanistan.
- Post: <u>Together with our partner @MofaJapan_en, we install water systems, handwashing stations and toilets</u> to improve sanitation in schools.
- Post: With thanks to @EUinAfghanistan, UNICEF delivered these iron supplements to over 4 million adolescent girls, protecting them from anaemia in 2023.
- Article: With support from the @ADB_HQ, @WorldBankSAsia, @MofaJapan_en, @MOFAkr_eng, @EUinAfghanistan, @gavi, & Thematic Funding, UNICEF supports over 122 community engagement and feedback centres through 4,350 trained volunteers.

Human-interest stories

- <u>Under Fatima's watchful eye:</u> As a Community Health Worker in one of Afghanistan's most mountainous regions, Fatima expresses how children's health and well-being often rest in her hands.
- <u>UNICEF responds to seasonal uptick in acute respiratory infections in Afghanistan.</u>
- <u>A joyous reunion:</u> After harrowing journeys across borders on his own, UNICEF safely reunited 12-year-old Matiullah with his family in Afghanistan.
- <u>Igniting positive change for children:</u> How UNICEF-supported strategies help families and communities make better decisions.

Next Sit Rep: 25 April 2024

UNICEF Afghanistan Humanitarian Action for Children Appeal: https://www.unicef.org/appeals/

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Annex A

Summary of Programme Results

	Total	UNICEF and IPs Response			Cluster/Sector Response		
Sector / Indicator	Needs 2024	2024 Target	Total Results (Jan - Feb 2024)	Change ▲ ▼	2024 Target	Total Results (Jan - Feb 2024)	Change ▲ ▼
Health ¹⁶							
Number of children under 1 who are vaccinated against measles, including during outbreaks	17, 412	2,100,000	242, 239	112,073			
Number of people who accessed primary health care through UNICEF supported health facilities and mobile teams	6,028, 692	19,420,000	12,328, 910	6,049,465			
Nutrition ¹⁷							
Number of children 6-59 months with Severe Acute Malnutrition (SAM) admitted for treatment	857,155	815,000	89,607	43,980	814,297	89,607	43,980
Number of primary caregivers of children aged 0 to 23 months who received infant and young child feeding (IYCF) counselling	3,028,217	2,500,000	414,533	206,026	2,422,573	414,533	
Number of children aged 6-59 months who received vitamin A supplements	7,214,281	7,200,000	0		7,214,281	0	
Child Protection, GBViE and PSEA							
Number of children and caregivers accessing Mental Health and Psychosocial Support (MHPSS) and information messaging on wellbeing	6,083,399	3,600,000	388,969	114,092	4,670,000	405,195	122,927
Number of girls and boys victims or at risk, including unaccompanied and separated children, who received case management services	1,24,968	80,000	13,139	8,939	100,000	13,799	9,431
Number of women, girls and boys accessing GBV risk mitigation, prevention or response interventions		330,00018	51,957	40,695			
Number of children and caregivers accessing explosive ordinance risk education		3,600,000	121,826	61,310			
Number of people reached through UNICEF supported awareness activities and community mobilisation interventions on PSEA		500,000	51,173	40,468			
Number of individuals -UNICEF and Implementing partners- trained on SEA prevention, risk mitigation and SEA reporting mechanisms		800	27	0			

¹⁶ The UNICEF health targets includes coverage from both mobile health and nutrition teams and static health facilities and is larger than the HRP reach, which is based on coverage by mobile health and nutrition teams only.

¹⁷ All the key results are attributed to Cluster Partners who are partially or fully supported by UNICEF. UNICEF is supporting the provision of therapeutic supplies, micronutrient supplements, equipment and tools as well as a pool of master trainers on Integrated Management of Acute Malnutrition (IMAM) and Maternal Infant and Young Child Nutrition (MIYCN), targeting all the Cluster Partners.

 $^{^{\}rm 18}$ The figure represents UNICEF's contribution to the GBV sub-cluster target.

Number of vulnerable school-aged girls and boys reached through community-based education (CBE) initiatives	1,748,767	600,000	561,454 ¹⁹	445	750,000	574,194		
Number of children in public education (including shock-affected/vulnerable girls and boys) reached with emergency education support	4,835,311	5,000,000 ²⁰	104,080	104,080	600,000	104,080		
WASH								
Number of people accessing a sufficient quantity of safe water for drinking, cooking and personal hygiene	20,840,551	5,500,000	141,783	59,946	9,474,947	232,792	108,695	
Number of people who gained access to gender and disability sensitive sanitation facilities	17,127,735	3,250,000	31,306	14,981	4,500,000	42,432	15,647	
Number of people reached with hygiene promotion programmes	21,592,955	4,200,000	187,891	103,281	6,377,540	504,108	243,542	
Number of people reached with critical WASH supplies	6,877,382	1,900,000	117,556	39,265	2,388,865	222,210	97,083	
HCT/Social Policy								
Number of households reached with UNICEF funded social assistance		155,000	0	0				
SBC/AAP								
Number of at risk and affected populations reached with timely, appropriate, gender/age-sensitive lifesaving information on humanitarian situations and outbreaks		10,000,000	4,418,948	1,220,463				
Number of children, caregivers, and community members engaged in participatory behaviour change interventions		3,500,000	837,158	126,932				
Number of people who shared their concerns and asked questions or requested clarifications to address their needs through established feedback mechanisms		300,000	61,605	13,757				
Gender, Youth, and Adolescent Development								
Number of women and girls accessing lifesaving services through safe spaces		85,000	20,694	11,092				
Number of UNICEF frontline workers trained on gender integration		15,000	1, 138	0				
Emergency Preparedness and Response								
Number of households reached with cash assistance to meet winter needs		70,000	7,532	4,315				

 19 These are the number of unique beneficiaries currently enrolled in UNICEF's Community-Based Education Programme. 20 The Public Education indicator includes HRP and non-HRP schools.

Annex B

Funding Status

		Fun	ds available	2024 Funding Gap		
Appeal Sector	2024 HAC Requirements (US\$)	Humanitarian resources received in 2024	Resources available from 2023 (carry - over)	Other resources available, including from 2023 (carry-over)	\$	%
Health	477,798,280	7,237,058	337,319,869	1,927,096	131,314,257	27%
Nutrition	185,510,711	12,425,023	14,178,991	1,050,573	157,856,124	85%
Child protection, GBViE and PSEA	57,174,120	9,191,162	2,036,314	1,501,327	44,445,318	78%
Education	227,693,910	-85,218	55,824,759	955,665	170,998,703	75%
Water, sanitation, and hygiene	298,399,962	9,856,667	16,293,701	1,251,740	270,997,854	91%
Social protection	87,285,585	5,638,713	12,826,331	1,708,873	67,111,668	77%
Cross-sectoral (HCT, SBC, RCCE and AAP)	18,450,000	145,002	7,189,950	2,442,973	8,672,075	47%
Emergency preparedness and response	77,050,114	0	0	0	77,050,114	100%
Gender, adolescents, and youth development	10,762,500	0	651,138	444,527	9,666,835	90%
Total	1,440,125,182	44,408,407	446,321,053	11,282,774	938,112,949	65%

^{*} The above results are supported by a range of financing instruments to meet the needs of women and children.

** To more accurately reflect the level of funding for the response, funds from other sources that also contribute to the emergency response in 2024, including those carried over from 2023, are included.