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Myanmar Country Office

Humanitarian Situation Report No. 3



Situation in Numbers

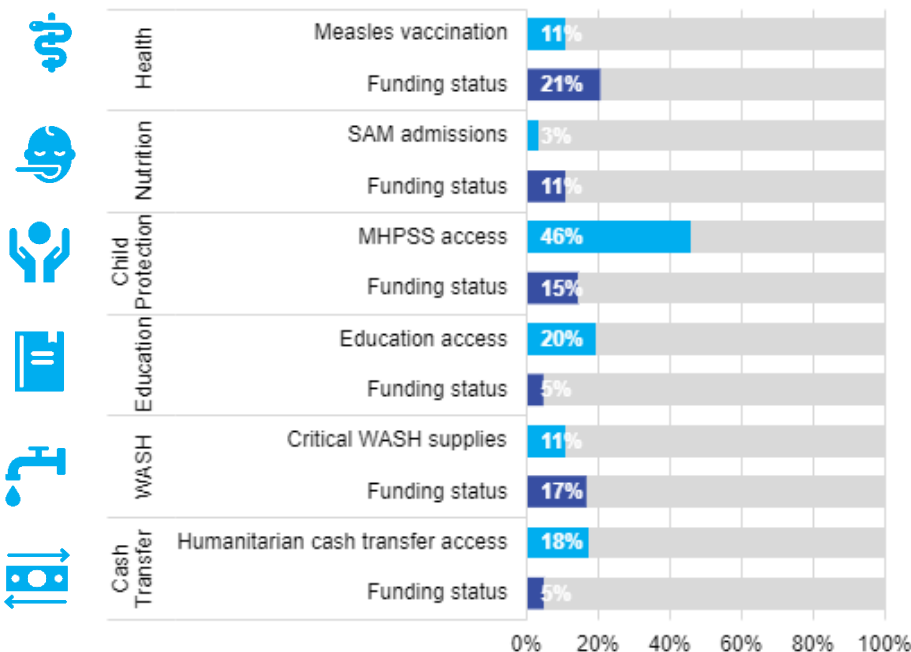
-  **6,000,000** children in need of humanitarian assistance
-  **18,600,000** people in need (HAC 2024)
-  **2,717,500** Internally displaced people since 1 February 2021
-  **60,500** People displaced to neighbouring countries since 1 February 2021 (UNHCR, 29 April 2024)
-  **289,000** displacement before February 2021

Reporting Period: 1 to 30 April 2024

Highlights

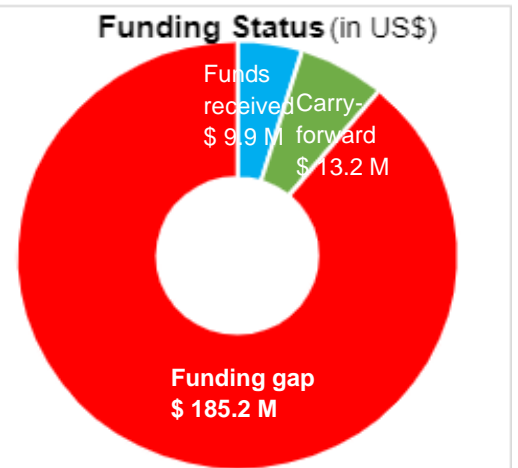
- The number of internally displaced persons (IDPs) has now surpassed 3 million, with children continuing to bear the heaviest burden of the continuing violence and experiencing grave violations of their rights. Sustained humanitarian action to provide a comprehensive package of services remains challenging.
- In Rakhine, water scarcity and increase of acute watery diarrhoea cases are exacerbating pre-existing vulnerabilities. UNICEF is providing safe water through water boating and trucking services to internally displaced persons' camps and communities. In addition, UNICEF with support of the WASH cluster, is providing water purification chemicals for the treatment of key water sources and systems to reduce the spread of infection.
- While 300,000 children missed routine vaccinations, UNICEF has vaccinated 88,043 children aged under one year against measles and rubella as of February 2024.
- The significant funding gap against the Humanitarian Action for Children (HAC) Appeal persists. Securing timely and sufficient funding for immediate and sustained assistance is crucial to avert the worst outcomes for children and their families, especially with the onset of the monsoon season.

UNICEF's Response and Funding Status



UNICEF Appeal 2024

US\$ 208.3 million



*Funding available includes: Funds received in the current year; carry-over from the previous year; and repurposed funds with agreement from donors.

Funding Overview and Partnerships

UNICEF Myanmar Country Office has appealed for US\$ 208.3 million in 2024 to address the needs of 3.1 million people, including an estimated 2.1 million children. As of the end of April 2024, the secured funding remains the same as previously reported last month: UNICEF has secured US\$ 23.1 million (11.1 per cent of its appealed funding), comprising US\$9.9 million received for the current year and US\$13.2 million carried forward from the previous year.

In 2024, UNICEF has received generous funding support from the Government of Japan, the Australian Department of Foreign Affairs and Trade (DFAT), the European Commission's Civil Protection and Humanitarian Aid Operations Department (DG ECHO), the Central Emergency Response Fund (CERF) as well as internal allocations from global humanitarian thematic funding (GHTF). Additionally, UNICEF also acknowledges the contributions previously made by the Bureau for Humanitarian Assistance (BHA) part of the United States Agency for International Development (USAID), the Government of Canada, the Government of Japan, DFAT, DG ECHO, the Japan International Cooperation Agency (JICA), the Government of Norway, the Royal Thai Government, the Czech Committee for UNICEF, the French Committee for UNICEF, the United Nations Office for the Coordination of Humanitarian Affairs (UNOCHA) along with CERF, and the Myanmar Country-Based Pooled Fund (CBPF) as well as GHTF. Moreover, earlier in 2024, UNICEF Myanmar received an internal loan from the Emergency Programme Fund (EPF) to support the humanitarian response.

With these resources, UNICEF and its partners are delivering humanitarian services in the areas of nutrition, health, HIV/AIDS, water, sanitation, and hygiene (WASH), education, child protection, gender-based violence in emergencies (GBViE), social protection and cash-based programming. UNICEF is also providing humanitarian leadership and cluster coordination and is strengthening protection against sexual exploitation and abuse (PSEA), social behaviour-change and accountability to affected populations. However, UNICEF is limited by the funding gap of 89 per cent against the HAC appeal that is severely hampering the quality and coverage of the humanitarian assistance. Without this resource, targeted populations, especially children, who need basic social services, will not be able to receive assistance. UNICEF continues its efforts to mobilize resources and expresses its sincere appreciation to all private and public sector donors for their contributions to supporting the children of Myanmar.

Situation Overview & Humanitarian Needs

The humanitarian situation continued to deteriorate across the country, with intensifying armed clashes leading to further displacement, increased security incidents, human rights violations and protection concerns. An additional 200,000 people were displaced internally over the past month. More than 3 million people are now internally displaced,¹ mainly in the northwest, where more than 1.5 million people have left their homes, followed by the southeast (932,900 people) and Rakhine (356,000).

In the southeast, fighting and airstrikes have escalated in Kawtkareik and Myawaddy since 11 April resulting in civilian injuries and deaths. In Loikaw, Hpasauing, Mawchi, Demoso and Bawlakhe in Kayah state, armed clashes between the Myanmar Armed Forces (MAF), ethnic armed organizations (EAOs) and the people's defence forces (PDFs) have also been escalating, with airstrikes and artillery shelling resulting in civilian casualties and the increasing risk of injuries from landmines. Internally displaced persons (IDPs) in Kayah need urgent humanitarian support; they are suffering from acute water shortages especially in Hpruso township in these driest periods. In southern Shan, armed conflict involving artillery shelling and airstrikes have escalated in Hsihseng, Nyaungshwe, Pinlaung, Pekon and Moebye with some casualties. EAOs had reportedly increased their efforts for further recruitment, while MAF enforced the conscription law. People displaced from Moebye, Hsihseng and Pinlaung are in dire need of humanitarian support, especially food and shelter.

In the northwest, the situation remains unchanged with continuing armed clashes and restrictions on movement and supplies. At least 5,200 IDPs require humanitarian assistance in Katha, Tigyaing and Indaw townships in northern Sagaing.

In Rakhine, armed clashes are intensifying with aerial bombardment, heavy shelling, and increasing grave protection concerns and exacerbating an already vulnerable situation. The escalation in conflict has seen huge needs emerge in previously stable areas. Armed clashes in the outskirts of Buthidaung ignited a new level of conflict in and around the

¹ United Nations High Commissioner for Refugees, 'Myanmar UNHCR displacement overview 29 April 2024', UNHCR.

town and displaced at least 15,000 people.² The entire population in Buthidaung are without essential services, including health care. Basic commodities and essential items, including fuel, are scarce and cash is very difficult to obtain. While many vulnerable IDPs in Rakhine are short of water, there has been an increase cases of acute watery diarrhoea (AWD) in Sittwe and Pauktaw, with most of those affected being children aged under 5 years. In addition, more than 165,000 people are newly displaced here since the intensification of conflict in November 2023. The risk of forced recruitment by all parties to the conflict is a major protection concern, particularly for the vulnerable Rohingya people. The closure of roads and waterways, restricted access, limited telecommunications and internet connections, and authorizations are hampering attempts to provide humanitarian assistance.

Data³ released by UNICEF on 4 April, the International Day of Mine Awareness and Assistance, showed a significant increase in civilian casualties – including many children – due the use of landmines and other explosive ordnance. There were 1,052 verified civilian casualties from landmine and explosive ordnance incidents during 2023 – nearly triple the 390 incidents recorded in 2022. More than 20 per cent of the victims were children.

Summary Analysis of Programme Response⁴

Health

UNICEF and its partners have continued to provide life-saving health care services, including emergency referral support, in the northwest, southeast, northeast and Yangon peri-urban areas. In March 2024, 36,594 people (14,548 male, 22,046 female) received primary health care services in Rakhine, Kachin, Shan, Kayah and Chin states, and the Sagaing, Bago and Magway regions. UNICEF distributed 500 family newborn kits to support essential care for newborns and personal protective equipment for health care providers.

UNICEF ensured the effective and timely allocation of required vaccines through its work in supporting their procurement and the maintenance of cold chain equipment for routine immunization. As of February 2024, about 11 per cent of the targeted children aged 0–12 months, received vaccinations against measles and rubella. In collaboration with the World Health Organization, UNICEF is providing continuous support for a multi-antigen catch-up vaccination campaign with a target population of 1.01 million people across the country. The catch-up immunization is administered on three occasions, with a two-month interval between each. The first phase was started in Yangon, Nay Pyi Taw and Mandalay regions in the first week of April 2024 and is scheduled to be rolled out in the remaining states and regions during 2024.

Nutrition

In March 2024, UNICEF and its partners screened a total of 15,497 children aged 6–59 months (8,161 boys, 7,336 girls) to identify malnourished children. Among them, 873 children with severe acute malnutrition (SAM) and moderate acute malnutrition (MAM) were detected (186 SAM and 687 MAM). 259 children (124 boys, 135 girls) with SAM have been treated by partners. Vitamin A supplements were given to 1,526 children aged 6–59 months (750 boys, 776 girls). UNICEF has also been coordinating and supporting planning for a vitamin A supplementation campaign to be implemented across the country in the coming months.

1,510 children aged 6–59 months (760 boys, 750 girls) and 281 pregnant and lactating women received multiple micronutrient powder supplementations in March 2024. Moreover, 5,706 primary caregivers (331 males and 5,375 females) with children aged under two years were supported with infant and young child feeding (IYCF) counselling services.

Nutrition Cluster

By the end of March 2024, the Nutrition Cluster supported 18 per cent (108,973)⁵ of the targeted children and women with life-saving curative and preventive services. Some 250 children who need life-saving treatment for SAM received therapeutic treatment and 1,520 children affected by MAM received enriched foods. Temporary supplies of other enriched foods are being used to manage SAM, in the absence of the normal ready-to-use-therapeutic-foods (RUTF). The Nutrition Cluster remains concerned about the shortages of therapeutic foods, limited access and other constraints, which have led to a fivefold decrease in the number of children admitted for acute malnutrition treatment/ management

² Ibid.

³ United Nations Children's Fund, 'Three-fold increase in civilian casualties caused by landmines and unexploded ordnance in Myanmar's escalating conflict', 4 April 2024, <www.unicef.org/eap/press-releases/three-fold-increase-civilian-casualties-caused-landmines-unexploded-ordnance>.

⁴ Due to the frequency of data collection, the results reflected are as of end of March 2024.

⁵ Nutrition cluster's achievements for all indicators

in the first quarter of 2024, compared to the same period in 2023. Despite these deeply concerning trends, the Nutrition Cluster is encouraged to note the performance indicators of cured children (85 per cent), children who died (0.4 per cent), those who defaulted (4 per cent) and those who failed to respond to treatment (11 per cent) were within the acceptable SPHERE minimum standards.⁶

Child Protection

In March 2024, UNICEF and partners continued to provide life-saving child protection services reaching 53,792 people (2,880 boys, 3,399 girls, 14,740 men, 32,773 women). Community-based structured mental health and psychosocial support (MHPSS), particularly psychosocial first aid delivered through child and women-friendly spaces, benefited 1,862 people including children and adolescents. Awareness-raising activities through social media and other online platforms to promote psychosocial well-being and psychosocial first aid reached 43,882 people.

1,339 people (163 boys, 216 girls, 960 women) benefited from interventions to respond to, and prevent, gender-based violence (GBV) while 220 people (79 boys, 109 girls, 19 men, 13 women) used safe and accessible channels to report sexual exploitation and abuse. 3,923 child protection kits were distributed to internally displaced children while 209 children (92 boys, 117 girls) received individual case management services, with 91 participants (34 men, 57 women) attending an online webinar on remote case management guidelines. 306 clients, including 164 children (125 boys, 39 girls) and 142 young people (120 boys, 22 girls) were provided with legal assistance in Yangon (41 per cent), Sagaing (25 per cent), Rakhine (11 per cent), Ayeyarwady (9 per cent), Magway (3 per cent) and Bago (3.9 per cent). Explosive ordnance risk education (EORE) awareness training was given to 26,814 people by the end of March 2024. Some 323 community members, young people, caregivers, local groups, and the staff of partner organizations (5 boys, 13 girls, 323 men, 420 women) benefited from training on MHPSS, GBV, the monitoring and reporting of grave violations and community-based child protection.

International Mine Action Day was organized on 4 April in the southeast and other regions in a low-profile mode with the participation of UN agencies, INGOs, NGO, CSOs, other cluster leads and community volunteers. The events reinforced the advocacy messages on banning mines in Myanmar and highlighted key achievements nationally.

Child Protection Area of Responsibilities (CP AoR)

CP AoR was able to reach 114,883 people⁷ with life-saving child protection services despite the challenges with access and funding constraints. The services included case management for 1,077 young people (723 boys, 354 girls); psychosocial support for 34,637 people (12,943 boys, 14,757 girls, 2,362 men, 4,575 women); community awareness-raising activities for 75,299 people (11,710 boys, 14,230 girls, 14,051 men, 35,308 women); community level child protection (CLCP) for 2,201 people (516 boys, 523 girls, 548 men, 614 women); adolescent programming for 418 people (218 boys, 191 girls, 4 men, 5 women); and capacity-building support for 1,251 child protection staff and front-line workers (141 boys, 283 girls, 149 men, 678 women). Coordination, collaboration and innovative approaches to child protection partnerships were strengthened, while CP case management services and legal aid services continued across the country.

CP AoR also completed its third Localization Dashboard Survey⁸ designed to monitor progress towards greater recognition of, and support for, local and national actors in coordination groups. The results of the dashboard are guiding the Localization Working Group to develop key actions, as well as focusing on improving child protection programming for its partners. This includes a tip sheet on Child Friendly Accountability to Affected Populations/ Complaints and Feedback mechanisms in English and Burmese.⁹ This will support all cluster members working with children to ensure their voices are heard and that programmes are adjusted accordingly. CP AoR also developed simple child protection messages¹⁰ for awareness-raising which could be used by any actor with access, maximizing our reach with life-saving messaging.

⁶ The Sphere standards are a set of principles and minimum humanitarian standards in four technical areas of humanitarian response. These areas are water supply, sanitation, and hygiene promotion (WASH), food security, nutrition, shelter and settlement and health. The minimum standards for the nutrition sector are, cured - >75%, died - <10%, defaulted - <15%

⁷ CP AoR's achievements for all indicators

⁸ Myanmar Child Protection AoR, 'Child Protection AoR Localization Dashboard - Myanmar, July to December 2023', 02 April 2024, <www.myanmarchildprotection.com/files/ugd/5456a3_a386918581274b38a0565b9bd69c25d3.pdf>.

⁹ Myanmar Child Protection AoR, 'Resources of Child Protection (Myanmar)', <www.myanmarchildprotection.com/myanmar-cp-resources>, accessed 26 April 2024.

¹⁰ Ibid.

Mine Action Area of Responsibilities (MA AoR)

Throughout April, explosive ordnance risk education (EORE) delivery and victim assistance activities continued across operational areas in the affected states and regions. In the northwest, access restriction remains a challenge, however, local partners and volunteers facilitated to be stationed in operational areas. Delivery in the northwest faced interruptions only during raids and attacks and partners encountered difficulties in crossing checkpoints with information, communication and education (ICE) materials. Partners of MA AoR submitted their Myanmar Humanitarian Fund (MHF) proposals and the review process continues.

MA AoR is collaborating closely with the Child Protection cluster in mainstreaming protection principles into the broader humanitarian response and reviewing its protection strategy. This is taking place through the integration of protection considerations within the MHF and should reflect a commitment to holistic and more inclusive support for affected populations. It is also developing advocacy messages for the protection strategy, aiming to enhance awareness and support for it.

Education

In March 2024, UNICEF and its partners supported access to formal and non-formal education including early learning for 20,723 children (10,769 girls) including internally displaced children by providing teaching and learning materials, basic literacy and numeracy skills, social and emotional learning, and psychosocial support, as well as life skills-based education for out-of-school children. UNICEF and its partners also provided individual learning materials including essential learning package (ELP) kits to 16,809 children (8,480 girls). Moreover, UNICEF and its partners trained and supported 28 (24 women) volunteer teachers/educators/facilitators, and incentivized them with stipends. 108 temporary learning spaces were established or maintained.

There has been an increasing demand for EIE services for children among the displaced communities, including the establishment of safe learning spaces. Learning materials, educational supplies and trained facilitators are also needed. UNICEF continues to provide education assistance to promote learning continuity and learning outcomes for children through partners and relevant stakeholders, including parents.

Education Cluster

In April, the Education Cluster provided an update on the Rakhine area inter cluster coordination group (ICCG) critical gap analysis. This update includes the current and anticipated critical impacts on education-related barriers, ongoing efforts and the challenges encountered. The information will be used to inform advocacy efforts, including the pursuit of additional funding, following discussions held during the Rakhine area humanitarian country team (HCT) meeting.

The Education Cluster collaborated with Gender in Humanitarian Action (GiHA) and nominated one candidate from the partner organization for a 5-day training of trainers session hosted by UN Women in Thailand. This initiative aimed to enhance capacity-building efforts within the cluster and promote gender-responsive approaches in humanitarian activities.

By adhering to Myanmar Humanitarian Fund (MHF) criteria, the cluster nominated new potential organizations that had not previously been suggested to UNOCHA for the funding opportunity. The criteria encompassed relevant expertise and experience, geographical presence, context understanding, active network participation and collaboration expectations. The cluster's nomination of two new potential partners from each hub contributes to broadening its scope and effectiveness in addressing education-related challenges.

Education cluster participated in the research on conflict and protracted crisis (ERICC), inter-agency network for education in emergencies (INEE) interview, and Myanmar research agenda key informant interview which underscores a commitment to improving education outcomes in Myanmar despite challenging circumstances. Through collaborative ERICC research, the Education Cluster seeks to contribute to the development of effective interventions for learners in Myanmar.

WASH

By the end of March 2024, 71,274 people were reached with WASH services, in Kachin, northern Shan and Rakhine. Of these, 31,852 people were reached with safe water for drinking and domestic use, 2,187 were supported with sanitation services, and 65,628 people received critical WASH supplies and key hygiene messages in March 2024.

Escalated conflict in various parts of the country has increased the need for WASH services, particularly in Kachin and Rakhine, as well as in a number of townships in the southeast and Kayah. UNICEF and its partners are working closely with community-based agencies to provide safe water through water trucking in Kayah while, on the border of Kayin and Thailand, WASH implementation is scheduled to begin in May.

The water scarcity response continues in Rakhine where UNICEF, in collaboration with local contractors and partners, have initiated support for water boating and trucking services to the camps for internally displaced people and communities in Rakhine. The situation has been further aggravated by the reported cases of acute watery diarrhoea in some camps and communities in the north and south of the state. UNICEF, with support of the WASH Cluster, is providing life-saving water purification tablets and sachets, as well as chlorine powder to partners for the treatment of key water sources and systems, in order to reduce the spread of infection.

As part of ongoing WASH in Emergency capacity-building, UNICEF has recently completed a reflection and refresher training session with key partners and champions on programmatic topics, with the aim of strengthening partner capacity on the development of a robust and inclusive WASH in Emergency programme. A total of 14 participants from 10 WASH agencies including UNICEF, were part of the refresher training.

WASH Cluster

The WASH Cluster partners continued to provide WASH services despite many difficulties. The partners have been grappling with limited resources to meet increasing needs, as well as a lack of humanitarian access and blockages of road and waterways. This complex emergency is compounded by the increase cases of acute watery diarrhoea in Sittwe and the water scarcity caused by the dry season.

Nevertheless, by the end of March 2024, the WASH partners reached 214,368 individuals with sufficient safe water for drinking and domestic purposes in internally displaced persons' camps and host communities. Safe and appropriate sanitation was provided to 184,505 people, hygiene promotion reached 121,228 people and critical WASH supplies were provided for 208,561 people. UNICEF is providing critical WASH supplies to WASH partners in Rakhine, which will contribute significantly to the reduction in AWD cases in the next few weeks, saving the lives of children aged under five years, who are the most affected. The cluster partners have started water trucking and filling ponds in response to the water scarcity in Kyauktaw and Minbya. The response will commence in Pauktaw, Ponnagyun, Sittwe, Mrauk U and other areas in May 2024 when all logistical arrangements are in place.

Social Protection and Cash-based Programming

In April, UNICEF provided bimonthly maternal and child cash transfers for 6,938 programme participants in two peri-urban townships in Yangon region. A total of 82 complementary social and behavioural change (SBCC) group sessions reached 781 programme participants. The key theme was common childhood illnesses and danger symptoms in children. Additionally, 3,500 people received a bimonthly disability cash grant. The screening and registration of children with disabilities has reached 37,376 people.

Social and Behaviour-Change (SBC) and Accountability to Affected Population (AAP)

In March 2024, a total of 54,921 community members (10,980 males and 43,941 females) were reached with key messages on maternal newborn and child health (MNCH), nutrition, immunization, water, sanitation and hygiene (WASH) and COVID-19 in 42 townships across 10 states and regions.

Through the 'Knowledge Talk' Viber channel and partners' social media platforms, 316,136 people were reached with 40 key messages on MNCH, immunization, nutrition, water sanitation and hygiene promotion, education, child protection, mental health and psychosocial support (MHPSS) and mine risk education.

Trainings on interpersonal communication were conducted for 18 staff and 50 community volunteers from three nutrition and WASH partners from Bago East and Ayeyarwady regions to improve their ability to effective community mobilization to support behaviour change.

Accountability to Affected Population (AAP) trainings were conducted for 37 partner staff to improve their understanding of the importance of community participation and of feedback mechanisms in the work of partners in emergency

contexts. 132 staff from implementing partners have completed the AAP e-course (in Burmese). A satisfaction survey was carried out in Kayin state and Sagaing region to assess the levels of satisfaction among key stakeholders, including parents, caregivers, teachers and volunteers on EiE services.

Humanitarian Leadership, Coordination and Strategy

UNICEF continues its national presence through seven field offices in Myanmar which prioritize humanitarian assistance to all vulnerable children and families, including those in communities which have been displaced (or not) by natural disasters and conflicts. UNICEF also continues supporting the expansion of humanitarian assistance to the most vulnerable people through its leadership roles in the WASH Cluster, the Nutrition Cluster, the CP AoR, the MA AoR and its co-lead role of the Education Cluster with Save the Children at national and subnational levels. UNICEF also participates in the Myanmar Cash Working Group and facilitates the in-country inter-agency network for PSEA with the United Nations Population Fund (UNFPA). UNICEF continues to co-lead the RCCE Working Group and participates in the Humanitarian Access Working Group.

UNICEF humanitarian strategy focuses on working with local civil society organizations, non-governmental organizations and other United Nations agencies to deliver life-saving services efficiently and to broaden the humanitarian response for children in all conflict-affected states and regions.

Human Interest Stories and External Media

Stories

Rising from adversity in conflict-affected Myanmar

Community education allows Kim Pu to dream again

<https://www.unicef.org/myanmar/stories/rising-adversity-conflict-affected-myanmar>

Community-based learning in Chin state helps children overcome education challenges

I used to be scared of mathematics, but now that I've been taught from the basics, I think I'm no longer scared of it."

Muang Nu, a Grade 3 student

<https://www.unicef.org/myanmar/stories/community-based-learning-chin-state-helps-children-overcome-education-challenges>

Dreams at risk

How the widespread use of landmines is threatening the future of Myanmar children

<https://www.unicef.org/myanmar/stories/dreams-risk>

Social Media

April 4: International Day for Mine Awareness and Assistance in Mine Action

Facebook

Photo Essays on Mine Victims

<https://shorturl.at/pwCZ9>

<https://shorturl.at/ijmyM>

<https://shorturl.at/KLU38>

X

<https://x.com/UNICEFMyanmar/status/1775732386376118756>

<https://x.com/UNICEFMyanmar/status/1775820417187696992>

<https://x.com/UNICEFMyanmar/status/1775852059876794684>

YouTube

Dreams at Risk: How the increasing use of landmine is threatening the future of Myanmar children

<https://youtu.be/ko21PO2U9wU?si=NJis17A8qXMIAe38>



Next SitRep: June 2024

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

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Annex A

Summary of Programme Results

Sector indicator disaggregation		UNICEF and IPs response			Cluster response					
		2024 targets	Total results	Change since last report ▲ ▼	2024 targets	Total results	Change ▲ ▼			
HEALTH										
# of children aged 6–59 months vaccinated against measles in UNICEF-supported areas	Boys	800 000	42 261	45 082						
	Girls		45 782							
# of children and women accessing primary health care in UNICEF-supported facilities	Male	350 000	50 866	▲ 36 594						
	Female		74 076							
NUTRITION										
# of children aged 6–59 months with SAM admitted for treatment	Boys	10 900	225	▲ 259				17,897	167	▲ 375
	Girls		257		208					
# of primary caregivers of children aged 0–23 months receiving IYCF counselling	Men	316 000	1 334	▲ 5 706	140,764	1 638	▲ 17 876			
	Women		11 621			16 238				
# of children aged 6–59 months receiving micronutrient powder	Boys	293 000	1 829	▲ 1 510	474,489	1 829	▲ 3 614			
	Girls		1 785			1 785				
# of children 6–59 months receiving vitamin A supplementation	Boys	1 014 000	2 654	▲ 1 526						
	Girls		2 885							
# of children screened for wasting	Boys	418 000	19 783	▲ 15 497	474,489	45 771	▲ 90 230			
	Girls		18 683			44 459				
# of pregnant and lactating women receiving micronutrient supplementation		316 000	502	▲ 281	140,764	803	▲ 803			
CHILD PROTECTION										
# of children and parents/caregivers accessing MHPSS	Boys	3 392 000	6 946	▲ 45 744	1 140 000	12 943	▲ 34 637			
	Girls		9 049			14 757				
	Men		566 505			2 362				
	Women		977 535			4 575				
# of women, girls and boys accessing GBV risk mitigation, prevention and/or response interventions	Boys	831 000	1 938	▲ 1 339						
	Girls		2 696							
	Men		0							
	Women		3 885							
# of people who have access to a safe and accessible channel to report sexual exploitation and abuse by aid workers	Boys	1 654 464	161	▲ 220						
	Girls		234							
	Men		392							
	Women		639							
# of children who received individual case management	Boys	25 000	245	▲ 209	10 000	723	▲ 1 077			
	Girls		236			354				
# children in areas affected by landmines and other explosive weapons provided with relevant prevention and/or survivor-assistance interventions	Boys	940 000	5 828	▲ 6 280	2 046 062	11 735	▲ 52 147			
	Girls		6 635			13 358				
	Men		5 605			10 757				
	Women		8 746			16 297				
EDUCATION										
# of children accessing formal and non-formal education, including early learning	Boys	890 360	85 481	▲ 20 723	1 335 945	64 311	▲ 133 654			
	Girls		88 158			69 343				
# of children receiving individual learning materials	Boys	450 000	20 726	▲ 16 809						
	Girls		21 547							

# of educators supported with training and/or incentives	Male	21 864	262	▲ 28				
	Female		1 149					
# of temporary learning centres rehabilitated	centres	600	731	▲ 108				
WATER, SANITATION AND HYGIENE PROMOTION								
# of people accessing sufficient quantity of safe water for drinking and domestic needs	Boys	390 000	22 029	▲ 31 852	1 107 739			
	Girls		20 245					
	Men		15 218					103 055
	Women		14 032					111 313 ▲ 214 369
	PWDs		220					34 375
# of people using safe and appropriate sanitation facilities	Boys	300 000	3 969	▲ 2 187	1 006 597			
	Girls		3 929					
	Men		2 956					88951
	Women		2 842					95554 ▲ 184 505
	PWDs		51					28282
# of people reached with handwashing behaviour-change programmes	Boys	300 000	11 998	▲ 2 3 606	1 671 533			
	Girls		10 578					
	Men		5 400					58115
	Women		5 320					63113 ▲ 121 228
	PWDs		64					19664
# of people accessing functional handwashing facilities with soap	Boys	300 000		0				
	Girls							
	Men							
	Women							
	PWDs							
# of people reached with critical WASH supplies	Boys	850 000	29 576	▲ 65 628	1 671 533			
	Girls		26 502					
	Men		17 946					100537
	Women		16 947					108024 ▲ 208 561
	PWDs		166					31382
SOCIAL POLICY								
# of households reached with UNICEF-funded humanitarian cash transfers		90 000	16 711	▲ 856				
# of children and adolescents with disabilities reached with assistive technology and interventions to address disability-related need		18 600		0				
Cross-sectoral (HCT, SBC, RCCE and AAP)								
# of people reached through messaging on prevention and access to services		3 000 000	892 356	▲ 316 136				
# of people sharing their concerns and asking questions through established feedback mechanisms	Men	359 529	2 472	0				
	Women		4 688					
# people participating in engagement actions for social behaviour-change	Men	150 000	23 047	▲ 54 921				
	Women		53 621					

* All the results data are as of end of March 2024.

* The Cluster target for MHPSS only includes the number of people reached through interpersonal support; whereas UNICEF reports on the number of people reached by both interpersonal support and online engagement.

*PWDs: People with disabilities.

Annex B

Funding Status

Sector	Requirements	Funds available		Funding gap	
		Humanitarian resources received in 2024	Resources available from 2023 (carry-over)	\$	%
Health	16,750,000	1,937,172	1,527,886	13,284,942	79%
Nutrition	18,010,388	937,549	1,049,350	16,023,490	89%
Child protection, GBViE and PSEA	33,115,892	1,435,786	3,382,312	28,297,794	86%
Education	55,871,200	1,570,222	1,121,458	53,179,520	95%
WASH	35,880,000	2,475,002	3,558,964	29,846,033	83%
Social protection	8,195,000	12,737	399,148	7,783,115	95%
Cross-sectoral (HCT, SBC, RCCE and AAP)	29,242,348	27,577	270,710	28,944,061	99%
Cluster and field coordination	11,221,000	1,471,215	1,885,289	7,864,496	70%
Total	208,285,828	9,867,260	13,195,117	185,223,451	89%