



©UNICEF Myanmar/2024/ Minzayar Oo

Reporting Period: 1 to 31 May 2024

# Myanmar Country Office

## Humanitarian Situation Report No. 4



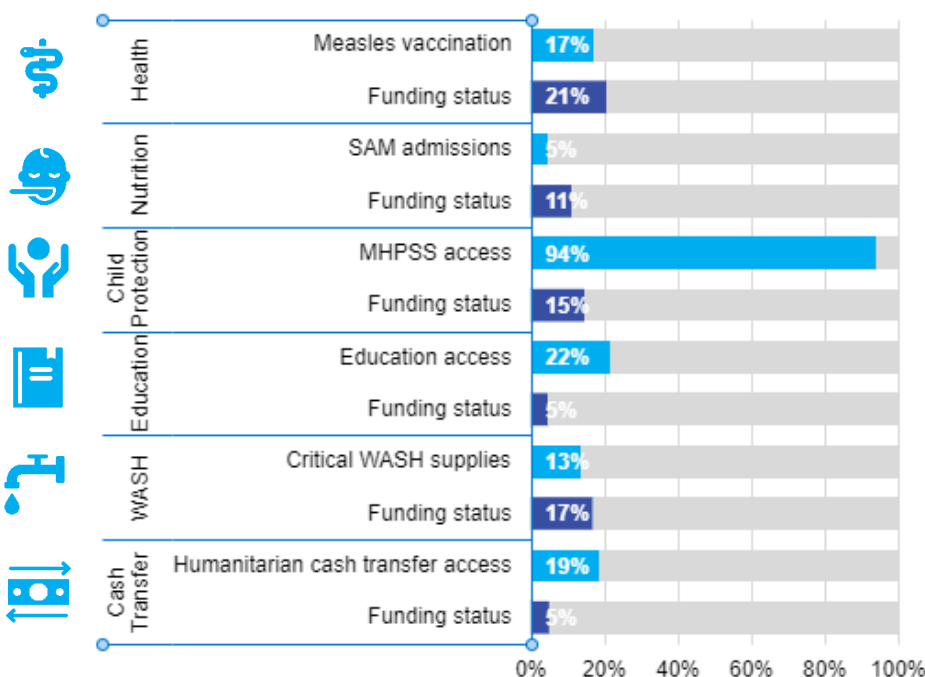
### Situation in Numbers

- 
**6,000,000**  
 children in need of humanitarian assistance
- 18,600,000**  
 people in need (HAC 2024)
- 2,830,200**  
 Internally displaced people since 1 February 2021
- 64,600**  
 People displaced to neighbouring countries since 1 February 2021 (UNHCR, 03 June 2024)
- 289,000**  
 displacement before February 2021

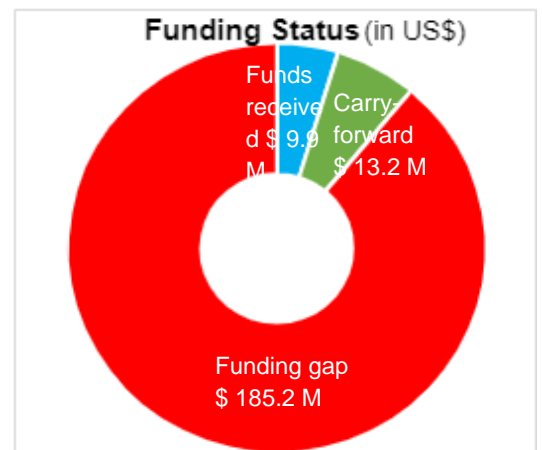
### Highlights

- More than 3.1 million people have been internally displaced, including 112,000 in the past month. They remain in precarious conditions and in need of life-saving assistance.
- 18,929 children were provided with access to formal and non-formal education including early learning; more than 43,000 people were reached with clean drinking water; and lifesaving child protection services reached more than 34,000 people during the month of April.
- In areas with heightened conflict, the need for access to services continues to increase while the cost of programme delivery is also increasing in a resource constrained environment.
- Underfunding remains a significant constraint with only 11 per cent of against the Humanitarian Action for Children (HAC) Appeal requirement being received. Timely and sufficient funding is crucial in providing immediate assistance 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 31 May 2024, UNICEF's funding level remains unchanged at US\$ 23.1 million (11.1 per cent of its appealed funding), comprising of 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 Central Emergency Response Fund (CERF) as well as internal allocations from global humanitarian thematic funding. Additionally, UNICEF also acknowledges the contributions previously made by the Australia's DFAT, the United States Agency for International Development (USAID), USAID's Bureau for Humanitarian Assistance (BHA), the European Commission's Civil Protection and Humanitarian Aid Operations Department (DG ECHO), the Government of Canada, the Government of Japan, 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 the CERF and the Myanmar Country-Based Pooled Fund (CBPF). Moreover, in 2024, UNICEF Myanmar also received an internal loan from the Emergency Programme Fund (EPF) to support the humanitarian response, following a similar grant received the previous year.

With these resources, UNICEF and its partners are delivering humanitarian services in 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 capacity to deliver these services is severely limited by the funding gap of 89 per cent which has remained unchanged over the last two months. Without the funding for these resources, 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

Armed conflict has been escalating across Myanmar, and more than 3.1 million people<sup>1</sup> are internally displaced in precarious conditions and in need of life-saving assistance. This includes more than 112,000 people displaced since the end of April. The protection situation of children who are suffering grave violations of their rights remains of great concern. Humanitarian assistance is significantly challenged due to access restriction, roadblocks at checkpoints, high commodity prices, transportation costs, banking issues and forced recruitment by different armed groups.

In northern Rakhine, armed conflict between the Arakan Army and the Myanmar Armed Forces (MAF) intensified, particularly in Buthidaung and Maungdaw, and also expanded to southern townships such as Ann and Thandwe and Toungup townships. Clashes have been escalating with artillery shelling, gunfire, airstrikes and bombardment from the sea. This has severely affected both the Rakhine and Rohingya communities, resulting in casualties, multiple displacements, and the destruction of property. More than 185,000 people have been displaced across Rakhine since November 2023.<sup>2</sup> Taking into account those displaced earlier in the conflict, the total displacement in Rakhine numbers more than 402,000 people at the end of May.<sup>3</sup> Protection concerns and rights violations have increased. An unverified number of houses in Buthidaung and Maungdaw were set on fire including humanitarian facilities and properties of humanitarian staff were also impacted. Artillery shelling hit a hospital in Buthidaung which was sheltering displaced people, and at least one hospital and one school were bombed in Kyauktaw township.

An estimated 420,000 basic education students will miss formal classes if schools in the conflict-affected townships are not able to open as usual. Routine immunization was stopped in most of the central and northern part of Rakhine for six months. An estimated 1.6 million people could be without access to hospital care in central and northern Rakhine.<sup>4</sup> Restrictions on access and on the movement of supplies, plus the closure of roads and waterways continue to hamper the humanitarian response. There are increased reports of water scarcity across the state including in Pauktaw,

---

<sup>1</sup> United Nations High Commissioner for Refugees, 'Myanmar UNHCR displacement overview 3 June 2024', UNHCR.

<sup>2</sup> United Nations Office for the Coordination of Humanitarian Affairs, 'Myanmar Humanitarian Update No. 38', 24 May 2024 <[www.unocha.org/publications/report/myanmar/myanmar-humanitarian-update-no-38-24-may-2024](http://www.unocha.org/publications/report/myanmar/myanmar-humanitarian-update-no-38-24-may-2024)>.

<sup>3</sup> United Nations High Commissioner for Refugees, 'Myanmar UNHCR displacement overview 3 June 2024', UNHCR.

<sup>4</sup> United Nations Office for the Coordination of Humanitarian Affairs, 'Myanmar Humanitarian Update No. 38', 24 May 2024 <[www.unocha.org/publications/report/myanmar/myanmar-humanitarian-update-no-38-24-may-2024](http://www.unocha.org/publications/report/myanmar/myanmar-humanitarian-update-no-38-24-may-2024)>.

Ponnagyun and Myebon. There are shortages of food and essential items, life-saving medicine and therapeutic nutrition commodities and increasing prices, especially in the conflict-affected townships.

The armed conflict in Kachin State has significant developments in May 2024, resulting in substantial changes in the control areas of the ethnic armed organizations/Kachin Independence Army and MAF. This conflict has led to an influx of internally displaced persons (IDPs) across the state, particularly in the townships of Myitkyina, Waingmaw, Bhamo, Tanai, Mansi, Hpakant and Mohnyin during April and May 2024. The state is home to more than 150,000 IDPs (protracted and new) in more than 142 sites and host communities, lacking the means of survival and livelihoods. The humanitarian operations in Bhamo, Tani, Mansi, Shwegu, Mohnyin and Waingmaw townships are facing severe challenges due to fighting and limited access. The numerous checkpoints by different actors along the line from Yangon to Myitkyina impose arbitrary taxes and have significantly impacted supply movements into, and within, the state. In some parts of the state, there is still a need to conduct rapid needs assessments. However, shelter, WASH, food and protection have been identified as the most urgent humanitarian needs. UNICEF, along with its partners, has been working to provide WASH, health and nutrition services, education and child protection services for the newly displaced people. Despite these efforts, there are still significant unmet needs.

In the southeast, the escalation of armed conflict continued throughout the region, particularly in Kawkaik and around Hpa-An districts in Kayin state, and there have been intense armed conflicts in Tanintharyi, Mon and Bago east. As a result, the number of displaced people in this region has increased to around 660,000,<sup>5</sup> the highest increase here since 2021 and highly likely to continue to increase the displacement as the conflict escalates.

In the northwest, armed clashes have continued, resulting in the displacement of more than 1.5 million people. In addition, in early May, strong winds and heavy rains damaged or destroyed about 400 homes, temporary shelters and other structures. The main road from Kalay to Hakha is still blocked, there are unstable phone and internet connections and reportedly increasing the arbitrary arrests of young people for the military service.

The approaching monsoon season with a heightened risk of cyclones and floods further increases the risks faced by the vulnerable population. Already strong winds and heavy rain has impacted multiple locations in recent months damaging infrastructure. If a cyclone with a scale similar to that of last year hits Myanmar this year, its impact would be even more devastating for the populations whose coping capacity continues to be eroded by the escalating conflict and the increasing socio-economic hardships.

## Summary Analysis of Programme Response<sup>6</sup>

### Health

UNICEF and its partners continue provision of life-saving health care services, including emergency referral support, in the northwest, southeast, northeast and Yangon peri-urban areas. In April, 44,061 people (18,035 male and 26,026 female) received primary health care services in Rakhine, Kachin, Shan, Kayah, Chin, Sagaing, Bago and Magway. UNICEF also provided 500 family newborn kits to support essential care for newborns and gave essential medicines, including antibiotics, to health care providers.

With the recommendation from the Myanmar National Immunization Technical Advisory Group to boost the immunity of high-risk people against COVID-19 virus, UNICEF and WHO collaborated on rolling out a vaccination programme supplied by the Global Alliance for Vaccines and Immunization (GAVI). As of April 2024, 709,065 people have received booster doses of the Pfizer vaccine. UNICEF is also continuing to roll out its catch-up vaccination programme, initially implemented in Yangon, Mandalay and Naypyitaw, with 70 per cent of the children targeted (those aged 1–5 years) being immunized against measles and rubella (MR). The second round of the catch-up vaccination programme is being rolled out. In addition, up to March 2024, more than half of the children aged under one year (59.02 per cent) were vaccinated against MR through the routine immunization programme.

### Nutrition

UNICEF continued to work with its partners to implement nutrition programmes in multiple regions across Myanmar. Despite the persistence of challenges for access and in transporting supplies, UNICEF reached 1,881 children aged 6–59 months (1,007 boys, 874 girls) and 280 pregnant and lactating women with preventive nutrition services, including the distribution of multiple micronutrient powder and multiple micronutrient tablet supplementation in April.

<sup>5</sup> United Nations High Commissioner for Refugees, 'Myanmar UNHCR displacement overview 3 June 2024', UNHCR.

<sup>6</sup> Due to the frequency of data collection, the results are as of end of April 2024.

8,527 children aged 6–59 months (4,390 boys, 4,137 girls) were screened in April to identify those who were malnourished. Among them, 237 children with severe acute malnutrition (SAM) and moderate acute malnutrition (MAM) (48 SAM, 189 MAM) were detected. Of the 48 SAM children identified, UNICEF provided treatment to 31 children (13 boys, 18 girls). 2,198 primary caregivers (373 males and 1,825 females) of children aged under two years, were supported with infant and young child feeding (IYCF) counselling services.

UNICEF also supplied flip charts and promotional materials to promote IYCF practices and enable an estimated 140 nutrition workers to carry out community IYCF counselling services. In the reporting period, there were constraints on partners' reporting due to staffing and communication challenges caused by increasingly complex operational contexts in the conflict-affected areas. As a result, monthly achievements have been limited compared to those reported in previous months.

### Nutrition Cluster

By the end of April, the Nutrition Cluster had reached 136,567 vulnerable people with both preventive and curative nutrition services, representing 22 per cent of the target set out in the inter-agency 2024 Humanitarian Needs and Response Plan (HNRP). This included providing treatment for 407 (2 per cent) of children suffering from SAM, as well as 1,979 (3 per cent) of those suffering from MAM. 135,491 people (22 per cent) of the preventative response target have already been achieved, encompassing malnutrition screening, blanket supplementary feeding programmes, IYCF counselling and the distribution of vital micronutrient powders and tablets.

Recognizing the logistical hurdles in transporting critical supplies, the Cluster partners have been exploring innovative cash-based assistance and preventative measures. While the insecurity and restrictive conditions have undoubtedly constrained the humanitarian response, the national and subnational Nutrition cluster partners remain steadfastly committed to delivering these critical nutrition services to the children and women who need them most.

### Child Protection

Life-saving child protection services reached 34,391 people (4,905 boys, 5,253 girls, 9,790 men, 14,443 women) in April 2024. Psychosocial first aid through community-based structured mental health and psychosocial support (MHPSS) delivered in child and women-friendly spaces, benefited 12,264 people including children and adolescents. 1,609,222 people were reached by social media and other platforms to raise awareness and promotion on psychosocial well-being and psychosocial first aid.

Gender-based violence (GBV) risk mitigation and response interventions benefited 4,066 people (1,049 boys, 1,158 girls, 1,859 women). 1,771 people (636 boys, 718 girls, 71 men, 346 women) used safe and accessible channels to report sexual exploitation and abuse. UNICEF has distributed 1,285 child protection kits to internally displaced children and communities while 162 children (84 boys, 78 girls) received individual case management services. Explosive Ordnance Risk Education awareness was delivered to 16,128 people (3,805 boys, 4,253 girls, 2,627 men, 5,443 women). Extensive awareness-raising and capacity-building efforts benefited 552 community members, youths, caregivers, local groups, and partner staff members (2 girls, 195 men, 355 women) and trainings on MHPSS, GBV, the monitoring and reporting of grave violations, and community-based child protection were expanded.

UNICEF trained 16 PSEA focal points to develop internal capacity and create ownership among staff. They are equipped to prevent sexual exploitation and abuse by aid workers and to manage reporting systems, referral pathways, and to protect victims in a multidisciplinary way. Furthermore, UNICEF staffs and partners are being trained on PSEA in May 2024.

### Child Protection Area of Responsibility (CP AoR)

The CP AoR is supporting the mainstreaming of child protection among other clusters and sectors. As part of a broader mainstreaming of protection, CP AoR provided training to more than 300 partner staff members eligible for the Myanmar Humanitarian Fund (MHF), which will contribute significantly to the proposals for integrating child protection in the upcoming allocation. Furthermore, the CP AoR has provided training to the shelter/non-food items and camp management cluster participants on protection mainstreaming together with protection cluster and AoRs. CP AoR partners have been working towards providing life-saving child protection services nationally. Given the uncertainty of access, community-level child protection has been prioritized. CP AoR has also disseminated child protection messages to partners in preparation for the upcoming monsoon season.



## Mine Action Area of Responsibility (MA AoR)

The MA AoR has worked closely with the wider protection cluster to ensure protection mainstreaming to MHF partners that all humanitarian initiatives prioritize the safety, dignity and rights of affected populations. The integration of protection principles across sectors, such as health, education, food security and shelter, creates a holistic and inclusive approach. This not only safeguards vulnerable individuals but also enhances the overall effectiveness and sustainability of humanitarian efforts, promoting resilience and recovery.

As part of MA AoR objectives, partners are now developing new information, education and communication materials on Explosive Ordnance Risk Education (EORE) to address emerging challenges. This initiative improves EORE sessions, leading to better-informed communities and reduced risk of explosive hazards. Tailored materials engage diverse audiences more effectively, considering cultural, linguistic and situational differences, thereby maximizing the reach and impact of risk education efforts.

MA AoR is also working to integrate advocacy messaging into day-to-day EORE delivery. This integration amplifies the impact of EORE by educating communities about the dangers of explosive ordnance and advocating for broader systemic changes to enhance safety and protection. Embedding advocacy messages raises awareness about the need for policy changes, leading to more comprehensive and sustainable mine-action programming.

## Education

UNICEF and its partners supported access to formal and non-formal education including early learning for 18,929 children (including 9,728 girls) in April 2024. These children, including internally displaced children, were supported through the provision of teaching and learning materials, basic literacy and numeracy, social and emotional learning, and psychosocial support, as well as life skills-based education for out-of-school children, with some receiving hygiene and nutrition enhancement skills sessions, and remedial education to catch up on their lessons. UNICEF and its partners also provided individual learning materials, including essential learning packages to 12,662 children (6,431 girls). UNICEF and its partners trained and supported 485 volunteer teachers/educators/facilitators (382 women) and incentivized them with stipends. The training sessions included teaching, MHPSS, reading, writing and the enhancement of critical thinking. 75 temporary learning spaces were established or maintained, while some partners also conducted needs assessments in their target areas to enable the renovation of learning spaces.

In the areas where conflict is intensifying such as Sagaing, Kahin, Kayin, Shan North, Kayah and Rakhine, the need for access to safe learning spaces/centres is increasing. Under these circumstances, while the need for education supplies continues, transportation costs in some areas are increasing due to road closures and to secure safer routes, further increasing the overall cost of programme delivery in a constrained resource environment. Nationwide, there is a need for the immediate establishment of safe learning spaces, plus the provision of learning materials, educational supplies and trained facilitators.

## Education Cluster

In May, in collaboration with UNICEF, the Education Cluster coordinated key activities to support children affected by Cyclone Mocha and by armed conflict in Falam Township, Chin State.

In Rakhine and the northwest, the Education Cluster, in collaboration with the United Nations Educational, Scientific and Cultural Organization (UNESCO), facilitated the participation of cluster partners in the launch of the Myanmar Teacher Platform. This platform will enable teachers and educators to access self-study courses online or offline, regardless of their location, which will help teachers in Rakhine and northwest regions to enhance their skills and ensure the continuity of education in emergency situations.

At the national level, the Education Cluster is coordinating with Global Partnership for Education – Education Sector Programme Implementation Grant (GPE ESPIG), the Education Can't Wait (ECW) team, and technical advisers at global and national levels, including the PSEA adviser and Global Education Cluster (GEC), for three capacity-building trainings for cluster partners at subnational level on PSEA, contingency planning and EiE-Gen Kit, a core resource package for gender in education in emergencies. These trainings are scheduled from June to August. This coordinated effort will enhance the capacity and preparedness of cluster partners, ensuring more effective education responses in emergencies.

Information from cluster partners indicates that the turnover rate among volunteer teachers and facilitators has increased due to the enforcement of conscription laws, inflation and low pay, impacting the stability of educational programmes.

## WASH

In April, an additional 43,138 people were reached with clean drinking water; gender segregated sanitation services were provided to 30,807 people (4,999 boys, 4,889 girls, 9,779 men and 11,140 women); and life-saving WASH supplies were distributed to 23,223 people across Kachin, Shan, Kayin, Rakhine and Yangon. 22,500 people in peri-urban Yangon continue to access affordable clean drinking water through UNICEF supported water kiosks.

As part of the Rakhine water scarcity response, partners have increased water distribution activities in several locations including camps. UNICEF, with its partners and local service providers, have begun delivery of safe water to camps for people experiencing protracted displacement. The response also strives to mitigate the increasing number of acute watery diarrhoea cases. While the number of cases has decreased significantly in recent weeks, it still remains an issue of concern due to the fast-approaching monsoon season.

Kachin is witnessing a sharp increase in displacement due to an escalation in armed clashes. A number of displaced families are seeking refuge in Myitkyina. Some are moving into established camps, and some are residing in available safer locations around the township. UNICEF and its local partners have activated contingency mechanisms to ensure the immediate provision of life-saving WASH services and supplies. An estimated 9,000 people are being targeted over the next three months.

## WASH Cluster

In the first quarter of 2024, WASH Cluster partners provided water, sanitation and hygiene services and support to 355,225 people nationally, including 180,921 in Rakhine, 38,388 in the northwest, 32,731 in the northeast and 103,185 in the southeast. Nationwide reach equates to 21 per cent of the cluster's target for 2024 and is lower than for the same period in 2023 due to access restrictions, especially with the expanding conflict, challenges in replenishment of supply. There are still 1.3 million people prioritized for assistance in 2024 who have not been reached with any kind of support due to severe underfunding. The WASH Cluster has received only 9 per cent of the required funds for 2024, impacting response capabilities across all states and regions.

## Social Protection and Cash-based Programming

UNICEF's Maternal and Child Cash Transfer (MCCT) programme has reached more than 10,000 participants in peri-urban Yangon by end May. The complementary social and behaviour-change communication (SBCC) sessions reached 1,179 participants. The SBCC message for the month is *Common childhood illnesses and danger signs in children*.

UNICEF is also delivering humanitarian cash assistance for internally displaced people with some children with disabilities in hard-to-reach areas such as Chin, Sagaing and Magwe Region and reached 3,360 households. The Disability Management Information System has screened and registered 3,500 people with disabilities (PWDs) this month.

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

34,979 community members (13,523 males and 21,456 females) were reached with key messages on maternal and child health (MCH), nutrition, immunization, WASH and COVID-19 in 42 townships in 10 states and regions in April 2024. Through the 'Knowledge Talk' Viber Channel and 'Healtppy' Facebook page, 189,516 people were also reached with 39 key messages on maternal newborn and child health (MNCH), routine immunization, WASH, education, child protection, MHPSS and mine risk education.

Face-to-face trainings on interpersonal communication were conducted for 37 partner staff members of three nutrition partner organizations from the northwest region in order to strengthen their skills in community engagement and mobilization activities. Accountability to Affected Population (AAP) trainings were conducted for 31 partner staff members and 18 UNICEF staff members. A total of 165 partner staff members have completed the Burmese version of the AAP e-course.

## Humanitarian Leadership, Coordination and Strategy

UNICEF Myanmar's humanitarian strategy is aligned with the inter-agency 2024 Humanitarian Needs and Response Plan and the 2024 Humanitarian Action for Children (HAC) appeal. 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 conflict. 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 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

How to prepare for a cyclone

Keep your family safe during a cyclone

<https://www.unicef.org/parenting/emergencies/how-to-prepare-for-hurricane-or-typhoon>

Behind life's beginnings

One midwife's passion makes a difference in rural Myanmar

<https://www.unicef.org/myanmar/stories/behind-lifes-beginnings>

### Social Media

International Day of the Midwife

Facebook

<https://shorturl.at/fsGZ0>

<https://shorturl.at/hjkm3>

X

<https://x.com/UNICEFMyanmar/status/1787087558868181155>

Cyclone Mocha Anniversary

Facebook

<https://shorturl.at/degT6>

<https://shorturl.at/bdHM8>

X

<https://x.com/UNICEFMyanmar/status/1790610799373042156>

## Next SitRep: July 2024

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

Who to contact for further information: Marcoluigi Corsi  
Representative  
Myanmar Country Office  
Tel: (+95) 9765491680  
Email: [mcorsi@unicef.org](mailto:mcorsi@unicef.org)

Julia Rees  
Deputy Representative  
Programmes  
Myanmar Country Office  
Tel: (+95) 9883768865  
Email: [jrees@unicef.org](mailto:jrees@unicef.org)

Faika Farzana  
Emergency Manager  
Myanmar Country Office  
Tel: (+95) 9883768871  
Email: [ffarzana@unicef.org](mailto:ffarzana@unicef.org)

## Annex A

### Summary of Programme Results<sup>7</sup>

Sector indicator   disaggregation		UNICEF and IPs response			Cluster response					
		2024 targets	Total results	Change since last report ▲ ▼	2024 targets	Total results	Change ▲ ▼			
<b>Health</b>										
# of children aged 6–59 months vaccinated against measles in UNICEF-supported areas	Boys	800 000	66 365	▲ 50 217						
	Girls		71 895							
# of children and women accessing primary health care in UNICEF-supported facilities	Male	350 000	68 901	▲ 44 061						
	Female		100 102							
<b>Nutrition</b>										
# of children aged 6–59 months with SAM admitted for treatment	Boys	10 900	238	▲ 31				17,897	167	▲ 375
	Girls		275						208	
# of primary caregivers of children aged 0–23 months receiving IYCF counselling	Men	316 000	1 707	▲ 2 198				140,764	1 638	▲ 17 876
	Women		13 446		16 238					
# of children aged 6–59 months receiving micronutrient powder	Boys	293 000	2 836	▲ 1 881	474,489	1 829	▲ 3 614			
	Girls		2 659			1 785				
# of children 6–59 months receiving vitamin A supplementation	Boys	1 014 000	2 655	0						
	Girls		2 885							
# of children screened for wasting	Boys	418 000	24 173	▲ 8 527				474,489	45 771	▲ 90 230
	Girls		22 820						44 459	
# of pregnant and lactating women receiving micronutrient supplementation	Women	316 000	782	▲ 280				140,764	803	▲ 803
<b>Child Protection</b>										
# of children and parents/caregivers accessing MHPSS <sup>8</sup>	Boys	3 392 000	12 999	▲ 1 621 486				1 140 000	12 943	▲ 34 637
	Girls		15 705						14 757	
	Men		1 168 237		2 362					
	Women		1 984 580		4 575					
# of women, girls and boys accessing GBV risk mitigation, prevention and/or response interventions	Boys	831 000	2 987	▲ 4 066						
	Girls		3 854							
	Men		0							
	Women		5 744							
# of people who have access to a safe and accessible channel to report sexual exploitation and abuse by aid workers	Boys	1 654 464	797	▲ 1 771						
	Girls		952							
	Men		463							
	Women		985							
# of children who received individual case management	Boys	25 000	329	▲ 162	10 000	723	▲ 1 077			
	Girls		314			354				
# of children in areas affected by landmines and other explosive weapons provided with relevant	Boys	940 000	9 633	▲ 16 128	2 046 062	11 735	▲ 52 147			
	Girls		10 888			13 358				
	Men		8 232			10 757				

<sup>7</sup> All the results data are as of end of April 2024. Clusters' results are as of March 2024 and reported as quarterly basis.

<sup>8</sup> Against the target of 3.39 million to be reached with MHPSS, 3 million people was planned to be reached through digital MHPSS and remaining 392,000 people through community-based support. By end April, a total of 3.1 million people were reached, 3,147,938 through digital support and 33,583 through community-based support. The Cluster MHPSS target only includes people reached through interpersonal support.



prevention and/or survivor-assistance interventions	Women		14 189			16 297	
<b>Education</b>							
# of children accessing formal and non-formal education, including early learning	Boys	890 360	94 682	▲ 18 929	1 335 945	64 311	▲ 133 654
	Girls		97 886			69 343	
# of children receiving individual learning materials	Boys	450 000	26 957	▲ 12 662			
	Girls		27 978				
# of educators supported with training and/or incentives	Male	21 864	366	▲ 485			
	Female		1 531				
# of temporary learning centres rehabilitated	centres	600	806	▲ 75			
<b>WASH</b>							
# of people accessing sufficient quantity of safe water for drinking and domestic needs	Boys	390 000	22 369	▲ 43 138	1 107 739		▲ 214 369
	Girls		23 583				
	Men		33 031			103 055	
	Women		35 679			111 313	
	PWDs		4 261			34 375	
# of people using safe and appropriate sanitation facilities	Boys	300 000	8 469	▲ 30 807	1 006 597		▲ 184 505
	Girls		8 105				
	Men		13 494			88951	
	Women		14 434			95554	
	PWDs		582			28282	
# of people reached with handwashing behaviour-change programmes	Boys	300 000	5 794	▲ 3 123	1 671 533		▲ 121 228
	Girls		6 047				
	Men		11 483			58115	
	Women		13 095			63113	
	PWDs		595			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	22 152	▲ 23 223	1 671 533		▲ 208 561
	Girls		22 550				
	Men		33 074			100537	
	Women		36 418			108024	
	PWDs		2 241			31382	
<b>Social Protection</b>							
# of households reached with UNICEF-funded humanitarian cash transfers		90 000	16 711		0		
# of children and adolescents with disabilities reached with assistive technology and interventions to address disability-related need		18 600			0		
<b>Cross-sectoral (HCT, SBC, RCCE and AAP) <sup>9</sup></b>							

<sup>9</sup> \*HCT: Humanitarian Cash Transfer; RCCE: Risk communication and community engagement

# of people reached through messaging on prevention and access to services		3 000 000	1 081 872	▲ 189 516	
# of people sharing their concerns and asking questions through established feedback mechanisms	Men	359 529	2 472	0	
	Women		4 688		
# of people participating in engagement actions for social behaviour-change	Men	150 000	36 570	▲ 34 979	
	Women		75 077		

## 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	1,937,276	1,527,886	13,284,838	79.3%
Nutrition	18 010 388	937,549	1,049,350	16,023,490	89.0%
Child protection, GBViE and PSEA	33 115 892	1,437,170	3,382,312	28,296,410	85.4%
Education	55 871 200	1,570,871	1,121,458	53,178,872	95.2%
WASH	35 880 000	2,478,639	3,558,856	29,842,505	83.2%
Social protection	8 195 000	12,944	394,809	7,787,247	95.0%
Cross-sectoral (HCT, SBC, RCCE and AAP)	29 242 348	27,651	270,710	28,943,987	99.0%
Cluster and field coordination	11 221 000	1,465,161	1,885,289	7,870,550	70.1%
<b>Total</b>	<b>208,285,828</b>	<b>9,867,260</b>	<b>13,190,670<sup>10</sup></b>	<b>185,227,898</b>	<b>88.9%</b>

<sup>10</sup> The amount of carry-over changed by \$4K due to grant re-evaluation.