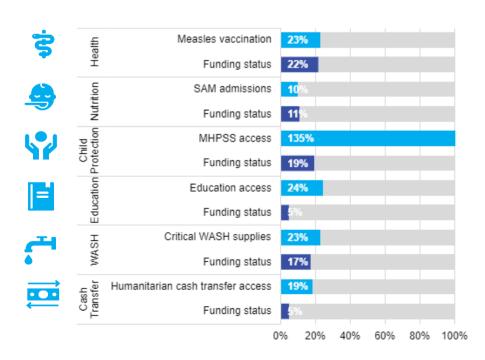


Reporting Period: 1 to 30 June 2024

# **Highlights**

- Protection concerns are on the rise with nearly 3.2 million people internally displaced. Ongoing conflict and seasonal flooding are exacerbating the already severe humanitarian needs.
- During the month of May, UNICEF and partners provided primary health care services to 46,117 women and children, and life-saving child protection services reached 66,483 people.
- Bimonthly maternal and child cash transfers have been made to 9,000 programme participants and 80,075 people received critical WASH supplies.
- Only 12 per cent of the funding against the Humanitarian Action for Children (HAC) Appeal requirement has been received, impacting UNICEF's capacity to deliver multisectoral humanitarian assistance to children and their families. Timely and sufficient funding is crucial to provide timely assistance, especially during the ongoing monsoon season.

# UNICEF's Response and Funding Status



# Myanmar Country Office

Humanitarian
Situation Report No. 5



for every child



6,000,000

children in need of humanitarian assistance



18,600,000

people in need (HAC 2024)



2,898,200

Internally displaced people since 1 February 2021



66,100

People displaced to neighbouring countries since 1 February 2021 (UNHCR, 24 June 2024)

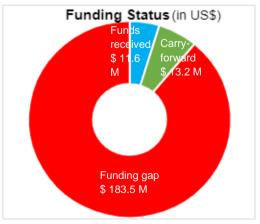


289,000

displacement before February 2021

# **UNICEF Appeal 2024**

US\$ 208.3 million



<sup>\*</sup>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 30 June 2024, UNICEF secured US\$ 24.8 million (12 per cent of its appealed funding), comprising US\$11.6 million received for the current year and US\$13.2 million carried forward from the previous year.

This year, UNICEF has received generous funding support from the Government of Japan, the European Commission's Civil Protection and Humanitarian Aid Operations Department (DG ECHO), the Australian Department of Foreign Affairs and Trade (DFAT), the Australian Committee for UNICEF, the Central Emergency Response Fund (CERF), as well as internal allocations from global humanitarian thematic funding. UNICEF also acknowledges the contributions previously made by Australia's DFAT, the United States Agency for International Development (USAID)'s Bureau for Humanitarian Assistance (BHA), 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, and the United Nations Office for the Coordination of Humanitarian Affairs (UNOCHA), along with the CERF and the Myanmar Country-Based Pooled Fund. Moreover, UNICEF Myanmar received an internal loan from the Emergency Programme Fund to support the humanitarian response.

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 roles in the WASH Cluster, the Nutrition Cluster, the Child Protection Area of Responsibility (CP AoR), the Mine Action Area of Responsibility (MA AoR) and as co-lead of the Education Cluster and is strengthening protection against sexual exploitation and abuse (PSEA), and social behaviour-change and accountability to affected populations. However, UNICEF's capacity to deliver these services is severely limited by the funding gap of 88 per cent against the 2024 appeal. Without additional funding, targeted populations, especially children, will not be able to receive urgently needed 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

Ongoing conflict continues to lead to further displacement across multiple parts of the country with nearly 3.2 million people internally displaced as of 24 June.<sup>1</sup> This includes 93,500 people internally displaced since the end of May. The onset of monsoon has also led to increased needs with further population movements, and damage to infrastructure and increasing the risk of seasonal diseases.

The fighting in Rakhine state has been intensifying with heavy artillery shelling; 15 townships out of 17 are affected by clashes. In the northern part of the state, fighting has moved from Buthidaung to Maungdaw. In Sittwe, it is estimated that between 15,000 to 20,000 people from at least 35 villages were reportedly forced to move. According to the camp coordination and camp management cluster report, as of 20 June there are more than 300,000 newly displaced people across Rakhine. Humanitarian access is still restricted in most areas, although some agencies gained access to some monasteries to assess the needs of IDPs who are sheltering there.

In the northwest, intense fighting has been continuing with gunfire, artillery shelling and aerial attacks resulting in civilian casualties, with children reportedly killed and injured. Civilian properties and public infrastructure, including temporary learning spaces, have also been destroyed. The number of people displaced since 2021 exceeded 1.5 million<sup>2</sup> by the end of June 2024, with an increase of nearly 200,000 IDPs since the beginning of 2024.

In Kachin, conflict between the Myanmar Armed Forces (MAF) and Kachin Independence Army and its allies continues to intensify in several townships. Fighting intensified in Bhamo, Hpakant, Mansi, Momauk, Myitkyina, Puta-O, Sumprabum, Tanai and Waingmaw townships and has displaced thousands of people. By mid-June, about 96,000 people had been newly displaced.<sup>3</sup> Bhamo, Mansi, Momauk and Waingmaw townships are host to the highest numbers of newly displaced people. Some 84,400 people have already been in protracted camps for a decade. Road closures have led to a shortage of essential items, including food and fuel, as well as rocketing prices, particularly in Puta-O.

<sup>&</sup>lt;sup>1</sup> United Nations High Commissioner for Refugees, 'Myanmar UNHCR displacement overview 24 June 2024', UNHCR

<sup>&</sup>lt;sup>2</sup> Ibid.

<sup>&</sup>lt;sup>3</sup> Ibid.

There was extensive flooding in Myitkyina on 30 June leading to infrastructure damage, and populations being displaced. Some roads are impassable, mobile networks are interrupted, and all flights cancelled as the airport was inaccessible. Most of the internally displaced persons (IDPs) living close to the river were relocated to other areas. An inter-agency needs assessment was planned as at end June. The risks of heavy rain, flood and cyclone are heightened during the monsoon season across the country and these disasters would seriously impact to already vulnerable population amid the escalating of conflict and crisis.

Armed conflicts between the MAF and ethnic armed organizations (EAO) persist, with frequent clashes reported in Pekhon, Pinlaung, Nyaung Shwe, Hsihseng townships in southern Shan and in Nawnghkio, Kyaukme and Hsipaw in northern Shan. By the end of June, there were more than 130,000 IDPs in southern Shan, more than 18,000 people in northern Shan (including more than 2,000 people in Nawnghkio) and more than 132,000 IDPs in Kayah state. Due to the recent conflict in northern Shan and in Pinlaung, the number of internally displaced people is expected to increase. However, in Hsihseng, the number of internally displaced people gradually returning to their places of origin is increasing. In Kayah state as well, some internally displaced people have voluntarily returned to their places of origin; primarily those who had been displaced to southern Shan.

Roads around Lashio in Shan state have been destroyed and tightening security is impacting the transportation of supplies. In addition, the number of landmine incidents is increasing in northern Shan, as well as in the Hsihseng and Pinlaung areas of southern Shan. Increased enforcement of the conscription law and recruitment activities by the MAF and EAOs have been reported. Humanitarian access in northern Shan and Kayah faces significant challenges and access to townships in southern Shan, particularly Hsihseng, Moebye, Phekon and some areas of Pinlaung township, are largely restricted.

According to recent monitoring of incidents involving landmines and explosive remnants of war in the first quarter of 2024, a total of 339 civilian casualties (29 per cent of them children) have been reported<sup>4</sup> nationally. This figure represents 32 per cent of the total casualties reported in 2023 (1,052 reported). Shan state had the highest number of casualties (25 per cent of the overall total). Sagaing and Bago followed with 19 per cent and 12 per cent of the total, respectively. The remaining regions, Chin, Kachin, Kayah, Kayin, Magway, Mandalay, Mon, Naypyitaw, Rakhine, Tanintharyi and Yangon, collectively accounted for the remaining 43 per cent of the total casualties.

# Summary Analysis of Programme Response⁵

#### Health

UNICEF and its partners continue to provide life-saving health care services, including emergency referral support, in the northwest, southeast, northeast and Yangon peri-urban areas. During the reporting period, 46,117 women and children received primary health care services in UNICEF target areas (Rakhine, Kachin, Shan, Kayah, Chin, Sagaing, Bago and Magway).

During the current rainy season, there is growing concern about diarrhoea, which is one of the most common seasonal illnesses in Myanmar. UNICEF is in preparedness and response mode and has provided partners with inter-agency emergency health kits, which include essential medicines like ORS, Zinc, oral antibiotics, and basic equipment sufficient to cover 4,000 people with essential health care services for a period of three months. UNICEF also provided 2,716 clean delivery kits and 2,820 family newborn kits to support essential care for newborns.

UNICEF is continuously supporting the strengthening of the routine immunization programme in Myanmar. According to the current preliminary available data, 23 per cent of targeted children under the age of 12 months have now received their first dose of the measles rubella vaccine. A second round of the catch-up immunization programme was conducted in Yangon, Mandalay and Nay Pyi Taw in early June, aimed at reaching to children aged under five-year-olds who missed their basic vaccines.

#### **Nutrition**

In May, UNICEF and its partners reached 5,717 children aged 6-59 months (2,996 boys and 2,721 girls) and 108 pregnant and lactating women with preventive nutrition services, such as multiple micronutrient powder, vitamin A

<sup>&</sup>lt;sup>4</sup> United Nations Children's Fund, Myanmar Landmine/ERW Incidents Information, Factsheet (January–March 2024), UNICEF.

<sup>&</sup>lt;sup>5</sup> Due to the frequency of data collection, the results are for May 2024.

supplementation and multiple micronutrient tablet supplementation. 3,770 primary caregivers (316 men and 3,454 women) of children aged under two years were supported with infant and young child feeding (IYCF) counselling for optimal breast feeding and child feeding practices.

In May, 9,193 children aged 6–59 months (3,872 boys and 5,321 girls) were reached with rapid nutrition screening to identify those with acute malnutrition and provide them with life-saving treatment. Among them, 494 children with severe acute malnutrition (SAM) and moderate acute malnutrition (MAM) (59 SAM, 435 MAM) were detected. UNICEF continued to provide life-saving SAM treatment to 1,098 children (511 boys and 587 girls). 125 children who had been admitted with SAM were discharged in May after being cured.

#### **Nutrition Cluster**

As of May 2024, 152,749 people were reached with both preventive and curative nutrition services; 25 per cent of the number targeted in the Humanitarian Needs and Response Plan (HNRP). The admission rates for SAM and MAM are suboptimal, at 5.5 per cent and 5.4 per cent, respectively, of national level targets, mainly due to the challenges in accessing these children. Preventive measures targeting acute malnutrition have been focused on children aged 6–59 months and on pregnant and lactating women and, by the end of May, had reached 151,382 (25 per cent) of the targeted number of 615,252 people.

The escalation of conflict in Rakhine state and in the northwest region has led to difficulties in accessing communities, like those in Buthidaung, resulting in the postponement and halting of life-saving treatments for SAM. This interruption of nutrition activities amid spreading conflict, coupled with funding gaps and supply shortages, continues to be an ongoing challenge.

Despite these obstacles, both the national and subnational nutrition clusters are steadfastly working to deliver nutrition services to meet the needs of children and women, with valuable support from partners.

#### **Child Protection**

Despite challenges, UNICEF and its partners continued providing life-saving child protection services, reaching 66,483 people (16,937 boys, 21,949 girls, 7,357 men and 20,240 women) in May 2024. Community-based structured mental health and psychosocial support (MHPSS), particularly psychosocial first aid delivered through static and mobile child and women-friendly spaces, benefited 21,833 people, including children. Awareness-raising activities through social media to promote psychosocial well-being and psychosocial first aid also reached 1,382,852 people.

3,729 people (968 boys, 1,155 girls and 1,606 women) benefited from gender-based violence (GBV) risk mitigation, prevention, and response intervention, while 27,129 people (6,084 boys, 8,362 girls, 3,666 men and 9,017 women) had access to safe channels to report sexual exploitation and abuse. 3,882 child protection kits were distributed to internally displaced children across the country; 211 children (73 boys and 138 girls) received individual case-management services, and 13,585 people (3,922 girls, 3,362 boys, 4,029 women and 2,272 men) received explosive ordinance risk education. A training on international human rights mechanisms for 39 local lawyers (16 men and 23 women) was jointly organized with the Office of the High Commissioner for Human Rights (OHCHR). 470 clients, including 240 children (183 boys and 57 girls) and 230 young people (167 men and 63 women) were provided with legal assistance.

2,062 people (34 boys, 110 girls, 704 men and 1,214 women) comprising community members, young people, caregivers and partner staff benefited from capacity-building trainings. The trainings covered MHPSS, GBV, case-management coaching and mentoring, community-based child protection, parenting, adolescent facilitation and mine risk education.

## Child Protection Area of Responsibility (CP AoR)

All humanitarian actors are required to incorporate child protection principles and actions into their work and the CP AoR has been focusing on supporting this, in line with the Humanitarian Country Team (HCT) protection strategy. CP AoR has provided training for the health cluster to ensure that child protection is at the heart of health responses; a training of trainers for protection partners has also been carried out on this. In line with the HCT strategy, the Protection Cluster, together with Child Protection, Gender-Based-Violence and Mine Action AoRs, has also committed to provide training to non-protection staff on mainstreaming protection into their activities, with 40 already trained.

Northwest CP AoR conducted a session on this for 32 northwest GBV AoR members. Key achievements include the agreement of GBV AoR members to integrate child protection monitoring and referral services to CP actors in the northwest region.

The CP AoR is also working on a disability inclusion tip sheet to be available in July. Additionally, the CP AoR has finalized its Q1 HNRP monitoring dashboard, which tracks the achievement of international and local actors in coordination groups in order to increase their recognition and support.

## Mine Action Area of Responsibility (MA AoR)

In preparation for the cyclone season, cyclone-specific explosive ordnance risk education (EORE) messaging was shared with northwest AoR members. This is to be integrated into their EORE activities to enhance community safety and awareness. There has been a heightened focus on delivering EORE in Chin state, as reports of casualties have risen with the return of some internally displaced people.

The MA AoR in the southeast has reviewed information, education and communication materials to ensure the inclusion of people with disabilities, enhancing the accessibility and effectiveness of our outreach efforts. Victim assistance was provided for 75 people in the southeast (35 children and 40 adults). This assistance included medication, transportation, basic needs support, psychosocial support and the distribution of child protection emergency kits. Victim assistance is being provided through the referral mechanism between MA agencies and clusters/AORs.

## **Education**

UNICEF and its partners supported access to formal and non-formal education, including early learning for 25,294 children (13,214 girls) in May. These children, including internally displaced children, were supported with teaching and learning materials, basic literacy and numeracy lessons, MHPSS, and life skills-based education for out-of-school children, with some children receiving personal hygiene and infectious disease prevention knowledge, and remedial education to catch up on lessons. UNICEF and its partners also provided individual learning materials, including essential learning package kits for 3,490 children (1,815 girls). Moreover, 365 (259 women) volunteer teachers/educators/facilitators were trained and incentivized with stipends. The training sessions included teaching skills, rapid gender analysis, inclusive education and MHPSS. 51 temporary learning spaces were established or maintained, while UNICEF and its partners also supported the functioning of education committees in target areas and their monitoring of learning spaces there.

In some areas where learning spaces are temporarily forced to close due to intensifying conflict and raids, such as in Rakhine, Sagaing, Kachin and Kayin, there is increasing need to provide access to safer learning spaces/centres. In these circumstances, the demand is also growing for MHPSS, including for partner staff.

### **Education Cluster**

In June, the Education Cluster disseminated information on the Myanmar Humanitarian Fund Standard Allocation 1 (MHF 2024 SA1) and discussed the prioritization of education activities across all subnational hubs. This aimed to increase awareness among the cluster partners, especially local organizations, about the MHF funding opportunity and facilitating them to position themselves better for successful application for the same. Building on the new partner outreach exercise conducted in 2023, the education cluster is seeking new partners (especially local NGOs, community-based organizations and civil society organizations) who are yet to engage in the Education Cluster coordination mechanism. The aim is to increase local partners' participation in the education in emergencies response, facilitate their capacity to support and access to resources, as well as leverage their unique access potential to propel the response at field level. The ongoing conflict and security issues, including damage to schools, disruptions to teachers' payments, hindrances to student enrolment, library closures, restricted humanitarian aid and logistical difficulties, significantly impact the Education Cluster partners' ability to provide a safe, stable and quality learning environment for children.

## **WASH**

An additional 80,075 people (12,996 boys, 12,706 girls, 25,417 men and 28,956 women) received emergency WASH supplies and services in May. This includes 2,884 people who received safe drinking water, 10,829 who were supported with sanitation services, 1,293 people who participated in handwashing behaviour-change programmes, and 80,075 people who received critical WASH supplies and hygiene messages.

In Rakhine, 26,206 people are benefiting from services in response to water scarcity and sanitation needs. In the first week of June 2024, UNICEF provided life-saving WASH supplies, including hygiene kits, buckets, tarpaulins, and water purification chemicals, to 19,090 IDPs in southern Shan and 17,381 displaced people in Kayah. In southern Shan, three healthcare centres received 1,000-litre water storage tanks, benefiting 842 people (401 men and 441 women).

With increasing displacement in Kachin, Kayah, and Shan due to the ongoing and escalating conflict, UNICEF is providing life-saving WASH services, particularly to families facing multiple displacements and host communities. The response is also tailored to respond to possible acute watery diarrhoea cases that may arise due to poor sanitation behaviour and contaminated drinking water. UNICEF is striving to expand its partnerships with local civil society organizations and community-based organizations to increase access to WASH services, but also to strengthen local capacity to respond to the evolving situation.

## **WASH Cluster**

The WASH Cluster has reached only 300,000 out of the 1.7 million people in need, according to the WASH Cluster Q1 report on the 4Ws (who, what, when, where).

During the reporting period, the cluster conducted an ad hoc meeting to disseminate the MHF SA1 allocation information and discuss the prioritization for WASH activities across all subnational level hubs. This ensured that all partners, including local organizations, were informed about the MHF funding opportunity. Furthermore, the WASH Cluster participated in the MHF SA1 strategic review committee to review MHF grants and provided cluster endorsements for MHF SA1 2024 proposal applications upon request. Moreover, a contingency planning exercise was carried out at the subnational level in preparation for the monsoon season.

# **Social Protection and Cash-based Programming**

In June, UNICEF provided bi-monthly maternal and child cash transfers to 9,000 programme participants in two periurban townships in Yangon. More than 140 complementary social and behavioural change (SBCC) group sessions reached 973 programme participants. The areas of focus were "Warning signs during pregnancy and delivery" and "Preparing for childbirth". A series of trainings were given to community mobilizers and mother support groups to introduce the Smart Start curriculum, a family-centred tool to support women and children's nutrition and care. The Smart Start curriculum materials will be used in SBCC sessions after the trainings are completed. Disability screening was carried out for 711 children and adults in hard-to-reach and humanitarian priority areas.

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

90,269 community members (40,164 males and 50,105 females) were reached through in-person community mobilization of life-saving key messages on maternal and child health, nutrition, immunization, WASH and COVID-19 in 17 townships of five states and regions during the reporting period.

239,038 people were reached through the 'Knowledge Talk' Viber Channel and partners' social media pages with key messages on maternal, newborn and child health, routine immunization, nutrition, WASH Promotion, education, child protection, mental health, MHPSS and mine-risk education. In-person digital engagement sessions were held to increase subscribers to the Viber channel with five faith-based organizations in eastern Shan and Bago east, resulting in about 1,300 new subscribers to the channel.

Through in-person and online Menstrual Hygiene Management Day campaigns, more than 300,000 people received key messages focusing on taboos around menstrual hygiene management, in collaboration with social influencers and young people. Interpersonal communication training was provided to strengthen the community mobilization skills of 130 community-based staff and volunteers in Bago and Shan. An AAP training was provided to 38 partner staff and 25 UNICEF staff, focusing on practical approaches to establish community feedback mechanisms and implementation challenges such as dedicated funding and staff for AAP. UNICEF partners' community feedback mechanisms reached 31,623 individuals (7,976 males and 23,647 females) in Shan state, Yangon, Bago east and Magway regions. A total of 531 feedback messages were received and addressed by the partners.

# Humanitarian Leadership, Coordination and Strategy

UNICEF's humanitarian strategy for Myanmar is aligned with the inter-agency 2024 HNRP and the 2024 Humanitarian Action for Children (HAC) appeal. In collaboration with the Myanmar Humanitarian Country Team, and through its cluster coordination role, UNICEF contributed to the addendum of the 2024 HNRP, which emphasized the most pressing needs and outlined the potential impacts of the current funding shortfall.

UNICEF continues its national presence through seven field offices in Myanmar that prioritize humanitarian assistance to all vulnerable children and families, including those in communities that have been displaced (or not) by natural

disasters and conflict. UNICEF also continues to support 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's 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

#### Shelter from the Storm

How community-led sanitation and hygiene initiatives are mitigating extreme weather impacts in Hpo Hla Gyi, Southeastern Myanmar

https://www.unicef.org/myanmar/stories/shelter-storm

#### "We wish for both of our sons to be educated"

How a family is championing inclusion for their child living with disability in eastern Myanmar https://www.unicef.org/myanmar/stories/we-wish-both-our-sons-be-educated

#### Community of care

Empowering families facing disability in Myanmar https://www.unicef.org/myanmar/stories/community-care

## Social Media

## Parenting Month (June 1 - June 30)

Happy Global Day of Parents! Parenting has its challenges and joys. At UNICEF, we provide tools and knowledge to help parents nurture growth through play this "Parenting Month".

https://x.com/UNICEFMyanmar/status/1796896308575551929

https://www.facebook.com/unicefmyanmar/posts/pfbid02xwTFvfqrGW9MBvyoR2q8wyUdmiCh3AwnQ7qyuWtL5JawhkZM35NbxdfHQS2NuCEJI

Every child deserves a strong start! Early parenting support is key for all families, including those with disabilities and single parents. Let's make it happen!

https://x.com/UNICEFMyanmar/status/1797570190420639823

https://www.facebook.com/unicefmyanmar/posts/pfbid02kKXYNPcJLPeyZN2CwLY6Rq6aAdvqU1wgoyZCYbZBEWy78c8sQAPCj1xVs14Q2WPBI

#### **International Day of Play (June 11)**

P Did you know? In the first three years, a child's brain develops faster than at any other time! Through play, children explore their surroundings and develop skills that last a lifetime.

Today on 11 June, we celebrate our first International Day of Play to encourage learning through play!

 $\frac{https://www.facebook.com/unicefmyanmar/posts/pfbid0ZVnyGGL1jQNWRrNZ61eVqktormAVKxjXwKCNn25WoNC1ooqa7u8d32Hxffy5zXLWI}{}$ 

https://x.com/UNICEFMyanmar/status/1800363332853170479

Play boosts emotional health and learning!

With the support of donors and partners, learning programmes in eastern Shan State incorporate playtime to keep every child creative, confident and socially skilled.

https://www.facebook.com/share/p/TdSKoHkhpDvep4j2/

### **Parenting Stories**

https://bit.ly/3VChZyr

https://bit.ly/3KTl3kJ

https://bit.ly/3VPBhBK

# Next SitRep: August 2024

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

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# Annex A

# Summary of Programme Results<sup>6</sup>

		UNICEF	and IPs	response	Cluster response		se
Sector indicator   disaggregation		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 Girls	800 000	87 943 95 271	▲ 44 954			
# of children and women accessing primary health care in UNICEF-supported facilities	Boys Girls Women	350 000	46 660 46 744 80 411	▲ 46 117			
Nutrition							
# of children aged 6–59 months with SAM admitted for treatment	Boys Girls	10 900	511 587	▲ 585	17,897	167 208	▲ 375
# of primary caregivers of children aged 0–23 months receiving IYCF counselling	Men Women	316 000	2 023 16 900	▲ 3 770	140,764	1 638 16 238	▲ 17 876
# of children aged 6–59 months receiving micronutrient powder	Boys Girls	293 000	4 263 3 932	▲ 2 700	474,489	1 829 1 785	▲ 3 614
# of children 6–59 months receiving vitamin A supplementation	Boys Girls	1 014 000	4 224 4 333	▲ 3 017			
# of children screened for wasting	Boys Girls	418 000	28 045 28 141	▲ 9 193	474,489	45 771 44 459	▲ 90 230
# of pregnant and lactating women receiving micronutrient supplementation	Women	316 000	890	▲108	140,764	803	▲ 803
Child Protection							
# of children and parents/caregivers accessing MHPSS <sup>7</sup>	Boys Girls Men Women	3 392 000	19 568 24 307 1 629 995 2 912 332	▲ 1 460 093	1 140 000	12 943 14 757 2 362 4 575	▲ 34 637
# of women, girls and boys accessing GBV risk mitigation, prevention and/or response	Boys Girls Men	831 000	3 955 5 009				
interventions	Women	7 350	▲ 3 729				
# of people who have access to a safe and accessible channel to repor sexual exploitation and abuse by aid workers	Boys Girls Men Women	1 654 464	6 881 9 314 4 129 10 002	▲ 27 129			
# of children who received individual case management	Boys Girls	25 000	402 452	▲ 211	10 000	723 354	▲ 1 077
	Boys	940 000	12 995	▲ 13 585		11 735	▲ 52 147

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<sup>&</sup>lt;sup>6</sup> All the results data are as of end of May 2024. Clusters' results are as of March 2024 and reported as quarterly basis.

<sup>&</sup>lt;sup>7</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 May, a total of 4,586,202 million people were reached, 4,530,790 through digital support and 55,412 through community-based support. The Cluster MHPSS target only includes people reached through interpersonal support.

# of children in areas affected by landmines and other explosive	Girls Men		14 810 10 504		2 046 062	13 358 10 757
weapons provided with relevant prevention and/or survivorassistance interventions	Women		18 218			16 297
Education						
# of children accessing formal and	Boys		106 762			64 311
non-formal education, including early learning	Girls	890 360	111 100	▲ 25 294	1 335 945	▲ 133 654 69 343
# of children receiving individual	Boys	450 000	28 632	▲ 3 490		
learning materials	Girls		29 793	▲ 3 490		
	Male		472			
# of educators supported with	Female	21 864	., _	<b>▲</b> 365		
training and/or incentives	Terriale		1 790			
# of temporary learning centres rehabilitated	centres	600	857	▲ 51		
WASH						
	Boys		22 837			
# of people accessing sufficient	Girls		24 040			
quantity of safe water for drinking	Men	390 000	33 946		1 107 739	
and domestic needs	Women		36 723			111 313 <b>A</b> 214 369
	PWDs		4 743 10 226			34 375
	Boys Girls		9 824			
# of people using safe and	Men	300 000	16 931	▲ 10 829	1 006 597	00054
appropriate sanitation facilities		300 000		<b>A</b> 10 629	1 000 597	88951
	Women PWDs		18 351 1 469			95554 ▲184 505
	Boys		6 004			28282
# of people reached with	Girls		6 252			
handwashing behaviour-change	Men	300 000	11 894		1 671 533	58115
programmes	Women	000 000	13 562			63113 ▲ 121 228
	PWDs		595			19664
	Boys					
	Girls					
# of people accessing functional	Men	300 000		0		
handwashing facilities with soap	Women					
	PWDs					
	Boys		35 148			
	Girls		35 256			
# of people reached with critical	Men	850 000	58 491	▲ 80 075	1 671 533	100537
WASH supplies	Women	650 000	65 374		10/1000	
						108024 ▲ 208 561
Social Protection	PWDs		2 241			31382
# of households reached with				0		
UNICEF-funded humanitarian cash transfers		90 000	16 711	0		
# of children and adolescents with disabilities reached with assistive		18 600		0		

technology and interventions to address disability-related need						
Cross-sectoral (HCT, SBC, RCCE						
and AAP) <sup>8</sup>						
# of people reached through						
messaging on prevention and access		3 000 000	1 620 910	▲ 539 038		
to services						
# of people sharing their concerns	Men		2 624			
and asking questions through	Women	359 529	3 631 <sup>9</sup>	0		
established feedback mechanisms	VVOITIGIT		3 03 1			
# of people participating in	Men		76 734			
engagement actions for social behaviour-change	Women	150 000	125 182	▲ 90 269		

 $<sup>^8</sup>$  \*HCT: Humanitarian Cash Transfer; RCCE: Risk communication and community engagement  $^9$  Result is less than previous month's report due to data correction.

# Annex B

# **Funding Status**

		Funds availa	Funding g	Funding gap	
Sector	Requirements	Humanitarian resources received in 2024	Resources available from 2023 (carry-over)	\$	%
Health	16,750,000	2,112,276	1,527,886	13,109,838	78.3%
Nutrition	18,010,388	937,549	1,049,350	16,023,490	89.0%
Child Protection, GBViE and PSEA	33,115,892	3,034,051	3,382,312	26,699,529	80.6%
Education	55,871,200	1,570,871	1,121,458	53,178,872	95.2%
WASH	35,880,000	2,650,634	3,558,856	29,670,510	82.7%
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	1,244,661	1,885,289	8,091,050	72.1%
Total	208,285,828	11,590,637	13,190,670	183,504,522	88.1%