

Children under attack



The sharp increase in

The sharp increase in armed attacks on communities, schools, health centres and other public institutions and infrastructure has reached unprecedented levels. Violence is disrupting livelihoods and access to social services including education and health care. Insecurity is worsening chronic vulnerabilities including high levels of malnutrition, childhood illnesses, and poor access to clean water and sanitation facilities.

As of August 2020, over one 1.8 million people were displaced in the Central Sahel countries of Burkina Faso, Mali and Niger, 60 per cent of whom are children. From July 2019 to July 2020, in Burkina Faso alone, the number of people internally displaced by insecurity and violence has jumped from 237,000 to over one million people, representing a 4-fold increase.* In the past 12 months, the number of children in need of humanitarian assistance across the three countries has risen from 4.3 million to 7.2 million.**

Reaching those in need is increasingly challenging. During the past year, the rise in insecurity, violence and military operations has hindered access by humanitarian actors to conflict-affected populations.



The United Nations Integrated Strategy for the Sahel (UNISS) continues to spur inter-agency cooperation. UNISS serves as the regional platform to galvanize multi-country and cross-border efforts to link development, humanitarian and peace programming (triple nexus). Partners are invited to engage with the UNISS platform to scale-up action for resilience, governance and security.

A humanitarian emergency is unfolding, with the risk of spillover to the neighbouring coastal countries.



UNICEF calls on governments and their partners to invest and strengthen emergency preparedness systems and boost capacities of national institutions in risk-informed approaches to programming to be ready to scale-up essential services in the event of insecurity, an influx of displaced people, or natural disasters.

Over 1,100,000 children forced to flee their homes 1.8 million internally displaced persons and refugees* Burkina Faso: 1,033,130 | Mali: 331,250 | Niger: 496,980 Kidal Mali Mauritania Tombouctou Koulikoro Segou Bamako Ouagadougou **Burkina** Ngourma Faso Sikasso **Côte** Sierra d'Ivoire Leone **#People displaced** (IDPs + Refugees in thousands) UNICEF offices 🔨 Refugee camps <=5 5-10 10-20 20-50 > 50

^{*} Mali: IOM DTM (July 2020), UNHCR data portal, 31 July 2020
Burkina Faso: OCHA Snapshot, 08 August 2020; UNHCR 31 July 2020
Niger: Government & UNHCR statistics, May 31, 2020
The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by UNICEF.

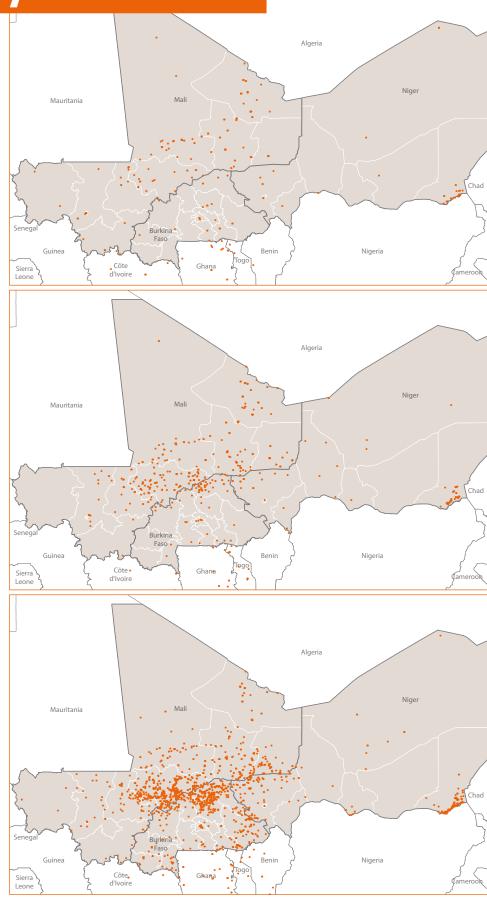


Security incidents

2014-15

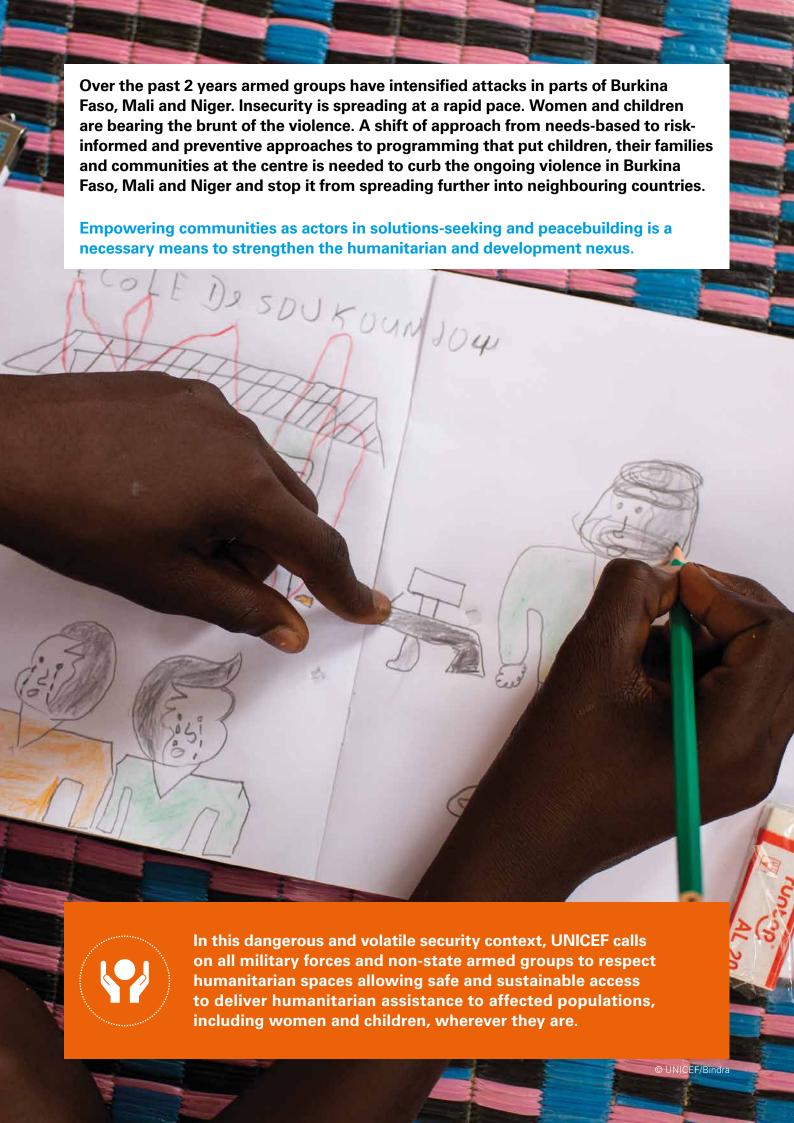
2016-17

2018-19



Source: Armed Conflict Location & Event Data Project (ACLED) 2 year window data; data filtered for security incidents include 'Battles' or 'Explosions/Remote violence' or 'Violence against civilians' according to ACLED definition.

The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by UNICEF.



Attacks and threats

on schools, students

and teachers

Education is a major challenge across the affected countries. Across the Central Sahel, attacks and threats on schools and against teachers and students are becoming more and more common, which further worsens the situation of children. In addition, COVID-19 is making the critical situation for children in the Central Sahel – particularly girls, displaced children and those living in the street – even worse.

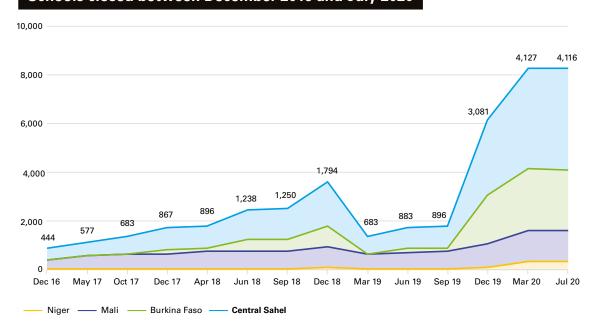
Since end of March 2020, schools have been fully or partially closed across all three countries to limit the spread of the coronavirus, affecting the education of millions of children temporarily out of school. Already in the region, 8.3 million children, 6-14 years, were out of school and out of reach for distance learning.²

Between April 2017 and July 2020, Burkina Faso, Mali and Niger witnessed a seven-fold increase in school closures due to violence. Before the governments closed all schools because of the COVID-19, 4,116 schools were

closed or non-operational as of July 2020, affecting almost 700,000 children and more than 19,000 teachers.³ The situation continues to worsen with increased violence around schools in the three countries.

26 direct attacks against schools and education personnel have been reported in July 2020. 5 schools were reportedly attacked and 13 burned down in Burkina Faso. In Mali, armed men detonated explosives in a school in Koro.⁴ Threats against schools, students and teachers have become a regular occurrence.

Schools closed between December 2016 and July 2020







Hussaini's story

Despite violence that destroyed his school and forced him to flee his home, Hussaini, 14, has been able to continue his studies through Radio Education in Northern Burkina Faso. The programme broadcasts lessons and works with trained facilitators, who provide students with guidance and support. Initially designed for children living in areas where schools are closed due to insecurity, the radio education programme expanded its target to reach more children affected by schools closed due to COVID-19. Children now temporarily out school because of the health crisis can continue learning outside their school environment, thanks to the radio.

"I was in class in my village. We heard screaming. Then people started firing guns. There was shooting everywhere. They shot at our teachers and killed one of them. They burnt down the classrooms. I was scared. I felt weak and lost. Then we just ran. I ran all the way home. My father said we have to leave, and so we did, all of us, my parents, grandparents, my sisters and brothers. We all escaped together to Gorom-Gorom. It took us four days walking day and night. We asked for water in villages along the way. I was frightened, very frightened. I used to love school, to read, to count, and to play during recess. It's been a year since I last went to school. One day when I was playing ball with my friends, some people approached us and said they were going to give us a radio to learn. It's good. All the family listens to the [radio] lessons now. There are lessons in Fulfulde, Songhai and Tamashek.

[The radio school focal point] 'Abdoulaye' helps us. He is like an older brother. The lessons teach us to read, write and do maths. I hope for peace, so that all children can go back to school again. Going to school is good, because then you can become an adult and help others. I want to be a doctor and cure other people, poor people. As a doctor I could help many.

I miss my village, my school. We had good teachers. I don't know where they are today."

In Burkina Faso, prior to schools closing because of COVID-19, 2,512 schools were closed or non-operational due to insecurity, depriving 350,000 children of their rights to education and affecting 11,200 teachers. From January to September 2020, there have been 354 security incidents, killing 579 civilians, including 30 children.

[Names changed]

"They shot at our teachers and killed one of them.

They burnt down the classrooms. I was scared."

Key asks: Education



UNICEF calls on governments, armed forces, non-state armed groups and other parties to the conflict and the international community to take concerted action to stop attacks and threats against schools, students, teachers and other school personnel – and to support quality learning for every child.



UNICEF calls on governments, communities and the private sector working together to increase efforts to provide education, protection and psychosocial support to children. All school-aged children, including refugees, migrants and displaced girls and boys must be able to continue learning through access to quality and safe education.



UNICEF calls on all parties to conflicts to protect education and uphold the principles of the Safe Schools Declaration⁵, which calls for stopping attacks on schools, education facilities and personnel. UNICEF calls for governments to endorse, implement and abide by the principles of the Declaration; work to create protective learning environments; and follow guidelines for protecting schools from use by military or non-state armed groups during conflicts.



UNICEF calls on governments and partners to diversify available options for quality education and formalize culturally suitable alternative learning pathways towards recognized qualifications. These alternatives can and should include innovative, inclusive and flexible approaches, responsive to learners' diverse needs.

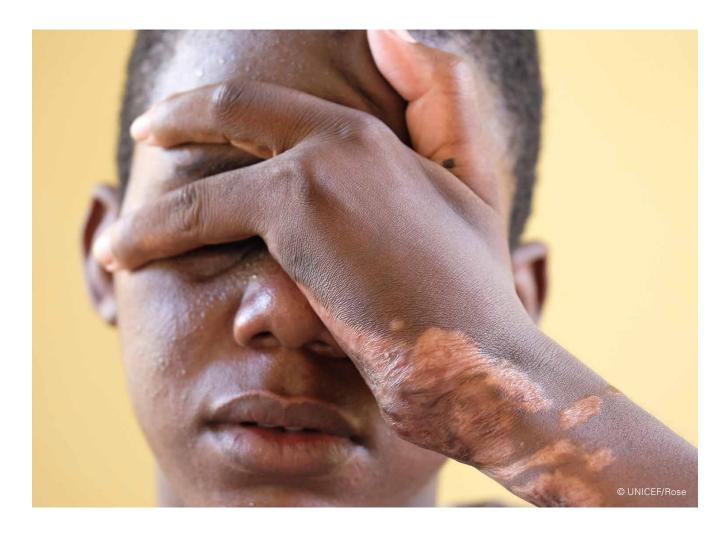
Child protection

This complex emergency is a crisis of children's care and protection. Children and their families fleeing conflict are at greater risk of violence, exploitation and recruitment by non-state armed groups.

In 2019, in Mali alone, 745 grave violations against children were recorded by the United Nations, including recruitment by armed groups, killing, maiming, rape and other sexual violence, attacks on schools and hospitals, abductions and denial of access to humanitarian services – the highest number recorded since 2017. As of June 2020, 553 incidents of grave violations against children were verified, a 29 per cent increase from the first semester of 2019 while 230 children associated with armed forces and groups were identified and provided with support. ⁶ Similarly, in Niger and Burkina Faso children

have been victims of abduction, killing, recruitment and use by armed groups.

The insecurity adds to the already significant chronic challenges children face in Burkina Faso, Mali and Niger. Rates of child marriage, economic exploitation or unsafe migration can increase during high levels of insecurity as protection or livelihoods survival strategies. This comes in addition to a significant increase of violence against children who are caught in the cross fire, thousands of them having been forcibly separated from their families, killed or maimed.



For families who have remained in conflict-affected areas, the situation of children is quickly deteriorating. Thousands of schools and other social services structures such as health centers and civil registration offices are either non-functioning or have been closed, leaving tens of thousands of children with little support and increasing their risk of child right violations including recruitment by armed groups.

For children who have been forcibly displaced, there is an increasing risk of separation from their caregivers, and of sexual and physical violence, exacerbating existing inequalities.

In already fragile host communities, the burden of forced displacement rapidly becomes more and more unsustainable. Adolescent girls are exposed to sexual abuse, child marriage or child pregnancy in addition to pre-existing gender inequalities – nearly 60 per cent of all girls are married before the age of 18, with the highest prevalence in the world in Niger at 76 per cent and over 28 per cent of all girls are married before the age of 15.7

Boys and girls may also suffer additional violence and abuse. Already 8 in 10 children across the three countries have experienced violence, and nearly 40 per cent of children are engaged in child labour.⁸



COVID-19 economic and physical restrictions have impacted humanitarian assistance and household income and security. As a result, violence against children has been on the rise. A survey in the Est, Nord and Sahel regions in Burkina Faso found that 32 per cent of children perceived an increase in domestic violence against girls and boys as a result of confinement at home.⁹

With COVID-19, children outside of family care are particularly vulnerable. At least 1,200 children are in residential care, including children in foster care and orphanages, and nearly 2,000 children are in detention in the Central Sahel. Children in institutions often live in congested and unhygienic conditions, and sometimes in environments that are prone to abuse and violence.

With measures to limit and control displacements as part of the COVID-19 responses, children living and working on the street have lost their meager source of living and been put at risk of detention, violence and abuse, including at the hands of the security forces.

COVID-19 has also had an impact on birth registration services, at a time when, across Burkina Faso, Mali and Niger, nearly 3 million children under 5 have not had their births registered.¹¹ Without a legal identity, children are at greater risk for recruitment into armed groups and may not have access to education, health, and other basic social services.





Haua and Zeinabou

COVID-19 has deepened the crisis facing unaccompanied young people in Niger.

Zeinabou and her sister Haua, 17, left their family behind when they travelled to Algeria. But after months of living on the streets and sheltering in cramped conditions with other migrants, they were repatriated in Agadez, Niger, where Haua gave birth to a son.

Growing attacks on civilians, natural disasters, health emergencies and poverty are the issues prompting young people and their families to flee crisis-ridden areas. However, the challenges they face on their perilous journeys are numerous: detention, human trafficking, sexual exploitation and discrimination.

Haua and Zeinabou's father, Issa, explains he had no choice but to send them to Algeria in search of a better life. "I fell sick. The drought hit the harvest on the farm...If we had enough to cover the family's basic expenses and my medicines, I would never have decided to send my daughters away," he says. "I lost two of my children during the famine of 2005. I don't want that to happen again."

Once the trade capital of West Africa, Agadez today is the gateway to the Sahara Desert, a hub for smugglers and human traffickers who prey on unaccompanied children and young people desperate for food, shelter and security. Many of these children have fled instability and uncertainty, only to face dehydration and starvation, extortion, torture, sexual violence, exploitation and forced labour along their journeys.

The number of young people passing through Agadez was already on the rise. COVID-19 and border closures have increased the vulnerabilities of young migrants, placing specific groups of children at even greater risk of harm.

Shortly after the first cases of COVID-19 were reported in the region, more than 7,400 talibé children – children who attend Koranic schools – were sent back to Niger from Nigeria following the closure of Koranic schools due to COVID-19. During the same period, 375 migrant children were repatriated from Libya and Algeria.

"If we had enough to cover the family's basic expenses and my medicines, I would never have

decided to send my daughters away."



UNICEF calls on all states to protect children in the Sahel, abide by their obligations under international law and to immediately end violations against children. UNICEF also calls on states with influence over parties to conflict to use that influence to protect children.

Children on the move

Through a regional project for the protection of children on the move, funded by the United Kingdom government Department for International Development (DFID), UNICEF works with the International Organization for Migration (IOM) and other partners to provide a continuum of care and protection in countries of origin and during transit, through one-stop social welfare shops, mobile teams, decentralized child protection services, and community networks for identification and referral.

Mental health and youth resilience in Central Sahel

Forced displacements, violations, attacks on social services such as schools or health facilities, and the stress generated by the COVID-19 pandemic call for new approaches and a comprehensive response in addressing the psychological distress generated in children and their caregivers in the Central Sahel.

In Burkina Faso and in Mali, new strategies, such as the establishment of mobile teams to conduct psychosocial activities within the communities, have been adopted to overcome security threats while increasing the number of children reached. From January to July 2020, UNICEF and its partners have provided psychosocial first aid to more than 300,000 girls and boys, a 166 per cent increase compare to the same period in 2019.

Further to community approaches, other strategies that promote and support the integration of psychosocial support into other social sectors such as education and health must be scaled up to respond to the unprecedent needs and challenges, including those face by social workers.

The use of innovative tools such as the Adolescent Kit for Expression, already implemented in Nigeria, can help to provide a safe space, tools, supplies and activities for adolescents aged 10-18. In particular, those who are affected by humanitarian crises are helped to express themselves, cope with difficult experiences, solve real problems, and explore new ideas. In the process, adolescent girls and boys develop key competencies and new skills that help them to cope with stressful circumstances, build healthy relationships, and engage positively with their peers and communities.

Key asks: Child protection



Children associated with armed forces and non-state armed groups are first and foremost victims of recruitment, a violation of their rights. Children who have been arrested because of their association with an armed group must be transferred to the care of relevant civilian authorities as quickly as possible to facilitate their return to their families and communities. UNICEF calls on governments and security forces to respects children's rights, avoid detention or use it as a measure of last resort and only within the framework of internationally accepted standards for child justice.



During a humanitarian crisis, the vulnerability of children, especially girls, to sexual abuse increases dramatically, due to weakened public and community protection services as well as children's increased dependence on adults for survival. With COVID-19 restrictions, children's opportunity for support has diminished. UNICEF calls on governments to assist all survivors of sexual abuse and gender-based violence with services that are timely and sensitive to their needs. This includes age-and sex-appropriate medical care, psychosocial support, legal assistance as well as opportunities for livelihoods and life skills education.



With insecurity and forced displacement on the rise, children are at risk of being separated from their families. UNICEF calls on governments and their partners to ensure that families are kept together, and children are rapidly reunified with their parents or provided with safe alternative family-base care based on their best interests. When children are separated or unaccompanied, decisions affecting their return, reintegration in their communities, and family reunification must be based on durable care arrangements in the best interests of the child.



Women and children without legal documents are at greater risk of rights violations and their access to social services is further limited; civil registration is the first step to recognizing the legal existence of children and protect their rights. It is essential to strengthen civil registration systems and provide birth certificates so that children have an identity and can access services.

The disruption of

basic social services

Access to basic services, including health care, nutrition, education, safe drinking water and other social services has been seriously compromised, impacting all aspects of children's lives – their safety, health and wellbeing. Displaced children and their families are being hosted in communities that even before the crisis had limited access to social services, putting a further strain on these communities. COVID-19 has had a significant impact on access to social basic services.

Health

Many children continue to miss out on routine immunization because of armed violence and insecurity, which damage and weaken health systems, disrupt the delivery of routine health care and divert scarce human and financial resources from health to security priorities.

When displaced women and children, and host communities do not have access to basic health services, or clean water and sanitation, it increases their risk of infectious diseases including acute respiratory infections, diarrhea, malaria and measles – all leading causes of child mortality.

In addition, the COVID-19 pandemic is severely impacting health services for mothers, newborns and children. In the three countries, the coverage for important childhood vaccines has already dropped – Penta 3 coverage, for example, has decreased by 3 per cent during the first half for the year compared to the same period in 2019, leaving 38, 626 additional children unvaccinated. The halt of polio campaigns and the significant decrease in routine immunization activities leave the population with a lower immunity against poliovirus in all three countries.

Burkina Faso Health

As of August 2020



95

health structures are closed, and 199 are working with minimum operations, up from 113 in December 2019¹³



1.2 million

people affected by health structure closure



Nutrition

In the Central Sahel, the nutrition situation of children under-5 and mothers is of serious concern, especially in a context of conflict, endemic poverty, high incidence of childhood illnesses, fragile health systems, and household food insecurity.

7.4 million people were projected to face food insecurity in this year's lean season (June-August 2020) in the Central Sahel, an increase of 3.4 million from the March-May 2020 projections.14 Prior to the COVID-19 pandemic, experts had estimated that 2.3 million children under-five were at risk of acute malnutrition in the Central Sahel in 2020, with one third at risk of its most severe form. A recent UNICEF/WFP joint analysis¹⁵, which took into account the increased food insecurity and the socio-economic impact of COVID-19, concluded that the number of children, 6-59 months, to suffer from global and severe acute malnutrition in 2020 could rise by a further 21 per cent in the Central Sahel countries. This would bring up the total number of malnourished children in the three countries to 2.9 million, including 890,000 children at risk of severe acute malnutrition.

Given the fragility of health and food systems, UNICEF anticipates that COVID-19 will further worsen all underlying causes of malnutrition including household food insecurity, child caring practices, access to water and hygiene. This will in turn put children at a high risk of death or, for the children who survive, poor growth, development and learning.

The final report of the Rapid Nutrition SMART survey that was carried out in July 2020 in communes of Burkina Faso that host large number of IDPs (Communes of Barsalogho, Djibo, Arbinda, Kaya, Matiacoli, Titao and IDPs site of Barsalogho) showed a worrying trend compared to the previous survey carried out in October 2019. The mortality situation in Djibo, Gorgadji and Barsalogho is on the verge of emergency, with mortality rates that exceed the alert threshold.¹⁶

In this context of complex crisis, nutrition interventions must respond to emergency humanitarian needs, without neglecting preventive interventions, which are essential for tackling to eliminate the underlying causes of malnutrition.

UNICEF strives to offer an integrated and multi-sectoral package for the prevention and care of malnutrition in young children and mothers through:

- 1. accelerating efforts towards the prevention of malnutrition;
- ensuring the early detection and treatment of malnutrition when prevention fails;
- 3. strengthening systems to deliver critical and multi-sectoral actions at all times;
- 4. empowering communities, families and caregivers to be part of the solution.

This is why UNICEF and WFP renewed their partnership to support the implementation of an integrated package of care with an emphasis on scaling-up prevention to reduce the number of children becoming malnourished.



The multisectoral approach focuses on strengthening systems (including health, WASH, food and social protection) and communities with the objective of long-term impacts. In 2020, all countries in the Central Sahel are scaling-up the use of mother/family middle upper arm circumference (MUAC) tapes to monitor and detect malnutrition. In Burkina Faso alone, over 45,000 caregivers have already been trained this year. In Burkina Faso and Mali, programmes to deliver treatment though community health workers, in collaboration with the government

and implementing partners, are being expanded. In the most remote areas, Community Health Workers are also mobilized to provide advice on optimal feeding practices for infants and young children, including in emergency situations.

UNICEF works with partners to accelerate the implementation of simplifications and adaptations for the detection and management of severe acute malnutrition so no child suffering from this deadly condition is left untreated.



Water, Sanitation and Hygiene (WASH)

Provision of safe WASH services is a key strategy to support both the treatment and prevention of undernutrition. A research conducted in Mali¹⁷ has shown that communities with increased access to sanitation had the prevalence of stunting reduced by 22 per cent. Another research in Niger has proven that improving WASH at household level would reduce the time of treatment of severe acute malnutrition in children and ease their recovery. In the Sahel, UNICEF works to better integrate WASH and Nutrition programming.

Unfortunately, displacement and increased insecurity have disrupted access to water, sanitation and hygiene (WASH) services and slowed down investment in already limited WASH infrastructures.

The sharp increase in displaced populations during 2019 and insecurity have placed WASH infrastructures in host communities under pressure. Within a year, the number of people in need of WASH humanitarian assistance has almost doubled, reaching a total of 6.7 million by end of June 2020.¹⁸

In Mali, in the northern and central regions that hosts the majority of displaced populations, less than 60 per cent of the

population has access to water, with almost one person in two without access to water in the Gao and Kidal areas.¹⁹

In Burkina Faso, the need for WASH increased by more than 300 per cent from 2019 to 2020²⁰ in the current COVID-19 context where washing hands is one of the key prevention measures to reduce the spread of the virus.

Inadequate water, sanitation, and hygiene practices threaten the development and survival of children. Without safe water, sanitation and hygiene children's health and nutrition are compromised, and they are exposed to preventable diseases including diarrhea, typhoid, and cholera. This overall degradation in the access to WASH services contributes directly to disease and even death: the mortality rates attributed to unsafe WASH services (per 100.000 inhabitants) are very high in both Niger and Mali (70/100.000), and high in Burkina Faso (49.6/100.000), seven and four times the global average, respectively.

Accelerated climate change effects are causing water points to dry-up, and yearly floods are regularly damaging WASH infrastructure.

Building resilience in the Sahel

With funding from the German Federal Ministry of Economic Cooperation and Development (BMZ) and alongside WFP, UNICEF is working with communities in Burkina Faso, Mali and Mauritania to become more resilient to shocks including drought, floods, conflict and epidemics. Through this project, UNICEF works with host country governments to provide water, sanitation and hygiene services, improve access to protective learning environments, promote and reinforce social cohesion, prevent and treat malnutrition. In addition, social protection services in underserved, insecure and vulnerable areas will be strengthened to benefit 1.8 million people.

Adama's story

Adama Traoré lives in the village of Sadiola, in the Kayes region, in western Mali. He has been working as a vaccinator in the community health centre of Sadiola for more than 10 years. He decided to become a vaccinator to improve the health of the children in his community. Adama services children at the gold mines of Massakama near the border with Senegal, and over 100 km motorcycle ride from his home.

"We are in a gold mine area, and many families work and live here, with their children completely isolated and deprived of any care."

More than 2,000 people, including families with children, live at this site every day. There is no school here and no health centre anywhere nearby. With no other options, many of the children here work on the site, deprived of their rights to protection, education, survival and development.

At 7:30 a.m., Adama leaves his house to go on his first stop at the Sadiola community health centre. Once there, he picks up his motorcycle and continues his way to his second stop at the Kobokotossou community health centre to pick up the vaccines before heading to Massakama.

With partners' support, UNICEF has equipped this centre with a solar fridge to keep vaccines at a consistent temperature.

"Adama is doing a great job," says the village chief of Massakama. "Here, parents spend their days looking for gold and do not finish until very late. Without this mobile vaccination activity, most of them will never be able to vaccinate their children."

UNICEF and partners such as Gavi, the Vaccine Alliance, and WHO support governments, bringing healthcare including vaccines as close to children's homes as possible – leveraging both innovative and traditional means to bringing critical health services to children most in need.

"We are in a gold mine area, and many families work and live here, with their children completely isolated and deprived of any care."



Key asks: Social services



With the spread of COVID-19, more must be done to protect the continuity of essential social services for women and children. Investing in social services also means investing in the people who deliver them – teachers, health workers, social welfare officers and volunteers. In accordance with international human rights and international humanitarian law, UNICEF urges all parties to protect medical and educational facilities and frontline workers.



UNICEF calls on governments to increase or at least maintain national commitments to budgets for social service budgets. As the conflict worsens, attention has been oriented to the security dimensions. Cutbacks on investment for social services have a direct impact on access to basic services including education, health, nutrition and water and sanitation. The increase in security allocation will constrain governments' abilities to include and maintain the cost of treatment for severe acute malnutrition, vaccines and essential services into national health budgets.



While responding to urgent needs, UNICEF calls on governments and their partners to invest in durable solutions for the prevention and care of malnutrition including promoting the availability, access and use of nutritious, safe, affordable and sustainable foods. Optimal infant and young child feeding practices including exclusive breastfeeding in the first six months of life and good dietary practices for children, adolescent girls, pregnant and lactating women must be prioritized. Working with communities to detect growth faltering and early signs of malnutrition is critical.



UNICEF calls on governments to strengthen and expand social protection mechanisms, such as cash transfers programmes, to help vulnerable families meet their immediate needs and provide food, school and health care for their children. These mechanisms must be embedded within national social protection systems and designed to be adaptable and responsive to shocks.



A mother holds her 14 month old baby girl, at the health centre in Ouagadougou, Burkina Faso.

The baby was admitted at the health centre for treatment of malnutrition with complications.

Originally from a village in the Sahel Region, the family was forced to move to Arbinda after their village was attacked by assailants who stole villagers' goods and animals. They spend 8 months in Arbinda before moving to Ouagadougou.

"Life was tough [in Arbinda]. There was no water, no food, and we had lost everything we owned. So, we decided to move to Ouagadougou. Our usual diet is leftover cereal paste in the morning, some rice or beans for lunch and cereal paste in the evening.

Before, [in our village] we used to eat well; we had a vegetable garden where we grew different vegetable and rice. I also raised poultry for meat. We haven't farmed since we left our village. Life is difficult because we don't know how to live in a city, and our conditions are difficult."

While responding to urgent needs, UNICEF calls on governments and their partners to also invest in durable solutions for the prevention and care of malnutrition including promoting the availability, access and use of nutritious, safe, affordable and sustainable foods, and to strengthen existing social safety net programmes to protect vulnerable families.



Investing in communities, families, and young people to build their resilience to mitigate the impact of crisis and strengthen their capacity to build a long-term sustainable future for themselves, will foster social cohesion and contribute to protecting peace in the Sahel.



"Water makes us beautiful"

With the construction of a new water point, life in a village in central Mali has been transformed.

A sizeable crowd has gathered near the school in Dialangou village, and for a very good reason: water is flowing out of a brand-new manual pump.

Clean water is a rare resource in these parts. Here in the Mopti region of Mali, the weather has become extreme, with droughts alternating with flooding at increasing frequency. Rains are irregular, leading to poor harvests, rising food prices and food insecurity. When floods occur, roads are washed out and villages are cut off entirely from larger towns and the social services they offer.

But climate change is not the only issue faced by families here. A sharp increase in attacks and violence in the region over the past two years has fueled a displacement crisis.

While nearly 80 per cent of people in Mali now have access to clean drinking water, it is a different story in hard-to-reach rural areas, including the tiny hamlet of Dialangou. Flooding can destroy water supplies, leave behind contaminated water and make it particularly difficult to bring in construction equipment to build new infrastructure.

In addition, in areas affected by the conflict, internal displacement can limit families' access to drinking water, while also putting additional strain on the water supplies of host communities. Before the construction of the new pump, Dialangou's water supply consisted of three boreholes equipped with human-powered pumps, but the quantity of water wasn't nearly enough for its constantly growing population, and the old pumps were far from the village.

The result was that villagers often resorted to fetching stagnant, unclean water at a nearby pond, leading to the spread of water-borne illnesses like diarrhoea among children in the village. Other villagers walked up to 45 minutes to get to the nearest pump, which in the case of girls in particular hampered their education.

Fatoumata Lobbo Bocoum, a 13-year-old student, remembers how she would wait patiently next to the faraway pump for water to arrive, at times at the expense of her school day. "We sometimes missed school lessons, or even entire school days, when the pump was broken."

The installation of the pump near her school has transformed her life. "Water makes us so happy! We even have a borehole at school," she says. Laughing, she adds: "Water makes us beautiful!"

Her neighbour Fanta Diarra, is just as joyous. "We've stopped going to get water at the pond," she says. "The water from the pump is of much better quality. No matter what, it always comes out clean and clear!"

In Mali, UNICEF is scaling-up the rehabilitation and construction of human-powered and solar-powered water supply infrastructures that provide water to communities, schools and health care centres. UNICEF is taking a risk-informed programming approach to support WASH climate-resilient services that are better prepared when natural hazards strike.

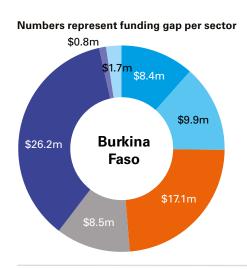


UNICEF calls on all stakeholders to expand investments in riskinformed programming to help ensure that education, health, child protection and WASH systems (including facilities and services) are sustainable and resilient to climate-related risks and contributes to building community resilience to climate change.

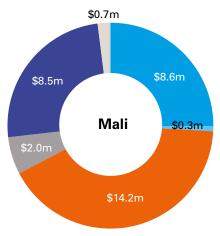
2020 funding requirements

UNICEF needs US\$ 210.7 million to provide essential education, child protection, health, nutrition and WASH services to the most vulnerable children and strengthen emergency preparedness. In addition, US\$ 65.7 million are needed to make UNICEF programmes in the Central Sahel resilient to COVID-19. Only 31 per cent²¹ of funding has been received for UNICEF humanitarian programmes in Burkina Faso, Mali and Niger, and 57 per cent²² for our response to the COVID-19 pandemic.

For further information on funding needs please visit https://www.unicef.org/appeals/



Sector	2020 requirements (US\$)	Available	% Gap
Nutrition	17,315,100	8,943,566	48%
• Health	10,281,116	387,779	96%
Water, sanitation and hygiene	25,263,857	8,209,407	68%
Child protection	11,228,787	2,774,054	75%
Education	27,727,668	1,519,362	95%
 Rapid response management and implementation 	3,050,000	2,258,751	26%
Communication for development	1,800,000	62,885	97%
Total	96,666,528	24,155,804	75%



Sector	2020 requirements (US\$)	Available	%Gap
Nutrition	20,500,000	11,925,423	42%
Health	1,600,000	1,340,307	16%
Water, sanitation and hygiene	14,400,000	236,704	98%
Child protection	4,850,000	2,845,943	41%
Education	9,000,000	531,026	94%
Cluster coordination	1,500,000	817,200	46%
Total	51,850,000	17,696,603	66%



Sector	2020 requirements (US\$)	Available	%Gap
Nutrition	26,460,000	12,249,455	54%
Health	1,410,000	443,400	69%
Water, sanitation and hygiene	9,103,000	2,274,955	75%
Child protection	4,212,000	1,415,933	66%
Education	12,635,000	998,775	92%
Non-food items/shelter	7,183,000	4,275,129	40%
Cluster/sector coordination	1,188,000	1,101,067	7%
Total	62,191,000	22,758,714	63%

References

- Revised 2020 HRP Burkina Faso, August 2020. Revised 2020 HRP Mali, July 2020. Revised 2020 HRP Niger, July 2020.
- 2. Burkina Faso DHS 2010, Niger DHS 2012, Mali MICS 2015.
- Across the three countries, the number of schools closed or non-operational increased from 512 in April 2017 to 4,116 schools in July 2020. Ministry of Education and Education Cluster, July 2020: Burkina Faso, Mali, Niger.
- 4. Cluster / Education in Emergency Working Groups and Ministry of Education, MRM task force in Mali.
- The Safe Schools Declaration is an inter-governmental political commitment to protect students, teachers, schools, and universities from the worst effects of armed conflict. https://ssd. protectingeducation.org/
- 6. UN verified information.
- 7. DHS, 2012, Niger.
- 8. UNICEF Strategic Monitoring Questions, 2017.
- Rapport d'Enquete aupres des Enfants dans les Regions de l'Est, du Nord et du Sahel, CPAoR, June 2020.
- 10. UNICEF Strategic Monitoring Questions, 2017.

- 11. UNICEF Global Databases, MICS/DHS (2010-2018).
- 12. Routine data collected by Ministries of Health in Burkina Faso, Mali and Niger, June 2020.
- 13. Health Cluster Bulletin n.3, December 2019.
- Burkina Faso Cadre Harmonise, June 2020 Update; Mali Cadre Harmonise, March 2020; and Niger Food Security Cluster Update, July 2020.
- 15 UNICEF-WFP Joint Call for Action, Acting Now to Avert a Nutrition Crisis in the Sahel region across West and Central Africa, July 2020.
- 16. More than 1 death / day / 10,000 children.
- 17. Amy J Pickering, The Lancet, Volume 3 November 2015.
- 18. BIS (Study in Niger): Peter Maes, PLOS-ONE, Volume 7, Novembre 2012.
- 19. Revised Humanitarian Response Plans from Mali, Niger, Burkina Faso.
- 20. Cluster WASH Mali.
- 21. UNICEF HAC Funding Status, Burkina Faso, Mali and Niger, 31 July 2020.
- 22. UNICEF COVID-19 Funding Status, Burkina Faso, Mali and Niger, 9 September 2020.

UNICEF's Regional Office for West and Central Africa is a hub for information, technical expertise and coordination in support of country offices across the region's 24 countries. Our advisors and specialists help to advance programmes and policies in health and nutrition, child protection, HIV and AIDS, education, water and sanitation, early childhood development, social policy, and emergency response and preparedness. The regional office advocates for investment in children and child-centred policies in West and Central Africa. Guided by the Convention on the Rights of the Child, we work with international, regional and national organizations across the region to accelerate progress towards the UN Sustainable Development Goals and the African Union Agenda 2063. Published by United Nations Children's Fund Regional Office for West and Central Africa Dakar, Senegal October 2020

www.unicef.org/wca

f У @ □ @unicefafrica

© UNICEF/Vincent Tremeau



