



Zimbabwe

Humanitarian Situation Report July - September 2017



SITUATION IN NUMBERS

Highlights

- UNICEF and partners have screened 233,950 children for acute malnutrition and provided lifesaving treatment for severe acute malnutrition (SAM) to 7,822 children aged 0-59 months since January 2017.
- UNICEF has provided 219,859 children aged 6-59 months with Vitamin A Supplementation (VAS) since the beginning of 2017, including 53,290 children since July 2017.
- The child protection sector reached a total of 13,980 children affected by drought and flooding with child protection services focusing on psychosocial support, alternative care and reunification of Unaccompanied and Separated Children (UASC) with their families and supporting recreational activities through Child Friendly Spaces since January 2017.
- A total of US \$1.2 million dollars was received from USAID (OFDA) during the month of July 2017 to support drought recovery interventions in the WASH and Nutrition sectors.

UNICEF Results with Partners 2017

UNICEF's Results with Partners 2017	UNICEF Target	UNICEF Results
WATER, SANITATION & HYGIENE		
# of people in humanitarian situations accessing water for drinking, cooking and personal hygiene	400,000	341,998
HEALTH		
# of children with diarrheal diseases having access to life-saving curative interventions, including oral rehydration therapy and zinc	85,000	57,121
# of children in humanitarian situations vaccinated against measles	105,939	80,311
NUTRITION		
# of children in humanitarian situations aged 0 to 59 months affected by SAM who are admitted for treatment	14,873	7,822
EDUCATION		
# of children aged 3 to 18 years in humanitarian situations accessing formal or non-formal basic education	25,000	12,500
CHILD PROTECTION		
# of children in humanitarian situations accessing appropriate care and service	35,000	13,980
HIV/AIDS		
% of children under 5 (of unknown or negative HIV status) with SAM admitted in therapeutic feeding programmes tested for HIV	70%	57%

1.1 million

People are projected to be food insecure during the peak hunger period (January-March 2018)

(ZimVAC report, July 2017)

7,822

Children aged 0-59 months with SAM from 20 drought-affected districts admitted and treated in the IMAM program as of 30th

August 2017

(DHIS, August 2017)

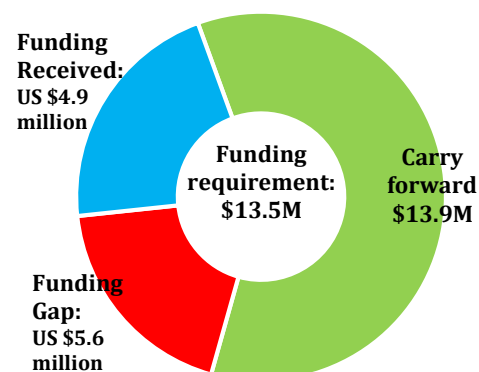
2,531

Cumulative typhoid cases comprising 2,448 suspected, 83 laboratory confirmed and 6 reported deaths

(MOHCC, September 2017)

UNICEF Zimbabwe 2017 Humanitarian Requirements

US \$13.5 million



*Funds available includes funding received for the current appeal year as well as the carry-forward from the previous year.

Situation Overview & Humanitarian Needs

The ZimVAC Rural livelihoods assessment report of July 2017 projected a food insecurity prevalence rate of 11 per cent during the peak hunger period (January to March 2018), down from 42 per cent during the same period last year. Approximately 1.1 million rural people are estimated to be food insecure during the January – March, 2018 peak hunger season down from 4.1 million people who were food insecure during the same period last year.

The assessment also reported a national Global Acute Malnutrition (GAM) prevalence of 3.2 per cent as shown in figure 1 below, as compared with the GAM prevalence reported at the same time in 2016 which was 4.4 per cent, (ZimVAC, July, 2016). Matabeleland North had the highest prevalence of GAM (5.2 per cent). There was a significant decrease in GAM prevalence in Mashonaland West, from 6.7 per cent in 2016 to 2.1 per cent in 2017. The reduction in GAM rates is associated with the support and implementation of drought response programmes focusing mainly on Agriculture and food security, Nutrition, Water Sanitation and Hygiene (WASH) and Social Protection sectors implemented by the Government, UN Agencies, Non-Governmental Organisations (NGOs), Donor Agencies and the Private sector. The improved harvests also contributed to a reduction in the GAM rates. More cases of acute malnutrition are expected during the period October 2017 to March 2018. Nutrition treatment commodities have been prepositioned in high risk districts to enable a timely and effective response to any increased cases of malnutrition.

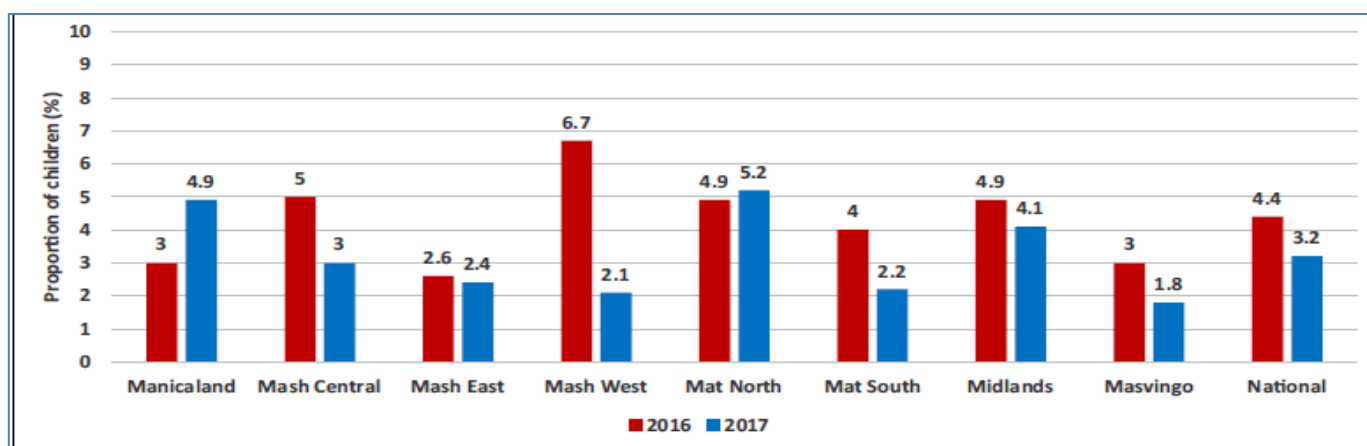


Figure 1: GAM Prevalence-ZimVAC-July, 2017

During the period July to September 2017, four new confirmed typhoid cases were reported from Harare and Hurungwe district in Mashonaland West province. In 2017, 2,531 suspected typhoid cases have been registered out of which 83 were laboratory confirmed with six typhoid related deaths reported (CFR 0.23 per cent). No cholera cases were reported during the period (July to September) under review. The national dam storage levels decreased by 18.7 percent from 94 percent recorded in June 2017 to 76.4 percent reported on the 11th of September 2017 due to various abstraction interventions for domestic water supply and irrigation purposes. According to the Zimbabwe National Water Authority (ZINWA) report, the decrease in dam levels will not impact negatively on the water security in the country. Provincial dam storage levels are above 50 per cent and have adequate water reserves up to the next runoff season.

Humanitarian leadership and coordination

The Government of Zimbabwe is leading the coordination of the WASH, Child Protection and Nutrition sectors with the support of UNICEF. During this reporting period, the nutrition sector continued to collaborate with the Ministry of Health and Child Care (MoHCC) and the National Nutrition Technical Working Group in coordinating the nutrition emergency response. A total of six National Nutrition Technical Coordination meetings and eleven weekly Emergency Nutrition Coordination Meetings were held at national level to date. Some of the outcomes of the coordination meetings include the formation of a task force that supported the revision and finalization of the Integrated Management of Acute Malnutrition (IMAM) guidelines and the standardization of the protocol that has been used to conduct SMART surveys in the country. The HIV/Nutrition integration task force facilitated the revision and updating of nutrition/HIV guidelines and the training package that will be used to cascade trainings at district levels. UNICEF continues to support coordination of the flood emergency and drought recovery programmes at national and sub-national levels through the WASH Sector Information and Coordination Forum (WSCIF) and the Provincial and District Water and Sanitation Sub Committees. The support includes a budget to support sectoral field monitoring activities and coordination. Through UNICEF support, a total of 11 national level WASH Sector Coordination meetings were held; 3 WASH sector Coordination and Information Forum (WSCIF) meetings and 8 Emergency Strategic Advisory Group (E-SAG) meetings. The Child Protection sector is focusing multi-sectoral linkages with the Education, Nutrition and WASH sectors through supporting awareness on mainstreaming Child Protection in Emergencies.

Humanitarian Strategy

UNICEF continues to work with the Government, UN Agencies and NGOs to provide access to critical and life-saving health and nutrition, WASH, education, child protection, social protection and HIV/AIDS services. UNICEF is implementing emergency and recovery programmes in food and nutrition insecure districts and flood affected districts. The response is being implemented alongside other ongoing development programmes in an effort to enhance sustainability and link humanitarian interventions with recovery and resilience building programmes.

UNICEF and partners are supporting the MoHCC in providing improved access to life-saving essential Health, Nutrition and WASH services through strengthening community-based management of acute malnutrition programmes through training of health workers, provision of critical WASH and Health and Nutrition services, coordination, monitoring and supervision. To ensure quality of nutrition prevention services, UNICEF and partners are strengthening the Infant and Young Child Feeding (IYCF) component through training of Village Health Workers on IYCF, reaching caregivers through counselling and supporting access to Vitamin A supplementation for 70 percent of children aged between 6-59 months. UNICEF is supporting the Ministry of Public Service Labour and Social Welfare (MOPSLSW) to strengthen child protection services to protect the most vulnerable children, particularly girls, from violence, abuse and exploitation. Children, adolescents, pregnant and lactating mothers on antiretroviral treatment (ART) are being supported through advocacy for an HIV sensitive health and nutrition programme and are being provided with care and treatment. In addition, increased support is being provided to strengthen HIV testing in IMAM services for children under 5 years, to identify children living with HIV to initiate treatment early and enhance recovery and reduce HIV related morbidity and mortality.

Summary Analysis of Programme response



Nutrition

Since January 2017, UNICEF and partners have trained 3,965 of the targeted 4,345 Village health workers (VHWs) in the 20 priority districts on active screening. The VHWs have in turn screened 233, 950 children under five (69 percent) out of the targeted 340,863 children; for acute malnutrition (DHIS, 2). Out of the screened children a total of 2,484 (1,070 males; 1,414 females) were found to be severely malnourished and admitted for treatment in the months of July and August, 2017. A total of 7,822 children (3,452 males; 4,370 females) were admitted from January to August. Due to the multi-sectoral response efforts on IMAM programming by the Government, UNICEF and Partners the IMAM performance indicators have improved from a cure rate of 70 percent during the period (January to June 2017), to a cure rate of 76 per cent during the period (July and August 2017). The death rate in the IMAM program remains within the acceptable SPHERE standards at less than 3 per cent.

UNICEF and partners have finalized the update of the Country IMAM Protocols and trained 401 health workers on IMAM in July and August to strengthen quality of the nutrition programme. A total of 973 health workers have been trained on IMAM in the 20 priority districts to date, of which 109 health workers have been trained on data management. Additionally, 1,509 VHWs participated in a 5-day training on Community, Infant and Young Child Feeding (c-IYCF) in July and August, bringing a total of 2,569 VHWs trained on c-IYCF to date out of a target of 2,160. All trained VHWs were supported with IYCF counselling cards and key messages booklets. The trained VHWs reached 4,986 caregivers with IYCF key messages in July and August, making a total of 59,238 caregivers out of a target of 72,000 reached with key messages by end August. In relation to micro nutrient supplementation, 91 percent (219,859 out of 240,051) children aged 6-59 months (113,498 girls and 106,361 boys) were reached with the first dose of Vitamin A Supplementation (VAS) in the first semester (January –June 2017). During the second semester, a total of 53,290 children aged 6-59 months (27,353 girls and 25,937 boys) received the second dose of Vitamin A supplementation during the period July to August 2017, across the 20 priority districts. To date, 22 percent of the targeted 240,051 children aged 6-59 months have received the recommended two doses of Vitamin A supplementation (VAS).

The program ensures a linkage between HIV testing and treatment of children admitted with SAM. During the reporting period, an additional 1,323 children with SAM were tested for HIV in July and August, making a total of 4,448 (57 per cent) of the children admitted to date, who have been for tested for HIV. A total of 321 (7 per cent) of the children tested positive for HIV as shown on table 1 below and were all referred and initiated on anti-retroviral treatment.

Table 1: Total number of children with SAM admitted in the CMAM program, tested for HIV in the 20 high risk districts as of August 2017.

District	Infants less than 6 months		Children 6-59 months			
	Admissions 0-5 months	Total HIV Tested 0-5 months	0-5 months HIV+	Admissions 6-59 months	Total HIV tested 6-59 months	6-59 months HIV+
Gokwe North	33	18	0	698	608	19
Gweru	20	10	5	417	238	47
Umguza	12	10	1	414	159	5
Binga	15	6	0	182	119	5
Hwange	14	0	0	224	50	5
Makonde	19	8	1	407	212	25
Chegutu	17	6	0	452	256	26
Kariba	2	0	1	47	25	2
Mangwe	5	5	0	305	248	7
Matobo	19	3	0	281	94	5
Gwanda	18	15	1	166	103	14
Shamva	36	5	1	740	491	26
Bindura	26	23	0	279	113	9
Mount Darwin	6	6	0	372	299	21
Guruve	9	2	1	354	228	21
Mwenezi	9	7	2	186	71	13
Chipinge	34	8	2	517	324	17
Chimanimani	85	12	1	556	143	8
Buhera	14	6	15	668	411	9
Nyanga	2	2	0	162	104	6
Total	395	152	31	7,427	4,296	290



Water, Sanitation and Hygiene (WASH)

UNICEF continued to support the Government of Zimbabwe and partners in responding to the effects of the drought and flooding, in affected parts of the country to reduce morbidity and mortality from diarrheal diseases. During the reporting period, an additional 94,024 people were reached with safe water, giving a cumulative total of 341,998 people since January 2017. These were achieved through the repair of 891 boreholes, rehabilitation of 21 piped water schemes (solar powered) and drilling of 52 new boreholes in drought, flood and typhoid affected areas. An additional 140,557 people received key health and hygiene education resulting in a total reach of 453,334 people since January 2017. Furthermore, 65,744 households received Non Food Item kits (comprising of 20L buckets with lid and tap, 20L jerry cans, 1kg bars of all-purpose soap, household water purification chemicals and IEC materials) by September 2017. The implementation of the emergency WASH activities followed the Rural WASH development programme coordination and implementing structures, which have proven to be effective in ensuring sustainability, rapid deployment and roll-out of the WASH emergency programme.



Education

UNICEF continued to support the Ministry of Primary and Secondary Education in responding to the impacts of flooding on the Education sector. Through support from the Central Emergency Response Funding (CERF) a total of 27 schools in 5 flood affected districts namely Tsholotsho, Hwange, Bubi, Masvingo and Gokwe North received grants for light rehabilitation of damaged classroom and sanitation infrastructure. Light rehabilitation of damaged infrastructure has resulted in improved access to safe learning spaces, furthermore, a total of 12,500 children (6,503 girls and 6,002 boys) received teaching and learning materials which comprised of ECD kits, School in a box kits and recreational materials.



To increase the capacity of schools to withstand, adapt and recover from shocks, the Development programme supported school improvements grants increased the overall allocation/ quota on income generating activities from 10 to 20 per cent. This will allow vulnerable schools to support crop and livestock production activities that will support the

home-grown school feeding programme. A total of 3,351 Rural Primary and Secondary schools with low annual incomes received the school improvement grants during the reporting period. A total of 100 vulnerable schools with limited access to WASH services in 6 districts namely; Gokwe South, Gokwe North, Chipinge, Chiredzi, Mwenezi and Binga are being supported through a WASH in Schools (WinS) programme mainly focusing on the drilling of boreholes and the rehabilitation of piped water schemes. Planned trainings on Disaster risk reduction (DRR), Climate change, Health Management and Resilience building targeting the district civil protection committees will be conducted in the last quarter of the year. The expected result of the trainings is improved awareness on a resilient education system that encounters minimum disruptions due to shocks or hazards and promotes early recovery, quality education, and special care in humanitarian situations.



Health

From January 2017 to date, UNICEF reached a total of 57,121 out of the targeted 85,000 children affected by diarrheal diseases with lifesaving curative interventions. A total of 80,311 of the targeted 105,939 children under the age of 5 years in drought and flood affected districts were also vaccinated against measles. During the reporting period (July to September 2017), UNICEF reached a total of 20,723 children under five affected by diarrheal diseases through the provision of medical supplies (ciprofloxacin, ceftriaxone, Ringer Lactate, cannulas and ORS & Zinc). A total of 14,508 children under 5 years were vaccinated against measles during the same period. In addition, UNICEF supported diarrheal diseases and pneumonia case management trainings for 1,395 health workers in 26 drought and flood affected districts. The trainings targeted nurses, environmental health technicians (EHTs), laboratory scientists, doctors, health promotion officers and pharmacy technicians. Cascading of the trainings to 4,867 VHVs is ongoing, to date 4,616 VHVs have been reached through the cascading training approach. The trained VHVs are sensitising communities on the risks of diarrhoeal diseases and pneumonia.



HIV and AIDS

UNICEF continued to support tracking of children, adolescents, pregnant and lactating women affected by HIV to prevent an increase in lost to follow up cases. By the end of August 2017, a total of 62,413 children, adolescents, pregnant and lactating women were on ART in 20 targeted districts. UNICEF's support to strengthen nutrition and HIV integration has led to a further review and updating of the nutrition and HIV guidelines and training package to ensure alignment with the new WHO HIV guidelines. The revised training package will be used to train approximately 60 provincial and district trainers during two regional training workshops scheduled for October 2017. Subsequently, the trainers will cascade the training to district level cadres. During the reporting period, a total of 10,200 people were reached through HIV/Aids awareness sessions through the distribution of IEC materials in Mwenezi and Chiredzi districts. Information dissemination on HIV treatment literacy and adherence is on-going through the distribution of IEC materials, face to face discussions with trained village health workers, awareness activities at schools and through supporting community based support group meetings for children and adolescents living with HIV.

While there has been concerted efforts to increase testing and treatment in CMAM services, HIV testing coverage is still low at 57 per cent out of a target of 80 per cent. Major bottlenecks identified are (i) weakness in the reporting tools and flow of data; (ii) inadequate capacity of health workers on integration of nutrition and HIV due to high staff rotation and turnover (iii) discrepancy between HIV/nutrition guidelines and HIV testing algorithm (iv) low commitment by district leadership in some of the districts and mothers not bringing children with MAM to the health facilities. UNICEF is addressing the bottlenecks through the revision and dissemination of the nutrition and HIV guidelines and facilitating the training of health workers using the updated training guidelines with the support of OPHID, the provision of on the job mentorship and support programmes to health workers and supporting the improvement of data collection, analysis and reporting.



Child Protection

During the period January to September 2017, the child protection sector continued increasing partnerships to respond to the impact of the drought and flooding emergency thus complementing the government national case management system. The child protection sector continued its work to mainstream child protection in WASH, Education and nutrition sectors. Since the beginning of the year, a total of 13,980 children have been reached with humanitarian child protection interventions and services.

UNICEF in partnership with civil society organizations significantly increased the integration of psychosocial support (PSS) within the drought response and recovery programme. A total of 129 health facilities out of a target of 160 facilities across the 10 priority drought affected districts are now offering integrated psychosocial support as well as referral services. To date, 11,466 adolescent mothers out of a target of 5,000 have received psychosocial support services in the

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10 drought affected districts. In addition, 1,551 children and women affected by flooding were also reached with psychosocial support services. Furthermore, a total of 3,571 children were reached through child friendly spaces in 4 flood affected districts. An additional 272 orphaned, separated and unaccompanied children were identified of which 243 children were provided with interim care whilst 29 children were reunified with their parents. UNICEF child protection partners have started to orient water point committees in the flood affected districts to integrate protection in their training in order to prevent abuse taking place whilst children and women travel to fetch water.

Furthermore, 4,724 young mothers out of a target of 3,000 were reached with positive parenting skills support through mother to mother support groups which were set up by the nutrition program to provide cIYCF services. A total of 11,365 young mothers out of a target of 5,000 were reached with parenting and child protection messages in order to contribute to the prevention of acute malnutrition as well as keeping the children safe. A total of 2,722 children from a target of 2,500 children at risk of neglect and abuse were identified and referred to the case management system for the provision of appropriate child protection services. The quality of the referral system and the services provided has been positively impacted by the training of 311 government staff in 10 drought affected districts on enhanced coordination for child protection services in humanitarian settings, including issues on prevention of gender based violence.

Communication for Development (C4D)

During the period under review, a total of 329,403 people were reached with key messages on nutrition, WASH, HIV/AIDS and child protection using various communication for development platforms. Of this figure; 71,934 principal caregivers of children under two years were reached with key nutrition and HIV prevention and treatment key messages. In addition, 11,139 young mothers (12-24yrs) were reached with positive parenting and child protection messages to prevent malnutrition, 246,330 people were reached with critical WASH related hygiene information, while 10,730 young mothers (below 24yrs) received psychosocial support in the waiting mothers' shelters. A total of 800 community health care workers, 125 nurses, 50 nutrition ward coordinators and 90 environmental health technicians were trained on the use of the integrated key messages guide as well as the use and dissemination of information, education and social and behaviour change communication materials. The integrated key messages guide is being illustrated for ease of use by frontline community based cadres, and communities.

Media and External Communication

Articles and op-eds/media outreach:

Press

Nexus between poverty and nutrition

<http://www.herald.co.zw/nexus-between-poverty-child-nutrition/>

Website

Flood response saves lives in Umzingwane

<https://www.unicef.org/zimbabwe/20347.html>

Makota, an almost open defecation free village

<https://www.unicef.org/zimbabwe/20330.html>

Facebook

<https://www.facebook.com/www.harareunicef.co.zw/posts/1868518326496373>

<https://www.facebook.com/www.harareunicef.co.zw/posts/1869619909719548>

Twitter

<https://twitter.com/UNICEFZIMBABWE/status/912967226604625920>

<https://twitter.com/UNICEFZIMBABWE/status/912711829842989056>

<https://twitter.com/UNICEFZIMBABWE/status/912710101819117568>

Instagram

<https://www.instagram.com/p/BZi2neHB6jD/>



Supply and Logistics

UNICEF has ensured adequate stocks of nutrition commodities to treat all SAM cases in the country. From July to August, 2,000 boxes of Ready to Use Therapeutic Food (RUTF) and 2,200 boxes of Ready to Use Supplementary Food (RUSF) that were in the pipeline were received. Table 3 below shows a breakdown of the supplies received to date and those in the pipeline.

Table 3: Supplies received to date in the year 2017 and those in the pipeline.

	Item Description	Unit of Measurement	Quantity Received	Quantity in the Pipeline	Total
1	RUTF	Carton	23,300	6,040	29,340
2	RUSF	Carton	6,855	0	6,855
3	F100	Carton	0	594	594
4	F75	Carton	250	90	340
5	ReSoMal	Carton	50	0	50

In addition, UNICEF prepositioned WASH supplies (buckets, jerry cans, soap, water treatment tablets and IEC materials) in 4 high risk provinces during the flood response. Currently, the provinces are in possession of 5,000 NFI kits that will enable them to respond timely to any WASH related emergency situation. UNICEF procured WASH contingency stock sufficient for 10,000 households and procured health emergency supplies (Ciprofloxacin, Ringer Lactate, Ceftriaxone and cannulas) which were distributed in 10 districts affected by flooding.

Funding

As part of the regional Southern Africa El Niño/La Niña Humanitarian Action for Children (HAC), the requirements for Zimbabwe are US\$ 13.5 million. In 2017, UNICEF received a total of US \$4. 9 million. In addition, the funds available for the response also included generous contributions of over US\$13.9 million received in the last quarter of 2016. With the available funding, UNICEF will be able to meet the increased humanitarian needs of children in Zimbabwe in sectors that have been fully funded. However, Health, Education and Social Protection sectors have funding gaps which will affect the scale of the response. UNICEF will provide a timely response to critical risks or multiple hazards and shocks affecting vulnerable and disadvantaged women and children of Zimbabwe and enable them to withstand, adapt to, and recover from emergencies. UNICEF is grateful to DFID, ECHO, USAID (OFDA and Food for Peace), USAID-PEPFAR, the Government of Japan, the Government of Korea, the UN Central Emergency Response Fund (CERF), the Government of Canada through Global Affairs Canada, German Federal Office (AA Germany), GIZ and UK, Japan and German National Committees for UNICEF who have directly supported the ongoing response and donors that are contributing to regular development programmes that are contributing to resilience building.

UNICEF Zimbabwe Funding Requirements (as defined in the Humanitarian Appeal for 2017)				
Appeal Sector	Requirements	Funds available*	Funding gap**	
			\$	%
WASH	2,500,000	7,325,966	0	0
Education	1,000,000	297,388	702,612	70
Health	2,617,000	266,638	2,350,362	90
Nutrition and HIV/AIDS	3,125,000	8,643,145	0	0
Child Protection	1,550,000	1,732,691	0	0
Social Protection	2,734,000	228,855	2,505,145	92
Total	13,526,000	18,494,683	5,558,119	41

*Funds available includes funding received against current appeal and carry-forward (\$13.9 million) from 2016.

**The WASH, Nutrition/HIV/AIDS and Child Protection sectors have a surplus of \$ 4,825,966, \$ 5,518,145 and \$ 182,691 respectively mainly for the drought response. Most of the Social Protection interventions supported at risk households in food insecure districts funded through the Harmonized Social Cash Transfer Programme. Other sectors still have a significant funding gap of \$5.5 million.

UNICEF Zimbabwe Humanitarian Action for Children Appeal: www.unicef.org/appeals/zimbabwe

UNICEF Zimbabwe Facebook: <https://www.facebook.com/www.harareunicef.co.zw/>

UNICEF Zimbabwe Twitter: <https://twitter.com/unicefzimbabwe>

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Annex 1: SUMMARY OF PROGRAMME RESULTS

UNICEF Zimbabwe Results Table 2017	UNICEF and Implementing Partners		
	2017 Target	Total Results	Change since last report ▲ ▼
WATER, SANITATION & HYGIENE			
# of people in humanitarian situations accessing water for drinking, cooking and personal hygiene	400,000	341,998	▲ 94,024
# of people in humanitarian situations received critical WASH-related information to prevent child illness, especially diarrhoea	450,000	453,334	▲ 140,557
EDUCATION			
# of children aged 3 to 18 years in humanitarian situations accessing formal or non-formal basic education	25,000	12,500	▲ 1,300
HEALTH			
# of children with diarrheal diseases have access to life-saving curative interventions, including oral rehydration therapy and zinc	85,000	57,121	▲ 20,723
# of children in humanitarian situations vaccinated against measles	105,939	80,311	▲ 14,508
NUTRITION			
# of children in humanitarian situations aged 0 to 59 months affected by SAM who are admitted for treatment	14,873	7,822	▲ 2,484
# of caregivers of children in humanitarian situations accessing infant and young child feeding counselling*	72,000	59,238	▲ 4,986
# of children aged 6 to 59 months receive vitamin A supplementation	240,051	273,149	▲ 53,290
CHILD PROTECTION			
# of children in humanitarian situations accessing appropriate care and services	35,000	13,980	▲ 2,610
HIV and AIDS			
# of children, adolescents and pregnant and lactating mothers retained on HIV treatment**	55,500	62,413**	▲ 9,458
% of children under 5 (of unknown or negative HIV status) with SAM admitted in therapeutic feeding programmes tested for HIV	70%	57%***	▼ 4%

*This figure includes children who received the second dose of VAS during the second semester

**The figure includes children, adolescents and young people only

*** The slight decrease is mainly due to inadequate data capturing and discrepancy in nutrition/HIV guidelines and HIV algorithm