

**Mauritania**

**Consolidated Emergency Report 2018**



Screening of severe acute malnutrition  
©UNICEF Mauritania 2018/ Tamayo Alvarez

Prepared by:  
UNICEF Mauritania  
March 2019

## TABLE OF CONTENTS

<b>ABBREVIATIONS AND ACRONYMS.....</b>	<b>3</b>
<b>EXECUTIVE SUMMARY .....</b>	<b>4</b>
<b>HUMANITARIAN CONTEXT.....</b>	<b>5</b>
<b>HUMANITARIAN RESULTS .....</b>	<b>6</b>
<b>NUTRITION SECTOR .....</b>	<b>7</b>
<i>Results Table of the Nutrition Sector .....</i>	<i>7</i>
<b>WASH SECTOR .....</b>	<b>8</b>
<i>Results Table of the WASH Sector .....</i>	<i>8</i>
<b>EDUCATION SECTOR .....</b>	<b>9</b>
<i>Results Table of the Education Sector .....</i>	<i>9</i>
<b>CHILD PROTECTION SECTOR.....</b>	<b>10</b>
<i>Results Table of Child Protection Sector.....</i>	<i>10</i>
<b>HUMANITARIAN THEMATIC FUNDING CASE STUDY.....</b>	<b>12</b>
<b>SYSTEMATIZATION OF NUTRITION SURVEILLANCE MECHANISM IN MAURITANIA'S 2018 EMERGENCY</b>	
<b>RESPONSE PLAN .....</b>	<b>12</b>
<i>Top Level Results .....</i>	<i>12</i>
<i>Issue/Background .....</i>	<i>12</i>
<i>Resources Required/Allocated.....</i>	<i>13</i>
<i>Progress and Results .....</i>	<i>13</i>
<i>Criticality and value addition.....</i>	<i>14</i>
<i>Challenges and Lesson Learned.....</i>	<i>14</i>
<i>Moving Forward .....</i>	<i>15</i>
<b>RESULTS ACHIEVED FROM HUMANITARIAN THEMATIC FUNDING .....</b>	<b>15</b>
<b>NUTRITION SECTOR .....</b>	<b>15</b>
<b>WASH SECTOR .....</b>	<b>15</b>
<b>EDUCATION SECTOR .....</b>	<b>15</b>
<b>CHILD PROTECTION .....</b>	<b>16</b>
<b>ASSESSMENT, MONITORING AND EVALUATION.....</b>	<b>16</b>
<b>FINANCIAL ANALYSIS .....</b>	<b>17</b>
<b>FUTURE WORK PLAN.....</b>	<b>17</b>
<b>EXPRESSION OF THANKS .....</b>	<b>18</b>
<b>ANNEXES TO THE CER.....</b>	<b>19</b>
<b>ANNEX A: FINANCIAL ANALYSIS .....</b>	<b>19</b>
<i>Table 1: Funding status against the appeal by sector.....</i>	<i>19</i>
<i>Table 2: Funding received and available by donor and funding type .....</i>	<i>20</i>
<i>Table 3: Thematic Humanitarian Contributions Received in 2018 .....</i>	<i>21</i>
<b>ANNEX B: TWO-PAGERS – NON-THEMATIC FUNDING CONTRIBUTIONS.....</b>	<b>22</b>
<b>DONOR STATEMENT (AS OF 31 DECEMBER 2018).....</b>	<b>23</b>
<b>HUMAN INTEREST STORIES AND COMMUNICATION .....</b>	<b>23</b>
<b>DONOR FEEDBACK FORMS.....</b>	<b>23</b>

## **Abbreviations and Acronyms**

ACF	Action Against Hunger (Spain)
AED	Academy for Educational Development (national NGO)
BPRM	Bureau of Population, Refugees, and Migration (US Dept. of State)
CERF	Central Emergency Response Fund
CLTS	Community-Led Total Sanitation
COAR	Country Office Annual Report
CPDD	Partnership Framework for Sustainable Development
CPWG	Child Protection Working Group
CSA	Commissioner for Food Security
DPEF	Direction des Projets Éducation Formation (Directorate of Education Training Projects)
ECHO	European Commission Humanitarian Aid Office
ESD	Ensemble pour la Solidarité et le Développement (national NGO)
EWG	Education Working Group
GAM	Global Acute Malnutrition
GBV	Gender-Based Violence
HAC	Humanitarian Action for Children
IASC	Inter Agency Standing Committee
ICRC	International Committee of the Red Cross
IDA	World Bank International Development Association
IMAM	Integrated Management of Acute Malnutrition
InterSOS	Italian humanitarian organisation
IOM	International Organisation for Migration
IYCF	Infant and Young Child Feeding
LWF	Lutheran World Federation
MASEF	Ministry of Social Affairs, Children and Family
MICS	Multiple Indicator Cluster Study
MOH	Ministry of Health
MRM	Monitoring and Reporting Mechanisms
MSF	Médecins sans Frontières (Doctors without Borders)
MUAC	Mid upper arm circumference
NGO	Non-Governmental Organisation
OFDA	Office of Foreign Disaster Assistance (USAID)
PBF	Peace Building Fund
PCA	Programme Cooperation Agreement
RUTF	Ready-to-Use Therapeutic Food
SAM	Severe Acute Malnutrition
Sida	Swedish International Development Agency
SMART	Type of survey; stands for specific, measurable, achievable, relevant, and time-based goals
SOP	Standard Operating Procedure
SOWC	State of the World's Children report
UNHAS	UN Humanitarian Air Service
UNHCR	UN High Commissioner for Refugees
UNRC	UN Resident Coordinator
USAID/ FFP	United States Agency for International Development/ Food for Peace
WASH	Water, Sanitation and Hygiene
WCARO	West and Central Africa Regional Office
WFP	World Food Programme
WV	World Vision

## **Executive Summary**

Mauritania is the fourth most vulnerable country in the world to climate change. Natural hazards are long-term challenges that generate long-term needs. The country has faced food crises and poor distribution of rain resulting in a decrease of agricultural production and pasture. The 2017 SMART survey showed a critical nutritional situation with a 44% increase in severe acute malnutrition (SAM) compared to the average annual burden over the last five years. All concerned agencies and NGOs developed a humanitarian response plan to meet the needs of the most vulnerable. This includes access to safe drinking water and sanitation.

An added stress to the fragile humanitarian situation is the presence of a refugee camp on the Malian border. Access to safe drinking water was only 36 per cent prior to the refugees' arrival and many of them fled with their livestock, which could lead to competition for pastureland and increased tensions. Furthermore, the population is expected to double by 2039. This is bound to place a strain on the already limited educational opportunities.

The 2018 Humanitarian Response Plan set forth specific goals for the nutrition, WASH, education and child protection sectors. Nutrition goals entail maintaining and intensifying existing actions including therapeutic food supply, curative and preventive nutrition, and strengthening vulnerable communities. A national surveillance mechanism was set up to ensure proper screening and monitoring of acute and severe malnutrition and to provide supplements, therapeutic food and other remedies. Due to the weak health system and low number of districts supported by UNICEF and NGOs, it was not possible to reach 100% of supply and treatment targets. Mobile health care provision was key to filling the gaps in remote areas. Mass campaigns reached high percentages of national coverage (over 85%) with quality screening, supplements of vitamin A and de-worming tablets. Operational support in emergency districts facilitated early detection of acute malnutrition and real-time data collection and monitoring. Capacity-building efforts succeeded in training health workers to support 86% of health facilities throughout the country. Preventive interventions benefited pregnant and lactating women and an intervention of home food fortification reached 13,300 children.

In the WASH sector, the emergency response actions reached nearly 60,000 people, of which more than 10% were children affected by malnutrition. WASH kits were delivered to nutrition centres, many of which benefited from the construction of latrines or connection to drinking water. Flood victims benefited from emergency support including drinking water and sanitation. To better prepare the Ministry of Water and Sanitation to assume more responsibility for emergency response planning and coordination, UNICEF is leading an ongoing consultation with the General Directorate of Civil Protection of the Ministry of the Interior, which will be extended to include other government and civil society organisations.

Significantly, the WASH response is being integrated with the Nutrition interventions at the same localities so that health/nutrition centres are equipped with water, sanitation, and hygiene facilities.

The education sector handles numerous goals and actions. The current focus is on Education in Emergency for refugees and host communities. Funds were mobilised for formal and non-formal education and intense enrolment campaigns surpassed their targets. Out-of-school children were identified and both preventive and reintegration efforts were implemented. One incentive was the distribution of student kits every quarter. Secondary education facilities were built in the refugee camp to create a safe environment for students, especially girls. To ensure quality education, teachers were trained in child-centred pedagogy and peace education. Textbooks and manuals were procured to supply the community library to be built in the camp in 2019. As for capacity-building, UNICEF and partners helped create an inter-ministry task force to develop a national strategy and plan for education in emergencies.

In child protection, UNICEF adopted a three-phase approach to mitigate the impact of the Malian conflict on children and families, namely, providing frontline child protection services, community-based reintegration, and capacity-building of child protection mechanisms and systems. These entailed training of frontline responders and psychosocial support, albeit falling far short of the planned targets due to limited funding and low capacity of NGO partners. In order to strengthen national child protection systems and improve data collection and monitoring, UNICEF partnered with UNHCR to develop a case management system in the M'Berra refugee camp, which ensured that all children identified as at risk or victims of violence, abuse or exploitation got follow-up visits by social workers. Community-based child protection mechanisms succeeded in expanding the reach of committees, action plans, service provision, frontline response, training, and prevention. Reporting of sexual violence remains a challenge due to conservative social norms and stigmas and inadequate laws or legal redress.

## **Humanitarian Context**

Frequent climatic shocks and high vulnerability in Mauritania mean hundreds of thousands of people face the painful consequences of food insecurity and malnutrition every year. Rainfall has steadily declined since the 1950s<sup>1</sup>, and water is retreating deeper underground. As the fourth most vulnerable country in the world to climate change, natural hazards in Mauritania are long-term challenges that generate long-term needs. The country still struggles to recover from one of the world's biggest food crises that wreaked havoc on the Sahel in 2011 and 2012. Poor distributions of rain in space and time in 2017 resulted in a significant decrease of agricultural production and pasture in most of the agro-pastoral areas of the country: a long 'rain-pause' of 20 to 40 days has been observed between July and August 2017, just when the first crops were in full growth. All available and observable indicators (biomass, pasture availability, arable areas, and productivity) are in distress. The 2017 SMART survey conducted in August has shown a critical nutritional situation with 10.9% of global acute malnutrition (GAM) and 2.3% of severe cases (above the emergency threshold). The 2018 caseload of severe acute malnutrition (SAM) is estimated at 32,244 children under five years, representing a 44% increase compared to the average annual burden over the last five years. An exercise of prioritization has shown that 21 districts in eight regions are in a critical nutrition situation<sup>2</sup>. As part of a set of actions to support the government to mitigate the 2018 projected crisis, UN agencies, international and local NGOs as part of the Humanitarian Country Team developed an integrated humanitarian response plan for Mauritania as a preparatory measure to meet the needs of the most vulnerable people in a timely and efficient manner during the 2018 drought. The 2018 SMART survey conducted during the lean season period confirmed that acute malnutrition among children under five is still a concern in Mauritania with 11.6 per cent of GAM and 2.3 per cent of SAM. The results have shown that 23 districts out of 55 in seven regions are in a critical/emergency nutrition situation.

Access to safe drinking water, sanitation and adequate hygiene practices are among the main humanitarian needs and play an instrumental role in malnutrition treatment, improve school attendance for girl students and reinforce social cohesion. While access to safe drinking and adequate sanitation facilities is still challenging in the country, Mauritania faces the impact of climate changes with recurrent cycles of drought and foods that generate further tests to livelihoods of the most vulnerable segment of the population: Only 47 per cent<sup>3</sup> of malnutrition centres in rural and semi-urban areas have access to drinking water and sanitation services, reducing the quality of care and increasing the admission time of children in treatment.

Established in 2012 and located 30km from the Malian border, the refugee camp in M'Berra, which currently hosts 57,673 refugees, including 33,642 children<sup>4</sup>, continues to depend on Government, external and humanitarian assistance, in addition to the generosity of already impoverished local communities in the

---

<sup>1</sup> World Bank Climate Change Knowledge Portal

<sup>2</sup> Global Acute Malnutrition >15% and/or Severe Acute Malnutrition >2%

<sup>3</sup> Stratégie National pour un Accès Durable à l'Eau et l'Assainissement 2016-2030 (SNADEA), August 2016 report

<sup>4</sup> UNHCR 2018

Bassiknou district (which has a population of approximately 55,000 people). The district hosting refugees already struggled with drought impact and scarce resources prior to the arrival of refugees when access to safe drinking water was only 36 per cent.<sup>5</sup> As many refugees fled with their livestock, the strain on the limited water supply pasture and other natural resources has been further exacerbated. Competition over access to pasture, cross-border movements of livestock and water are likely to increase the risk of tension and conflict in this agro-pastoral area.

Compounding these issues, the population is expected to double by 2039, and there is a growing youth demographic bulge with limited livelihood options. With 45 per cent (or 455,000) of children outside the formal education system<sup>6</sup>, young people searching for opportunities are at risk of radicalization. Indeed, only 3% of children 3-5 years old benefit from preschool education in the Hodh El Chargui region. At the camp of M'Berra, the situation is even worse as since 2018 no preschool offer has been created - UNICEF succeeded to establish the first preschool programme only in the late months of 2018. Child development is a huge issue as only 6 out of 10 children are on the right track for development (ECD index-MICS 2015). Unmet needs caused by the protracted nature of the Malian crisis include provision of preschool and primary school facility equipment kits and textbooks. For primary education only 7 out of 10 primary school aged children are enrolled in school and among them only 54% succeed to complete the whole primary cycle (statistic yearbook 2016-17, MOE). Concerning education in the refugee camp of M'Berra, while UNCHR registered 17,373 children aged (6-17 years old) through a census exercise, UNICEF and its partners could verify that only 5,574 were enrolled in school. The above data highlights the need of further efforts to ensure universal education.

**Table: Estimated Population in Need of Humanitarian Assistance**

<b>Estimated Population in Need of Humanitarian Assistance</b>			
<b>Total</b>		<b>Male</b>	<b>Female</b>
Total Population in Need	830,000	431,600	398,400
Children (Under 18)	414,000*	209,121*	204,980*
Children Under Five	119,000	61,880	57,120
Child refugees (UNHCR June 2018)	33,642	16,550	17,092

\* As per the Nutrition/Food Security Response Plan (February 2018).

## **Humanitarian Results**

<b>Indicators</b>	<b>Sector 2018 Target</b>	<b>Sector total results</b>	<b>UNICEF 2018 Target</b>	<b>UNICEF Total results</b>
Number of natural disaster and conflict-affected persons with access to water, hygiene and sanitation basic services	250,000	91,242	126,000	39,242
Number of people who received training/awareness-raising sessions on living in environments free of open defecation	250,000	115,309	70,000	57,873
Number of severely malnourished children who access an agreed quantity of water for drinking, cooking and personal hygiene	42,244	10,000	42,244	6,140
Number of children who access and use appropriate sanitation and hygiene facilities	42,244	10,000	13,780	6,140

<sup>5</sup> BADIHA, Base de Données des Investissements d'Hydraulique et d'Assainissement

<sup>6</sup> Multiple Indicators Cluster Survey (2015)

## Nutrition Sector

Priority actions identified by the nutrition sector for implementing the 2018 Humanitarian Response Plan concerned (i) ensuring an appropriate therapeutic supply in line with targets for the management of severe cases of acute malnutrition nationally; (ii) intensifying a package of curative and preventive nutrition activities targeting children under five years, pregnant and lactating women in the 21-nutritional emergency districts according to the 2017 SMART survey (global malnutrition > 15% and / or severe cases > 2 %); and (iii) contributing to create an enabling environment to strengthen resilience among vulnerable communities based on a multi-sectoral approach and on coordination. To ensure the synergies with other actions at operational level, UNICEF has supported a mapping exercise showing the gaps of partners to support the weak health system. That's why beyond ensuring SAM therapeutic supplies countrywide, UNICEF filled the gaps of partners in nine emergency departments. To intensify emergency nutrition response in 2018, UNICEF has recruited six national consultants to ensure technical assistance to the regional health team/system in regions where no or insufficient active nutrition partners are in place. To mitigate the impact of the lean season in any department countrywide, a national surveillance mechanism was systematized. This mechanism entails (i) ensuring access of quality screening of acute malnutrition twice yearly using a mass campaign countrywide and an integrated approach with vitamin A supplementation and deworming, (ii) conducting the national nutrition survey using SMART methodology during the lean season, (iii) conducting a real-time monitor about the origin of severe cases of acute malnutrition using the RapidPro platform.

**Results Table of the Nutrition Sector\***

Indicators	Sector 2018 Target	Sector total results	UNICEF 2018 Target	UNICEF Total results
Number of children with SAM admitted for therapeutic care	32,244	24,521	32,244	24,521
Number of pregnant/lactating women reached with an integrated package of infant and young child feeding services	47,871	32,876	47,871	32,876
Number of children 6-23 months who received micronutrient powders	77,167	13,300	77,167	13,300
*The cluster system has not been activated in Mauritania.				

Regarding the provision of therapeutic supply for ensuring quality SAM treatment, 29,437 boxes of RUTF were secured from ECHO (40%), USAID / FFP (38%) and CERF (22%) allowing to treat 24,521 children with SAM, representing 76% of the 2018 national burden (32,244). Indeed, due to the weakness of the health system and the low number of districts (18 out of 55) supported by UNICEF and NGOs, it was not possible to reach 100% of the burden as targeted in 2018. The programme performance analysis has shown that two out of three key indicators have met SPHERE's standards: 81 per cent of cure rate (>75 per cent SPHERE) and 0.7 per cent of death rate (< 5 per cent SPHERE). However, defaulter rate is at 16.4% above SPHERE standard (<15%). Mobile strategy of health care providers and the involvement of community health workers in the outpatient therapeutic programme were applied as key actions to reduce defaulter rates in the most remote areas. This is an important strategy in a context where only 69 per cent of the population lives within a 5 km radius of a health facility. In the 21 emergency districts, 14,275 SAM cases have been treated representing 70 per cent of the caseload in the targeted emergency areas.

Two integrated mass campaigns enabled reaching an average of 498,246 children aged 6-59 months with quality screening of acute malnutrition, representing 87% countrywide. These allowed to refer 2,241 severe acute malnutrition (SAM) cases for quality treatment. An average of 565,593 children aged 6-59 months were also supplemented with vitamin A through these two rounds, representing a coverage of 88%, and 498,246 children aged 12-59 months benefited from de-worming tablets as part of the anaemia integrated control approach, representing a coverage of 86%. In addition, thanks to ECHO, Food For Peace, CERF, Sida and UNICEF Humanitarian Thematic Funds, UNICEF provided operational support in nine emergency districts through two PCAs and two small scale agreements with International NGOs (ACF, World Vision) and local NGOs (ADICOR and AMSELA). Through these PCAs, 9,708 mothers/caregivers were trained on early detection of acute malnutrition at home using MUAC measuring tape. The RapidPro platform, which allows real-time data collection and monitoring via SMS, was used to monitor the origin of severe cases of acute malnutrition for appropriate corrective measures. This represents a contribution of 8,047 SAM cases admitted and treated from UNICEF's operational support.

As part of capacity-building efforts, UNICEF in partnership with the Ministry of Health and NGO trained 1,156 health workers and 457 community health workers with the skills needed to support 722 out-patient therapeutic and 19 in-patient facilities (86 per cent of all health facilities) throughout the country. As part of preventive intervention, 32,876 pregnant and lactating women have been reached with promotional activities at health facilities at the community level. Indeed, 866 health care providers and 457 community health workers were trained to deliver the integrated package of IYCF services through the life cycle. Using the community platform to promote optimal practice of IYCF services, 13,300 children were reached by an intervention of home food fortification in Guidimakha region as part of OFDA funding contribution to implement the 2018 humanitarian response plan.

- **WASH Sector**

UNICEF WASH emergency response was able to reach about **57,873** people (access to water, hygiene awareness and people living in communities free of open defecation) out of which 6,140 are children affected by malnutrition. In addition, 272 nutrition centres received WASH kits or benefited either from the construction of latrines or connection to drinking water. WASH interventions were carried out for flood victims in the Bassikounou District where 2,600 people benefited from drinking water supply as well as sanitation facilities (separate male/female latrines) on the temporary relocation site. Some 500 WASH kits were distributed to households to enable adequate water storage and adequate hygiene practices.

UNICEF continued to lead the coordination of the WASH sector group at the Hodh El Chargui level while strengthening the leadership of the Ministry of Water and Sanitation to assume more responsibility for emergency response planning and coordination. In this regard, a consultation at national level, initiated with the General Directorate of Civil Protection of the Ministry of the Interior, will be extended to government and civil society actors (NGOs) to better prepare for and respond to emergencies with a particular focus on floods. Given the level of Water and Sanitation coverage in the M'Berra refugee camp, UNICEF's interventions in collaboration with IOM have mainly concerned host communities with ongoing water supply works and the implementation of the CLTS.

**Results Table of the WASH Sector\***

Indicators	Sector 2018 Target	Sector total results	UNICEF 2018 Target	UNICEF Total results
Number of natural disaster and conflict-affected persons with access to water, hygiene and sanitation basic services	250,000	91,242	126,000	39,242



Number of people who received training/awareness-raising sessions on living in environments free of open defecation	250,000	115,309	70,000	57,873
Number of severely malnourished children who access an agreed quantity of water for drinking, cooking and personal hygiene	42,244	10,000	42,244	6,140
Number of children who access and use appropriate sanitation and hygiene facilities	42,244	10,000	13,780	6,140
*The cluster system has not been activated in Mauritania.				

The highlight in the implementation of WASH response is the integration of WASH and Nutrition interventions in the same localities. This approach has been scaled up mainly in the Guidimakha region. Indeed, this integrated approach has made it possible to equip with 20 health/nutrition centres with water, sanitation and hygiene facilities (including separate latrines for men and women,)

### • Education Sector

Through a collaborative approach targeting both refugees and host communities, UNICEF and its partners contribute to the overall preparedness and response programme for Education in Emergency. For the first half of 2018, funds mobilization was limited to ECHO's contribution, while in the second half of the year, a few important donors gathered to support UNICEF response for education in emergency providing enough funds to achieve results as planned. An intense advocacy campaign was carried out with the aim to increase enrolment for the upcoming school year. As a result, a total of 8,217 children and 1,438 new children in the M'Berra camp have benefited from formal education or non-formal education in 2018 (for the school year 2017-2018 and 2018-2019, respectively). The number of students enrolled for the school year 2018-2019 in primary education reached 4,594 (2,353 boys and 2,241 girls) and at secondary education level, 350 students (238 males and 112 females) are enrolled as of November.

**Results Table of the Education Sector\***

Indicators	Sector 2018 Target	Sector total results	UNICEF 2018 Target	UNICEF Total results
Number of school-aged boys and girls affected by humanitarian situation receiving learning materials	8,300	19,777	8,300	19,777
Number of emergency-affected children, including adolescents, accessing quality education, including through temporary learning structures	5,500	9,655	N/A	9,655
*The cluster system has not been activated in Mauritania.				

Out-of-school children have been an important target for UNICEF with the aim to increase social cohesion, strengthen equity and limit the risk of violent extremism. To this regard, 2,034 youth attended literacy courses (alphabetization and numeracy) while 208 children were reinserted to formal education. In addition to that, an important dialogue has been established with Koranic education teachers in order to improve the learning environment and conditions and allow more children to attend formal education, too. As school exclusion has been an issue where an effective solution could not be found, UNICEF tried new strategies in the last month of 2018. A preschool offering was eventually created to allow 400 children at the refugee camp and 300 children in the host community to access pre-primary education. In the UNICEF vision, this action will help reduce the number of out-of-school children as more children will enter primary education at the right age and with the right competencies and skills.

As a measure to reduce indirect education costs, student kits are distributed every quarter to 19,777 students (including 9,655 refugee students and 10,122 host community students – this target was not included in our HAC 2018 but was called necessary to ensure balance and equity). The construction of lower and upper

secondary education facilities in the camp started in September with an aim to improve learning conditions and ensure a safer and more protective learning environment for all refugee children accessing the secondary level and to boost transition rates from primary to secondary education, especially for girls. The quality of the construction (to be finalized by January 2019) was supervised jointly with the central Government (DPEF), UNICEF staff and the camp education committee.

Quality education was also a priority to allow children with better learning outcomes. 248 teachers (148 at the refugee camp and 100 in the host community) were trained in child-centred pedagogy and peace education. In addition, more than 19,000 textbooks for basic education were procured together with manuals for non-formal education and books to equip the community library that will be built in the first months of 2019. In order to capitalize on the activities carried on in 2018, UNICEF and its partners succeeded in mobilizing funds to create an inter-ministry task force for education in emergencies with the aim to develop a national strategy and an operational plan to better prepare and respond to education needs of children in emergency situations.

- **Child Protection Sector**

**Results Table of Child Protection Sector\***

Indicators	Sector 2018 Target	Sector total results	UNICEF 2018 Target	UNICEF Total results
Number of displaced, refugee and returnee children provided with safe access to community spaces for socialization, play and learning.	N/A	2,197	10,000	2,197
*The cluster system has not been activated in Mauritania.				

Overall, UNICEF contributed to a three phase approach to address the impact of the Malian conflict on children and their families by working with partners to ensure that: (1) Frontline child protection services (including psychosocial support) are accessible to affected children and their families, (2) Community based reintegration support (including livelihoods support) is available and (3) Duty bearers effectively meet their obligations to protect children and mitigate the impact of conflict and other humanitarian situations through capacity development and strengthening of child protection mechanisms and systems. As part of these efforts, UNICEF and partners ensured that front-line responders, including community volunteers were available, trained and supported to conduct outreach activities in M'Berra camp in order to support vulnerable children and their families.

UNICEF responded to the immediate psychosocial needs of children and their families directly or indirectly affected by the Malian conflict both in the refugee camp and host communities. The psychosocial support provided included various activities such as individual or group counselling and participation in play and recreation activities. UNICEF also ensured through coordination with partners that the basic needs of children identified as at risk or victims of violence, abuse, exploitation, discrimination and negligence were met through referral to basic services (such as health, education, skills training, birth registration, social follow-up, etc.). Insofar, UNICEF-supported psychosocial programmes benefited some 2,197 children, including 1,262 girls; reaching only 19% of its planned target. Of these children, 226 were referred to birth registration and 372 to formal and non-formal education. Reasons for reaching a lower number of children than planned include the limited availability of funding particularly during the first half of the year and the low capacity of NGO partners.

As part of UNICEF efforts to strengthen national child protection systems and improve data collection and monitoring, UNICEF partnered with UNHCR in developing and implementing a child protection case

management system for refugee children in M'Berra camp. With UNICEF support, 30 NGO case workers were equipped with the technical skills required for the implementation of the national case management framework, including the use of the standardized tools and processes for registration, assessment, development of case plans, referrals and follow up on children. Thanks to the implementation of this system, all refugee children identified as at risk or victims of violence, abuse and exploitation (1,538 in total) were provided with social follow-up visits by the NGO partner's social workers.

Significant progress was made in extending the reach of community-based child protection mechanisms in M'Berra camp. Forty-three child protection committees have been established/revitalized in M'Berra camp (each committee has an average of eight members) and their members trained on child rights and protection. They were further supported in developing and implementing community action plans to address child protection issues in the camp. Over 310 community members and service providers were trained as front-line responders and equipped with technical skills and knowledge to support refugee children at risk or victims of violence, abuse and exploitation and on how to make their referral to services in a confidential manner. Other topics covered during the training included the impact of emergencies on children, prevention and response to gender-based violence and the monitoring of child rights violations. Prevention of sexual abuse and exploitation was also explored during the training as part of efforts to strengthen local capacities to protect girls and women from sexual exploitation and abuse in humanitarian contexts.

The humanitarian impact and the child rights violations linked to the conflict in Northern Mali were also monitored by the informal Task Force on Children and Armed Conflict established in Bassikounou. In line with the UN Security Council resolution 1612, the terms of reference of the informal high-level Working Group on Monitoring and Reporting Mechanisms (MRM) of the gross child rights violations were adopted to strengthen inter-agency efforts to prevent the recruitment of children by Malian armed groups. To address the issue of sexual exploitation and abuse by humanitarian workers, UNICEF contributed to the development of a Focal Point Network of UN agencies and NGOs based in Bassikounou and trained agency Focal Points. As part of this process, UNICEF trained 21 UN agency and NGO focal points on the SG bulletin on sexual exploitation and abuse, the UN Code of Conduct and on UN expectations of staff.

Efforts to report on sexual violence and provide support to survivors remained a very sensitive and challenging area of protection work in Mauritania. Only 190 cases of sexual violence (including 9 boys) were recorded by UNICEF partners in 2018. Under-reporting of cases of sexual violence remains a challenge due to the associated levels of shame and stigma, conservative social norms, inadequate laws in protecting women and girls, which often result in the criminalization of the survivors. Legal redress to survivors remains a highly controversial area of work and only 48 cases (approximately 25% of all cases) accessed legal aid support.

## **Humanitarian Thematic Funding Case Study**

### **Systematization of nutrition surveillance mechanism in Mauritania's 2018 emergency response plan**

#### **Top Level Results:**

As part of Young Child Survival and Development outcomes supported by the Humanitarian Thematic Funds, the systematization of a nutrition surveillance mechanism during the implementation of the 2018 Mauritania emergency response plan enabled the screening of 498,246 children aged 6-59 months, representing 87% countrywide twice yearly, which further facilitated the referral of 2,241 severe acute malnutrition (SAM) cases for quality treatment. An average of 565,593 children aged 6-59 months were also supplemented with vitamin A through these two rounds, representing a coverage of 88%, and 498,246 children aged 12-59 months benefited from de-worming tablets as part of the anaemia integrated control approach, representing a coverage of 86%. As part of the surveillance mechanism, the national nutrition survey using SMART methodology conducted during the lean season showed that the situation is still serious with 11.6 per cent of global acute malnutrition (GAM) and 2.3 per cent of SAM and 23 districts out of 55 are in nutrition emergency<sup>7</sup>. Local authorities and other stakeholders were engaged in a discussion about malnutrition contributing factors using decentralized restitution sessions of results from national nutrition survey, allowing to identify priority actions as part of the regional nutrition multisectoral coordination mechanism. In addition, real-time data collection and monitoring using the RapidPro platform made it possible to monitor the origin of severe cases of acute malnutrition for appropriate corrective measures. Hotspots of SAM (top 20 localities) were identified in three vulnerable regions and mitigating actions were subsequently undertaken.

#### **Issue/Background:**

Mauritania is facing a structural crisis of malnutrition often aggravated by various shocks. A nutritional survey (SMART) conducted during the lean period 2017 showed a degradation of the nutritional status among children 6-59 months age. In 2018, an estimated 32,000 children under 5 years required treatment for SAM<sup>8</sup>. In addition, Projections of the “Cadre Harmonisé” (West Africa’s version of the Integrated Food Security Phase Classification) indicated that over 602,000 people would be in a critical food security situation during the lean season in 2018 – which was projected as much more severe than the average, and expected to start much earlier than normal (in some areas, possibly as early as February rather than June). In order to assist the most vulnerable population, an immediate humanitarian response was required. An integrated emergency response plan was developed. Priority actions identified by the nutrition were: (i) ensuring an appropriate supply of therapeutic inputs in line with targets for the management of severe cases of acute malnutrition nationally; (ii) intensifying a package of curative and preventive nutrition activities targeting children under five years, pregnant and lactating women in the 21-nutritional emergency districts according to the 2017 SMART survey (global malnutrition > 15% and / or severe cases > 2 %); and (iii) contributing to creating an enabling environment to strengthen resilience among vulnerable communities based on a multi-sectoral approach and on coordination. However, to mitigate the impact of the lean season in any department countrywide, a national surveillance mechanism was systematized. This mechanism concerned: (i) ensuring access of quality screening of acute malnutrition twice yearly using a mass campaign countrywide and in an integrated approach with vitamin A supplementation and deworming, (ii) conducting the national nutrition survey using SMART methodology during the lean season, (iii) conducting real-time monitoring of the origin of severe cases of acute malnutrition using the RapidPro platform.

---

<sup>7</sup> Nutrition emergency: GAM > 15 percent and/or SAM > 2 per cent

<sup>8</sup> Government of Mauritania Ministry of Health, Nutrition SMART Survey, August 2017; and World Food Programme Mauritania, Food Security Monitoring Survey, November 2017.

**Resources Required/Allocated:**

The nutritional surveillance mechanism was supported by funding opportunities from CERF (SM180129), OFDA (SM180225), FFP (SM180232) and ECHO (SM180130). Actions supported included (1) twice yearly mass campaign of screening acute malnutrition countrywide integrated to vitamin A supplementation and deworming services; (2) SMART survey conducted during the lean season period; (3) a real time monitoring of the origin of SAM cases using the RapidPro platform.

**Progress and Results:**

An average of 498,246 children aged 6-59 months were reached with quality service of acute malnutrition screening, representing 87% of children at countrywide, allowing to refer 2,241 severe acute malnutrition (SAM) cases for quality treatment. An average of 565,593 children aged 6-59 months were supplemented with vitamin A through these two rounds, representing a coverage of 88%, and 498,246 children aged 12-59 months benefited from de-worming tablets as part of the anaemia integrated control approach, representing a coverage of 86%.

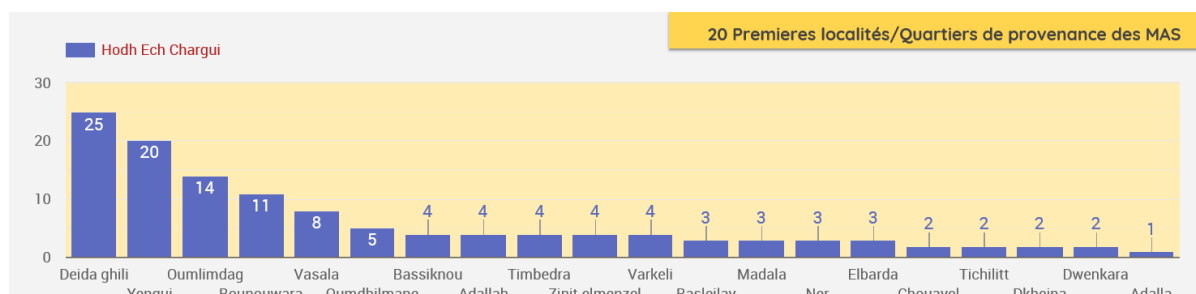
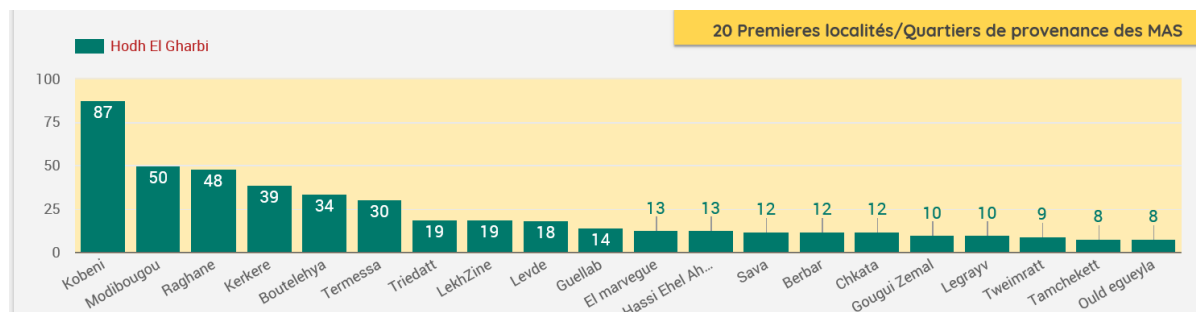
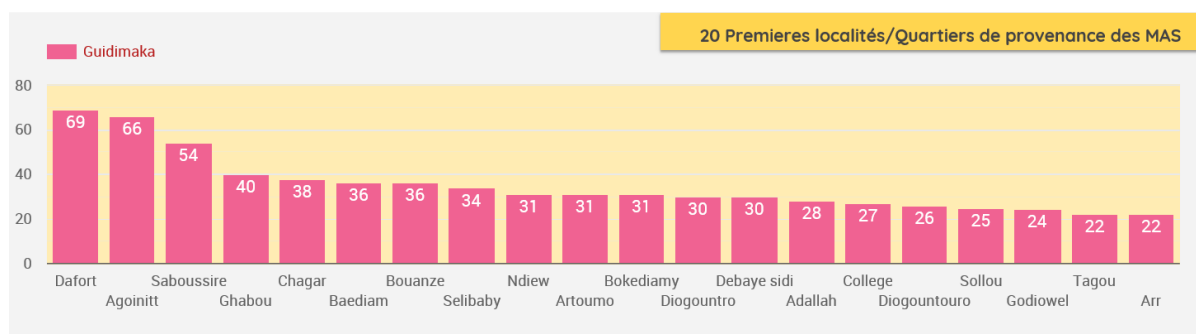
The 2018 SMART survey showed that the national nutrition situation is still serious with 11.6 per cent of GAM and 2.3 per cent of SAM; 23 districts out of 55 are in nutrition emergency (GAM>15 percent and/or SAM >2 per cent). Through the inter-sectoral group<sup>9</sup> (nutrition/food security), the SMART 2018 results have been presented, discussed and priority actions identified for the ongoing nutrition response and preparedness for the 2019 humanitarian response plan. In addition, the Ministry of Health has also received funding and technical support from UNICEF to hold regional restitution<sup>10</sup> of the key 2018 SMART survey results in eight emergency regions to (1) support a discussion on malnutrition contributing factors with nutrition authorities and stakeholders at the local level, (2) to identify priority actions as part of the multisectoral nutrition coordination at the regional level. Indeed, several malnutrition contributing factors were pointed out as: (i) immediate causes of acute malnutrition with poor practices of infant and young child feeding; childhood diseases (diarrhea, malaria, acute respiratory infection); (ii) underlying causes of acute malnutrition with food insecurity, mis-understanding of appropriate food for children, low access to health care and sanitation, poor practice of hygiene, gender issues, and under-protected children from divorced parents, (iii) root-causes of acute malnutrition with rainfall deficit, soil depletion, structural issues of health, and agriculture/livestock sectors. The immediate actions to undertake in 2019 include: (i) to strengthen multisectoral coordination at regional level; to scale-up optimal infant and young child feeding practices promotion at health facilities and communities level; (ii) to create an enabling environment for optimal nutrition, health care, hygiene and sanitation access using child focus interventions through a multi-sectoral approach.

Real time monitoring of the origin of SAM cases conducted in three regions (Guidimakha, Hodh El Gharbi, Hodh El Chargui) enabled the identification of hotspots of SAM cases (top 20 localities) as shown in the graph below. and implementation of early corrective actions including: (i) pre-proposal of RUTF stock close to SAM hotspots; (ii) intensification of early screening of acute malnutrition by community health workers and mothers/caregivers integrated to the promotion of optimal IYCF practices.

---

<sup>9</sup> Intersectoral group: Nutrition group led by UNICEF and Food Security group led by WFP

<sup>10</sup> <http://fr.ami.mr/Depeche-47710.html>; <http://fr.ami.mr/Depeche-47724.html>



### Criticality and value addition:

In 2018, the SMART survey indicated an emergency<sup>11</sup> nutritional situation. Indeed, prevalence of severe acute malnutrition (SAM) was estimated at 2.3% up from the emergency threshold (2%); the global acute malnutrition (GAM) was estimated at 11.9% within serious nutrition situation range (10-15%). Systematizing surveillance mechanism eased decision-making including reviewing ongoing emergency response, undertaking earlier corrective actions, prioritizing zones, and preparedness actions for the 2019 emergency plan. In addition, the surveillance mechanism catalyzed multi-sectoral coordination at the decentralized level.

### Challenges and Lesson Learned:

The surveillance mechanism pointed out chronic vulnerabilities of height regions that required combining emergency and development actions using child focus programming. However, raising development funding is a major obstacle; emergency funds are predominant in this Sahel country. Indeed, activities related to the surveillance mechanism are entirely financed by external emergency donors. In addition, capacity on SMART survey methodology is limited among stakeholders. We learned that when dealing with a nutritional crisis associated to a rainfall deficit, it is relevant to include in the humanitarian response a surveillance mechanism to monitor the evolution of the nutritional situation countrywide.

<sup>11</sup> Emergency nutrition situation: GAM >15% and/or SAM > 2%

### **Moving Forward:**

As part of the implementation of longer-term strong nutrition surveillance system in Mauritania, UNICEF will pursue capacity-building of nutrition surveillance. Advocacy will be undertaken for domestic financial resource mobilization to support a minimum package of nutrition surveillance activities: (1) SMART survey; (2) mass campaigns screening of acute malnutrition. Real time monitoring of SAM case origins in the seven chronic vulnerable regions combined with sentinel sites approaches implementation in these regions. Otherwise, as part of multisectoral coordination, it should be important to explore whether certain activities of nutrition surveillance could be integrated within the existing food security surveillance systems.

### **Results Achieved from Humanitarian Thematic Funding**

- **Nutrition Sector**

The Global Thematic Humanitarian Response grant allowed to secure IMAM supply for quality treatment of acute malnutrition as part of lifesaving action. Indeed, it allowed to purchase 8,850 cartons of RUTF (Plumpy-Nut), 95 cartons of therapeutic milk F75 and 36 cartons of therapeutic milk F100. Based on the 2018 national caseload estimated at 26,930 cases of severe acute malnutrition, this level of contribution on IMAM supply represents 37% of the RUTF annual need, 41% of F75 annual need and 30% of F100 annual need. The Global Thematic Humanitarian Response grant also supported logistic costs related to the management of IMAM supply countrywide. In order to ensure integrated quality SAM treatment, this contribution enable the training of 75 health agents on delivering infant and young child (IYCF) services at health facilities/communities levels in three regions (Assaba, Gorgol and Brakna). Through coherence and complementarity between humanitarian and development programming, the grant contributed to organizing a national breastfeeding campaign coinciding with the Celebration of the World Breastfeeding Week. UNICEF developed and supported the implementation of a communication plan for this campaign which included advocacy, mass promotion, and community mobilization to intensify the promotion of exclusive breastfeeding practices. TV and radio spots were broadcast throughout the country targeting at least 65,000 pregnant women and 104,000 lactating women. As part of promotional activities, a video promoting exclusive breastfeeding and featuring UNICEF goodwill Ambassador and young Mauritanian singer, Khoudia, was broadcast on national television and social media (<https://youtu.be/HvrRrTC8i9g>). The First Lady was nominated “First Nutrition Champion” in Mauritania during the launch of the campaign in Nouakchott in a key step to galvanize support from decision makers.

- **WASH Sector**

The Humanitarian Thematic Funds enable UNICEF to implement activities related to the nutritional emergency, for which 272 nutrition centres received WASH kits or benefited either from the construction of latrines or connection to drinking water. WASH interventions were carried out as well for flood victims in the Bassikounou District. 2,600 (1,040 Children, 812 women and 748 men) people benefited from drinking water supply and sanitation facilities (separate male/female latrines) on the disaster relief sites with some 500 WASH kits distributed to households. UNICEF continued to lead the coordination of the WASH sector group at the Hodh El Chargui level while strengthening the leadership of the Ministry of Water and Sanitation to assume more responsibility for emergency response planning and coordination. Without this funding, assisting flood affected people and distribution of WASH Kits, would not have been possible.

- **Education Sector**

Through a collaborative approach targeting both refugees and host communities, Global Thematic Humanitarian Response funds were utilised by UNICEF and its partners to contribute to the overall preparedness and response programme for Education in Emergency. An intense advocacy campaign was carried out with the aim to increase enrolment for the upcoming school year. As a result, a total of 8,217

children and 1,438 new children in the M'Berra camp have benefited from formal education or non-formal education in 2018 (for the school year 2017-2018 and 2018-2019, respectively). The number of students enrolled for the school year 2018-2019 in primary education reached 4,594 (2,353 boys and 2,241 girls) and at secondary education level, 350 students (238 males and 112 females) are enrolled as of November. Tackling school exclusion has been a priority for UNICEF and partners. As a result, 5,553 out-of-school children (3 to 17 years of age) accessed formal or non-formal basic education in 2018. As a measure to reduce indirect education costs, student kits are distributed every quarter to 19,777 students (including 9,655 refugee students and 10,122 host community students). The construction of lower and upper secondary education facilities in the camp started in September with an aim to improve learning conditions and ensure a safer and more protective learning environment for all refugee children accessing secondary level and boost transition rates from primary to secondary education, especially for girls. The quality of the construction (to be finalized by January 2019) was supervised jointly with the central Government, UNICEF staff and the camp education committee. Capacity building for better understanding, planning and responding to humanitarian crisis was carried out. In this regard, UNICEF supported the participation of the regional education director of the Hodh El Chargui region to an Education in Emergency training session facilitated by UNICEF WCARO in Dakar.

- **Child Protection**

The contribution received through the Thematic Humanitarian Funding was critical in strengthening the capacity of UNICEF to monitor child protection interventions in humanitarian situations and expanding the reach of community-based child protection mechanisms in M'Berra camps. With UNICEF support and in partnership with the national NGO ESD (Ensemble pour la Solidarité et le Développement), 43 child protection sub-committees were established in the camp and their members trained on their roles and a number of child protection issues affecting refugee children in M'Berra camps. 257 community members and service providers were equipped with technical skills and knowledge to support refugee children at risk or victims of violence, abuse and exploitation and on how to make their referral to services in a confidential manner. The contribution was also used to procure supplies, mainly recreational kits, which contributed to the improvement of the quality of play and recreational activities organised for children in the camp as part of psychosocial support. 1,538 refugee children at risk or victims of violence, abuse and exploitation, including 820 girls were identified and provided with integrated psychosocial support. This included individual or group counselling sessions, drama, singing, sports and recreational activities and referral to basic services (health, education, birth registration, nutrition) as required. The capacity of UNICEF to co-lead the Child Protection Working Group was also maintained. In fact, the CPWG maintained a high level of productivity through regular monthly coordination meetings and undertaking of joint activities. For example, with UNICEF technical support and in close collaboration of UNHCR as co-lead of the CPWG, the Standard Operating Procedures for case management were developed and signed off by all members of the CPWG. Implementation of these SOPs has gradually improved the quality of services provided to refugee children in need of protection, including their individual follow-up.

### **Assessment, Monitoring and Evaluation**

During a meeting in September, the Humanitarian Country Team reviewed the calendar of key upcoming events (including the availability of results from Cadre Harmonisé, which could only be available in December) and decided not to undertake a Humanitarian Needs Overview exercise. Instead, it developed an advocacy document to describe the unique features of the Mauritanian context, challenges and needs. Noting the various challenges highlighted in the SMART survey results and the protracted situation of Malian refugees in the country, UNICEF Mauritania developed an appeal for 2019 through the Humanitarian Action for Children exercise for a total of US\$10.5 million.

For the second consecutive year, irregular rainfall has negatively impacted crops and pastures, eroding household resilience and capacity to absorb shocks. Projections of the “Cadre Harmonisé” (West Africa’s



version of the Integrated Food Security Phase Classification) indicated that over 575,602 people will be in a critical food security situation during the lean season in 2019 – which is projected as much more severe than the average and expected to start much earlier than normal (possibly as early as February rather than June in some areas).

The 2018 SMART survey conducted at the end of the lean season (July) showed that the nutrition situation remains serious in Mauritania with a small increase of GAM, 11.6 per cent compared to 10.9 per cent in 2017; whereas the incidence of SAM was similar to 2017 (2.3 per cent), just above the critical threshold (2 per cent). In addition, 23 out of 58 districts faced nutrition emergency conditions (GAM > 15 per cent and/or SAM > 2 per cent) compared to 21 districts in 2017.

Throughout the year, UNICEF Mauritania tracked its humanitarian performance monitoring (HPM). Three SitReps were produced to update stakeholders (beneficiaries, Headquarters, Natcoms, and donors) on UNICEF's and partners' achievements and on the situation of children and women in Mauritania.

### **Financial Analysis**

Having seen a sharp and steady decrease in humanitarian funding since 2013 (66 per cent in 2017 compared to 2013 levels), the funding situation improved in 2018. UNICEF Mauritania received support for emergency nutrition interventions from ECHO, OFDA, CERF and Sida. Funds for WASH were received from OFDA, Swedish Committee for UNICEF and Sida, while ECHO and BPRM supported child protection and education in emergency activities. Unearmarked funding was used whenever possible as these give UNICEF essential flexibility to direct resources and ensure the timely delivery of life-saving supplies and interventions to where they are needed most, especially in the form of longer-term and predictable funding and in strengthening preparedness and resilience building.

Underfunding paired with constraints on flexibility hindered UNICEF agility to respond to emergencies in a timely and optimal manner; of all the emergency resources mobilised in 2018 only 16 percent were unearmarked. Most funds were to be used within a year of receipt and were received as the lean season was already well advanced. Lack of resources in several sectors (health in particular) limited a multi-sector response to the ongoing complex humanitarian situations affecting the country. While the prevalence of stunting in Mauritania decreased from 34.5 per cent to 20.1 per cent between 2001 and 2017 due to improved access to basic social services and reduction of poverty, the two consecutive years of drought 2017-2018 reminds us that gains obtained in recent years might be reversed if no sustained investment is made.

### **Future Work Plan**

In addition to work with partners to ensure emergency preparedness and sectoral coordination, UNICEF Mauritania will pursue the following actions:

#### **Nutrition:**

- Ensure provision of life-saving items and support the strengthening of health system to increase access to life-saving treatment for children 6-59 months with SAM in areas with high prevalence
- Continue working on financial tracking, leveraging domestic resources, and building national capacities, including by working with media and parliamentarians.

#### **Health:**

- Provide assistance, quality assurance and oversight to achieve humanitarian results in health.
- Support the response to measles epidemics

**WASH:**

- Pursue the integration of the humanitarian - development nexus.
- Facilitate the integration of climate resilience and/or risk management strategies into the country's water, sanitation and hygiene sector plans and strategies.

**Education:**

- Support education in emergency to refugee children in the camp and children in host communities through distribution of learning materials, and teacher training.
- Support early learning and stimulation for refugee children and children in host communities who are aged 3 to 5 years old.

**Child Protection:**

- Ensure optimal coordination with child protection in emergency stakeholders in Bassikounou and Nouakchott.
- Contribute to the Monitoring and Reporting Mechanism.
- Continue to provide respond to psychosocial needs of vulnerable children (Malian refugees and children in host communities).
- Continue to build capacity of stakeholders on PSEA.

**Expression of Thanks**

UNICEF Mauritania wishes to express its heartfelt gratitude to all public and private sector donors for the contribution and pledges received against the HAC 2018, which was funded at 46 per cent, and which made the 2018 response possible: your support enabled UNICEF Mauritania to successfully respond to humanitarian needs of women and children.

The results in this report highlight the importance of flexible thematic and non-thematic humanitarian funding from donors, which has enabled UNICEF to respond quickly and meet pressing priorities. UNICEF has been able to use the financial support it has received to contribute to achieving results for children affected by crises.

While significant results were achieved to address humanitarian needs in 2018, additional funding is still needed to ensure timely, targeted and comprehensive humanitarian response, as well as build long term community and family resilience, capitalizing on the gains made in the country. Mauritania is confronted with two silent and protracted crises that could potentially compromise gains achieved in the last thirty years. Your generous contribution contributed to the survival, protection, and development of children and women. Without your support UNICEF's work in Mauritania would not be possible – thank you!

## Annexes to the CER

### Annex A: Financial Analysis

**Table 1: Funding status against the appeal by sector**

**2018 Funding Status against the Appeal by Sector (Revenue in US\$):**

Funding Requirements (as defined in the revised Humanitarian Appeal 2018)					
Appeal Sector	Requirements	Funds available		Funding gap	
		Funds Received in 2018	Carry-Over from 2017	\$	%
Nutrition	9,930,000	4,779,351	51,562.83	5,060,127	<b>51%</b>
Health	2,979,000	107,449	-	2,871,551	<b>96%</b>
WASH	2,500,000	1,307,933	-	1,192,067	<b>48%</b>
Education	1,384,000	2,569,711	24,293.75	0	<b>0%</b>
Child Protection	2,338,000	1,103,543	4,234.47	1,230,223	<b>53%</b>
<b>Total</b>	<b>19,131,000</b>	<b>9,867,987</b>	<b>80,091</b>	<b>10,392,927</b>	<b>54%</b>

**Table 2: Funding received and available by donor and funding type**

<b>Table 2 - Funding Received and Available by 31 December 2018 by Donor and Funding type (in US\$)</b>		
<b>Donor Name/Type of funding</b>	<b>Programme Budget Allotment reference</b>	<b>Overall Amount*</b>
<b>I. Humanitarian funds received in 2018</b>		
<b>a) Thematic Humanitarian Funds</b>		
See details in Table 3	SM/18/9910	547,181
<b>b) Non-Thematic Humanitarian Funds</b>		
USAID/Food for Peace	SM/18/0232	65,814
Swedish Committee for UNICEF	SM/18/0425	1,852,083
Sida	SM/18/0246	789,846
USA (USAID) OFDA	SM/18/0225	1,850,000
USA (State) BPRM	SM/18/0369	1,388,888
ECHO	SM/18/0101	568,207
<b>Total Non-Thematic Humanitarian Funds</b>		<b>6,514,838</b>
<b>c) Pooled Funding,</b>		
<b>(i) CERF Grants</b>		
<b>(ii) Other Pooled funds</b> - including Common Humanitarian Fund (CHF), Humanitarian Response Funds, Emergency Response Funds, UN Trust Fund for Human Security, Country-based Pooled Funds etc.		
CERF	SM/18/0129	934,579
<b>d) Other types of humanitarian funds</b>		
In-kind assistance	KM/18/0005	333,318
In-kind assistance	KM/18/0006	26,496
In-kind assistance	KM/18/0007	16,200
<b>Total humanitarian funds received in 2018</b>		<b>8,372,612</b>
<b>II. Carry-over of humanitarian funds available in 2018</b>		
<b>e) Carry over Thematic Humanitarian Funds</b>		
Thematic Humanitarian Funds	SM/14/9910	<b>11,229</b>
<b>f) Carry-over of non-Thematic Humanitarian Funds</b>		
USAID/Food for Peace	KM/17/0021	16,838
USAID/Food for Peace	SM/17/0395	33,238
USAID/Food for Peace	KM/16/0043	434
USAID/Food for Peace	SM/16/0383	308
European Commission / ECHO	SM/17/0077	17,701
European Commission / ECHO	SM/17/0187	744
<b>Total carry-over non-Thematic Humanitarian Funds</b>		<b>69,263</b>
<b>Total carry-over humanitarian funds</b>		<b>80,492</b>

\* Programmable amounts of donor contributions, excluding recovery cost.

**Table 3: Thematic Humanitarian Contributions Received in 2018**

<b>Thematic Humanitarian Contributions Received in 2018 (in US\$): Donor</b>	<b>Grant Number<sup>12</sup></b>	<b>Programmable Amount (in US\$)</b>	<b>Total Contribution Amount (in US\$)</b>
Japan Committee for UNICEF	SM/18/9910/0462	500,000	540,000
Swedish Committee for UNICEF	SM/18/9910/0214	47,181	50,000
<b>Total</b>		<b>547,181</b>	<b>590,000</b>

---

<sup>12</sup> International Aid Transparency Initiative (IATI) requires all grants to be listed in reporting. <http://iatistandard.org/>

**Annex B: Two-pagers – non-Thematic Funding contributions**

Four two-pagers are attached to this grant

<b>Grant number</b>	<b>Donor</b>	<b>Sector</b>
<b>SM180369</b>	USA (State) BPRM	Education/ Protection
<b>SM180232</b>	USAID/Food for Peace	Nut
<b>SM180225</b>	USAID/Food for Peace	Nut/Health/WASH
<b>SM180246</b>	Sida	WASH/Health/Nut/Education/Protection

### **Donor Statement (As of 31 December 2018)**

A series of donor statements are attached to this report.

### **Human Interest Stories and Communication**

Mauritania's quarterly SitRep was a relevant platform to ensure the visibility of the relevant contribution to mitigate the impact of the 2018 emergency situation. UNICEF also ensured the visibility of humanitarian response through social media. Several human interest stories can be found:

[https://medium.com/@UNICEF\\_MTA/aichata-from-refugee-to-social-worker-168f0d0e5d6d](https://medium.com/@UNICEF_MTA/aichata-from-refugee-to-social-worker-168f0d0e5d6d)

[https://medium.com/@UNICEF\\_MTA/mother-courage-and-her-malnourished-children-fce79b8d25e8](https://medium.com/@UNICEF_MTA/mother-courage-and-her-malnourished-children-fce79b8d25e8)

[https://medium.com/@UNICEF\\_MTA/ndeyes-story-fighting-against-malnutrition-and-hoping-for-a-better-future-595f4cc2e20b](https://medium.com/@UNICEF_MTA/ndeyes-story-fighting-against-malnutrition-and-hoping-for-a-better-future-595f4cc2e20b)

### **Donor Feedback Forms**

- [English version](#)
- [French version](#)