

HUMANITARIAN PLAN 2023



CHILDREN CAUGHT IN CRISIS

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FOREWORD

In 2023, 339 million people will require humanitarian assistance, a nearly 24% increase in need compared to 2022.



The scale of converging crises globally means the stresses on children's rights are only expected to grow as more children need humanitarian assistance than ever before. Children are growing up in a world where if they are currently displaced, they will likely remain so for their entire childhood and their resilience will continue to be tested in 2023. Intersecting crises due to conflict, slow and rapid onset climate shocks, and global economic instability has resulted in dramatically increasing humanitarian need.

Children are living in the worst global cost of living crisis in a generation and their right to survive, be protected, and access education remains under threat. In every country Save the Children supports, food insecurity will increase in 2023, with millions of children unable to play, learn, study, and grow due to severe acute malnutrition. Food insecurity is forcing families to take unimaginable and desperate measures including withdrawing their children from school, and sending children to work, or forcing young girls into early marriage. In areas of conflict and insecurity, some children may be recruited into armed groups or gangs with the promise of food and protection, exposing them to devastating violence and harm.

In an increasingly volatile world with more children facing compounding crises, collective efforts are needed to invest in early anticipatory action to prevent and reduce human suffering before crises occur. We need to see more funding channeled directly to national and local organisations that are best placed to respond to the needs on the ground.

With the establishment of the One Humanitarian Team, Save the Children is ready to act and scale up engagement in humanitarian diplomacy to protect children, facilitate the delivery of assistance to those in need, and, ultimately, work to end these crises. Working in partnership with local and national actors, we will amplify children's voices, deliver anticipatory action and humanitarian assistance, strengthen nexus programming, and embed advocacy across our interventions.

Save the Children will require \$1.3 billion to reach 30 million people in need, including 17.3 million children, in 44 countries.

Inger Ashing Chief Executive Officer, Save the Children International

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GLOBAL HUMANITARIAN OUTLOOK FOR 2023

Critical needs for children will persist and accelerate, in an increasingly challenging operational environment.

The ongoing destabilisation of major world systems, including climate dysregulation and the erosion of human rights frameworks, is creating a world in flux, driving conflict, displacement, economic shocks, food insecurity, and a deterioration of international human rights norms. These pressures are disproportionately impacting the ability of lower income countries to provide the services and subsidies essential for girls and boys to survive, learn, and live free from violence.

Globally, economies are struggling to recover from the multi-layered impact of COVID-19, a string of financial crisis in previously stable economies, and the increasing risk of a global recession in 2023. The unfolding global cost-ofliving crisis will likely be felt until the second half of next year and be marked by an exacerbated energy crisis. This crisis will have significant impacts on children's health, well-being, and overall development, especially for the most vulnerable households.

The contemporary challenges humanitarian organisations face in responding, anticipating, and preventing compounding crisis will remain in 2023 as:

The most vulnerable will continue to be marginalised by **restrictions on humanitarian** access in several politicised aid settings.

Millions of additional children will face severe **food insecurity** due to substantial increases in food prices, continued disruption to food and supply chains, the persistence of conflicts causing increased population displacement, and the impact of the climate crisis.

Challenges brought on by global inflation and currency depreciation will reduce purchasing power and increase the cost of programme delivery.

Funding constraints will continue as the gap between institutional funding and growing needs increase and funding commitments for anticipatory action and necessary adaptive actions are insufficient.

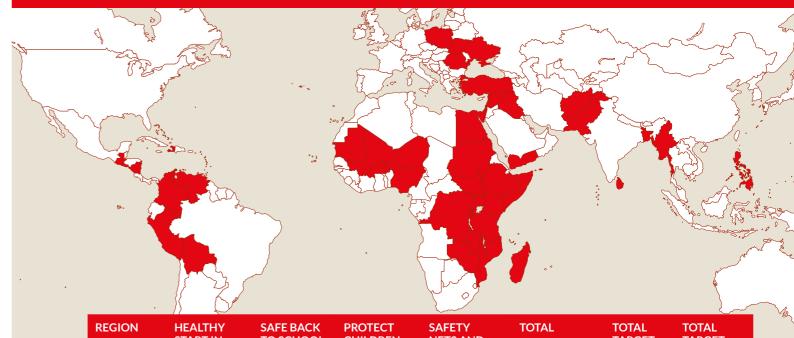
Addressing these ever-growing needs will require, now more than ever before, an interagency response, putting children and youth at the centre of our interventions. 2023 is the time to truly make children our partners of hope, to meet their essential needs at times of crisis, uphold their rights even in the most challenging contexts, and jointly work toward a better future.

HUMANITARIAN RESPONSE PLAN OVERVIEW

To address the accelerating and compounding humanitarian crisis, Save the Children will require \$1.3 billion to reach 30 million people in need, including 17.3 million children, in 44 countries.

This humanitarian plan reflects the critical needs and humanitarian priorities emerging from country office response planning and is informed by the Interagency **Humanitarian Response Plan.**

Countries included in the 2023 Humanitarian Response Plan



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REGION	HEALTHY START IN LIFE	SAFE BACK TO SCHOOL AND LEARNING	PROTECT CHILDREN FROM VIOLENCE	SAFETY NETS AND RESILIENT FAMILIES	TOTAL	TOTAL TARGET REACH	TOTAL TARGET CHILDREN REACH
ASIA	\$62,130,787	\$45,896,892	\$14,460,852	\$110,628,742	\$233,117,273	5,827,885	2,981,838
EAST AND SOUTHERN AFRICA	\$161,221,985	\$75,316,447	\$42,937,447	\$96,381,735	\$375,857,614	12,775,170	7,626,367
LATIN AMERICA AND CARIBBEAN	\$33,105,960	\$11,037,684	\$11,319,786	\$45,563,627	\$101,027,056	1,320,066	671,067
MIDDLE EAST AND EASTERN EUROPE	\$120,532,457	\$79,147,816	\$59,148,965	\$152,766,470	\$411,595,707	5,282,776	2,992,921
WEST AND CENTRAL AFRICA	\$59,556,848	\$25,167,007	\$21,204,965	\$71,225,792	\$177,154,611	4,985,307	3,073,263
TOTAL	\$436,548,037	\$236,565,845	\$149,072,014	\$476,566,366	\$1,298,752,262°	30,191,204	17,345,456

HUMANITARIAN RESPONSE PRINCIPLES

Save the Children's response principles guide our operations, programming, and advocacy. We will realise these principles by working to influence duty bearers at the national, regional, and international level to uphold children's rights in humanitarian contexts and advocate for principled humanitarian action to meet the ever-growing needs of children and communities.



We will continue to identify, prevent, and respond to key protection risks and violations in the humanitarian crises in which we work, linking programming to national and global advocacy. By mainstreaming and integrating protection outcomes across programme sectors, we aim to expand national capacities to monitor and report grave and other serious child rights violations, and link with global initiatives driving accountability for crimes against children. We will introduce and capture evidence and learning on the outcomes and impact of the Centrality of Protection Policy.



We will scale up efforts to reduce the impact of predictable crises on children, enhancing systems and capacities for anticipatory action and emergency preparedness. We will expand predictive analytical and dynamic risk assessment and monitoring capacities for a range of hazards, including climate-driven hazards, while adapting our decision-making, planning

and financial systems to enable our teams with local and national actors to act as early as possible. We will conduct conflict sensitivity assessments in preparation for our humanitarian response and work closely with stakeholders across the humanitarian, development, peacebuilding, and climate space, as well as with children and communities to generate evidence for and support scaling of anticipatory actions that reduce risk and mitigate humanitarian impact on children. We will allocate a minimum of 15% of unrestricted funding to pre-crisis response including emergency preparedness and anticipatory action and will advocate for the prepositioning and release of earlier, flexible funding and establishment of crisis modifiers with key donors.



We will support and amplify the voices of local and national actors, across the humanitarian response cycle to strengthen programme and advocacy efforts. We will support locally led coordination mechanisms, engage in government-led coordination at the national level and strengthen engagement of national NGOs. We will harmonise our approach to partner requirements with other humanitarian actors, work with local actors to strengthen local system & capacities, facilitate learning from and between local actors, and improve the quantity and quality of financial support direct and flexible. Save the Children remains committed to upholding our Grand Bargain commitments including supporting local and national actors with humanitarian funding. At the end of 2023, we will report on the allocation of funding, from Humanitarian Funds and Institutional Donors to local and national actors. These funds will allow these actors to carry out meaningful humanitarian action for children in crises.



GENDER EQUALITY

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We will work to empower women, men, boys, and girls, ensuring that the unique needs, risks, capacities and priorities

of girls, women, boys, and men and those with diverse sexual orientation, gender identity, gender expression and sex characteristics (SOGIESC) are identified and provided with targeted assistance. We will implement strategies to empower and support a diverse range of girls, through Girls' **Empowerment Curriculum and accelerate work** on Child Early Forced Marriage and Unions in humanitarian settings.



We commit to a 50% CO2e emissions reduction of our operations by 2030. Unavoidable residual emissions, which are critical to our mission, will be responsibly offset. We have also integrated an environmental and social screening tool into our project design process which identifies the risks to the environment and communities from project activities and allows mitigation measures to be chosen with responsibilities, timings, expected results and cost implications to be defined.

EVIDENCE-BASED

We will deliver quality programmes and advocacy informed by evidence of proven results, expanding the use of evidence-based programming approaches. Where evidence is weak or insufficient, we will aim to build it through increased investment in primary data collection, standardised programme indicator monitoring, high quality humanitarian evaluations and practical research, working in partnership with actors in the humanitarian system. We will systematically capture, visualise, communicate, and act on learnings from our responses through research, evaluations and real time reviews aligned to the Core Humanitarian Standard.



We will be accountable to children and communities affected by crisis and ensure that children's voices, demands, and expertise shape every humanitarian response in line with their needs, rights, and priorities. We will continue to put this commitment into action by consulting directly with children; supporting children's access to timely, accessible, and relevant information about our responses; strengthening inclusive child-friendly feedback and reporting mechanisms; and establishing meaningful opportunities for children and communities to participate in needs assessments, programme design, implementation, monitoring, evaluation, and advocacy.



Support Children to Have a Healthy Start in Life

Save the Children recognises the critical importance of integrated public health interventions for outbreak prevention and response, increasing access to health and nutrition services in humanitarian contexts, and addressing the growing hunger crisis. Through direct services and support to national government led interventions, Save the Children, with local and national actors, will continue our work to contribute to the reduction of morbidity and mortality and improve health outcomes for children, so no child under 5 dies from preventable causes.

We will work to increase the quality and scale of our humanitarian health interventions in 2023, recognising the scale of needs and the continued impacts of COVID-19 on health service delivery. We will strengthen community and primary health care services by working with local and national actors in existing health facilities, or by establishing mobile and primary health care services.

Save the Children, with local and national actors, will increase the scale of our vaccination work, in routine and mass vaccination settings, and focus on communicable disease outbreaks, prevention, and response, including surveillance for outbreaks. The Humanitarian Public Health Team will work closely with the Emergency Health Unit (EHU) to deliver appropriate and impactful programmes as they respond to the world's major epidemics including cholera, Ebola, measles, and COVID-19.

Save the Children will work with local and national actors to deliver preventative and curative interventions through a comprehensive package of services, including maternal, newborn, and reproductive health care. With a renewed focus on anticipatory action, and robust primary data applications for real-time decision making, together, we will support the management of common childhood illnesses at primary health

care facilities through Integrated Management of Newborn and Childhood Illness (IMNCI) and through Integrated Community Case Management (ICCM), at the community level.

Save the Children, with local and national actors will support caregivers and children to access integrated services for the prevention and treatment of malnutrition through direct interventions, technical leadership, capacity strengthening and advocacy. Coverage and quality of programming to protect, promote and support appropriate infant and young child feeding in emergencies (IYCF-E) and care practices will include integrated services to empower caregivers in nourishing their youngest. Management of small and nutritionally at-risk infants and their mothers (MAMI) will continue to scale up through programme implementation, internal and external capacity-building, and a robust learning agenda. We will also strengthen and scale up early detection and management of acute malnutrition as an essential safety net when prevention fails, including simplified approaches and supply chain strengthening.

Underpinning our critical humanitarian public health work, and contributing to food security and nutrition outcomes, Save the Children with local and national actors, will support children to increase access to safe water, adequate sanitation facilities and to perform basic hygiene practices. This entails working beyond first-phase responses, adopting early recovery, disaster risk reduction, and nexus approaches, providing resilient and sustainable water sanitation and hygiene (WASH) services at household, community, health care facilities, inside child friendly spaces and in schools to mitigate climate change related shocks. Close coordination with the EHU will enable WASH mainstreaming for infection, prevention, and control (IPC) and provision of WASH services in health care facilities.

SPOTLIGHT: MALNUTRITION ON THE RISE



Nelab', 22, lives with her two children, including 11-month-old daughter, Parsto', who has severe acute malnutrition, in a remote community in the Sar-e-Pul province of Afghanistan.

Nelab's mudbrick home sits on the side of a hill overlooking a large dry riverbed. Nelab's family survives on farming and the farm has been hard hit by Afghanistan's worst drought in decades. Nelab' says that there has been very little rain and that even if they plant something, nothing ever grows. She says that the price of food has increased. The nearest health facility is a six-hour walk and Nelab's children have all suffered from severe acute malnutrition.

Save the Children's health workers discovered Maryam', Nelab's three-year-old daughter, while operating a mobile health clinic in Nelab's community. Despite being immediately sent to the hospital, she tragically died on the way because she was so weak from hunger. Nelab's children, Parsto' and Mohammad', have been treated for malnutrition and Mohammad' has now recovered, but Parsto' is still severely malnourished and is being treated with therapeutic peanut paste, which provides the essential vitamins, minerals, and calories to help her survive and recover.

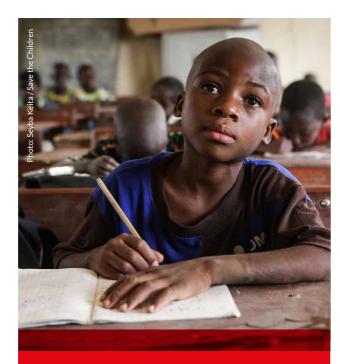
Provide Education and Support Learning

Education is lifesaving for children in crisis. It provides immediate physical, psychological, and cognitive protection and serves as an entry point to other life-saving interventions. Children and communities consistently prioritise access to education during times of crisis and it is an essential component of quality and accountable humanitarian action.

Save the Children will work to increase the reach, continuity, and quality of evidence-based rapid and adaptive education responses and advocacy to address the impact of COVID-19, conflict, and climate change on education systems. We will ensure that appropriate and inclusive in-person and distance learning approaches, including those that apply digital technology, are used to ensure quality learning and wellbeing including foundational literacy, numeracy, and social and emotional learning for crisis-affected children, and that approaches and learning outcomes are appropriately measured. We will tackle the barriers that can reduce children's safe access to quality learning opportunities. This includes providing cash and voucher assistance to families to help them overcome the financial barriers that keep children out of school, accelerated and catch-up approaches to recover lost learning time, and coordination with child protection case management systems so that highly vulnerable children are supported to return to education and can access alternative pathways when needed. We will support national education systems to ensure teachers have access to adequate support for their well-being in times of emergencies.

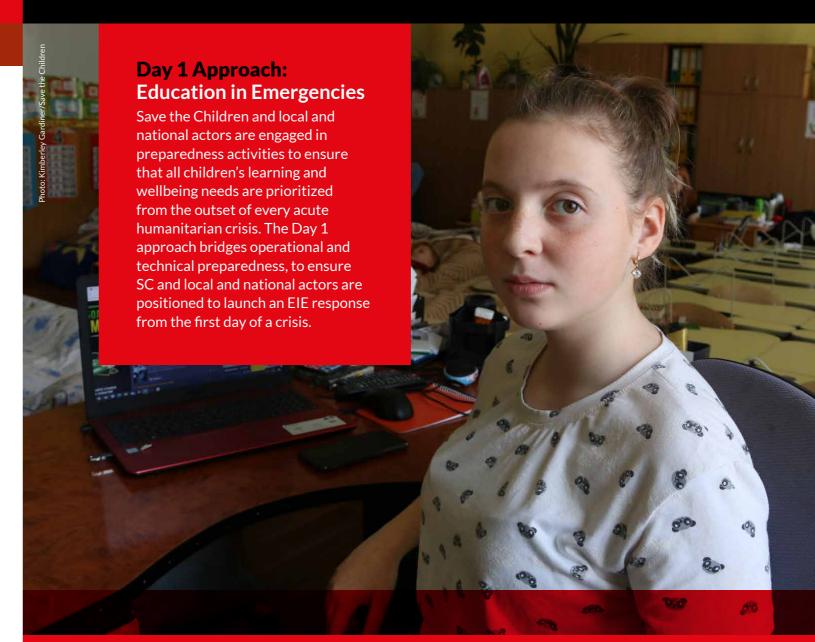
Strengthening community participation will be fundamental to ensure locally led appropriate education responses. Investment in local and locally appropriate rapid education response from day one of a crisis is an essential component of our approach to education in emergencies. This requires preparedness and anticipatory action efforts to identify, prepare and respond to education-related risks including direct attacks on schools, climate-induced hazards, and school closures due to the ongoing pandemic. We will train our staff and work with local and national actors to enable local responders to implement quality, risk-informed programming so that education can continue during a crisis, and we minimize loss of learning.

We will continue to support and lead effective and accountable coordination at country and global levels through the inclusive co-leadership of the Global Education Cluster and direct staffing of cluster roles. Strengthening co-leadership will be based on complementarity with UNICEF and include strengthened information and knowledge management, subnational cluster performance, and support to identify and mentor national organisations to co-lead clusters.



11-year-old Ousmane attends a Save the Children-supported school, Mopti region, Mali.

SPOTLIGHT: DIGITAL LEARNING PLATFORMS



Mariia^{*}, 13, fled her hometown with her mother Olena^{*}, six-year-old brother Mykyta^{*} and their cat. They found refuge in a school in Western Ukraine, and soon Mariia's grandparents came to join them. They all live in one classroom, surrounded by blackboards and learning materials. Mykyta^{*} is now enrolled in the school in the town where they live, but his classes are done mostly online. Mariia^{*} is still enrolled in school in her home region and attends classes online.

Save the Children, with local and national actors, is supporting children to access digital learning platforms across Ukraine, Poland, and Romania. Supporting parents and caregivers to make an informed decision as to whether integration into local schools or continuing with online learning is the right decision for their families. If parents

or caregivers decide online learning is best for their children, children access an online platform designed and managed by the Ukrainian Ministry of Education and Science, further their studies using the Ukrainian curriculum in Ukrainian, while accessing a protective digital environment with other children.

Protect Children from Violence

Save the Children will strengthen our focus on the prevention of child protection risks by developing a systematic approach to child protection in anticipatory action, and by continuing to strengthen the integration of child protection and mental health and psychosocial wellbeing in large-scale interventions to prevent, mitigate and respond to hunger. With local and national actors, we will systematically measure the impact of these interventions on child protection risks such as sexual and gender-based violence, child marriage, child labour, and family separation.

With local and national actors, we will leverage gender analysis to prevent, mitigate and respond to the effects of gender inequality and imbalance of power relations on the protection of children. Together with local and national actors, we will apply the Sexual and Gender Based Violence (SGBV) Multi-Sectoral Model for Humanitarian Settings to mitigate, prevent, and holistically respond to the needs of survivors through a child-centred and survivor-centred approach, by strengthening systems and improving coordination to ensure timely action. Together, we will amplify the voices and needs of child survivors to promote safer communities, homes, and schools and reduce the risk of SGBV and other grave violations.

We will roll out new guidance on multi-sectoral approaches to mental health and psychosocial support and strengthen investment in national capacity to drive these approaches. We will strengthen capacity to systematically monitor and report grave and other serious violations, both to strengthen our response and to improve accountability. We will use evidence from multiple humanitarian contexts to strengthen our support for community-led child protection, linking this with a growing focus on supporting community-led engagement with armed groups for humanitarian access and protection.



Ali, 12, with his 49-year-old father, Ramadan, in North West Syria where he lost his leg due to shelling in his local marketplace.

At the inter-agency level, we will strengthen our support to national actors to actively participate in and co-lead Child Protection Coordination groups. We will also seek further investment to extend our regional Child Protection in Emergencies Professional Development Programmes. We will develop and roll out revised guidance to address recruitment and use of children, particularly by armed groups designated as terrorist organisations, including detention for actual or perceived association with such groups. Building on the 15th anniversary of the Paris Principles and Commitments and the release of the Operational Handbook, we will collaborate with other child rights actors to advocate at a national and global level for the endorsement and implementation of the Paris Principles and contribute to advocacy for improved funding and resourcing of programmes and communitybased interventions to prevent recruitment and support meaningful reintegration.

SPOTLIGHT: AN ENTIRE CHILDHOOD DISPLACED

Complex crisis, armed violence, and climate driven events will continue to cause children and their families to be displaced in 2023. With forced displacement on average lasting 20 years, children currently living in displacement will likely remain displaced their entire childhood. A child's migration or displacement status does

not negate their fundamental rights under the Convention of the Rights of Child, yet more than 40 million children currently displaced are at risk of exploitation, family separation, violence, and early marriage. Even more concerning is that half of refugee children are not enrolled in school.



Community members displaced by fighting are seen at a primary school, which is serving as a displacement site in Rutshuru, DRC. As clashes between non-state armed groups and state armed groups in Rutshuru territory in North Kivu continues, at least 10,400 households, including at least 5,200 children, have been displaced during the past three months alone. Most of the families have been displaced to neighbouring territories in DRC, while more than 11,000 people have taken shelter across the border to Uganda. Nearly 60% of those displaced by the violence are children.

Provide Safety Nets and Support Resilient Families

Hunger impacts a child's ability to learn, to play, to create, and to dream. To address the current hunger crisis, Save the Children is working with national governments and local actors to support families and communities to build economic shock resilience and be less reliant on negative coping strategies such as child labour, child marriage, and withdrawing children from school.

By increasing investment in evidence-based early action, we will focus on anticipatory action triggers, to build shock responsive resilience in households and communities prior to crisis. Save the Children, with local and national actors, will expand the geographic scope, and use of data generated by food security analytical tools including Household Economic Analysis (HEA), **Emergency Market Mapping and Analysis** (EMMA) and Rapid Assessment of Markets (RAM). With local and national actors, we will deliver effective and efficient Cash and Voucher Assistance (CVA), in-kind food assistance, when needed, agricultural inputs, and support community-led productive asset creation.

In anticipation of continued displacement, restoration of livelihoods programming will include a shift to mobile skill set development, engaging the energy and technology sectors, promoting regenerative agricultural practices, increasing access to digital financial services, and partnering with youth-led and female-led Small and Medium Scale Enterprises (SMEs).

Save the Children will continue to strengthen our operational procedures to ensure the rapid delivery of funds directly to individuals and families in need. CVA will be embedded across humanitarian interventions with a specific focus on integration within food security livelihoods, protection, nutrition, and education programmes to strengthen child outcomes. With local and national actors, we will continue to identify opportunities for humanitarian CVA to contribute to social protection policy development and support research on the impact of CVA interventions in communities facing economic crisis, cost inflation, exchange volatility, and devalued currencies.

SPOTLIGHT: ADDRESSING THE CLIMATE CRISIS

In 2023, Save the Children will scale our work to demonstrate that the climate crisis is a child rights crisis and support children, including the most marginalised, to influence and voice change for climate action. Locally led and childsensitive action on climate change is increasingly becoming an economic necessity, as the costs of responding to humanitarian crises resulting from extreme weather events rise. We will work to

bring child-centered climate change adaptation to scale, hold states to account using strategic litigation and international accountability mechanisms through Child Rights Reporting, and influence climate change financing to be child sensitive, and anchor our climate crisis advocacy with evidence from both humanitarian and development work.

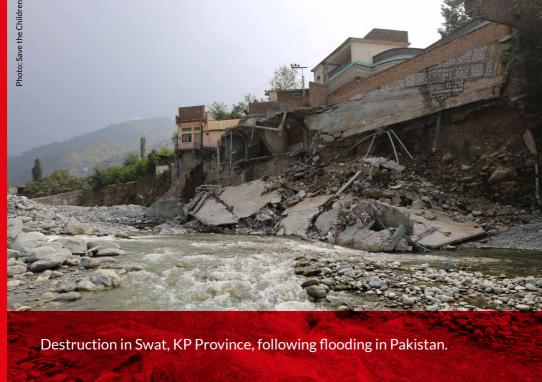


SPOTLIGHT: SAVE THE CHILDREN'S HUMANITARIAN FUND

The Humanitarian Fund is a critical tool to achieving Save the Children's 2023 humanitarian ambition. Flexible funding ensures Save the Children country offices, and local and national actors have the resources to rapidly scale and respond to escalating humanitarian needs. Through the strategic use of flexible funding, country offices are transforming our operational and technical capacity to prepare and respond at scale.



Save the Children Pakistan accessed flexible funding to immediately respond to the devastating floods affecting the country. Pakistani colleagues not only reached more than 100,000 people, but also leveraged flexible humanitarian funds to secure more than \$11 million in funding to support children and communities affected by the floods.



RESPONSE MONITORING FRAMEWORK

Save the Children will monitor the following indicators, disaggregated by age, gender, and disability where feasible. Data collected through Save the Children's response monitoring framework will be shared with Cluster-Lead agencies to support wider response monitoring at the sector level.

RESPONSE GOAL	INDICATOR						
Response Goal 1: Support Children	Number of vaccines provided by SC supported facilities, mobile clinics, or vaccination campaigns.						
to Have a Healthy Start in Life	Number of patients who received inpatient or outpatient consultation at a supported health facility or mobile clinic (number of consultations).						
	Number of children who are successfully treated / recovered from acute malnutrition.						
	Number of primary caregivers of children under two years old (0 – 23 months) counselled on Infant and Young Child Feeding (IYCF) at least once.						
	Number of pregnant women counselled on Infant and Young Child Feeding (IYCF) at least once.						
	Number of individuals directly reached through water, sanitation, or hygiene services.						
	Percentage % of supported households using improved sanitation facilities.						
Response Goal 2: Provide Education	Number of children participating in learning opportunities in humanitarian context through Save the Children and supported local and national actors.						
and Safe Learning	Percentage (%) of Save the Children supported education clusters or working groups operating with a strategic response plan which references localization, child safeguarding, or child participation.						
Response Goal 3: Live Free From	Percentage (%) of children who report an increase in their safety and wellbeing as a result of their needs being addressed.						
Violence	Number of grave and other serious child rights violations identified.						
	Percentage (%) of children, adolescents, family members, caregivers and service providers who demonstrate improved mental health and/or psychosocial wellbeing.						
Response Goal	Number of individuals participating in food security and livelihoods activities.						
4: Provide Safety Nets and Build	Percentage (%) of households with acceptable Food Consumption Score (FCS).						
Resilient Families	The average Reduced Coping Strategy Index (rCSI) score.						
	Number of children reached through cash or voucher assistance.						
	Percentage (%) of (beneficiary) households who report being able to meet the basic needs of their households (all/most/some/none), according to their priorities.						
Accountability and Participation	Percentage (%) of people surveyed who are satisfied with Save the Children support.						

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ANNEX: FINANCIAL REQUIREMENTS AND TOTAL REACH

Asia

COUNTRY	HEALTHY START IN LIFE	SAFE BACK TO SCHOOL AND LEARNING	PROTECT CHILDREN FROM VIOLENCE	SAFETY NETS AND RESILIENT FAMILIES	TOTAL	TOTAL TARGET REACH	TOTAL TARGET CHILDREN REACH
Afghanistan	\$21,000,000	\$30,882,353	\$3,705,882	\$49,411,765	\$105,000,000	2,183,135	1,289,546
Bangladesh	\$5,631,133	\$375,000	\$4,134,970	\$9,198,568	\$19,339,671	997,475	419,492
Myanmar	\$16,356,320	\$8,325,497	\$3,500,000	\$25,000,576	\$53,182,393	648,834	285,125
Pakistan	\$17,000,000	\$4,555,709	\$2,000,000	\$20,359,500	\$43,915,209	1,122,941	601,675
Philippines	\$310,000	\$1,000,000	\$120,000	\$750,000	\$1,680,000	71,500	18,000
Sri Lanka	\$1,833,334	\$1,258,333	\$1,000,000	\$5,908,333	\$10,000,000	804,000	368,000
TOTAL	\$62,130,787	\$46,396,892	\$14,460,852	\$110,628,742	\$233,117,273	5,827,885	2,981,838

East and Southern Africa

COUNTRY	HEALTHY START IN LIFE	SAFE BACK TO SCHOOL AND LEARNING	PROTECT CHILDREN FROM VIOLENCE	SAFETY NETS AND RESILIENT FAMILIES	TOTAL	TOTAL TARGET REACH	TOTAL TARGET CHILDREN REACH
Burundi	-	\$720,000	\$1,080,000	-	\$1,800,000	90,000	40,000
Ethiopia	\$29,930,000	\$16,046,347	\$6,200,000	\$10,823,653	\$63,000,000	2,060,756	1,767,151
Kenya	\$8,250,000	\$1,500,000	\$1,540,000	\$3,750,000	\$15,040,000	756,718	504,478
Madagascar	\$2,750,000	\$500,000	\$460,000	\$2,250,000	\$5,960,000	566,145	401,432
Malawi	\$1,100,000	\$1,600,000	\$400,000	\$950,000	\$4,050,000	230,890	138,534
Mozambique	\$3,500,000	\$4,700,000	\$2,840,000	\$2,000,000	\$13,040,000	323,495	184863
Rwanda	\$3,006,738	-	\$3,141,180	-	\$6,147,918	208,333	107,323
Somalia	\$39,439,068	\$5,000,000	\$4,850,000	\$53,113,082	\$102,402,150	2,148,456	1,158,415
South Sudan	\$19,735,107	\$9,500,000	\$5,100,000	\$3,500,000	\$37,835,107	955,866	661,178
Sudan	\$37,661,072	\$13,350,100	\$8,616,267	\$10,625,000	\$70,252,439	1,759,408	966,937
Tanzania	\$2,700,000	\$600,000	\$300,000	\$1,600,000	\$5,200,000	480,097	284,313
Uganda	\$7,250,000	\$20,000,000	\$5,750,000	\$3,500,000	\$36,500,000	866,103	588,859
Zambia	\$1,400,000	\$800,000	\$160,000	\$1,270,000	\$3,630,000	1,995,049	641,170
Zimbabwe	\$4,500,000	\$1,000,000	\$2,500,000	\$3,000,000	\$11,000,000	333,854	181,714
TOTAL	\$161,221,985	\$75,316,447	\$42,937,447	\$96,381,735	\$375,857,614	12,775,170	7,626,367

Latin America and Caribbean

COUNTRY	HEALTHY START IN LIFE	SAFE BACK TO SCHOOL AND LEARNING	PROTECT CHILDREN FROM VIOLENCE	SAFETY NETS AND RESILIENT FAMILIES	TOTAL	TOTAL TARGET REACH	TOTAL TARGET CHILDREN REACH
Bolivia	\$1,270,000	\$300,000	\$150,000	\$2,500,000	\$4,220,000	251,377	147,362
Colombia	\$4,232,000	\$3,496,000	\$2,208,000	\$8,464,000	\$18,400,000	195,020	136,520
El Salvador	\$2,589,850	\$1,337,528	\$1,116,836	\$1,337,528	\$6,381,742	151,752	44,008
Guatemala	\$3,000,000	\$700,000	\$1,000,000	\$4,050,000	\$8,750,000	142,157	69,027
Haiti	\$8,880,000	\$1,720,000	\$2,400,000	\$11,000,000	\$24,000,000	110,000	57,000
Nicaragua	\$400,000	-	-	\$600,000	\$1,000,000	34,678	9,719
Peru	\$7,734,110	\$484,156	\$444,950	\$13,612,099	\$22,275,315	96,972	43,084
Venezuela	\$5,000,000	\$3,000,000	\$4,000,000	\$4,000,000	\$16,000,000	338,110	164,347
TOTAL	\$33,105,960	\$11,037,684	\$11,319,786	\$45,563,627	\$101,027,056	1,320,066	671,067

Middle East and Eastern Europe

COUNTRY	HEALTHY Start in Life	SAFE BACK TO SCHOOL AND LEARNING	PROTECT CHILDREN FROM VIOLENCE	SAFETY NETS AND RESILIENT FAMILIES	TOTAL	TOTAL TARGET REACH	TOTAL TARGET CHILDREN REACH
Egypt	\$3,125,000	\$1,460,000	\$3,050,000	\$1,310,000	\$8,945,000	40,035	11,990
Iraq	\$8,000,000	\$4,000,000	\$4,000,000	\$4,000,000	\$20,000,000	1,036,999	539,257
Lebanon	\$5,000,000	\$9,000,000	\$7,400,000	\$12,400,000	\$33,800,000	183,500	140,975
oPt	\$1,500,000	\$3,000,000	\$4,000,000	\$2,500,000	\$11,000,000	152,516	73,914
Poland	-	\$8,240,856	\$5,491,593	\$7,185,331	\$20,917,779	35,740	18,150
Romania	-	\$3,901,211	\$7,308,273	\$1,539,594	\$12,749,077	171,091	113,634
Syria	\$12,200,000	\$15,100,000	\$7,000,000	\$7,500,000	\$41,800,000	628,900	318,700
Turkey	-	\$869,000	\$1,676,000	\$1,670,000	\$4,215,000	14,241	6,782
Ukraine	\$24,500,000	\$16,104,000	\$13,200,000	\$79,200,000	\$133,004,000	802,120	411,297
Yemen	\$66,207,457	\$17,472,749	\$6,023,100	\$35,461,545	\$125,164,851	2,217,634	1,358,222
TOTAL	\$120,532,457	\$79,147,816	\$59,148,965	\$152,766,470	\$411,595,707	5,282,776	2,992,921

West and Central Africa

COUNTRY	HEALTHY START IN LIFE	SAFE BACK TO SCHOOL AND LEARNING	PROTECT CHILDREN FROM VIOLENCE	SAFETY NETS AND RESILIENT FAMILIES	\$ TOTAL	TOTAL TARGET REACH	TOTAL TARGET CHILDREN REACH
Burkina Faso	\$11,000,000	\$5,000,000	\$1,500,000	\$2,500,000	\$20,000,000	651,866	537,610
DRC	\$21,349,389	\$6,642,000	\$6,984,000	\$5,400,000	\$40,375,389	1,341,333	763,099
Mali	\$10,500,000	\$4,000,000	\$2,000,000	\$7,000,000	\$23,500,000	674,250	427,000
Mauritania	\$179,974	\$157,895	\$189,474	\$373,684	\$901,026	32,690	19,040
Niger	\$4,325,000	\$2,859,120	\$3,210,000	\$3,749,876	\$14,143,996	631,168	334,114
Nigeria	\$12,202,485	\$6,507,992	\$7,321,491	\$52,202,232	\$78,234,200	1,654,000	992,400
TOTAL	\$59,556,848	\$25,167,007	\$21,204,965	\$71,225,792	\$177,154,611	4,985,307	3,073,263

Cover photo

Fadumo' (middle), 30, with other health workers holding therapeutic peanut paste, used to treat children with S.A.M, at a hospital in Puntland, Somalia.

