

MALI

HUMANITARIAN RESPONSE PLAN

2024





OVERVIEW

OF THE HUMANITARIAN SITUATION IN MALI

In 2024, the humanitarian situation in Mali remains volatile. Millions of people urgently require humanitarian aid due to violence, forced displacement, poverty and significant barriers to accessing basic services, such as health and education, compounded by the impacts of climate change. According to the 2024 Humanitarian Needs and Response Plan (HNRP), \$US701.6 million is required to meet the humanitarian needs of 7.1 million people.

The crisis stems from persistent political, security and socioeconomic turmoil that began in 2012 and continues to escalate; large parts of the country are under the control of non-state armed groups (NSAGs). Frequent clashes between these groups and government forces severely hinders access to populations in need. Humanitarian efforts are further challenged by insufficient funding and difficulties reaching affected communities trapped in conflict zones.

According to data from the May 2024 Displacement Tracking Matrix (DTM), 330,713 people are internally displaced across Mali, 848,886 have returned to their regions of origin within the country and 85,683 have been repatriated back to Mali and heavily depends on humanitarian assistance.

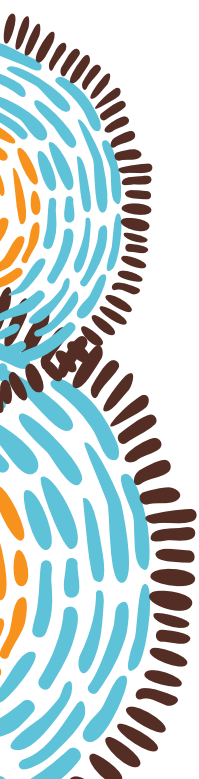
The deterioration in the security situation continues to severely limit the operational capacity of health focused humanitarian organizations, particularly in the North where the majority of non-functional health facilities cite staffing shortages, insecurity and a lack of medical equipment as the primary reasons

impacting service delivery. The breakdown in systems has resulted in reduced access to essential sexual and reproductive health (SRH) and specialized gender-based violence (GBV) services, including the clinical management of rape (CMR), psychosocial support (PSS), GBV case management, legal aid and referrals for mental health and other specialized services.

Less than 50% of women give birth with the assistance of qualified health personnel which increases the risks of complications and death for both mother and baby. Women and girls are particularly vulnerable as evidenced by the 2023 GBV Information Management System (IMS) report which recorded 15,993 cases of GBV, predominantly affecting women (96%). The number of cases is likely to be underreported due to stigma, fear or limited access to services.

Of the 7.1 million crisis-affected people in 2024, the Humanitarian Response Plan is targeting 4.1 million people with life-saving integrated assistance:

- **The health cluster is targeting 2.1 million people of whom 600,000 are in urgent need of SRH services. UNFPA is appealing for \$US9 million to respond to these SRH needs.**
- **1 million people are targeted for GBV response services. UNFPA is appealing for \$US6 million to respond to these GBV needs**



In 2023 UNFPA, through its partners, assisted 402,354 people through integrated GBV and SRH services in the Northern and central regions of Menaka, Gao, Tombouctou and Mopti. UNFPA supported 86 health centers,

providing Inter-Agency Reproductive Health (IARH) kits, recruited 200 midwives, and rehabilitated and supported activities in eight safe spaces (including four safe spaces for women and girls and three youth centers).

RESPONSE PLAN

The prolonged and persistent nature of instability, and economic, social security and political challenges, mean Mali is in a protracted crisis with acute periods that cannot be resolved solely by a humanitarian response or with medium- and long-term development programmes.

UNFPA Mali has adopted an integrated approach, embedding humanitarian interventions within its overall country programme to optimize resources and enhance efficiency.

The response capitalizes on UNFPA's longstanding presence in Mali and its strong partnerships with various stakeholders. By investing in dedicated local capacity, UNFPA has become a pivotal actor in the humanitarian response, placing SRH and GBV needs at the forefront of the country's overall response efforts.

UNFPA integrates a strong focus on risk reduction and prevention interventions to safeguard vulnerable populations, especially women and girls in the most affected regions of the country. The prevention approach incorporates robust community engagement to identify risks of GBV, raise awareness and establish support networks. It also involves comprehensive training and integration of

GBV prevention into broader health and humanitarian programmes. Emphasizing prevention not only addresses immediate risks but also promotes long-term resilience and recovery within affected communities.

UNFPA's response is designed and implemented as an integrated package addressing SRH and GBV. UNFPA aims to enhance access to essential SRH and GBV services for affected populations addressing life-saving needs while also striving to positively transform the lives of women, young girls and boys, their families and communities.

UNFPA's vision of achieving the three zeros:

**zero preventable
maternal deaths,
zero unmet need for
contraception and
zero gender-based violence
and harmful practices,**

is at the core of its humanitarian strategy in Mali. This approach emphasizes the use of innovative methods to tackle challenges in regions with high maternal mortality and GBV rates, as well as regions where there is limited access to family planning services.



GBV/SRH Raise Awareness Activity at an IDP site. Gao July 2023

INTERVENTION STRATEGY

To achieve the 3-zero transformative results, UNFPA plans to work with affected populations, putting them at the center of interventions so that they can provide input into programmes to ensure that they meet their needs. UNFPA delivers programmes through different modalities in the regions of Gao, Menaka, Timbuktu, Mopti and Segou.

- **FIXED HEALTH SERVICES** include hospitals, Health Centers of Reference (CSRef), Community Health Centers (CSComs) and One Stop Centers (for holistic care of GBV survivors). UNFPA will support the rehabilitation of service delivery points and provide equipment and reproductive health supplies.
- **MOBILE SERVICES** are multidisciplinary teams comprised of a doctor, nurse, midwife and psychologist as the core team that set up mobile clinics and coordinate schedules with local health authorities. Mobile clinics provide SHR and GBV integrated services to populations that are far from a fixed health center or don't have the means of transportation to reach them.
- **COMMUNITY ENGAGEMENT:** UNFPA and partners engage with communities on education and awareness campaigns on SHR and GBV, establishing Safe Spaces and support services for women and girls, and safe spaces for young people. Men and boys are also engaged in prevention and response efforts, community surveillance systems are established, and referral systems are strengthened.

- COLLABORATION WITH NATIONAL AUTHORITIES.** UNFPA's partnership strategy is based on a strong relationship with national and regional/provincial authorities to plan, implement, monitor and evaluate humanitarian and resilience interventions.
- LEADING COORDINATION WITH PARTNERS.** Coordination with national and international stakeholders is a core component of UNFPA's work with partners during emergencies which enables the response to be effective and resources to be allocated efficiently. UNFPA is currently leading the GBV Area of Responsibility and the SRH working group at national and decentralized levels in four regions.
- HEALTH AND PROTECTION SYSTEMS STRENGTHENING.** This element includes building the capacity of healthcare facilities to provide essential SRH services and integrate robust protection measures to prevent and respond to GBV. It includes training healthcare providers, especially midwives, to be more responsive during crisis phases when there is a sudden displacement of populations, including by conducting rapid needs assessments and providing first-line support.
- MENTAL HEALTH PROGRAMMES:** Integrating mental health services into Rapid Response Mechanisms as well as healthcare and protection systems is critical. Services include psychosocial support and counseling to mitigate the long-term impacts of GBV and trauma. By addressing medical care and mental health needs together, the strategy aims to restore dignity, resilience and overall well-being among those individuals facing a protracted crisis.
- DATA-DRIVEN APPROACHES FOR PROGRAMME IMPACT:** Through technology, innovative approaches and strategic partnerships, UNFPA generates and uses data and evidence to tailor interventions, improve service delivery and ultimately enhance the SRH outcomes and reduce GBV incidents in Mali's protracted crisis.
- CIVIL SOCIETY SUPPORT AND MOBILIZATION.** UNFPA works directly with civil society organizations (CSOs), notably youth-led and women-led, as they have a deep understanding of local contexts, needs and solutions. By strengthening CSOs' capacities and supporting their activities in GBV prevention and response, SRH promotion and peacebuilding, UNFPA ensures that its projects are effective, sustainable, responsive, and culturally adapted to the specific challenges faced by communities.
- RAPID RESPONSE MECHANISM (RRM):** Through the Rapid Response Mechanism, UNFPA, in collaboration with other UN Agencies and partners, acts rapidly to address the immediate needs of recently displaced populations. UNFPA deploys personnel to distribute dignity and IARH kits and a mobile clinic to provide immediate support and treatment to those in need. A rapid evaluation of needs is also conducted for follow up visits and to identify pregnant women or survivors in need of referrals for specialized care.
- REINFORCING SUPPLY CHAINS FOR SRH AND GBV SUPPLIES.** UNFPA strengthens supply chain management through the provision of digital equipment and the training of personnel at the district level.

PRIORITY INTERVENTIONS FOR 2024

1. Leading gender-based violence response

In 2024, UNFPA Mali plans to reach **208,662** people in conflict-affected areas of the Menaka, Gao, Timbuktu, Mopti and Segou regions. Interventions include providing specialized GBV case management services and conducting prevention and mitigation campaigns. This effort will enhance and expand specialized response, prevention, and risk mitigation services for thousands of girls, women, boys and men.

As the leader of the GBV Area of Responsibility, UNFPA will ensure that all its activities adhere to the GBViEs minimum standards, improve coordination among GBV stakeholders, and adhere to interagency guidelines for managing GBV cases. The GBV response aims to ensure survivors have access to specialized support services and reduce the incidence of GBV.

SPECIFIC ACTIVITIES:

- Deployment of mobile clinics to provide integrated SRH and GBV services in hard-to-reach areas.
- Provision of holistic support to GBV survivors through One Stop Centers.
- Undertaking of risk assessments and life-saving interventions through the Rapid Response Mechanism in collaboration with the RRM team in Mali (decentralized teams in the regions).
- Provision of first-aid psychosocial support and referral of cases to specialized care.
- Assisting women and girls with dignity/menstrual kits.
- Rehabilitation of and equipment for Safe Spaces for young people and women.
- Information management of GBV data to ensure a targeted response, evidence-based decision making, advocacy and awareness raising.
- Capacity building and coordination of GBV interventions ensuring compliance with minimum standards.
- Distribution of dignity kits to women and girls in internally displaced persons (IDP) sites and to vulnerable populations in host communities.
- Implementation of SRH and GBV awareness-raising activities in communities, IDP sites, youth centers and women centers and safe spaces for young people, involving men and young boys.
- Rehabilitation of and equipment for Safe Spaces for women and young people.

2. Leading the sexual and reproductive health response

In 2024, UNFPA Mali plans to reach **271,800** people in need of SRH services, mainly women and girls, by providing multiple integrated services, building the capacity of partners/health care staff, including through trainings, and increasing

awareness on GBV response and prevention and family planning.

UNFPA will continue leading the Sexual and Reproductive Health Task Force, already established in Mali at the national level and decentralized in four regions.



Dignity Kits women and girls. Gossi Timbuktu November 2023

SPECIFIC ACTIVITIES:

- Provision of IARH Kits to health facilities to enable them to provide basic and comprehensive emergency obstetric care.
- Build the capacity of service providers on emergency SRH programming (MISP for RH, clinical management of rape, postpartum care, family planning and basic emergency obstetric and newborn care (BEmONC)).
- Support mobile community outreach activities and disseminate messages on available SRH and GBV services.
- Build the capacity and deploy midwives to crisis-affected regions to increase access to SRH services and strengthen referral linkages to ensure emergency obstetric and newborn care services in hard-to-reach areas.
- Support awareness raising activities as part of a demand creation initiative to promote institutional deliveries for pregnant women, increase the use of family planning, increase the use of facility-based safe motherhood services, and increase the use of GBV prevention and response services.



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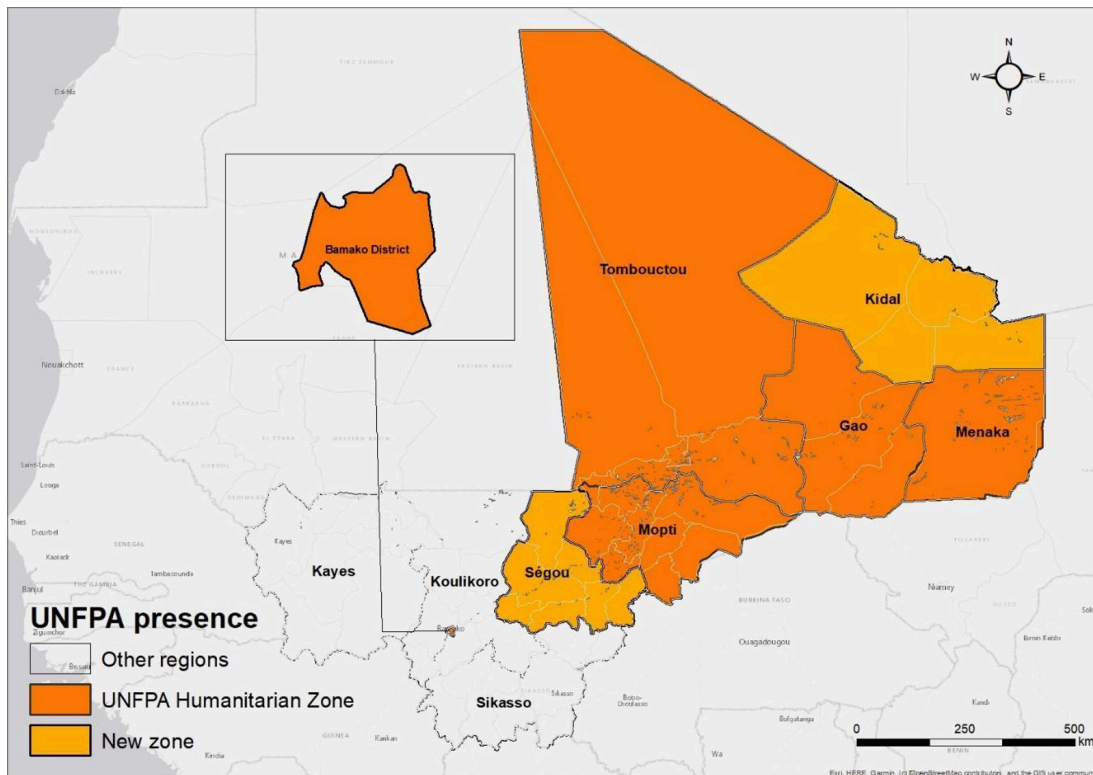
YOUTH, PEACE AND SECURITY

Youth, peace and security in Mali are crucial issues in the humanitarian response that require particular attention. Mali has faced major challenges in recent years, including armed conflicts and ethnic tensions, with young people not only being most impacted by these conflicts but also having the capacity to be catalysts of change. To harness the potential of Mali's youth, who make up close to 35 percent of the population, it is

essential to promote their inclusion in peace processes and strengthen their meaningful participation in political affairs. Through its humanitarian programme, UNFPA works to promote dialogue and understanding between communities in Mali to prevent conflict and ensure social cohesion.

UNFPA will promote activities in collaboration with the Government and youth civil society organizations, including:

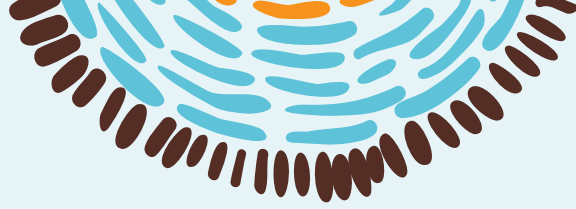
- Ensuring the meaningful representation and participation of youth in peace processes notably by promoting gender-inclusive and youth-inclusive governance in local conflict management and resolution committees and national mechanisms.
- Organizing “causeries” (local community dialogues) and intergenerational dialogues to ensure youth participate in community decision making and promote unity between community members.
- Facilitating access to trainings and employment for youth to increase community engagement and deter recruitment into armed groups/ violent extremism.
- Supporting local peace-promotion initiatives, notably youth-led, aimed at youth inclusion in political affairs and social cohesion.
- Strengthening the capacity of actors on the Youth, Peace and Security Resolution and advocating for the implementation of a national action plan.



UNFPA PRESENCE MAPS AND ZONES

@source HNRP 2024





KEY INDICATORS:

INDICATOR	TARGET
Number of people reached with SRH services	271,800
Women assisted to deliver safely at UNFPA-supported facilities	2,500
People reached with family planning services at UNFPA-supported facilities	16,573
Number of personnel trained on the Minimum Initial Service Package (MISP) for SRH	100
Number of health facilities supported by UNFPA	86
Number of SRH mobile clinics* supported by UNFPA and run by UNFPA's implementing partners (Daily Outings)	7
Number of people reached with GBV prevention, mitigation and response activities	208,662
Number of Safe Spaces for women and girls supported by UNFPA	4
Number of Youth Spaces supported by UNFPA	4
Number of community-based initiatives promoting peace and intercommunity dialogue supported by UNFPA	15
Number of youths referred to and accessing psychosocial support services	725

BUDGET

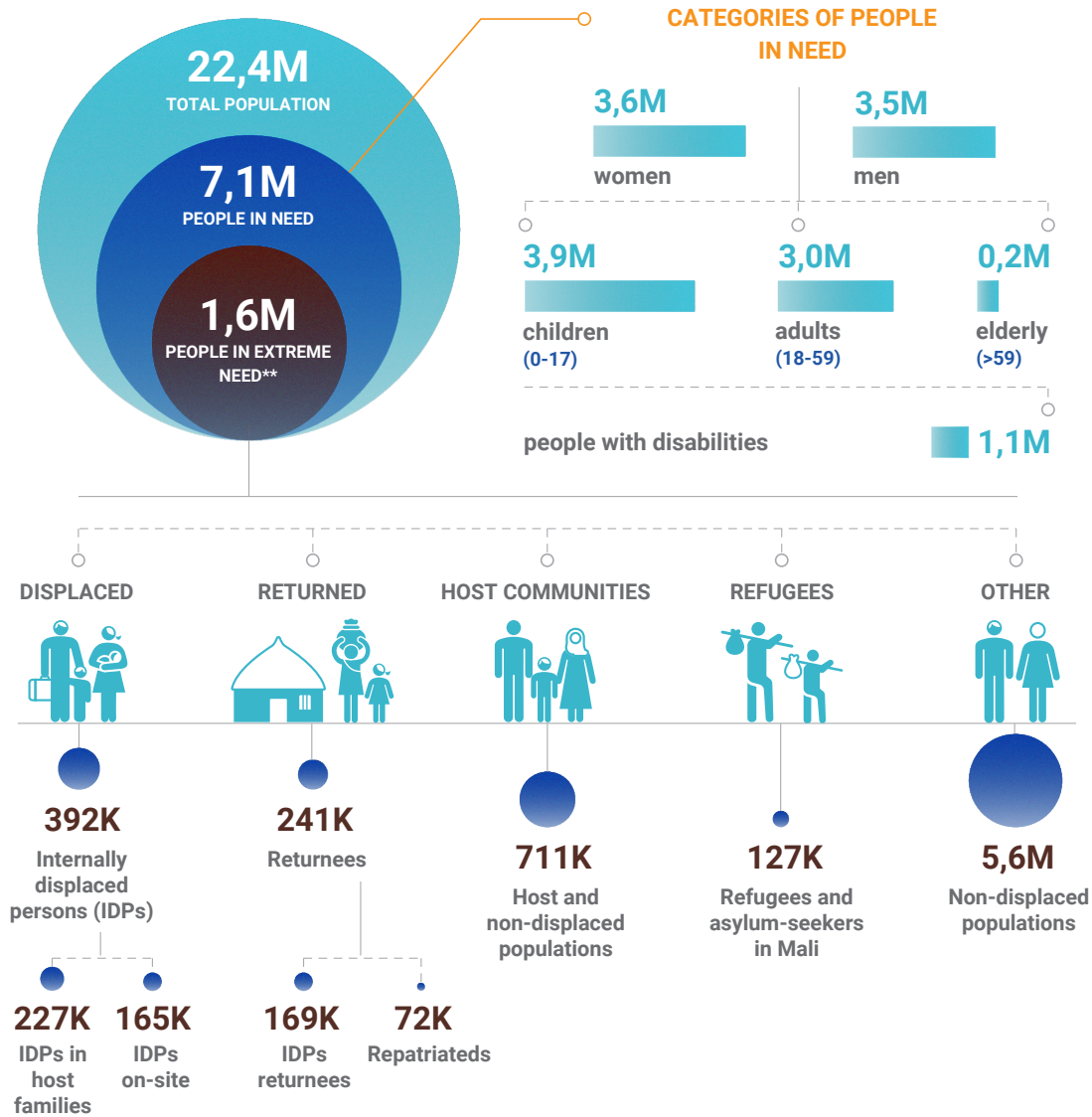
PRIORITIES	SRH	GBV	SUBTOTAL USD
1. Life-saving and high quality SRH and GBV services, supplies and commodities	6,800,000	3,800,000	11,000,000
2. Capacity development of implementing partners, including on youth for peace and security	1,500,000	1,500,000	3,000,000
3. Partnerships and coordination, including with communities and youth for peace generations	500,000	500,000	1,000,000
4. Generate data and disseminate data for informed humanitarian advocacy, policy and programmes	200,000	200,000	400,000
	9,000,000	6,000,000	15,000,000



KEY HUMANITARIAN FIGURES 2024

People in need

AT A GLANCE



By Cluster





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