

GLOBAL HUMANITARIAN OVERVIEW 2022

UNITED NATIONS-COORDINATED
SUPPORT TO PEOPLE AFFECTED
BY DISASTER AND CONFLICT





The Global Humanitarian Overview (GHO) is the world's most comprehensive, authoritative and evidence-based assessment of humanitarian need. It provides a global snapshot of the current and future trends in humanitarian action for large-scale resource mobilization efforts, and explores opportunities to more effectively deliver humanitarian assistance.

This publication was produced by the United Nations Office for the Coordination of Humanitarian Affairs (OCHA) in collaboration with humanitarian partners across the world. OCHA thanks all organizations, partners and donors who contributed to the Global Humanitarian Overview 2022 and who regularly report to OCHA's Financial Tracking Service (FTS).

Appeals figures are as reported by country offices, donors and recipient organisations to the Financial Tracking Service as of 20 November 2021. All appeal data for response plans is continuously updated on fts.unocha.org and hum-insight.info. Dollar signs in this document denote United States dollars.



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Kandahar, Afghanistan. These young girls and their families were displaced by violence to the Tajikan IDP site, near Kandahar City. Most people taking refuge here fled violence in Zabul and some have been displaced for more than six years. They are relieved to be safe, but urgent needs include shelter, farming supplies, water, sanitation and hygiene. One woman said: "Where we came from, we had beautiful green gardens, we had a good life until the conflict." Another said: "You can find malnourished children in every second and third home." November 2019. *OCHA/Charlotte Cans*

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Introduction

Foreword by the Emergency Relief Coordinator

Martin Griffiths

United Nations Under-Secretary-General for Humanitarian Affairs and Emergency Relief Coordinator

2021 was a year of challenge and achievement. At the start of the year, the pandemic was hitting hard. Combined with ongoing conflicts and the climate crisis, it has driven up humanitarian needs.

Children, especially girls, are missing out on their education. Women's rights are threatened. Multiple famines loom. Individual lives and livelihoods, regional and national stability, and decades of development are at risk. The cost of inaction in the face of these challenges is high.

But this has also been the year that the humanitarian system rose to the challenge, overcoming seemingly insurmountable obstacles and showing what can be done when the international community comes together. Thanks to generous donors, the humanitarian system delivered food, medicines, health care and other essential assistance to 107 million people this year.

In South Sudan, over half a million people have been brought back from the brink of famine. In Yemen, more than 10 million outpatient medical consultations were carried out, and 344,000 safe births assisted. The humanitarian system got hundreds of millions of dollars in cash assistance into the hands of people struggling to survive.

Chakmakul, Bangladesh. A young girl sits by the entrance of her home in Chakmakul, a refugee camp sheltering Rohingya refugees in Cox's Bazar, Bangladesh. The world's biggest refugee camp battles regularly with the onset of monsoon rains. The Bangladeshi Government and humanitarian organizations on the ground work hard to minimize the risks from landslides, flash floods, waterborne diseases and, ultimately, loss of life. Thousands of people face dire circumstances, as conditions in the camps are expected to dramatically worsen with the onset of heavy rains. *UNICEF/Siegfried Modola*



Hawzen, Ethiopia. The Director of Hawzen Referral Hospital explains to ERC Martin Griffiths how, after being used for eight months as a military base, the facility was left inoperative. Around 160,000 people who live in the area were left without proper medical attention. Equipment including the neonatal ICU (pictured here) was vandalized and destroyed. To restore services, all equipment and medicines will have to be replaced. *OCHA/Saviano Abreu*

The results achieved by national and international humanitarian workers are a credit to the determination and capability of the humanitarian system and to the donors who support it. They deserve our gratitude. What they really need is our support.

The humanitarian system is strong, but the challenges are increasing. New battlefields have emerged, including in northern Ethiopia, where millions now need aid to survive. Across Ethiopia, humanitarian needs are growing at an alarming rate. As the conflict spreads from Tigray into Amhara and Afar regions, thousands of people are being displaced. Elsewhere in the country, conflict, drought and locusts are pushing more people to the brink. In the Tigray region, I met survivors of horrific sexual abuse whose horizons were limited to survival.

In Afghanistan, needs are skyrocketing. There I saw systems on the brink of complete collapse and the rights of women and girls under threat. In Myanmar, the humanitarian situation is fast deteriorating because of growing conflict and insecurity. Conflict remains in parts of the Democratic Republic of the Congo, the Central African Republic, Syria and Yemen.

Meanwhile, the climate crisis presents an immediate existential threat to the lives and livelihoods of many. In 2020, extreme climatic and weather events drove almost 16 million people into food crises in 15 countries. And food crises in turn fuel further violence and exploitation of women and children. Among the top 15 countries classified as most vulnerable and least ready to adapt to climate change, 12 had a Humanitarian Response Plan in 2020. In 2021, climate change joined conflict as a root cause of famine, as evidenced in drought-affected Madagascar, where climate is driving famine-like conditions.



Aleppo, Syria. The ERC Martin Griffiths meets the implementing partners of an health care centre situated in the Maaret Al Arteeq area in Aleppo, to listen listen to their needs and learn from the challenges they face daily. *OCHA/Ali Al Matar*

Humanitarian action must adapt to the climate crisis. We cannot risk overlooking other threats while we fight the climate crisis. We all must continue advocating for the full and equal participation of women and girls at all levels of education, the economy and public life. Decision-making must involve them.

This Global Humanitarian Overview 2022 projects humanitarian needs for the coming year. In many respects, the outlook it presents is bleak. But I am encouraged. Not only by the results the humanitarian system can achieve but by its innovation.

Anticipatory action can help mitigate the consequences of climate change. Governments and humanitarian agencies saved millions of lives by taking early action in 2017 to prevent famine in north-east Nigeria, Somalia, South Sudan and Yemen. The humanitarian system is also taking determined action to prioritize equity, inclusion and access to information for affected communities. It must work ever harder to protect the most vulnerable from sexual exploitation and abuse.

The challenges are immense, and funding remains well below what is needed.

This is the moment to double down. To protect hard-won gains, to stand by those who need our support, and to take the kind of decisive action that is in everyone's interests.

We need your support.

Martin Griffiths



Introduction

At a Glance

PEOPLE IN NEED

274_M

PEOPLE TARGETED

183_M

REQUIREMENTS (US\$)

\$41_B

APPEALS

37

Part one

Global Trends

COVID-19 shows no signs of abating, claiming at least 1.8 million lives across the GHO countries, fuelled by variants and a lack of vaccines. Economies and livelihoods have been devastated, increasing humanitarian needs and fuelling conflict. Only 4 per cent of the 7 billion vaccines administered have reached countries with an Humanitarian Response Plan (HRP). In two thirds of these countries, an additional 20 million people have been pushed into extreme poverty.

Major tipping points for the climate may already have been reached or passed; humanitarian action must adapt. Climate-related disaster events are more frequent and variable. Up to 216 million people may have to move within their own countries by 2050 due to the effects of climate change.

Political conflicts continue hitting civilian populations hard, particularly the vulnerable including children and persons with disabilities. Women and girls remain at increased risk of conflict-related sexual violence. Attacks against humanitarian workers and assets continue; 117 humanitarian workers were killed in 2020, 108 of whom were working in their own country.

Al Qadarif, Sudan. This woman is one of the Ethiopian refugees who volunteered to teach children in makeshift classrooms at Um Rakuba camp. She said: "These children are the next generation coming up. Some will be doctors, teachers, pilots. I don't just dream for them... teaching plays a role in building a generation."
UNHCR/Will Swanson



More than 1 per cent of the world's population is now displaced, about 42 per cent of whom are children. Millions of IDPs are living in protracted situations, 40 per cent fewer are able to return home.

COVID-19 is severely impacting health systems worldwide. Testing, diagnosis and treatment have decreased for HIV, TB and malaria. Antenatal-care visits have fallen by 43 per cent and 23 million children worldwide missed basic childhood vaccines in 2021.

Hard-won development gains in employment, food security, education and health care have been reversed. Extreme poverty is rising after two decades in decline. Recovery from the extraordinary disruptions caused by COVID-19 remains uncertain. Women and younger workers are disproportionately impacted by job losses.

Aleppo, Syria. Around 2,000 households received bread and COVID-19 information flyers in Salheen, Aleppo. The neighbourhood was under opposition control until late 2016 and the massive destruction of buildings is still visible. Residents relied on daily or weekly wages, which have been halted due to precautionary measures for COVID-19. WFP/Khudr Alissa



Hunger is rising and food insecurity is at unprecedented levels. Globally, up to 811 million people are undernourished. Famine-like conditions remain a real and terrifying possibility in 43 countries around the world. Without sustained and immediate action, 2022 could be catastrophic.

COVID-19 continues to disrupt global education. School closures hit vulnerable children the hardest. Globally, 870 million students face disruptions to their education. Remote learning cannot reach everyone; 2.2 billion children have no Internet access at home. Online learning does not replace the protection benefits of children physically being in school.

Yangon, Myanmar. This woman lives in the urban outskirts of Yangon. Since February, food prices have been rising throughout Myanmar, placing basic foods out of the reach of the poorest people. The current political crisis and the COVID-19 pandemic have exacerbated job cuts and resulted in lost incomes. *WFP/Photolibrary*



The pandemic has dealt a major blow to gender parity and women's employment. The gender-poverty gap is widening, and 247 million women live on less than US\$1.90 a day. For every three months that COVID-19 lockdowns continue, an additional 15 million GBV cases are expected to occur. Over 70 per cent of women and girls in humanitarian settings have experienced GBV.

The private sector has been a key ally during COVID-19, demonstrating its ability to mobilize resources and strengthen emergency preparedness and recovery. Greater collaboration is needed to systematically include the private sector in humanitarian coordination systems.

Part two

Inter-Agency Coordinated Appeals

In 2022, 274 million people will need humanitarian assistance and protection - a significant increase from 235 million people a year ago, which was already the highest figure in decades. The UN and partner organizations aim to assist 183 million people most in need across 63 countries, which will require \$41 billion.

The ten most underfunded emergency situations in 2021 received less than half the funding required to meet humanitarian needs. Humanitarian aid cannot provide a path out of protracted crises while such a scarcity of funds persists. Much-needed food rations have been cut back and life-saving health-care services reduced. It is essential that funding requirements for 2022 are met in full and on time.

Two regions, the Middle East and North Africa and West and Central Africa continue to have the most humanitarian needs due to protracted crisis that show no signs of abating. Over the past two years sharp increases in needs are evident in Asia and the Pacific, Latin America and the Caribbean and Southern and East Africa. Five years ago, only Haiti had an HRP in Latin America and the Caribbean, now there are six in place across the region.

In Afghanistan, more than 24 million people require life-saving assistance to prevent catastrophe. This represents a dramatic increase in needs, driven by repeated economic shocks, political tumult and the severe food insecurity caused by the worst drought in 27 years.

A decade into the crisis in Syria and basic service delivery continues to be vastly inadequate and hampered by damaged infrastructure, lack of critical supplies and, increasingly, financial unaffordability. Average household expenditure now exceeds available income by 50 per cent compared to 20 per cent in August 2020.

Al Noeyah, Yemen. A boy waits at the food distribution point supported by WFP.
WFP/Ayman Fuad



Despite continued efforts to mitigate the risk of famine in Yemen, food insecurity continues to remain a key challenge. Acute food insecurity is a reality for 16.2 million people in the country. Even with the current levels of humanitarian assistance, 40 per cent of the population have inadequate food.

In Ethiopia, climate shocks, unprecedented levels of conflict, insecurity and disease outbreaks coupled with a deteriorating economy continue to exacerbate humanitarian needs for 25.9 million people. Many of the 4.2 million IDPs, seek shelter in urban areas, further increasing pressure on vulnerable families within host communities.

People in Myanmar are facing an unprecedented political, human rights and humanitarian crisis, with needs escalating dramatically since the military takeover and a severe COVID-19 third wave in 2021. Humanitarian assistance is needed by 14.4 million people.

In Haiti, 43 per cent of the population needs humanitarian assistance. The country is experiencing a profound and disturbing deterioration of the socioeconomic, political and security context coupled with the effects of the COVID-19 pandemic and a 7.2-magnitude earthquake that affected more than 800,000 people.

South Sudan is facing its highest levels of food insecurity and malnutrition since the country declared independence ten years ago. Macroeconomic shocks, three years of consecutive flooding, disease outbreaks and increasing subnational violence have resulted in 8.4 million in need and a growing number of threats against humanitarian workers

Part three
**Delivering
Better**

Enhanced data collection is helping address the specific needs of women and girls in humanitarian prioritization and response. More women are needed in humanitarian leadership roles. Lack of funding for GBV response, mitigation and prevention remains of critical concern.

CERF and the CBPFs continue to reach the most vulnerable people, prioritizing response, recovery and coordination for extreme weather events, conflicts, disease outbreaks and the impacts of COVID-19.

Nyunzu, DR Congo. This internally displaced woman regularly brings her twins to the Tchanga Tchanga health centre to monitor their nutritional status. With funding from the DRC Humanitarian Fund, Médecins d'Afrique cares for some 3,450 children under 5 years of age suffering from severe acute malnutrition in Nyunzu.
OCHA/Wassy Kambale



At a time when 45 million people are on the edge of famine, **the High-Level Task Force on Preventing Famine is actively advocating for famine prevention resources**, improved access to people in need and strengthened data and analysis. Without immediate and sustained action to prevent famine, humanitarian needs will far exceed those seen in the last decade.

As new and escalating crises emerge, **progress has been made on strengthening system-wide accountability to affected people** and protection from sexual exploitation and abuse.

Local leaders and communities are gaining greater recognition by international actors as key first responders in a crisis and providers of long-term support. They have been critical to sustaining humanitarian operations and being at the forefront of the COVID-19 response.

Kalunguta, DR Congo. This man is building a house for his family, together with nine other displaced men. "When we finish one house, we start building the next, and so on. We also work with the local people, youths and women who we met here. They show solidarity with us who are displaced." *OCHA/Ivo Brandau*



Hurricanes Eta and Iota demonstrated local humanitarian organizations' pivotal role in saving lives while dealing with a pandemic. Local partners directly responded to affected communities in Guatemala and Honduras and informed operational planning. Essential first-hand knowledge of affected communities enabled timely and appropriate responses.

An estimated half of all today's crises are somewhat predictable. Anticipatory action mitigates the shock impact and reduces humanitarian needs, helping to enhance resilience and making resources more efficient.



Introduction

Global Achievements Results from 2021

Humanitarians responded within an ever-changing landscape in 2021, urgently delivering assistance to people caught up in crises.

The COVID-19 pandemic and its effects compounded multiple challenges already facing humanitarian workers including violent conflict, rising hunger and the devastating impacts of climate change. Local partners stepped up to help access areas that could not be reached by international responders and deliver critical aid.

In 2021, the United Nations and partner organizations aimed to assist 174 million people, through 38 country plans and 7 regional plans. Of the 153 million people targeted by plans at country level, 107 million were reached - 70 per cent of the total targeted. The people reached figure includes all targeted people who benefited from at least one form of aid in the year.

Life-saving food assistance has been delivered to multiple crisis situations in 2021. In northern Mozambique, humanitarian organizations significantly scaled up their response, enabling partners to provide life-saving and life-sustaining assistance and protection to 1.23 million people – more than double the number of people reached in 2020. In South Sudan, humanitarian action brought six counties back from the brink of famine through a targeted, multisectoral scale-up in the most food insecure areas. Over 500,000 severely food insecure people facing catastrophic levels of acute food insecurity (IPC Phase 5) received life-saving assistance, and 100,000 families received livelihoods assistance.

Port-au-Prince, Haiti. An IOM officer checks in with a displaced person at the Delmas 103 school in Port-Au-Prince, a temporary shelter for over 200 disabled residents who had been targeted by gang violence. *OCHA/Matteo Minasi*

People Reached by Humanitarian Response Plans (2021)

Appeal	Type	Targeted	Reached	%
Afghanistan	HRP+FA	17.7 M	17.5 M	99%
Yemen	HRP	16.0 M	10.9 M	68%
Ethiopia	HRP+FA	20.1 M	9.4 M	47%
Sudan	HRP	8.9 M	7.4 M	83%
DRC	HRP	9.6 M	7.1 M	73%
Syria	HRP	11.1 M	6.7 M	60%
South Sudan	HRP	6.6 M	5.7 M	86%
Nigeria	HRP	6.4 M	4.8 M	75%
Venezuela	HRP	4.5 M	4.0 M	89%
Somalia	HRP	4.0 M	3.0 M	74%
Zimbabwe	HRP	4.5 M	2.9 M	64%
Pakistan	HRP	4.3 M	2.6 M	60%
Mali	HRP	4.7 M	2.5 M	52%
Myanmar	HRP+ERP	3.1 M	2.2 M	72%
Chad	HRP	4.0 M	2.0 M	50%
Haiti	HRP+FA	1.8 M	1.8 M	100%
CAR	HRP	1.8 M	1.7 M	92%
Niger	HRP	2.1 M	1.7 M	82%
Burkina Faso	HRP	2.9 M	1.6 M	55%
Cameroon	HRP	3.0 M	1.6 M	53%
Ukraine	HRP	1.9 M	1.4 M	74%
Mozambique	HRP	1.0 M	1.2 M	100%
Iraq	HRP	1.5 M	1.2 M	80%
DRC	HRP+FA	1.8 M	1.2 M	64%
Colombia	HRP	1.4 M	1.1 M	76%
Madagascar	FA	1.3 M	908.0 K	69%
Kenya	FA	1.3 M	795.0 K	61%
Honduras	HRP+FA	1.8 M	728.0 K	40%
Libya	HRP	451.0 K	500.0 K	100%
Burundi	HRP	1.1 M	354.0 K	33%
Guatemala	HRP	1.7 M	136.1 K	8%
El Salvador	HRP	912.2 K	47.7 K	5%

Table: Global Humanitarian Overview 2022 • Source: Humanitarian Insight



Bangassou, Central African Republic. A local worker unloads a cargo plane carrying humanitarian aid in Bangassou. A new wave of violence linked to the December 2020 general elections has forced more than 51,000 people to seek refuge in the outskirts of Bangassou and in neighbour DRC. Despite the persistent insecurity in this region, humanitarian actors are progressively providing assistance to the IDPs. *OCHA/Adrienne Surprenant*

Food assistance has been delivered to 4 million people in Afghanistan, and as of August 2021 almost 6 million people were reached with regular food baskets in Syria – a country that has seen a steep rise in the cost of food.

As the impacts of conflict on civilians continue to grow, humanitarians operated in risky environments to help those in need. Despite the impact of protracted occupation in oPt, assistance continued to be delivered in 2021. Humanitarians responded to the escalation of hostilities and unrest in Gaza and the West Bank while also meeting the additional needs resulting from the pandemic. In Libya, Mine Action partners cleared almost 2.3 million m² of explosive hazards.

The provision of basic services for those most in need has continued in 2021. In Iraq, 1.2 million returnees and IDPs received assistance. This includes over half a million people who accessed basic health care; water, sanitation and hygiene (WASH) services; and special protection services. In Venezuela, 1.8 million people received WASH assistance, and 537,000 women, men, girls and boys were assisted with protection services, including access to legal documentation and information.

Achievements by sector

[Explore more achievements
gho.unocha.org](https://gho.unocha.org)

Overcoming Disruption to Health Services

Global health services have been disrupted due to the COVID-19 pandemic, severely impacting the most vulnerable. Humanitarian response has included the provision of personal protective supplies in 29 countries, life-saving child immunization campaigns and the supply of critical hygiene items and services.



COVID-19

362 million doses of the vaccine were shipped globally through COVAX. A further 1.4 billion doses are forecasted for 2022.

WHO



Medical supplies

2 million people, including health workers, reached with personal protective equipment supplies in twenty-nine countries.

UNFPA



Hygiene items

26.9 million people reached with critical WASH supplies - including hygiene items - and services.

UNICEF



Refugees

4.2 million refugees, asylum-seekers and others of concern in 74 countries received essential healthcare services.

UNHCR

Averting Alarming Levels of Hunger and Extreme Poverty

COVID-19 has devastated livelihoods around the globe and extreme poverty is rising. Drought, floods and other climate crises have threatened the livelihoods of those living in rural areas in addition to ongoing conflict and political instability. The number of acutely food insecure people has increased dramatically and the risk of famine is now a reality. Humanitarians have responded with urgent actions including cash-based transfers and direct food assistance, support to the self-employed, live-stock feed and help with crop production.



Livelihoods

18 million people have received livelihoods assistance: cash, heating, livestock rearing, crop production and fishing.

FAO



Food assistance

Nearly 105 million people received direct food aid in the first nine months (January - September) of 2021.

WFP



Safe water

34 million people, some forcibly displaced, accessed safe water for drinking, cooking and personal hygiene.

UNICEF



Cash transfers

Partners handed \$1.6 billion in cash-based transfers to vulnerable people and communities across 67 countries.

WFP

Prioritizing the Most Vulnerable People

The COVID-19 pandemic and its effects have taken a heavy toll on the most vulnerable in communities, who were already experiencing disproportionate challenges in accessing services including health care and education. Humanitarians have responded with actions including the provision of facilities for women and children to access reproductive health services, supporting persons with disabilities to participate in communities and assistance to survivors.



Psychosocial support

5 million children and caregivers accessed mental health and psychosocial support.

UNICEF



Risk education

1.3 million children accessing explosive weapons-related risk education and survivor assistance interventions.

UNICEF



Sexual health

29 million women of reproductive age were reached with sexual and reproductive health services and supplies.

UNFPA



Risk mitigation and prevention

8.6 million women, girls and boys accessed GBV risk mitigation, prevention or response interventions.

UNICEF

Basic Services to Support Refugees

The number of refugees remains at a record high. As crises become increasingly complex and protracted, fewer can return home and are living in crowded conditions with limited access to water, sanitation and health facilities. The humanitarian system has provided key services to support refugees, almost half of which are women and girls. This includes provision of safe drinking water, cash assistance, mental health services and vital health care.



Protection

4.75 million displaced children - including stateless, disabled and separated - benefited from protection services.

UNHCR



Camp management

Over 6.6 million people reached with CCCM interventions in 4,074 sites across 13 countries.

CCCM Cluster



Education

Over 896,900 refugee and host community children in 80 countries supported with connected or home-based learning.

UNHCR



Social protection

2.51 million refugees and asylum-seekers in 95 countries benefit from increased or expanded social protection.

UNHCR

Mainstreaming Protection and Gender-Based Violence

Over 70 per cent of women and girls living in some conflict contexts have experienced GBV. The pandemic's socioeconomic impacts have only intensified this risk. Greater access to social protection and affordable, quality and accessible health-care services is urgently needed. Humanitarian actors have provided protection services including legal aid, GBV services and psychological support to vulnerable groups including women and girls, young people refugees and asylum seekers.



Safe report channels

3.2 million people with access to safe channels to report sexual exploitation and abuse.

UNICEF



Legal aid

11.3 million people received protection services, including legal aid, referrals to GBV services and psycho-social support.

UNHCR



Safe spaces

12,000 safe spaces for women, adolescent girls and young people were supported in 38 countries.

UNFPA



Communities

656,680 people in the Syria Crisis participated in Gender-Based Violence response activities and community-led initiatives.

UNHCR

Ensuring Timely and Efficient Humanitarian Operations

From moving goods and equipment to relocating disaster-affected people, humanitarian response relies on efficient transport and communications systems to reach those in crises and provide the help they need. Coordination and information management is key to supporting operational decision-making and improving the predictability, timeliness and efficiency of the humanitarian emergency response.



Air services

236,100 passengers across 23 operations transported by the United Nations Humanitarian Air Service.

WFP / Logistics Cluster



Relief items

Storage for 42,394 m3 of relief items and dispatch services for 19,959 mt of cargo to more than 400 different locations.

WFP / Logistics Cluster



Preparedness

Preparedness activities to strengthen national Information Technology capacity and resilience to disaster in eight countries.

ET Cluster



Communications

Over 10,500 aid workers across 450 different organizations assisted with Emergency Telecommunications services.

ET Cluster



Part one

Global Trends

In 2022, humanitarian action will need to adapt to new and challenging realities. The COVID-19 pandemic is taking a heavy toll in developing countries, civilians continue to be the most affected by conflict and extreme poverty is rising. Climate change effects are devastating, forced displacement is at record levels and 161 million people face acute food insecurity.

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Part one: Global trends

Humanitarian Action Must Adapt to Climate Change Realities

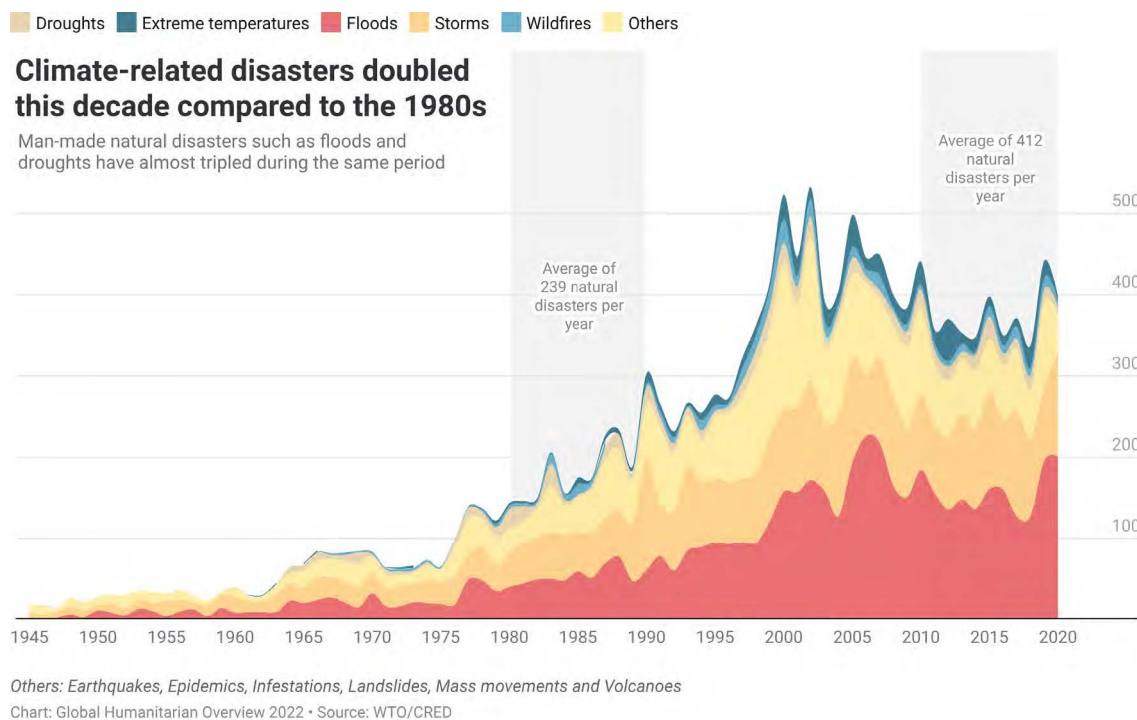
The climate crisis is no longer a distant threat in the future. Its effects are happening now, impairing human rights, creating new humanitarian needs and exacerbating and protracting those that already exist.

2020 was one of the three warmest years on record, with a global mean temperature of 1.2 °C above pre-industrial times.¹ The past six years were the hottest on record, and 2010-2019 was the hottest decade on record, characterized by climate- and extreme-weather-related disasters, such as heatwaves, droughts, tropical storms and acute floods.² Alarming evidence from the Intergovernmental Panel on Climate Change³ shows that major tipping points and irreversible changes to the climate may have already been reached or passed. This is an existential climate reality that all stakeholders, including humanitarian actors, will need to adapt to.

Climate-related disaster events are becoming more frequent and variable, creating heightened levels of risk and vulnerability, negatively impacting human rights and disrupting livelihoods and threatening lives around the globe. A total of 389 climate-related disasters were recorded in 2020, resulting in the deaths of 15,080 people, affecting 98.4 million others and inflicting \$171.3 billion in economic damage.⁴

Beira, Mozambique. A young girl from Nharrime, Mozambique, takes shelter in Samora Machel School in Beira. She is escaping the winds and heavy rain of Tropical Cyclone Eloise, which made landfall on January 2021 with wind speeds of 160 km per hour. *UNICEF/Ricardo Franco*

2020 exceeded the average number of recorded climate-related events and associated economic losses compared to average annual data taken over the previous two decades. Records show 26 per cent more storms, 23 per cent more floods and 18 per cent more deaths from floods compared to the average.⁵ Many of these extreme events happened consecutively, leaving little time for recovery from one shock to the next. The climate emergency is a threat multiplier, contributing not only to more frequent and intense climate-related disasters but also conflict, driving displacement and making life harder for those already forced to flee.⁶ The collapse of natural ecosystems is also fuelling food insecurity and economic, human rights and societal challenges.



People caught in humanitarian crises are already among those most vulnerable to the climate crisis. Should the 1.5°C and 2°C targets be missed, humanitarian consequences are projected to increase exponentially and will gradually become global.

Among the top 15 countries classified as most vulnerable and least ready to adapt to climate change,⁷ 12 had a HRP in 2020.⁸ Humanitarian needs in these countries are becoming more and more protracted. Haiti, Mali, Niger and Yemen have had an inter-agency humanitarian appeal for at least 10 consecutive years; Afghanistan, the Central African Republic (CAR) and Chad for at least 15 consecutive years; and the Democratic Republic of the Congo (DRC), Somalia and Sudan for at least 20 consecutive years.⁹ Of these countries, 12 had concurrent public health emergencies with COVID-19,¹⁰ and all 15 were in a state of conflict or high-institutional or social fragility.¹¹ In 8 countries, at least 15 per cent of the population was experiencing levels of acute food insecurity or worse (IPC Phase 3 or above),¹² and 14 had moderate to high risk of debt distress or were already in debt distress.

Vulnerability to Climate Change (2020)

Country	▲ ND-GAIN	HRP	State of conflict	Public health emergencies	Food Insecure Population	Debt risk	Natural disasters
Chad	28.40	Yes	Medium	Measles, Polio	12%	High risk	39
CAR	28.95	Yes	Medium	Measles, Polio	47%	High risk	32
Eritrea	31.15	–	Fragile	–	–	–	4
Guinea-Bissau	31.95	–	Fragile	–	8%	High risk	10
DRC	32.28	Yes	Medium	Measles, Polio, Cholera, Plague	28%	Moderate risk	110
Sudan	32.71	Yes	Fragile	Diphtheria, Rift Valley Fever	21%	Debt distress	54
Niger	33.09	Yes	Medium	Measles, Polio	10%	Moderate risk	64
Afghanistan	33.50	Yes	High	Dengue, Polio	42%	High risk	147
Liberia	33.75	–	Fragile	Measles, Lassa Fever	20%	Moderate risk	14
Somalia	33.94	Yes	High	Cholera	22%	Debt distress	68
Yemen	34.68	Yes	Medium	Cholera, Polio	54%	Moderate risk	45
Zimbabwe	34.90	Yes	Fragile	–	35%	Debt distress	39
Mali	35.01	Yes	Medium	Measles	6%	Moderate risk	36
Haiti	35.40	Yes	Fragile	Diphtheria	46%	High risk	83
Burundi	35.46	Yes	Fragile	Cholera, Measles	14%	High risk	52

Table: Global Humanitarian Overview 2022 • Source: University of Notre Dame (ND-GAIN), OCHA (HRP), World Bank (Conflict), WHO (Health emergencies), FSIN Network (Food insecurity), IMF (Debt risk), CRED (Natural disasters)

The humanitarian system needs to link up with monitoring systems to understand and anticipate what lies ahead in the immediate future on a global level. In this way humanitarians can prepare for and advocate for the transformative action needed to adapt to and mitigate the worst consequences of climate change. It is essential that these measures are identified now to ensure the system effectively and efficiently fulfills its mandate in a changing climate. Humanitarian costs are highest in countries that are most vulnerable and least ready to adapt to the suite of climate shocks and stresses. Yet, these countries are also the least responsible for global warming, contributing only 0.2 per cent of global emissions in 2019,¹³ and comprising only 4.2 per cent of the global population.¹⁴



Anjampaly, Madagascar. People work to fix dunes, protecting sand-covered crop fields in Anjampaly, Madagascar. Dune-fixing provides income, protects crop fields and builds savings for the community. *OCHA/Viviane Rakotoarivony*

Financing for climate adaptation is still woefully insufficient and does not prioritize the countries that are most vulnerable to the effects of the climate crisis. Although policies and planning for climate change adaptation are increasing, financing and implementation lag behind.¹⁵ The top 15 most vulnerable countries received less than 6 per cent of global adaptation finance in 2019.¹⁶

To narrow these gaps, shifts are needed towards integrated and longer-term climate risk and impact management by humanitarian stakeholders. Addressing acute humanitarian needs requires the introduction of more anticipatory and preparedness measures, multi-year outcomes, the increased use of flexible cash assistance, in addition to programmes and clearer strategies that prioritize equity, inclusion and access to information for affected communities. This implies deploying multi-risk management strategies to build capacities to prevent, anticipate, absorb, adapt and transform¹⁷ in the face of climate change. Improved participation, connectivity and complementarity across sectors will help efforts to better communicate the risks and impacts of the climate crisis with local communities, humanitarian and development actors, Governments and donors. Such actions will strengthen community resilience to future shocks and place human rights and humanitarian action as an essential part of global climate-adaptation efforts.

Challenges in Humanitarian Contexts

Climate Change, Water Scarcity, and Conflict in the Central African Republic



In the Central African Republic (CAR), extreme climate events collide with conflict and fragility. Between 2001 and 2018, approximately 74 per cent of disasters were water related, including droughts and floods. When disasters hit, they can destroy or contaminate entire water supplies, increase the risk of diseases, and exacerbate tensions that may lead to conflict. The growing frequency of erratic weather patterns has led to multiple floods, causing disease outbreaks and further compounding existing pressures of conflict, water stress, and weaker social cohesion. In CAR, an increasing scarcity of water resources is leading many livestock herders to seek water and pasture for their herds, creating tension between farmers and livestock herders.

In the picture, a mother holds her daughter in an IDP camp, which shelters families displaced due to the floods that affected Bangui in March 2021. OCHA/Siegfried Modola

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Part one: Global trends

Hunger is on the Rise. Unprecedented Levels of Food Insecurity Require Urgent Action to Prevent Famine

Last year's warnings of unprecedented levels of global food insecurity have been confirmed. Up to 811 million people worldwide were undernourished in 2020, an approximate rise of 161 million from the previous year.¹

In 2021, the situation continued to deteriorate. Acute hunger levels and famine-like conditions were driven by a toxic combination of factors including conflict, the impacts of COVID-19, extreme weather and climate shocks, transboundary pests and difficulties reaching people in need. In 2021, overlapping and compounding drivers have come together to form a perfect storm. The impacts of each of these converging catastrophes are disproportionately felt by women and girls – who account for 60 per cent of people who are chronically food insecure globally. In nearly two thirds of countries, women are more likely than men to report food insecurity. Women farmers are also at particular risk of hunger, and face greater barriers to accessing land, agricultural inputs and credit.

Beira, Mozambique. A young girl from Nharrime, Mozambique, takes shelter in Samora Machel School in Beira. She is escaping the winds and heavy rain of Tropical Cyclone Eloise, which made landfall on January 2021 with wind speeds of 160 km per hour. As the storm disrupted many key communications systems, UNICEF emergency teams designed a quick and efficient relief response for the most immediate needs, namely shelter, food, water, medical attention, and the protection of children from abuse and exploitation. *UNICEF/Ricardo Franco*

In its September update, the Global Report on Food Crises (a joint, consensus-based analysis by 16 partner organizations) estimated that 161 million people² in 42 countries faced acute food insecurity in the first eight months of 2021.³ However, given the worsening situation at the end of 2021, and the fact that IPC/CH or equivalent analyses⁴ do not cover all the countries at risk, if additional contexts⁵ are factored in, the numbers are likely to be even higher; up to 283 million people⁶ could be acutely food insecure or at high risk in 2021 across 80 countries.⁷ This is a record high, and an unprecedented increase of 12.4 million people since the June 2021 edition of WFP's Global Operational Response Plan was published.⁸

Food Insecurity Levels (2021)

Country	Population (IPC3+)	% of population (IPC3+)	Increase 2019-2021
DRC	27.3 M	28%	11.7 M
Ethiopia	16.8 M	30%	8.8 M
Yemen	16.1 M	54%	200.0 K
Afghanistan	13.2 M	42%	1.9 M
Nigeria	12.8 M	12%	7.8 M
Syria	12.4 M	60%	5.8 M
Sudan	9.8 M	21%	3.9 M
South Sudan	7.2 M	60%	200.0 K
Haiti	4.4 M	46%	700.0 K
Guatemala	3.7 M	23%	600.0 K
Somalia	3.5 M	22%	1.4 M

Number of people in crisis-level food insecurity or worse (IPC3+). Syria data from 2020, as data from 2021 is not yet available.

Table: Global Humanitarian Overview 2022 • Source: Global Report on Food Crisis 2021

This increase is primarily driven by new food insecurity figures from Afghanistan, Myanmar and Somalia. Meanwhile, famine-like conditions remain a real and terrifying possibility in 43 countries around the world, with 45 million people facing emergency or catastrophic levels of acute food insecurity in IPC Phase 4 Emergency and above, up from 41 million people in June 2021. This includes 584,000 people facing famine-like conditions in Ethiopia, Madagascar, South Sudan and Yemen. The situation also remains extremely concerning in Nigeria, where areas in the conflict-affected north-east may be at risk of famine should the situation deteriorate further.

As conflict spreads across northern Ethiopia, the impact is devastating. At least 5.5 million people across three regions – Afar, Amhara and Tigray – were in crisis levels of acute food insecurity and in dire need of food assistance in mid-2021, with 2 million people facing emergency levels of acute food insecurity. Up to 401,000 people were projected to be in IPC Phase 5 Catastrophe in 2021 – the highest number since the 2011 famine in Somalia – due to the



Maiduguri, Nigeria. A worker offloads food provisions in WFP's warehouse in Maiduguri. Humanitarian partners work around the clock to provide food access for the most vulnerable communities affected by violence and food insecurity across Nigeria. *OCHA/Damilola Onafuwa*

impact of conflict in the northern Ethiopia region. The situation is also worrying in other parts of the country: overall, an estimated 16.8 million people were facing crisis levels of acute food insecurity in 2021 in Ethiopia.⁹ In 2021, **Afghanistan** became one of the world's largest hunger crises. Acute food insecurity is affecting 22.8 million people (more than half the population). This figure includes 8.7 million people facing emergency levels of food insecurity (IPC Phase 4).¹⁰ Among those at risk are 3.2 million children under 5 years of age who are expected to suffer from acute malnutrition by the year's end.

Over half (16.2 million) of **Yemen's** population is facing crisis-levels of acute food insecurity, with 5 million people facing Emergency IPC Phase 4. In South Sudan, humanitarian needs are outpacing the resources available to respond, and the situation has worsened as the country is battered by flooding that has swallowed entire villages. Acute food insecurity of crisis level (IPC Phase 3 or above) affects 7.2 million people. More than 2.4 million of those people are in Emergency IPC Phase 4, and more than 108,000 face catastrophic (IPC Phase 5) levels of hunger.

Almost half of the people living in **Central African Republic (CAR)** experience high acute food insecurity, with thousands of children and women severely malnourished due to factors such as the socioeconomic effects of the COVID-19 pandemic.¹¹ Around 27 million people in the **Democratic Republic of Congo (DRC)** are experiencing high levels of acute food insecurity (IPC Phase 3 or above) between September and December 2021. Of these, around 6.1 million people are experiencing critical levels of acute food insecurity (IPC Phase 4). DRC has the world's largest number of highly food insecure people.¹² Some 12.4 million people in **Syria** do not know where their next meal will come from – a level of food insecurity higher than any time during the country's decade-long conflict. Approximately 3.5 million people in **Somalia** faced high acute food insecurity in late 2021, with 1.2 million children likely acutely malnourished.¹³



Anjampaly, Madagascar. Sand dunes are restored in Anjampaly, Madagascar, through a UNDP project that helps provide cash for work, income for local communities and protection for sand-covered crop fields. Between November 2020 and January 2021, the Grand Sud received less than 50 per cent of the normal rainfall, leading to the region's most acute drought since 1981. Extreme drought affected almost 69 per cent of the Grand Sud. Sandstorms, soil erosion and deforestation have transformed arable land into wasteland across wide areas in the region. *OCHA/Viviane Rakotoarivony*

The Central Sahel (**Burkina Faso, Mali and Niger**) experienced a record level of violence in 2020, driving the number of IDPs up from 1.8 million in September 2020 to 2.3 million in September 2021. At the same time, food insecurity has increased, with the number of people in food crisis or worse more than doubling between 2019 and 2020.

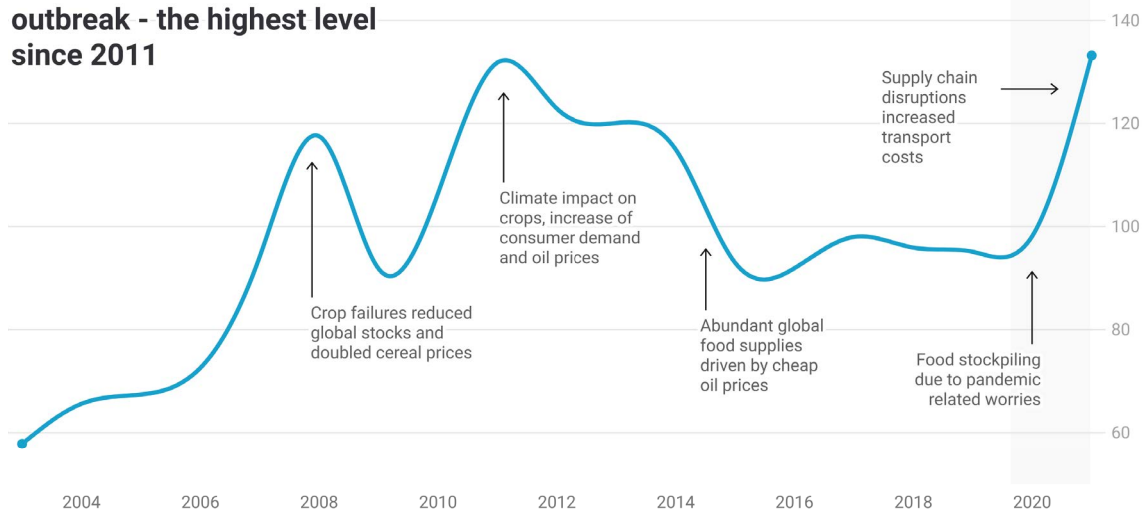
Conflict remains the key driver of food insecurity. Close to 100 million people experienced acute hunger across 23 countries affected by conflict and insecurity in 2020, and protracted conflict was the main cause of six of the ten worst food crises.¹³ In 2020, 56 armed conflicts were active around the world – the highest number recorded since the end of the Second World War – and fatalities caused by organized violence increased for the first time in six years. While data for 2021 is not yet available, key trends indicate that conflict continues to be the primary driver of an alarming rise of food insecurity, particularly among refugees and the most vulnerable. In 2021, conflict levels and violence against civilians continued to increase, most notably in Africa. Armed violence is likely to further intensify in the coming months in several conflict-affected countries.

Extreme climatic and weather events drove almost 16 million people into food crises in 15 countries in 2020. Tropical storms, hurricanes, flooding and drought contributed to acute food insecurity in **Central America** and **Haiti**. Hurricanes Eta and Iota affected over 8.3 million people in northern and eastern Guatemala, northern Honduras and north-east Nicaragua.¹⁴ In 2021, climate impacts joined conflict as a root cause of famine. This is evident in drought-affected Madagascar, where climate is driving famine-like conditions for approximately 28,000 people who faced IPC 5 levels of food insecurity in 2021. Acute food-insecurity of crisis-level has touched

over 1.3 million people, including also 484,000 in Emergency IPC Phase 4. Delayed rains this planting season, signal another poor harvest and despair for families resorting to survival measures such as eating locusts, wild leaves and cactus leaves, which are usually fed to cattle.

Economic shocks following COVID-19 also had a negative impact on food crises in 2020. Indeed, more than 40 million people in 17 countries were pushed into acute food insecurity compared to 24 million in eight countries in 2019 – particularly in Haiti, Sudan and Zimbabwe.¹⁵ Data from 2021 indicates an alarming overall increase in international food prices, pushing global food prices to their highest level in almost a decade. The FAO Food Price Index showed an increase of almost 40 per cent from the same period last year and the twelfth consecutive monthly rise to its highest level since September 2011.¹⁶ The cost of a food basket is at least 30 per cent higher in 11 countries with an HRP than five years earlier.¹⁷ The cost is six times higher in Sudan (534 per cent) and in Syria (531 per cent), and almost three times higher in South Sudan (174 per cent). By the end of June 2021,¹⁸ almost 110 million people were suffering from acute food insecurity in countries with a HRP.

Food prices increased by more than 30% since the COVID-19 outbreak - the highest level since 2011



The FAO Food Price Index is a measure of the monthly change in international prices of a basket of food commodities. It consists of the average of five commodity group price indices (meat, dairy, vegetable oils, cereals and sugar) weighted by the average export shares of each of the groups over 2014-2016.

Chart: Global Humanitarian Overview 2022 • Source: FAO

Funding for food and livelihoods assistance needs to be scaled up urgently. Currently, the GHO's food security sector is only 34 per cent funded and the nutrition sector less than 35 per cent funded.¹⁹ A stark imbalance remains in funding within the food security component of humanitarian assistance, with a significant proportion of resources directed to food assistance alone. Without immediate and sustained humanitarian action, many more lives will be lost and millions of people will continue to face catastrophe next year, the effects of which will be felt for de-



Yangon, Myanmar. WFP distributed rice to vulnerable families in Yangon's Hlaingtharyar Township in response to rising hunger following the military takeover on February. *WFP*

acades to come. We cannot afford to wait for famine declarations. The stakes have never been higher. Governments and humanitarian agencies saved millions of lives by taking early action in 2017 to prevent famine in north-east Nigeria, Somalia, South Sudan and Yemen. We have prevented famine before – we can and must prevent it again.

There is no time to waste; major planting seasons have already passed in 2021, robbing people of a valuable opportunity to produce their own supply of nutritious food. We must take advantage of every opportunity to safeguard livelihoods and save lives today and into 2022. In a world in which there is more than enough food to nourish every person on the planet, allowing famine to happen is cruel and a failure of compassion and foresight.

References

¹ FAO, *State of Food Security and Nutrition in the World 2021*, (SOFI), p. 8. Considering the middle and the upper bound of the projected range, the prevalence of undernourishment increased from 8.4 to around 9.9 per cent in just one year. Africa reported the highest prevalence of undernourishment, affecting more than 282 million people across the region (21 per cent of the population). Close to a third of the world's population did not have adequate access to food in 2020, a rise of 13.5 per cent in just one year. Women are the most at risk; compared to men they are 10 per cent more likely to be food insecure, a rise of 4 per cent on the previous year.

² This is a preliminary number, as not all countries covered in earlier years have updated numbers for 2021 available.

³ Analysis focused on countries that requested external assistance and where most recent IPC/Cadre Harmonisé or equivalent data is available.

⁴ IPC, *IPC Overview and Classification System*

⁵ Covered by WFP monitoring systems

^{6,8} WFP Global Operational Response Plan 2021, Update #3, November 2021

⁷ Based on WFP operational presence and where data is available.

⁹ FSIN, *Global Report on Food Crises, September 2021*

¹⁰ According to the latest *Integrated Food Security Phase Classification* analysis published on 25 October 2021, 18.8 million people (47 per cent of the population) have acute food insecurity (IPC Phase 3 or above), which is a staggering 24 per cent increase from March. The IPC analysis forecasts that this number will rapidly increase to 22.8 million people from November 2021 to March 2022.

¹¹ IPC Central African Republic Alert, October 2021

¹² IPC Democratic Republic of the Congo Alert, November 2021

¹³ FSIN, *Global Report on Food Crises 2021*, p. 22. DRC, Yemen, Afghanistan, Syria, Nigeria, and South Sudan.

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^{16,17,18,19} OCHA, *COVID-19 Data Explorer: Global Humanitarian Operations*, Monthly Highlights, 30 June 2021



Part one: Global trends

Conflict Remains a Major Driver of Humanitarian Need

In 2020, about 60 per cent of all conflicts worldwide were fought violently.¹ Despite repeated calls for global ceasefires due to the COVID-19 pandemic, political conflicts continue to hit civilian populations the hardest and further exacerbate the needs of the most vulnerable categories of people.²

The overall number of civilian deaths and injuries from the use of explosive weapons decreased by 43 per cent in 2020 compared to the previous year, yet civilians still account for the most casualties. In 2020, 59 per cent of casualties were civilians, totaling 11,056 deaths and injuries.

Civilians continued to be far more at risk when explosive weapons were used in populated areas. The destruction to essential infrastructure including homes, hospitals, roads and schools has had devastating impacts on civilian populations, driving up displacement and protection risks. Globally, 88 per cent of people harmed by explosive weapons are civilians, a trend that has been observed for the tenth consecutive year.³ The overall decrease in civilian casualties could be linked to parties shifting focus to the pandemic and related safety measures, as well as ceasefires in Libya and the Syrian Arab Republic.⁴

Malakal, South Sudan. At Malakal Hospital, South Sudan, an ICRC worker visits a man wounded by gunshot.
ICRC/Alessio Romenzi

Casualties from explosive arms incidents decreased by 43% after the COVID-19 outbreak

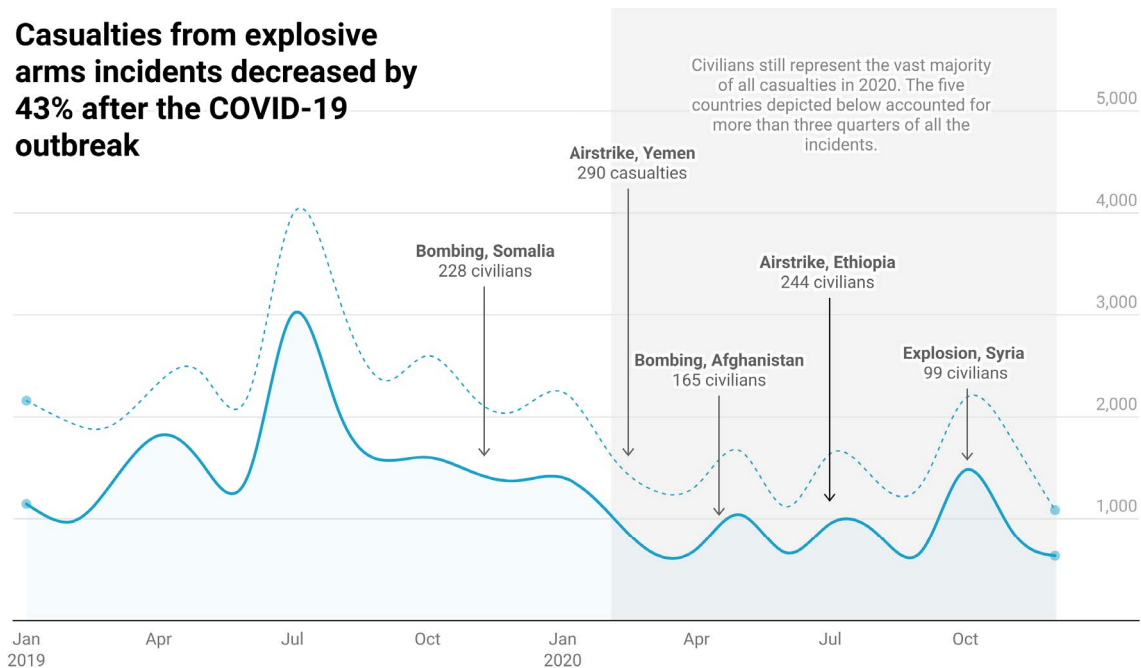


Chart: Global Humanitarian Overview 2022 • Source: Action on Armed Violence

Children are particularly vulnerable. In 2020, the United Nations verified over 26,000 grave violations against children, including the recruitment and use of children by armed groups, killing, maiming, harassment, rape and sexual violence, abductions and attacks on schools and hospitals.⁵ Persons with disabilities often face difficulties fleeing violence and a higher risk of injury and death.⁶ When escaping hostilities, they can struggle to access devices that might usually enable them to carry out daily activities, such as prostheses or mobility aids. Persons with disabilities face challenges meeting basic needs such as food, protection, sanitation and health care, which can be inaccessible even when service provisions are in place.⁷ Women and girls with disabilities also experience higher rates of sexual violence.

Yemen is home to at least 4.6 million persons with a disability.⁸ As in other countries, they face heightened risks, such as exclusion, discrimination and violence, as well as a lack of representation and access to services.⁹ Analysis from eastern Ukraine showed that older persons and persons with disabilities living closer to the front line had significantly lower levels of access to health-care services.¹⁰

Conflict-related sexual violence continues, mostly targeting women and girls.¹¹ Survivors face persistent social, structural and security constraints, often leading to negative coping mechanisms, including early and forced marriage.¹² The pandemic has slowed the pace of judicial proceedings in many conflict settings, impacting the already severely limited judicial processes for rape and sexual violence. It is critical that the capacity of national rule of law institutions is strengthened to advance accountability and prevention.



Anjampaly, Madagascar. Sand dunes are restored in Anjampaly, Madagascar, through a UNDP project that helps provide cash for work, income for local communities and protection for sand-covered crop fields. Between November 2020 and January 2021, the Grand Sud received less than 50 per cent of the normal rainfall, leading to the region’s most acute drought since 1981. Extreme drought affected almost 69 per cent of the Grand Sud. Sandstorms, soil erosion and deforestation have transformed arable land into wasteland across wide areas in the region. *OCHA/Viviane Rakotoarivony*

Violence against humanitarian workers and assets continues, with most incidents occurring in conflict-affected countries. In 2020, 117 humanitarian workers were killed, 108 of whom were national staff.¹³ Attacks against health-care workers are increasing. WHO recorded the killings of 182 health-care workers in 22 countries affected by armed conflict, with the highest numbers in Burkina Faso, DRC, Somalia and the Syrian Arab Republic.¹⁴

Aid Worker Security Incidents (2010–2020)

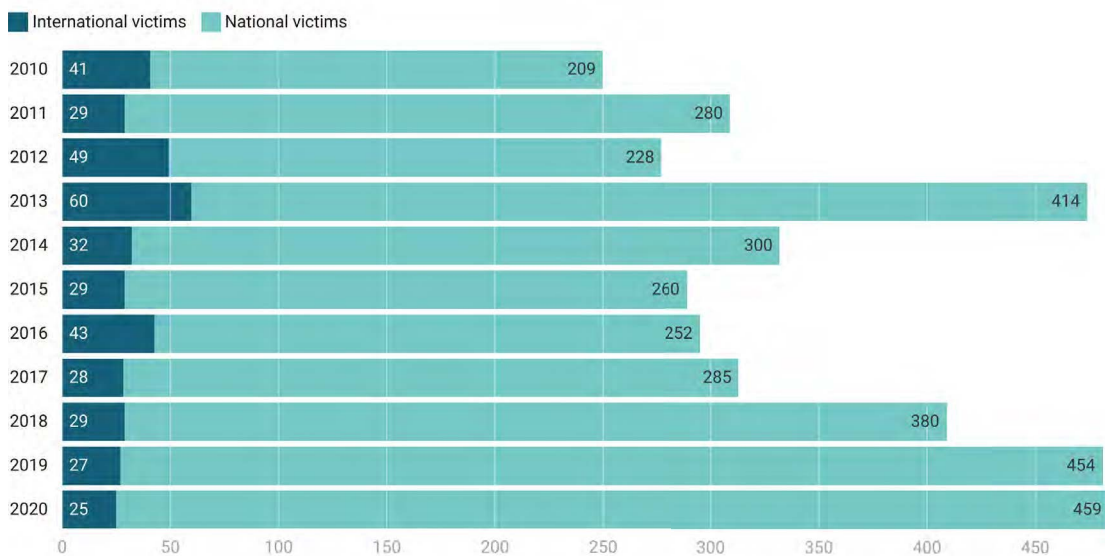


Chart: Global Humanitarian Overview 2022 • Source: Aid Worker Security Database

Humanitarian access constraints have severely deteriorated over the last four years

Crisis-affected people in ten countries are experiencing extreme access constraints, hindering the delivery of humanitarian aid - this number has tripled in just one year.

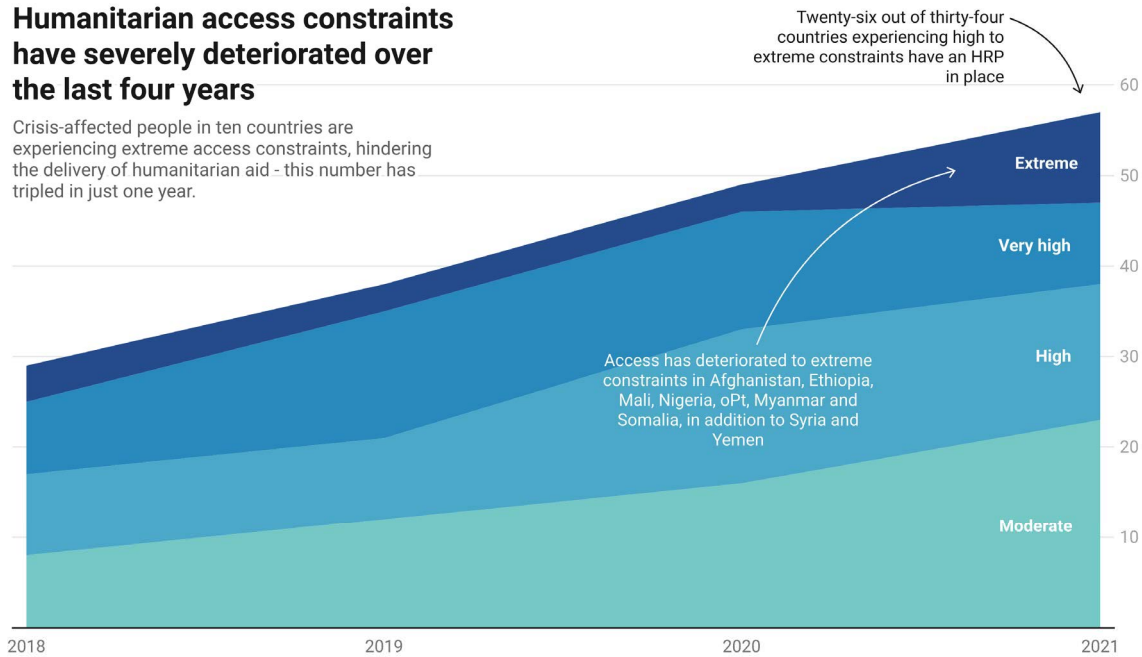


Chart: Global Humanitarian Overview 2022 • Source: ACAPS - Humanitarian Access Overview

Humanitarian access and operations continued to be hampered by conflict, insecurity, violence against humanitarian workers and assets, bureaucratic impediments, counterterrorism, sanctions measures and political attacks, which delegitimize humanitarian response. COVID-19 has also intensified access challenges. Border closures, flight suspensions, lockdowns and other countermeasures cause delays, additional costs and the partial suspensions of some humanitarian activities.¹⁵

References

- ¹ Heidelberg Institute for International Conflict Research, [Conflict Barometer 2020](#).
- ² Political conflict is classified according to its intensity into low, medium or high. Low-intensity political conflict is non-violent; it includes political disputes and non-violent crises. Medium- and high-intensity political conflict includes the use of violence. Specifically, highly violent political conflicts included 21 wars and 19 limited wars. For full definitions on methodology, please see Heidelberg Institute for International Conflict Research, [Conflict Barometer 2020](#).
- ³ Action on Armed Violence, [Explosive Violence Monitor 2020](#), p. 9.
- ⁴ Report of the UN Secretary-General on the [Protection of Civilians in Armed Conflict](#), S/2021/423, p. 2.
- ⁵ Report of the UN Secretary-General on [Children and Armed Conflict](#), A/75/873 S/2021/437, 6 May, 2021, p. 2. The highest numbers of grave violations were verified in Afghanistan, the Democratic Republic of the Congo, Somalia, the Syrian Arab Republic and Yemen.
- ⁶ Report of the UN Secretary-General on the [Protection of Civilians in Armed Conflict](#), S/2021/423, p.7.
- ⁷ Human Rights Watch, [Persons with Disabilities in the Context of Armed Conflict](#), 8 June 2021
- ⁸ OCHA, [Humanitarian Needs Overview - Yemen](#), 2021, p. 33
- ⁹ Report of the UN Secretary-General on the [Protection of Civilians in Armed Conflict](#), S/2021/423, p.7.
- ¹⁰ WHO, [Access to health-care services for older persons and persons with disabilities living in Eastern Ukraine along the "line of contact"](#), 2021
- ¹¹ Report of the UN Secretary-General on the [Protection of Civilians in Armed Conflict](#), S/2021/423, p.7.
- ¹² Report of the UN Secretary-General on [Conflict-Related Sexual Violence](#), S/2021/312, 30 March 2021
- ¹³ [Aid Worker Security Database](#), 2020
- ¹⁴ Report of the UN Secretary-General on the [Protection of Civilians in Armed Conflict](#), S/2021/423, p. 11.
- ¹⁵ Report of the UN Secretary-General on the [Protection of Civilians in Armed Conflict](#), S/2021/423, p. 8.



Part one: Global trends

Variants and Slow Vaccine Rollout are Fuelling the COVID-19 Pandemic

COVID-19 and its effects are taking a heavy toll on countries already struggling to cope with poverty, conflict, climatic shocks and other disease outbreaks. At least 20 million additional people are being pushed into extreme poverty in 17 countries with a Humanitarian Response Plan (HRP) in 2021, as a direct result of the economic impact of the crisis.¹

The virus has claimed at least 1.9 million lives, with 67 million cases reported across the 59 countries in the GHO as of November 2021.² Two thirds of these deaths and cases were reported in 2021 alone,³ with a threefold increase recorded in over a third of countries compared to the previous year. Inadequate testing capabilities in many countries continue to veil the scale of the crisis, with figures expected to be much higher than official records show. More easily transmissible variants, a lack of vaccines, and the easing of public health and social measures have increased the spread of the virus. The Delta variant has been confirmed in 80 per cent of GHO countries.⁴

Kigali, Rwanda. A woman receives a COVID-19 vaccination in Kigali. Rwanda is sharing experiences in complex cold-chain logistics for WHO's Vaccines Learning Agenda - a database of valuable information for African countries, creating case studies on a range of positive vaccine experiences and overcoming risks and challenges. *WHO/Andre Rugema*

Recorded cases of COVID-19 doubled this year, for countries with Inter-Agency Coordinated Appeals

The pandemic hit Latin America and the Caribbean the hardest, totalling 67% of the cases. Africa saw the steepest increase this year, with 116% more cases recorded

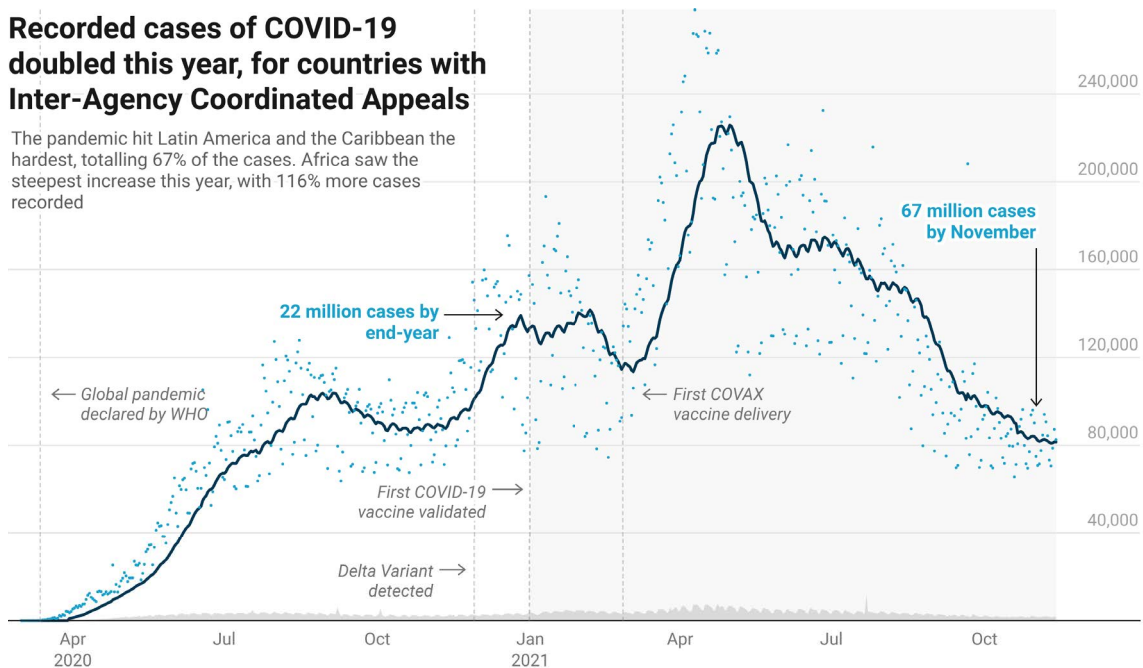


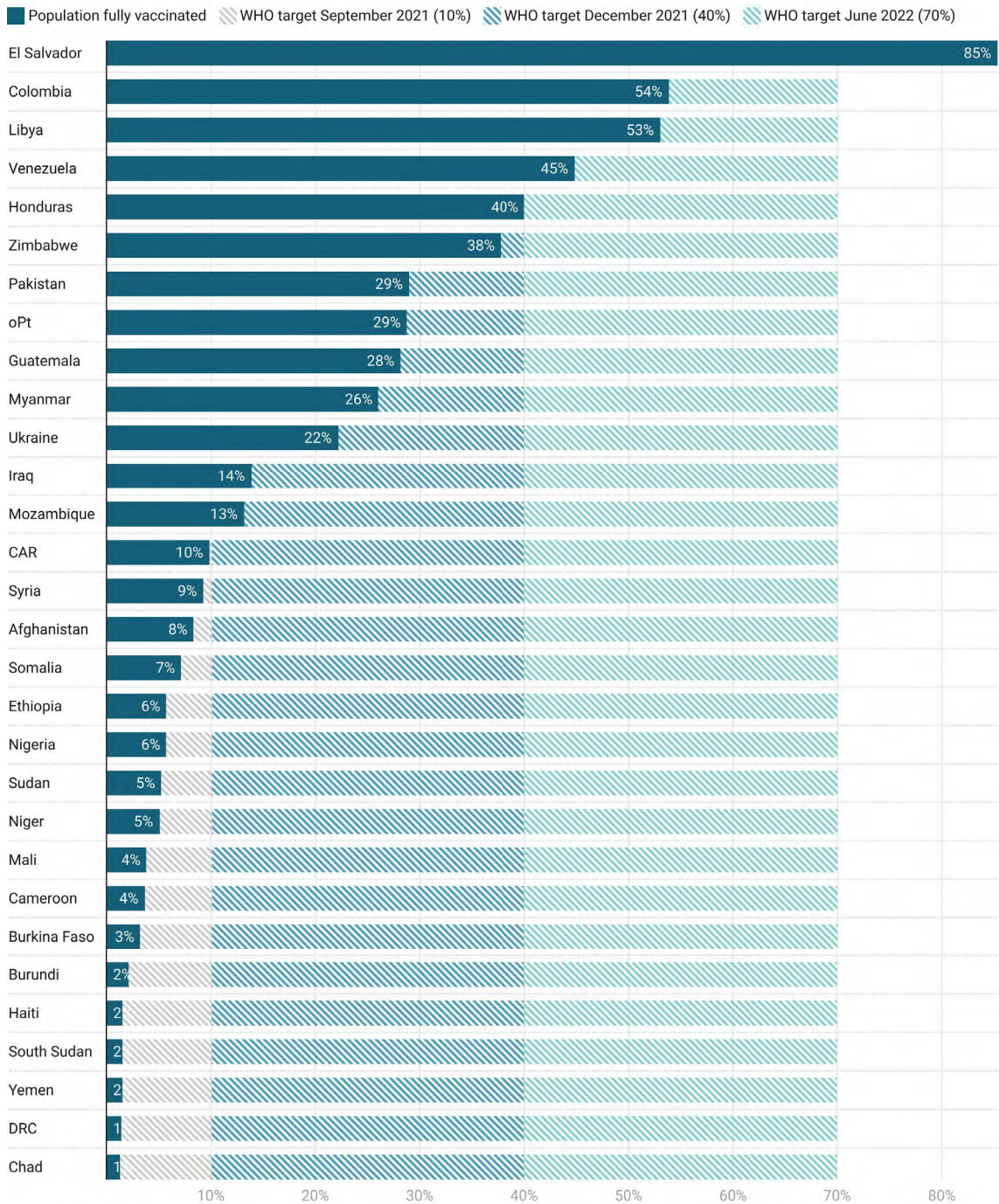
Chart: Global Humanitarian Overview 2022 • Source: HDX COVID-19 Data Explorer

Of the 7.5 billion COVID-19 vaccine doses administered globally, only about 4 per cent have been administered in the 30 countries with an inter-agency HRP.⁵ The number of doses delivered to countries has fallen far short of the number required to reach WHO's goal of vaccinating 40 per cent of the population in every country by the year's end, with the poorest and most fragile contexts the furthest behind. As of November 2021, over half of countries with a HRP were unable to vaccinate even 10 per cent of their population.

Supplies of COVID-19 vaccines are improving and will continue to increase in 2022. As they increase, the logistics of getting vaccines into people's arms will likely become the main constraint to improving vaccination coverage. To ensure the most vulnerable countries are not left behind, it is imperative that countries and partners receive support to accelerate the administration of vaccines, including to populations of concern in humanitarian settings.⁶

Vaccine hesitancy remains a major hurdle. Early and continuous engagement of communities and local leaders, including women's organizations, will improve vaccine uptake. Despite an increased vaccine supply, many countries with HRPs are not expected to have sufficient coverage of their population until mid-2022 or later. In the absence of adequate vaccines, severe outbreaks of COVID-19 can be expected in 2022. These countries will require continued support to respond to outbreaks, including through scaling up diagnostics, personal protective equipment and treatments such as oxygen. The delivery of COVID-19 vaccines must not compromise other essential health services and should go together with other life-saving support that communities are seeking.

COVID-19 Vaccine Roll-Out (2021)



Data as of end-October 2021

Chart: Global Humanitarian Overview 2022 • Source: HDX COVID-19 Data Explorer • Created with Datawrapper



Beirut, Lebanon. Staff at COVID-19 Intensive Care Unit of the Rafik Hariri University Hospital wear personal protective equipment donated by WHO. The current crisis in Lebanon, coupled with the COVID-19 pandemic, has disrupted the health system. Patients face numerous cost barriers when trying to access healthcare services, including the PCR tests required for in-patient procedures. The Emergency Response Plan for Lebanon aims to support the capacity of the Lebanese health system to respond to and cope with the COVID-19 emergency. *WHO*

Essential health services continue to be disrupted, including immunization campaigns, risking outbreaks of preventable diseases such as measles, polio and cholera. School closures have continued to interrupt education for millions of children and youth, many of whom will not return. Social cohesion has been stretched thin.

COVID-19 continues to exacerbate the political and socioeconomic conditions that increase humanitarian need and fuel conflicts. Economies and livelihoods have been devastated. Full financing of the GHO remains the best way to mitigate the secondary impact of the COVID-19 pandemic on humanitarian populations. However, these are not short-term challenges. Without an urgent and dramatically scaled-up response from the international community, the health, economic, development and security situation will worsen in the coming years.

Member States and international financial institutions must intensify and scale up responses that support countries to address and recover from COVID-19. Vaccines will save lives and boost economies. More than 1.3 billion doses are still needed to reach the WHO target of vaccinating 70 per cent of the population in HRP countries by mid-2022. At the same time, the allocation of US\$650 billion in Special Drawing Rights⁷ and the G7's call to reallocate \$100 billion of those to poorer countries⁸ is a unique opportunity to support the global COVID-19 response and enable greener and more robust economic recoveries. It is critical that resources and initiatives benefit the poorest and most fragile contexts without adding to already high levels of debt burden.

Aid in Action

COVID-19 Vaccines for High-Risk and Vulnerable Populations



The Humanitarian Buffer was established in 2021 within the COVAX Facility to act as an important measure of 'last resort'. It ensures access to COVID-19 vaccines for high-risk and vulnerable populations in humanitarian settings that are not covered under national deployment and vaccination plans. Populations of concern may include refugees, asylum seekers, stateless persons, internally displaced persons (IDPs), minorities, populations in conflict settings or those affected by humanitarian emergencies, and vulnerable migrants, irrespective of their legal status. *In the picture, this 77-year-old displaced Venezuelan man receives his second dose of the COVID-19 vaccine from a health-care provider in Guayaquil, Ecuador. UNHCR/Santiago Arcos*

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Part one: Global trends

Forced Displacement is at Record Levels, COVID-19 Hampers Durable Solutions

The number of people forcibly displaced worldwide is higher than ever. By the end of 2020, 82.4 million people were forcibly displaced, including 48 million IDPs¹ and 26.4 million refugees,² because of persecution, conflict, violence, human rights violations, or events seriously disturbing public order. More than 1 per cent of the world's population is now displaced, about 42 per cent of whom are children.³

This represents a worrying trend that has increased for nine consecutive years and is now more than double the number compared to 10 years earlier. Many people are also driven to forced and voluntary movements for multiple reasons, including environmental factors and/or threats to their human rights and dignity.⁴ The number of refugees⁵ remains at a record high, growing from 26.0 million in 2019⁶ to 26.4 million at the end of 2020.⁷ Almost 65 per cent of all refugees come from just five countries: Afghanistan, the DRC, Myanmar, South Sudan and Syria.⁸ Developing countries host 83 per cent of refugees, while the least developed countries have provided

Kigali, Rwanda. A woman receives a COVID-19 vaccination in Kigali. Rwanda is sharing experiences in complex cold-chain logistics for WHO's Vaccines Learning Agenda - a database of valuable information for African countries, creating case studies on a range of positive vaccine experiences and overcoming risks and challenges. *WHO/Andre Rugema*

82.4 million people are forcibly displaced – this number has doubled in the past ten years. 35 million are children below 18 years of age.

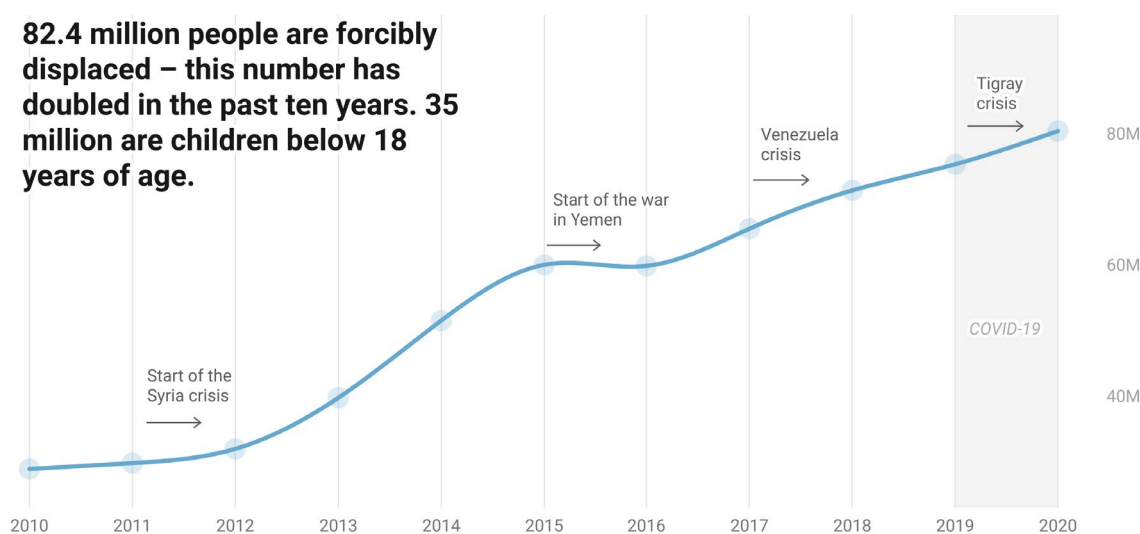


Chart: Global Humanitarian Overview 2022 • Source: IDMC / UNHCR / UNRWA

asylum to 33 per cent of this total.⁹ Of these refugees, at least 40 per cent are children and 49 per cent women and girls.¹⁰ Some 5.7 million refugees, migrants and asylum seekers remained displaced from Venezuela at mid-2021.¹¹

COVID-19 disruptions have further hampered efforts to find durable solutions. Despite efforts to adapt asylum procedures, the number of new applications worldwide was 45 per cent lower in 2020 than in 2019.¹² In 2020, fewer than 300,000 refugees were able to return to their country of origin or resettle to a third country compared to 425,000 the year before. Some 15.7 million refugees (76 per cent) were in a protracted situation at the end of 2020, similar to 2019.¹³

Refugees by Country of Origin (2020)

Country	Total refugees	Evolution (2016–2020)	Main host countries
Syria	6.8 M		Turkey, Lebanon, Jordan
Afghanistan	2.6 M		Pakistan, Iran
South Sudan	2.2 M		Uganda, Sudan, Ethiopia
Myanmar	1.1 M		Bangladesh
DR Congo	840.4 K		Uganda, Burundi, Rwanda
Somalia	812.4 K		Kenya, Ethiopia, Yemen
Sudan	787.8 K		Chad, South Sudan
CAR	642.2 K		Cameroon, DRC, Chad
Eritrea	524.7 K		Tanzania, Rwanda, Uganda
Burundi	373.0 K		Ethiopia, Sudan, Switzerland

Table: Global Humanitarian Overview 2022 • Source: UNHCR

Countries with the Largest Populations of IDPs (2020)

Country	Total IDPS	Conflict-induced	Disaster-induced	Evolution (2016–2020)
Syria	6.6 M	6.6 M	-	
DRC	5.3 M	5.3 M	64K	
Colombia	4.9 M	4.9 M	21K	
Afghanistan	4.7 M	3.5 M	1.1M	
Yemen	3.9 M	3.6 M	223K	
Somalia	3.0 M	3.0 M	-	
Nigeria	2.9 M	2.7 M	143K	
Sudan	2.7 M	2.3 M	454K	
Ethiopia	2.7 M	2.1 M	633K	
South Sudan	1.5 M	1.4 M	106K	

Table: Global Humanitarian Overview 2022 • Source: IDMC

Internal displacement is also at an all-time high. The number of IDPs due to violence and conflict reached 48 million in 2020, the highest ever figure and a rise of 4.2 million on the previous year.¹⁴ A further 7 million people remained internally displaced due to natural disasters. Millions of IDPs are living in protracted situations, with 40 per cent fewer able to return to their place of residence in 2020 compared to 2019.¹⁵

Three quarters of the 48 million people displaced due to violence and conflict come from ten countries, nine of which are located in sub-Saharan Africa and the Middle East.¹⁶ Following tensions and ensuing violence in Ethiopia's northern region of Tigray, the number of people displaced within the country due to conflict stood at 2.1 million by the end of 2020. In Afghanistan, the number of people displaced within their own country, due to persistent conflict and violence, reached 3.5 million at the end of 2020. This is an 18 per cent increase compared with 2019 and the highest figure in more than a decade.¹⁷ By mid-September 2021, a further 678,000 people in Afghanistan were known to have fled their homes due to the increased fighting in the country.¹⁸ Significantly, 95 per cent of new conflict-related internal displacements in 2020 happened in countries with a high vulnerability to climate change.

COVID-19 has also presented interlocking health, socioeconomic and protection crises for forcibly displaced people. The pandemic is particularly devastating for displaced women and children, who experience higher rates of domestic and sexual violence and child marriages.¹⁹ Even before COVID-19, refugee and internally displaced women and girls were at greater risk from gender-based violence (GBV). For example, an estimated one in five forcibly displaced women in humanitarian crises has been subjected to sexual violence – one of many forms of GBV. The pandemic's socioeconomic impacts have only intensified this risk – heightening tensions in households – while containment measures have created additional barriers to reporting abuse and



Kotoni, DR Congo. Displaced boys play cards in the primary school where they found refuge after fleeing their village in DRC. Following violent clashes in the surrounding mountains, Kotoni village received more than 9,000 displaced people, doubling its population. *OCHA/Ivo Brandau*

seeking help.²⁰ A survey of displaced women in 15 post-conflict settings in Africa found a 73 per cent increase in intimate partner violence and a 32 per cent rise in early marriage between May and July 2020.²¹ At the onset of the pandemic, school closures inhibited learning opportunities for children from forcibly displaced households. Protection measures were often lifted and children were exposed to greater risks, reducing their chances of to return to school when they reopen.²²

The UN SG's High-Level Panel on Internal Displacement has called for stepped-up action on solutions anchored in the affirmation of IDPs as rights holders. The panel also called for the recognition of solutions as a development priority, and greater visibility to internal displacement in Government policies, UN strategies, development financing, private sector engagement and the media.²³

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⁵ Including people in a refugee-like situation.

⁶ In 2019, 26 million refugees: 20.4 million refugees under UNHCR's mandate, 5.6 million Palestine refugees under UNRWA's mandate. In 2020, 26.4 million refugees: 20.7 million refugees under UNHCR's mandate, 5.7 million Palestine refugees under UNRWA's mandate – [UNHCR Global Trends 2019](#), p. 2.

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¹⁴ IDMC, [Global Report on Internal Displacement](#), p. 14. Syria, DRC and Colombia, accounted for more than a third of the global total.

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²¹ IRC, [What Happened? How the Humanitarian Response to COVID-19 Failed to Protect Women and Girls](#), October 2020, pp. 4, 7.

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Part one: Global trends

Health Services for the Most Vulnerable Have Been Severely Impacted

Almost half of all deaths in low-income countries are caused by communicable diseases, and maternal, perinatal and nutritional conditions. Respiratory infections, diarrhoea, malaria, tuberculosis (TB) and HIV/AIDS are the top 10 causes of death.¹ At the current pace, many health-related Sustainable Development Goals (SDGs) will not be met in 2030, including premature mortality from non-communicable diseases, the incidence of TB and malaria, and new HIV infections.²

COVID-19 severely impacts the operational readiness of health systems worldwide, dealing a considerable blow to operating budgets and the ability to maintain the minimum stock levels of essential commodities for HIV, TB and malaria.³ In 502 health facilities across Africa and Asia, HIV testing fell 41 per cent, TB referrals declined by 59 per cent and malaria diagnoses fell by 31 per cent in 2020 compared with 2019.⁴ This disruption means that people are not as widely tested, diagnosed or treated for HIV, TB and malaria, increasing the chance of HIV and TB transmission within communities.⁵

Maiwut, South Sudan. Hospital porters carry a patient from the intensive care unit at an ICRC-supported centre in Maiwut. *ICRC/Albert Gonzalez Farran*

Immunization coverage dropped for the first time in decades

Global immunization coverage dropped by 3%, leaving more than 23 million children unvaccinated. Countries with an HRP are the most affected and already experience lower than average coverage

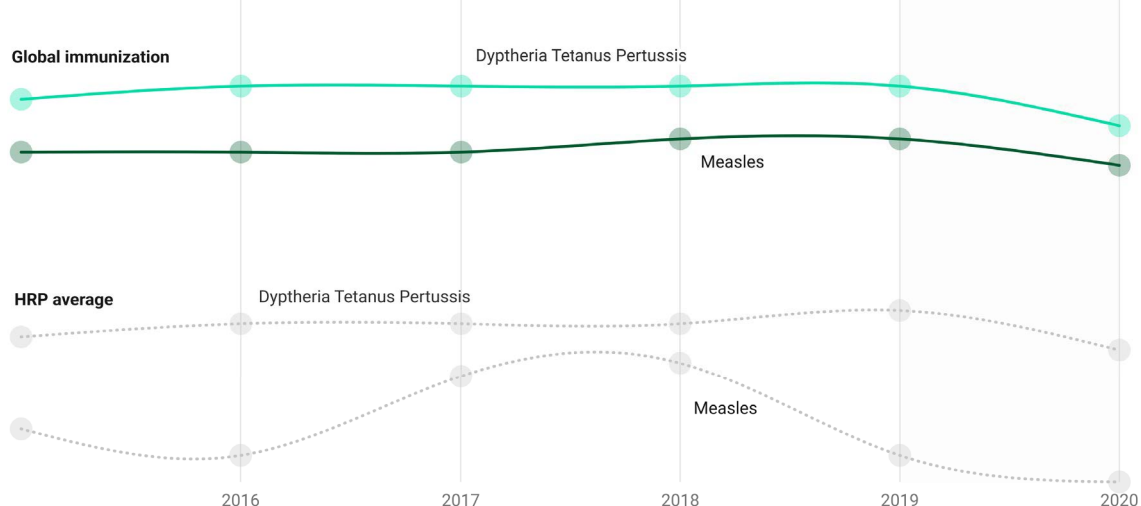


Chart: Global Humanitarian Overview 2022 • Source: World Health Organization

Declining health systems are particularly dangerous for mothers and children. If they have reduced access to essential health services, mortality among children under 5 years of age could rise.⁶ Antenatal-care visits have already fallen by 43 per cent.⁷ 2020 saw a decrease of 23 per cent in consultations for under-5 services in Africa and a large drop of 74 per cent in Asia.⁸ In 2021, about 23 million children worldwide missed out on basic childhood vaccines. Children living in remote or deprived areas are the most affected, highlighting the widening gaps in vaccine access.⁹

Conflict severely hampers the provision of health care. In 2020, Yemen experienced six outbreaks of infectious diseases, including cholera, dengue, diphtheria and malaria. Only 51 per cent of health-care facilities across the country are reported to be fully functional, due to the conflict. The fragile health system has extremely limited capacity to implement effective COVID-19 preparedness and response measures.¹⁰

Mental health services require greater support, particularly in conflict settings, where adults are almost three times more likely to have mental health conditions. Children who are refugees or IDPs or who live in conflict settings also have high levels of mental health issues.¹¹

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Part one: Global trends

COVID-19 Continues to Disrupt the Global Economy as Extreme Poverty Rises

COVID-19 has caused extraordinary disruptions to the global economy. Economic contraction and fiscal and policy responses have been unprecedented, helping to ensure that the global economic contraction of -3.3 per cent in 2020 was severe but better than initially forecast.¹

Global economic recovery remains uncertain and is set to widen the gap between advanced economies, emerging markets and developing economies. The global economy is projected to grow 5.9 per cent in 2021, largely based on the strength of major economies such as the United States and China.² Many other countries are not expected to return to pre-pandemic Global Domestic Product levels until well into 2023 and beyond.

Latin America and the Caribbean experienced the worst economic contraction in the region's history, with the economy declining by 7 per cent in 2020.³ The pandemic continues to take a particularly heavy toll on sub-Saharan Africa. By the end of 2021, real Global Domestic Product per capita in sub-Saharan Africa will likely regress to the same level as 2007, and growth is expected to be significantly lower than the trend anticipated before the pandemic.⁴ Per capita output is not expected to return to pre-COVID-19 levels until after 2024 for half of those countries with a HRP for which data was available in October 2021.⁵

Idlib, Syria. A teenager from Idlib shows his oiled hands. He now works in car maintenance after dropping out of school early. OCHA/Bilal al Hamoud

Economic Indicators for Countries with HRP

Country	GDP growth	Debt distress	Working poverty rate	Unemployment rate	Youth NEET
World	3.1%	-	6.6%	6.5%	22.3%
Afghanistan	-2.4%	High	34.3%	11.7%	41.2%
Burkina Faso	1.9%	Moderate	31.1%	0.8%	22.0%
Burundi	-1.0%	High	77.6%	5.0%	4.1%
Cameroon	-1.5%	High	19.4%	3.6%	19.9%
CAR	1.0%	High	62.5%	4.3%	21.9%
Chad	-0.8%	High	40.3%	9.5%	22.2%
Colombia	-6.8%	-	2.0%	9.1%	24.0%
DRC	1.7%	Moderate	67.4%	13.4%	21.3%
El Salvador	-7.9%	-	0.4%	7.0%	27.3%
Ethiopia	6.1%	High	20.4%	2.8%	11.3%
Guatemala	-1.5%	-	3.6%	4.7%	27.3%
Haiti	-3.3%	High	23.2%	14.5%	27.4%
Honduras	-9.0%	Low	12.7%	9.4%	26.7%
Iraq	-15.7%	-	0.4%	13.7%	44.4%
Lebanon	-25.0%	-	0.1%	6.6%	17.8%
Libya	-59.7%	-	0.2%	19.4%	31.4%
Madagascar	-6.1%	Moderate	72.3%	1.9%	5.9%
Mali	-1.6%	Moderate	42.3%	7.5%	29.4%
Mozambique	-1.2%	Debt distress	58.3%	3.4%	17.1%
Myanmar	3.2%	Low	1.1%	1.8%	14.9%
Niger	3.6%	Moderate	39.2%	0.7%	23.8%
Nigeria	-1.8%	-	33.8%	9.0%	31.4%
oPt	-11.5%		0.2%	27.4%	33.4%
Somalia	-0.7%	Debt distress	94.4%	13.1%	25.5%
South Sudan	-6.6%	High	-	12.7%	21.2%
Sudan	-3.6%	Debt distress	8.5%	17.7%	32.0%
Syria	-	-	36.1%	9.0%	33.7%
Ukraine	-4.0%	-	0.0%	9.5%	16.6%
Venezuela	-30.0%	-	21.2%	9.1%	21.6%
Yemen	-8.5%	Moderate	45.3%	13.4%	44.4%

Table: Global Humanitarian Overview 2022 • Source: IMF (GDP Growth, Debt Distress), ILO (% of population with working poverty rate, NEET: % of youth not in education, employment or training), World Bank (Unemployment rate)



Tagal, Chad. A father and his son fish on a small pirogue in Lake Chad. He explains: “Where we lived, we had some fields. We went fishing and were able to earn enough to feed the family. My wife never came to ask for more; we had enough. Often, we were able to help others. We fled when Boko Haram arrived in our village. Our nets were stolen and destroyed. Here, we had to borrow a net from a local guy, and we have to pay back by giving the better part of what we fish. We share one net with five other families. I go out early in the morning and fish for three or four hours. Before, the water was free to access for everybody. Now there are many controls everywhere. We can only go 2 or 3 km from the shore. Back home, I threw my nets two times and caught enough for ourselves and to sell more on the market. Here, you have to throw the net 10 times, and it’s still not enough to only feed the family.” *OCHA/Ivo Brandau*

The growing divergence reflects differences in pandemic developments and in policy and fiscal responses. COVID-19 vaccine availability and roll-out are highly unequal and unevenly distributed. Prior to the pandemic, half of all low-income countries were either already in debt distress or at high risk of debt distress. This same group of countries saw their debt burdens rise by a further 12 per cent to \$860 billion in 2020.⁶

The losses experienced by low- and middle-income countries will persist into the medium term as the virus mutates and fiscal space becomes ever more constrained.⁷ Failing to act now to contain the pandemic could cost in excess of \$5 trillion of global GDP over five years.⁸ Hard-won development gains in poverty reduction, employment, food security, education and health care have been reversed. These losses will lead to higher debt and are likely to compound the vulnerability of people living in humanitarian crises, especially in fragile and conflict-affected economies.⁹

Extreme poverty has increased significantly, after more than two decades of continued decline. An estimated 97 million additional people were pushed into extreme poverty in 2020 owing to the COVID-19 pandemic. Their prospects are not expected to improve. While global poverty is projected to decrease in 2021, this prediction is highly uncertain and not at a pace sufficient to close the gap caused in 2020. The prediction is also largely driven by high-income and upper-middle-income countries, while sub-Saharan Africa and low-income countries are expected to see further increases in poverty in 2021 and at a faster pace than pre-pandemic projections.¹⁰

Evolution of Extreme Poverty (2015 - 2021)

Population living with less than \$1.9 per day

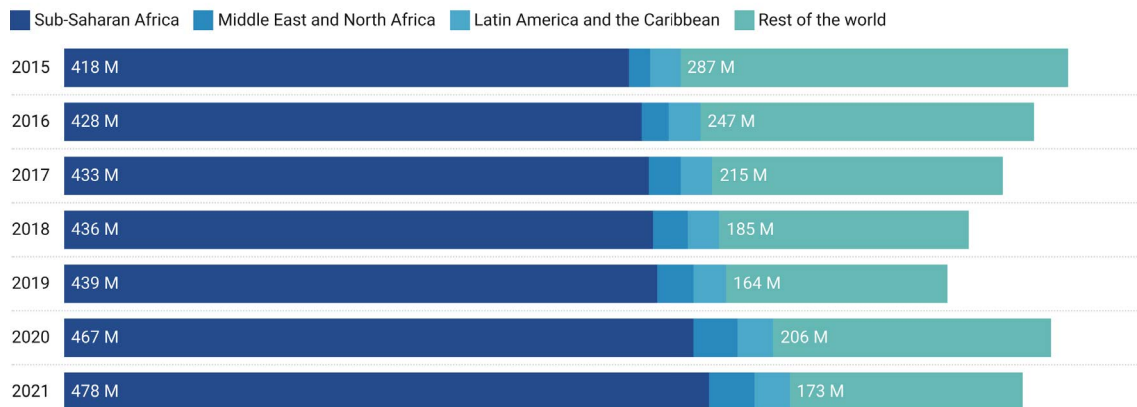


Chart: Global Humanitarian Overview 2022 • Source: World Bank

Following unprecedented contractions in 2020, the global total hours worked are expected to remain 4.3 per cent below pre-pandemic rates in 2021. This is the equivalent of 125 million full-time jobs – a dramatic downward revision from ILO’s June 2021 forecast.¹¹ Recurrent waves of the pandemic are causing working-hour losses to remain persistently high in low- and lower-middle-income countries, disproportionately impacting women and younger workers.¹²

The gender gap in the labour force continues to be exacerbated. Although women accounted for 38.9 per cent of pre-pandemic total employment, they comprised 47.6 per cent of employment losses in 2020.¹³ Higher vaccination rates help to strengthen labour market recovery. ILO estimates that for every 14 people fully vaccinated in the second quarter of 2021, one full-time equivalent job was added to the global labour market. However, none of these benefits accrued to low-income countries. More equitable access to vaccines would enable employment recovery in these countries.¹⁴

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Part one: Global trends

School Closures Have Severely Disrupted Education, and Remote Learning Remains Out of Reach for Many

Significant disruptions to global education caused by COVID-19 continue. At the pandemic's peak in 2020, school closures affected 1.6 billion students in 180 countries.¹ This has resulted in education losses equivalent to about one half of a school year in emerging markets and developing economies and disproportionately affects children from poorer and less-educated families.²

Between February 2020 and August 2021, schools were closed nationwide for more than 41 weeks in several countries included in the 2022 GHO, such as Bangladesh, Myanmar, Uganda and Venezuela.³ Other countries have implemented brief school closures amid rising cases, including in Iraq, Myanmar and Zimbabwe.⁴ Vulnerable children are often the hardest hit by school closures - the longer they are out of school the less likely they are to return.⁵

Herat, Afghanistan. At the Mawlana Hafezi school for girls, only grades one to six have returned to learning. The school has high demand and a number of classes are held in tents due to funding shortages and lack of space. Around 4,000 girls attend this school when operating at full capacity for grades one to twelve. On last August, the authorities instructed schools in Afghanistan to reopen for grades one to six for both girls and boys in so-called 'cold climate' provinces. Grade seven and above remain closed with no clarity on when they will open again. Across Afghanistan, children's education has been disrupted for two academic school years now due to the COVID-19 pandemic. *UNICEF/Sayed Bidel*

Duration of school closures (2020-2021)

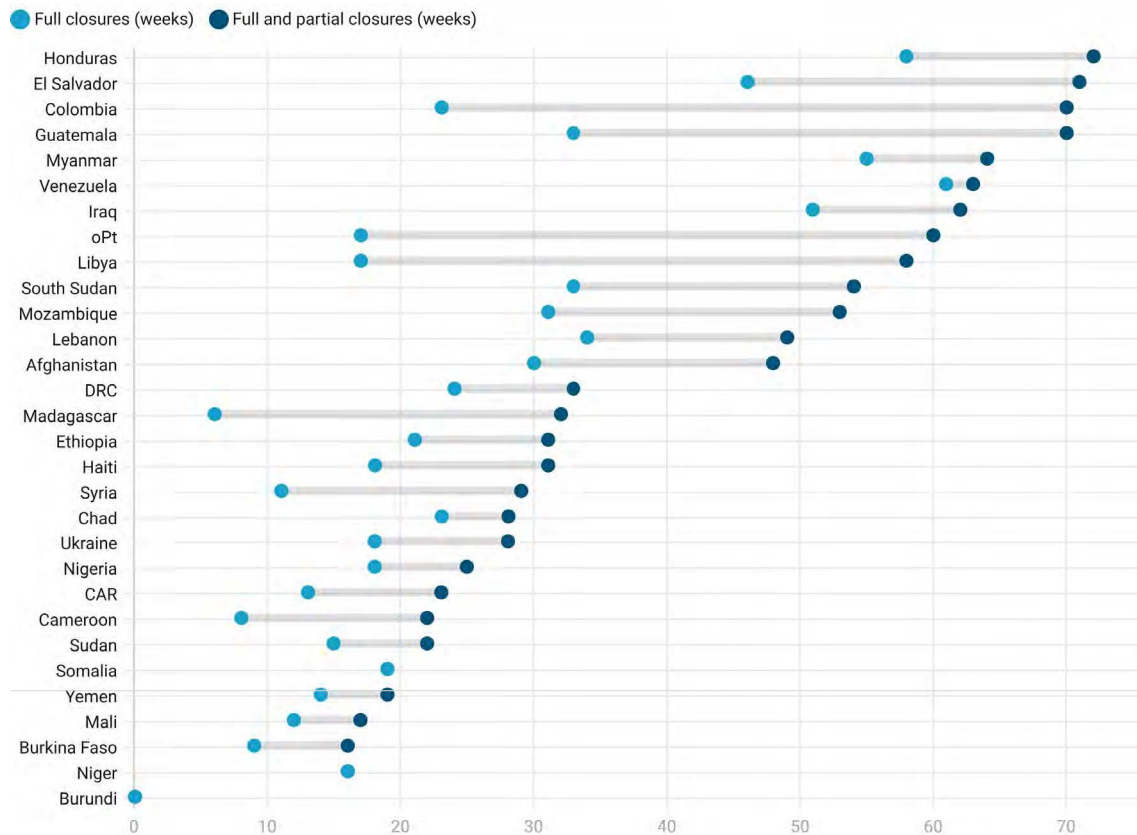


Chart: Global Humanitarian Overview 2022 • Source: UNESCO

Even before the pandemic, 127 million primary and secondary school-age children and young people in crisis-affected countries were out of school. By September 2021, schoolchildren around the world, including those in displacement situations,⁶ had lost an estimated 1.8 trillion hours of in-person learning, due to COVID-19 lockdowns.

Despite many schools reopening in 2021, more than 870 million students face disruptions to their education⁷ and the protection that it provides. UNICEF estimates that 40 per cent of all school-age children across Eastern and Southern Africa - over 69 million children - were not in school in July 2021, due to pandemic-related closure,⁸ and adolescent girls are more likely than boys to fail returning to school.⁹ As of 31 October 2021, countrywide school closures are still enforced in seven countries, of which six (Bangladesh, Honduras, Mozambique, Myanmar, Uganda and Venezuela) are included in the 2022 GHO.¹⁰ Global school closures due to COVID-19 show the fragility of education systems and the need for accessible and effective remote learning and child protection mechanisms that can be relied on when schools are forced shut.

Children affected by school closures (2020-2021)

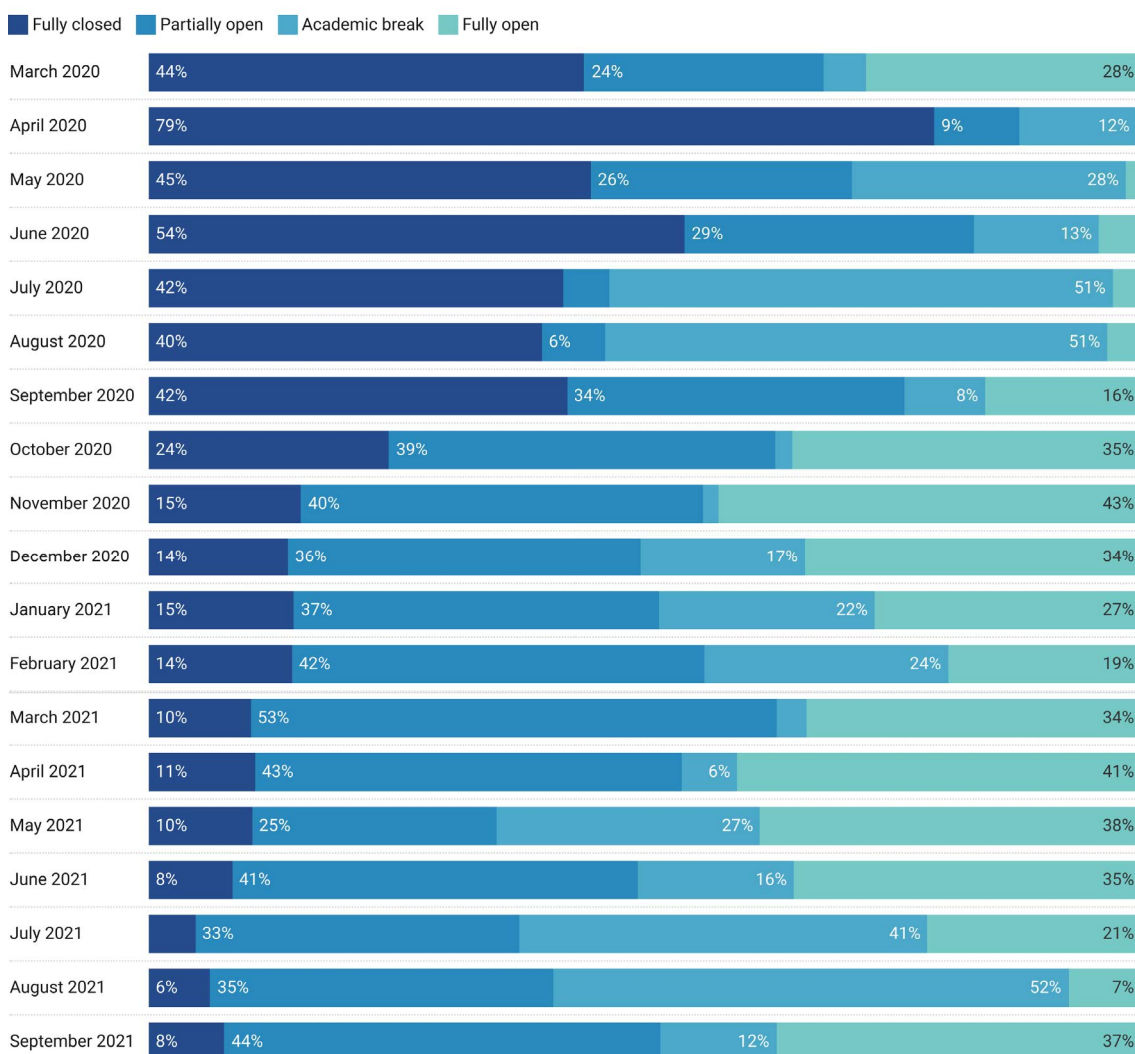


Chart: Global Humanitarian Overview 2022 • Source: UNESCO

The global shift to remote learning has reduced education losses but also shown its limitations. Children and youth in humanitarian contexts often lack access to the technologies needed to learn remotely.¹¹ About 2.2 billion, or two thirds of children and young people age 25 years or under, do not have Internet access at home. Households in rural areas are far less likely to have Internet access. Even when access is achieved, the cost of connectivity is prohibitive for many students and teachers.¹² The greatest digital divides exist in Eastern and Southern Africa, East Asia and the Pacific, and Latin America and the Caribbean.¹³ Education losses are 70 per cent higher in economies that rank below the world average in access to electricity.¹⁴

TV- or radio-mediated education programmes have been offered in some cases, but they do not support personalized learning or monitor attendance and progress.¹⁵ The full and specific needs of children with disabilities are often not accommodated in home-based learning.¹⁶ Increased investment in remote-learning programmes and infrastructure is key to building resilient edu-



Maiduguri, Nigeria. Children play football in the grounds of a school. During the pandemic in 2020, when all schools were closed, UNICEF collaborated with SUBEB to start the UNICEF Radio Hub, where students can learn multiple school subjects from teachers through radio learning programmes. The programme is successful and continues to stress that the right of every child to education should not be limited. *OCHA/Damilola Onafuwa*

cation systems.¹⁷ Attempts are under way to improve the situation of people affected by this digital divide, but progress takes time as well as dedicated and sustained donor support. Work has been accelerated on UNICEF's Giga Initiative, which sets out to provide connectivity to every school in the world by 2030, and is mapping the location and real-time Internet connectivity of every school in the world.¹⁸ UNICEF's Learning Passport provides a global online, mobile and offline learning platform that can help youth continue their education during emergencies that result in school closures. It is now live in 14 countries including Bangladesh, Honduras, Somalia (Puntland) and Sudan, and more than 25 countries are in the deployment process.¹⁹

It is important that schools are kept open wherever possible. Online learning alone cannot replace the overall benefits of children physically being in school. Beyond learning, schools often provide nutrition, health and hygiene services, and protection from violence and negative coping mechanisms, such as child marriage, child labour and enrollment by armed actors.²⁰ School closures have exacerbated the risk of violence against adolescent girls, cutting them off from important social support networks.²¹ Sustained lack of access to these services means children's overall welfare declines significantly.²² In the absence of vaccines, non-pharmaceutical interventions, such as social distancing, outdoor classes, and opening windows or doors for additional ventilation, can decrease the risk of transmission.²³

In his report titled *Our Common Agenda*, the UN Secretary-General has focused on learning and quality education as a clear priority and announced the convening of a Summit on Transforming Education in 2022 to accelerate progress towards achieving SDG 4.²⁴

Aid in Action

Instant Network Schools



The Vodafone Foundation and UNHCR have jointly established the Instant Network Schools (INS) programme, which supports access to quality, accredited digital education in Africa. Each INS is set up with free connectivity and includes a projector, laptop, speaker system and set of classroom tablets, enabling thousands of refugee and host-community students and teachers across Africa to access a quality, accredited digital education. Currently, INS is operating in DRC, Kenya, South Sudan and Tanzania. In 2021, the Vodafone Foundation and UNHCR announced the opening of 20 new INS centres in Egypt and Mozambique, which will benefit nearly 43,000 secondary-school students, 125,000 family members and over 1,500 teachers. *UNHCR/Vodafone Foundation/Sala Lewis*

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- ²⁴ Report of the UN Secretary-General, [Our Common Agenda](#), p. 40. The summit will discuss a modernization of the education system, more student-centred learning, education obstacles faced by girls and young women, the transition from education to employment, and the promotion of lifelong learning and reskilling. Digital inclusivity will be a vital part of the summit, building on existing efforts such as the Giga Initiative.



Part one: Global trends

Humanitarian Crises Continue to Exacerbate Gender Inequalities

Gender inequalities continued to worsen in 2020. Women and girls were disproportionately affected by the pandemic and other global crises, exacerbating pre-existing gender norms and inequalities.

The COVID-19 pandemic is dealing a major blow to women's employment progress and ending poverty. Women represent 70 per cent of the global health and social sector force, and they are at the front lines of the pandemic.¹ Despite this, 4.2 per cent of all employed women lost their jobs in 2020, compared to 3 per cent employment losses for men.² Poverty rates for women and girls also continued to worsen; about 247 million women over age 15 live on less than \$1.90 per day, compared to 236 million men. The global gender poverty gap for women age 25 to 34 is projected to worsen, from 118 women for every 100 men in 2021, to 121 women in 2030.³ Despite some progress over the past decade, gender parity remains far from reach as women and girls continue to face structural marginalization and discrimination. According to the World Economic Forum, the fallout from the COVID-19 pandemic could add another generation to the fight for gender parity, a goal predicted to take over 100 years to achieve.⁴

Les Cayes, Haiti. A group of older women wait to collect aid supplies following the earthquake that hit Haiti in August. One of the women is now homeless. Like many others, she sleeps in a tent erected at an assembly point next to a school outside Les Cayes. But finding food is a major concern. She explains: "Since this morning, I haven't even had so much as a coffee. Sometimes we all put together what we have so we can prepare a meal. But it's never enough for everyone. Some people eat, others don't. As a result, we are hungry, and children ask for food we cannot give them." *OCHA/Matteo Minasi*

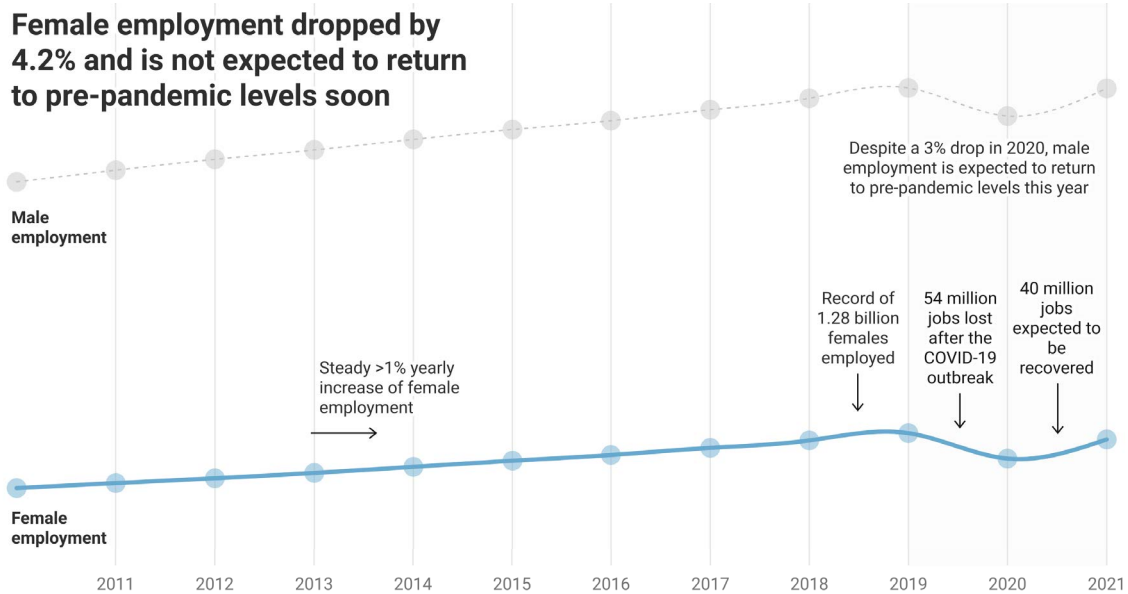


Chart: Global Humanitarian Overview 2022 • Source: International Labour Organization

Women and girls living in humanitarian contexts continue to be among those most affected by gender inequalities, such as limited access to decision-making processes, education, work, and gaps in sexual and reproductive health services. Countries with a HRP in 2020 had some of the widest gender gaps.⁵ This makes it even more important to ensure humanitarian action promotes the protection, participation and leadership of women and girls, particularly adolescent girls, older women, and women and girls with disabilities.

Violence against women and girls has intensified in some settings, giving rise to a shadow pandemic of GBV.⁶ COVID-19 and economic slowdowns have also adversely impacted services and programmes for GBV.⁷ For every three months that COVID-19 lockdowns continue, an additional 15 million GBV cases are expected to occur.⁸ Women and girls living in humanitarian contexts are experiencing GBV at a disproportionate rate: over 70 per cent compared with 35 per cent worldwide.⁹

Women and girls are also disproportionately impacted by climate shocks.¹⁰ Those living in rural areas are more dependent on natural resources for their livelihoods, which are threatened by a changing climate.¹¹ Such vulnerabilities can intensify the risk of GBV, which may become more acute following climate-related disasters.¹² Women and girls are often severely limited by gendered systems, structures, laws and social expectations, and underrepresented in decision-making processes on climate action.¹³ Addressing the acute needs of women and girls will require greater investment in humanitarian programming, informed by women's meaningful participation, especially through community-/women-led organizations and local partners,¹⁴ to shape the humanitarian response as well as their equal representation in humanitarian leadership positions. Robust gender analysis and the use of sex- and age-disaggregated data, including ethnicity, race, migratory status and disability, are critical to close gender gaps.

Gender Inequality Index (2020)

Country ▲	Maternal mortality ratio <i>Deaths per 100,000 live births</i>	Adolescent birth rate <i>Births per 1,000 women aged 15–19</i>	Females with parliament seats <i>Percentage held by women</i>	Females with secondary education <i>Percentage aged 25 and older</i>	Female labour force participation <i>Percentage aged 25 and older</i>
World	204	43	25%	61%	47%
Afghanistan	638	69	27%	13%	22%
Burkina Faso	320	104	13%	6%	58%
Burundi	548	56	39%	8%	80%
Cameroon	529	106	29%	33%	71%
CAR	829	129	9%	13%	64%
Chad	1140	161	15%	2%	64%
Colombia	83	67	20%	56%	57%
DRC	473	124	12%	37%	61%
El Salvador	46	69	31%	40%	45%
Ethiopia	401	67	37%	11%	73%
Guatemala	95	71	19%	39%	40%
Haiti	480	52	3%	27%	62%
Honduras	65	73	21%	32%	52%
Iraq	79	72	25%	40%	12%
Lebanon	29	15	5%	54%	23%
Libya	72	6	16%	70%	34%
Madagascar	335	110	17%	-	83%
Mali	562	169	10%	7%	61%
Mozambique	289	149	41%	14%	77%
Myanmar	250	29	12%	29%	47%
Niger	509	187	17%	5%	61%
Nigeria	917	107	4%	-	48%
oPt	27	53	-	64%	18%
Somalia	829	100	24%	-	22%
South Sudan	1150	62	27%	-	71%
Sudan	295	64	28%	15%	29%
Syria	31	39	13%	37%	14%
Ukraine	19	24	21%	94%	47%
Venezuela	125	85	22%	72%	45%
Yemen	164	60	1%	20%	6%

The index measures gender inequalities in three aspects of human development: reproductive health, measured by maternal mortality ratio and adolescent birth rates; empowerment, measured by proportion of parliamentary seats occupied by females and proportion of adult females with at least some secondary education; and economic status, measured by labour force participation rate.

Table: Global Humanitarian Overview 2022 • Source: UNDP



Mangina, DR Congo. This woman has been at Kamuchanga IDP site for three months. Her village was attacked, and she was kidnapped by armed men, but her husband was killed. After two months, she managed to escape during a clash with military forces. She found her younger brother and is staying with him and her daughter. But Maria's leg is badly infected. She explains: "They injured my leg, stabbing me with bayonets. The injury is now five months old, but it does not heal. I had to leave the hospital because I could not pay for the treatment. When I have enough money for antibiotics, it gets better. But when I have to stop again, because I run out of money, the infection gets worse again. I can walk very slowly but cannot work. People in the community are the only ones who help me. My neighbours share food with me. I am surviving through the charity of others." *OCHA/Ivo Brandau*

Such efforts must be coupled with policies that expand the access of women, girls and other at-risk groups to social protection, dignified sustainable livelihoods and economic opportunities, and affordable, quality and accessible health-care services. Humanitarian response services must be gender-transformative and centred around building resilience to future shocks. And specifically, humanitarian response must prioritize the prevention of, response to and risk mitigation of GBV to ensure that humanitarian operations do not increase the risk of experiencing GBV, including sexual exploitation and abuse.

Across the humanitarian sector, there has been a growing focus on increasing the meaningful participation of women and women-led organizations in humanitarian action. In 2020, gender working groups were active in 12 crisis settings: Cameroon, CAR, Chad, Jordan, Myanmar, Nigeria, occupied Palestinian territory, Philippines, Somalia, Syria, Ukraine and Yemen. Regional gender in humanitarian action working groups covered the Middle East and North Africa and Asia-Pacific. Local women-led organizations have increasingly engaged in meaningful participation in the HPC design and planning and HCTs, particularly in Ethiopia, Iraq, Myanmar, Syria and Yemen.

Stories from the Field

Supporting and counselling for displaced women



Tumahini Mave is the Protection Committee President at Linji IDP site in DRC. When her village was attacked, she followed the village chief to find refuge at the site. It hosts several thousand IDPs and is located near small gold mines, where many IDPs go to find a day's labour or dig for a lucky find. The fields and paths around the site expose all IDPs to great risks, particularly women and girls. Protection incidents often go unreported. Tumahini is a mother of four and struggling to make ends meet for her family. She puts all her energy into supporting and counselling other displaced women. She explains: "I fled the fighting in my village. I heard the shots, people were hit. They burned down the village. I took my children and ran. Here it is dangerous. I am counselling women at any time, whatever happens. When they leave the site to look for wood or food, they are being harassed and forced to have sex for food. When women are raped, they prefer to keep silent. They risk being discriminated and rejected by their husbands. I am surviving with little activities, helping out in the fields of the local population, carrying building materials or in the gold mine. Because of the risks, I try to leave the site as little as possible." *OCHA/Ivo Brandau*

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- ³ UN Women, [From Insight to Action, Gender Equality in the Wake of COVID-19](#).
- ⁴ World Economic Forum, [Global Gender Report 2021](#).
- ⁵ According to data from the [World Economic Forum's Global Gender Gap Index 2021 Rankings](#).
- ^{6,7} UN Women and UNFPA, [Impact of COVID-19 on Gender Equality and Women's Empowerment in East and Southern Africa](#).
- ⁸ UNFPA, [Impact of the COVID-19 Pandemic on Family Planning and Ending GBV, Female Genital Mutilation and Child Marriage](#).
- ⁹ ActionAid, [On the Frontline: Catalyzing Women's Leadership in Humanitarian Action](#).
- ¹⁰ World Bank, [Poverty and Shared Prosperity 2020: Reversals of Fortune](#).
- ¹¹ UN Women, [Women, Gender Equality, and Climate Change](#).
- ¹² OHCHR, [Frequently Asked Questions on Human Rights and Climate Change](#).
- ¹³ IFRC, [World Disasters Report 2020: Come Heat or High Water, Tackling the Humanitarian Impacts of the Climate Crisis Together](#).
- ¹⁴ UNHCR, [Global Report 2020](#)



Part one: Global trends

Private Sector Mobilizing Resources for Emergency Response

The private sector continues to prove its capacity to quickly mobilize resources on the ground and strengthen emergency preparedness and recovery. In 2021, as the number of people affected by humanitarian crises continued to increase, the private sector has once again shown that it can contribute to stakeholders' coordinated action within complex emergencies.

Businesses are providing financial and in-kind contributions, including operational support. This ranges from funding for projects identified within the GHO, to sharing expertise and core competencies. It also includes staff deployment in field operations, as well as using existing resources and infrastructure to improve the delivery of aid. The Vodafone Foundation and UNHCR have jointly established the Instant Network Schools (INS) programme, which supports access to quality, accredited digital education in Africa (see education article for further details). After a 7.2-magnitude earthquake hit Haiti in August 2021, the Alliance for Risk Management and Business Continuity, a local private sector network, played a key role in the response. Support was received from the [Connecting Business initiative](#) (CBI), a joint OCHA-UNDP project engaging the private sector in disaster management. The private sector has been a key ally during the

COVID-19 pandemic. In 2021, UNICEF, leader of the COVAX procurement and logistics operation, partnered with Microsoft's Disaster Response Team to improve the security and infrastructure of the COVAX information hub. The hub provides key stakeholders with up-to-date information on the allocations and delivery of COVID-19 vaccines. Microsoft experts worked with UNICEF to track and monitor the distribution of vaccines from manufacturers through to local market delivery, increasing efficiencies and sharing real-time data with key stakeholders to help make critical decisions. Following the hub's success, the project has expanded to include all COVAX partners and new types of vaccine product and service delivery information.

Engaging the private sector in local disaster management builds resilience by empowering communities and enabling a more efficient response, relying on local supply chains and economies. Since 2016, OCHA and UNDP's CBI private sector member networks have raised more than \$50 million for disaster preparedness, response and recovery activities and reached more than 15.5

Aid in Action

Private Sector Support to Humanitarian Response in the Philippines



The Philippine Disaster Resilience Foundation (PDRF) – a coalition of more than 60 major companies and the CBI member network – is an observer on the HCT and acts as overall private sector coordinator for the inter-agency task force that is part of the HRP. PDRF works closely with the national Government, the UN, CSOs and humanitarian actors to operate a business-led Emergency Operations Centre, which coordinates businesses across the Philippines when a disaster strikes. In 2020, PDRF responded to COVID-19, two typhoons, flooding and a volcanic eruption. It has raised significant funds and leads the private sector response in the Philippines, working closely with the Government, the UN and other humanitarian actors and visiting affected areas to assess and respond to damage. PDRF also deployed vehicles, medical supplies, drinking water, ready-to-eat meals, call and charging booths, relief packs and a team of engineers to restore communications in typhoon-hit areas. *In the picture, a resident of Barangay Baybay in Malinao, Albay, rummages through the remnants of his destroyed home, a week after Typhoon Goni destroyed most of his village. OCHA/Martin San Diego*

million people in 17 countries. With the increasing frequency and severity of extreme-weather events, such as flooding, the CBI network in Sri Lanka (the Asia Pacific Alliance for Disaster Management Sri Lanka) [spearheaded a multi-stakeholder collaboration with the military](#) to provide annual training in swift-water search-and-rescue operations.

Despite the demonstrated value of private sector contributions to humanitarian emergencies and achieving the SDGs, the private sector and particularly local businesses are frequently overlooked. The private sector is still far from being systematically included in humanitarian coordination systems. More needs to be done to fully leverage its expertise and contribution to principled and accountable disaster response and recovery in sudden-onset and complex emergencies, whether in natural hazards, or human-made conflicts and pandemics.

Aid in Action

Private Sector Response to the Earthquake in Haiti



After a 7.2-magnitude earthquake hit Haiti in August 2021, the Alliance for Risk Management and Business Continuity (AGERCA), a local private sector federation and CBI member network, mobilized in-kind donations of critical items, including thousands of gallons of drinkable water, clothes, solar-powered refrigerators and mobile phone credit for emergency responders. In recognition of its expertise, AGERCA has been formally designated as the representative of civil society and the private sector within the Haitian National System for Risk and Disaster Management. AGERCA works directly with the General Directorate for Civil Protection and is also a member of the national Emergency Operations Centre. AGERCA posts regular situation reports and has deployed a staff member to south Haiti to support the earthquake response. They will continue to coordinate the private sector and civil-society response in Haiti. DHL also deployed three staff members to Haiti, feeding into collective international action efforts of the country's private sector.

In the picture, essential non-food items, such as tarpaulins, and essential hygiene kits (buckets, toilet paper, toothpaste, toothbrush and face masks) are distributed in Valere, Les Cayes. UNICEF/Georges Rouzier



Part two

Inter-Agency Coordinated Appeals

The United Nations and partner organizations aim to assist **183 million people most in need across 63 countries**. This section presents an overview of results from 2021, needs for 2022, regional overviews, as well as country-specific and regional response plans.

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Part two: Inter-Agency Coordinated Appeals

Inter-Agency Coordinated Appeals Results from 2021

PEOPLE IN NEED

250_M

PEOPLE TARGETED

174_M

REQUIREMENTS (US\$)

\$37.7_B

FUNDING (US\$)

\$17.2_B

COVERAGE

46%

The Global Humanitarian Overview 2021 presented initial funding requirements of US\$35 billion to assist 160 million of the 235 million people in need of humanitarian aid.

By mid-November, 2021 requirements had grown to \$37.7 billion for inter-agency plans in 60 countries following the finalization of several response plans in the first quarter of the year; adjustments to some HRP's due to changing situations (Ethiopia and South Sudan); the new HRP's for El Salvador, Guatemala and Honduras; and Flash Appeals and other inter-agency emergency plans for Afghanistan, Haiti, Honduras, Kenya, Madagascar, Myanmar, Northern Ethiopia, and oPt. This amount is only \$873 million less than the previous record for requirements of \$38.6 billion in 2020.

Marib, Yemen. Families fled their villages when fighting between Houthi rebel forces and coalition backed resistance fighters broke out in mid-2020. The Marib government has allocated several areas of land for the use of those recently displaced. *OCHA/Giles Clarke*

Inter-Agency Coordinated Appeals Humanitarian Response Plans (2021)

Country	Type	People in need	People targeted	Requirements (US\$)	Funding (US\$)	Coverage
Afghanistan	HRP	18.4 M	17.7 M	868.7 M	673.2 M	77%
Burkina Faso	HRP	3.5 M	2.9 M	607.9 M	248.7 M	41%
Burundi	HRP	2.3 M	1.1 M	194.7 M	67.2 M	35%
Cameroon	HRP	4.4 M	3.0 M	361.6 M	158.6 M	44%
CAR	HRP	2.8 M	1.8 M	444.8 M	364.1 M	82%
Chad	HRP	5.5 M	4.0 M	617.5 M	185.7 M	30%
Colombia	HRP	6.7 M	1.4 M	174.0 M	55.9 M	32%
DRC	HRP	19.6 M	9.6 M	2.0 B	713.0 M	36%
El Salvador	HRP	1.7 M	912.2 K	42.2 M	21.0 M	50%
Ethiopia	HRP	19.0 M	14.8 M	1.5 B	726.6 M	49%
Guatemala	HRP	3.8 M	1.7 M	56.3 M	24.8 M	44%
Haiti	HRP	4.4 M	1.5 M	235.6 M	64.3 M	27%
Honduras	HRP	2.8 M	1.8 M	78.9 M	28.1 M	36%
Iraq	HRP	4.1 M	1.5 M	607.2 M	334.4 M	55%
Libya	HRP	1.3 M	451.0 K	189.1 M	138.0 M	73%
Mali	HRP	5.9 M	4.7 M	563.3 M	212.4 M	38%
Mozambique	HRP	1.3 M	1.0 M	254.1 M	161.5 M	64%
Myanmar	HRP	1.0 M	944.5 K	276.5 M	200.9 M	73%
Niger	HRP	3.8 M	2.1 M	523.2 M	205.6 M	39%
Nigeria	HRP	8.7 M	6.4 M	1.0 B	648.4 M	64%
oPt	HRP	2.4 M	1.8 M	417.6 M	298.4 M	71%
Pakistan	HRP	11.0 M	4.3 M	332.0 M	90.8 M	27%
Somalia	HRP	5.9 M	4.0 M	1.1 B	753.2 M	69%
South Sudan	HRP	8.3 M	6.6 M	1.7 B	1.1 B	67%
Sudan	HRP	13.4 M	8.9 M	1.9 B	705.2 M	36%
Syria	HRP	13.4 M	11.1 M	4.2 B	1.9 B	44%
Ukraine	HRP	3.4 M	1.9 M	168.0 M	92.1 M	55%
Venezuela	HRP	7.0 M	4.5 M	708.1 M	259.6 M	37%
Yemen	HRP	20.7 M	16.0 M	3.9 B	2.2 B	57%
Zimbabwe	HRP	6.8 M	4.5 M	507.0 M	93.9 M	19%

Table: Global Humanitarian Overview 2022 • Source: Humanitarian Insight

Inter-Agency Coordinated Appeals

Flash Appeals and Regional Response Plans (2021)

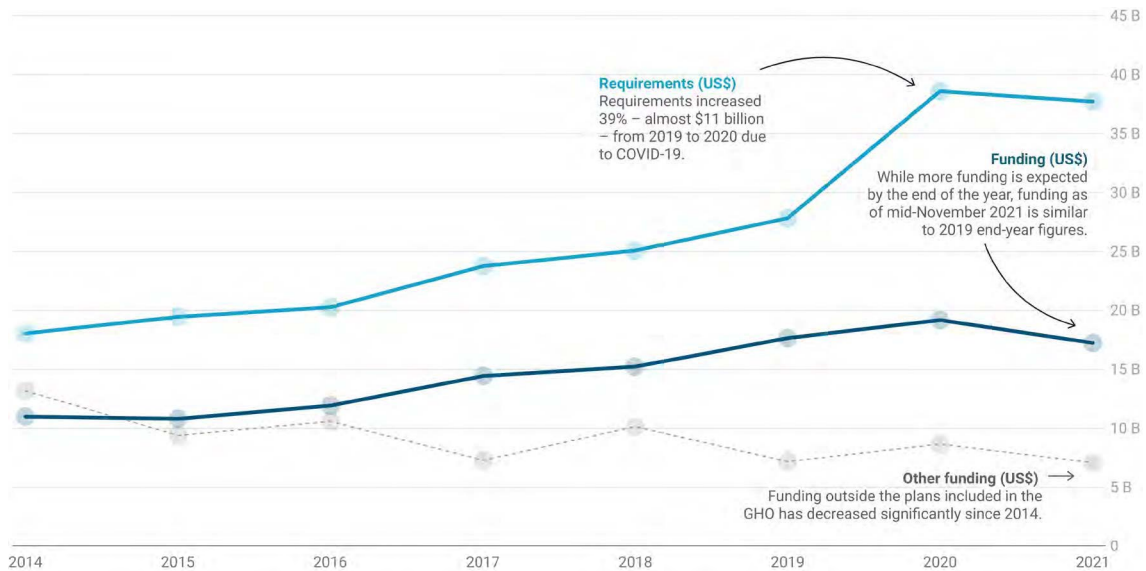
Country	Type	People in need	People targeted	Requirements (US\$)	Funding (US\$)	Coverage
Afghanistan	FA	0.0	0.0	606.3 M	603.9 M	100%
Ethiopia <i>Northern Ethiopia</i>	FA	5.2 M	5.2 M	957.0 M	561.1 M	59%
Haiti	FA	39.2 K	271.2 K	187.3 M	81.3 M	43%
Honduras	FA	0.0	0.0	90.1 M	71.5 M	79%
Kenya	FA	2.9 M	1.3 M	139.5 M	15.6 M	11%
Madagascar	FA	1.6 M	1.3 M	166.2 M	119.0 M	72%
oPt	FA	0.0	0.0	95.1 M	59.8 M	63%
Myanmar	ERP	2.1 M	2.1 M	109.2 M	18.3 M	17%
Burundi <i>Regional</i>	RRP	490.5 K	490.5 K	190.7 M	15.3 M	8%
DRC <i>Regional</i>	RRP	1.8 M	1.8 M	534.3 M	16.7 M	3%
Horn of Africa <i>Regional</i>	MRP	613.7 K	311.0 K	68.2 M	9.6 M	14%
Rohingya <i>Bangladesh</i>	JRP	1.4 M	1.4 M	943.1 M	565.5 M	60%
South Sudan <i>Regional</i>	RRP	3.1 M	3.1 M	866.9 M	137.9 M	16%
Syria <i>Regional</i>	3RP	10.3 M	10.3 M	5.8 B	1.6 B	27%
Venezuela <i>Regional</i>	RMRP	7.2 M	3.3 M	1.4 B	654.3 M	45%

Financial requirements, people in need and people targeted include all HRP, RRP's components of countries without HRPs, and other appeals. Changes to the population figures and financial requirements for the RRP have occurred because of the overlap with HRPs. The regional appeals components included are as follows: Afghanistan RRP, Syria 3RP and Venezuela RMRP: fully included. DRC RRP: Angola, Republic of Congo, Rwanda, Tanzania, Uganda, Zambia components included. Burundi excluded. South Sudan RRP: Kenya, Uganda and Ethiopia components included, DRC and Sudan excluded. Regional Migrant Response Plan for the Horn of Africa and Yemen: Ethiopia and Djibouti included, Somalia partly included, Yemen excluded. The full figures of the RRP can be found on their respective pages in the GHO 2021, and in Humanitarian Insight. The HRPs for El Salvador, Guatemala, Honduras and Madagascar are part of multi-year plans covering 2021 and 2022. Six countries having an HRP also released a separate plan: Afghanistan, Haiti, Honduras, oPt, Myanmar, and Ethiopia. The population figures for the Afghanistan, Haiti, Honduras and oPt Flash Appeals and for Myanmar's Interim Emergency Response Plan were reduced to avoid overlaps with each country's HRP figures. The full population figures of these plans can be found on their respective pages in Humanitarian Insight.

Table: Global Humanitarian Overview 2022 • Source: Humanitarian Insight

Despite high levels of contributions this year - \$17.2 million or 46 per cent of requirements – the \$20.5 billion gap between requirements and funding is the highest ever. Funding shortages plagued humanitarian agencies throughout the year, especially as scale-up was required for several emergencies including Afghanistan and Ethiopia, and the on-going effects of the COVID-19 crisis continued to impact vulnerable communities. The global rise in food insecurity and efforts to avert the risk of famine through multi-sector response also puts a strain on budget planning and existing resources. The monthly evolution of GHO percentage coverage remained similar to both pre-pandemic and pandemic levels throughout much of the year. If the trend remains the same, final 2021 coverage will likely remain below the 63 per cent coverage in 2019, and close to the 50 per cent coverage in 2020.

Inter-Agency Coordinated Appeals: Funding gap (2014–2021)



All requirements and funding between 2014 and 2020 are as of end-year. Requirements and funding for 2021 as of 19 November.
 Chart: Global Humanitarian Overview 2022 • Source: Financial Tracking Service

Monthly evolution of coverage (2021)

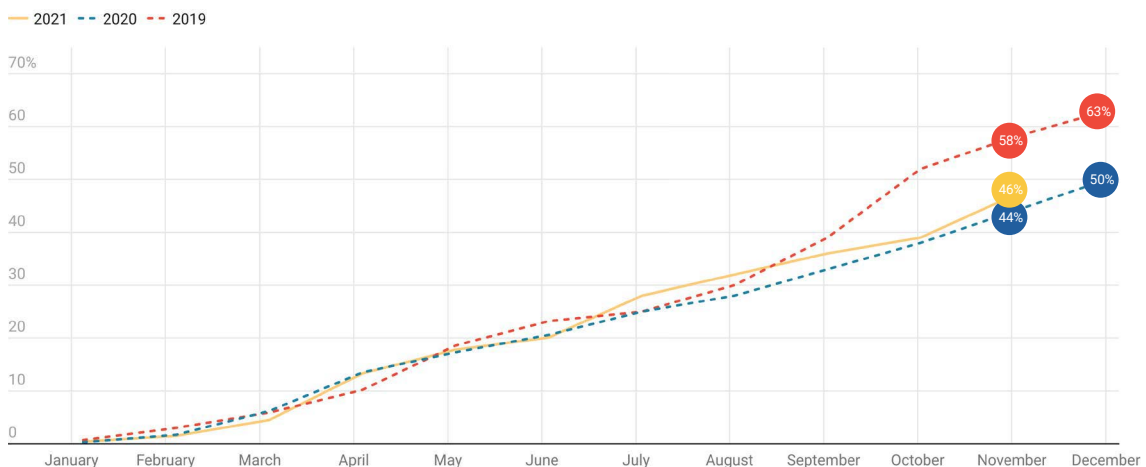


Chart: Global Humanitarian Overview 2022 • Source: Financial Tracking Service



High-Level Resource Mobilization Events coordinated by OCHA

Several high-level events were held in 2021 to raise awareness and mobilize resources for major crises. The Virtual High-level Pledging Event for the Humanitarian Crisis in Yemen took place on 1 March and 37 announcements of financial assistance were made, totaling \$1.67 billion. The Fifth Brussels V Conference on Supporting the Future of Syria and the Region was held on 30 March. Participants announced pledges for both Syria and the region: \$4.4 billion for 2021 and multi-year pledges of close to \$2 billion for 2022 and beyond. The High-level Ministerial Meeting on the Humanitarian Situation in Afghanistan was held on 13 September. Although it was not a formal pledging event, expressions of financial support of more than \$1.2 billion for the people of Afghanistan were made by numerous Member States and other participants.



Part two: Inter-Agency Coordinated Appeals

Inter-Agency Coordinated Appeals Overview for 2022

PEOPLE IN NEED

274 M

PEOPLE TARGETED

183 M

REQUIREMENTS (US\$)

\$41 B

APPEALS

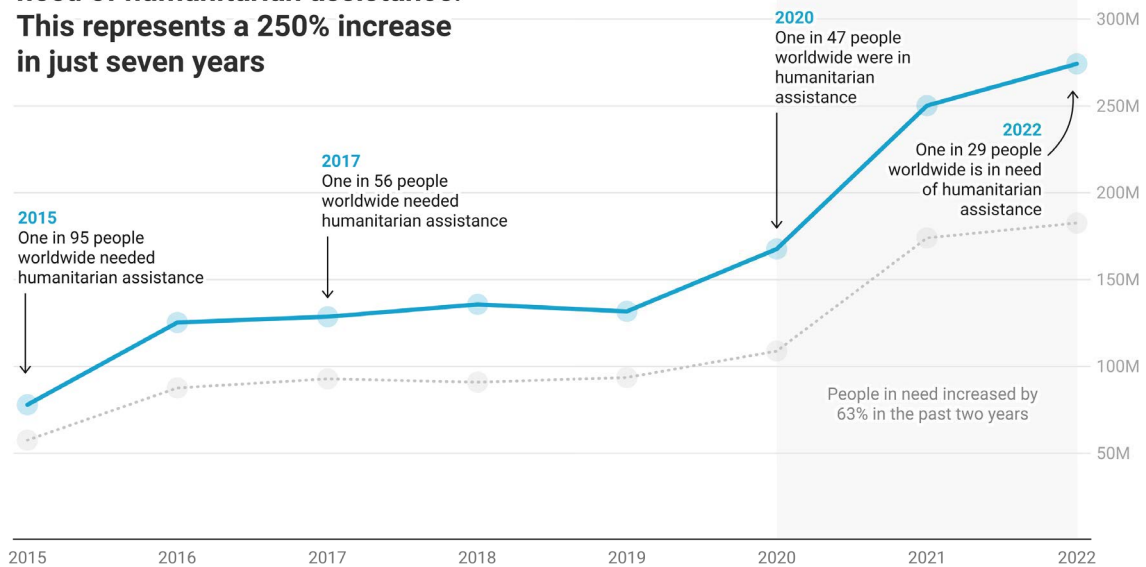
37

The number of people in need continues to rise at an alarming rate. In 2022, 274 million people will need humanitarian assistance and protection. The United Nations and partner organizations aim to assist 183 million people most in need across 63 countries, which will require \$41 billion.

1 in 29 people worldwide needs help, which is yet another significant increase from 1 in 33 in 2020 and 1 in 45 in 2019. Needs continue to increase, driven by a confluence of political instability, increased displacement levels, climate impacts and the effects of COVID-19. Crises have expanded their geographical range within already weakened States. The spike in humanitarian need is also being driven by specific natural disasters, such as the earthquake in Haiti and Hurricanes Eta and Iota in Central America. In Afghanistan, the worst drought in 27 years and the cumulative effects of more than four decades of conflict are severely affecting food security: even after the harvest, 57 per cent of households did not have sufficient food reserves for the next three months.

Bangassou, Central African Republic. A crowd awaits the World Food Program's food distribution at the IDP site of Siwa. OCHA/Adrienne Surprenant

3% of the world's population are in need of humanitarian assistance. This represents a 250% increase in just seven years



Showing People in need and people targeted for countries with Inter-Agency Coordinated Appeals.
Chart: Global Humanitarian Overview 2022 • Source: Humanitarian Insight

Two regions (the Middle East and North Africa, and West and Central Africa) continue to have the most humanitarian needs due to protracted crises that show no signs of abating. Over the past two years, sharp increases in needs are evident in Asia and the Pacific, Latin America and the Caribbean, and Southern and Eastern Africa. Five years ago, only Haiti had a HRP in Latin America and the Caribbean; now there are six in place across the region.

Despite increasing need, some countries, such as **Chad** and **DRC**, have reduced the number of people targeted in their response plans, introducing stricter prioritization processes to ensure that diminishing humanitarian capacities yield the maximum impact possible for the most vulnerable people. Welcome improvements have been seen in **Libya**, where the population has started to recover after the ceasefire agreement. Some countries have also weathered the COVID-19 crisis better than initially anticipated and recalculated the number of people in need accordingly.

In **Afghanistan**, more than 24 million people require life-saving assistance to prevent catastrophe. This represents a dramatic increase in needs, driven by a combination of conflict, COVID-19, political turmoil, recurrent economic shocks and the worst drought in 27 years. A decade into the crisis in **Syria** and basic service delivery continues to be vastly inadequate and hampered by damaged infrastructure, lack of critical supplies and, increasingly, financial unaffordability. Average household expenditure now exceeds available income by 50 per cent, compared to 20 per cent in August 2020.

Appeals are increasingly longer, larger and higher in number. Twelve appeals require over one billion dollars and represent 75% of the global ask

The number of large appeals has more than doubled in the past years, and currently require a combined amount of nearly 31 billion dollars.

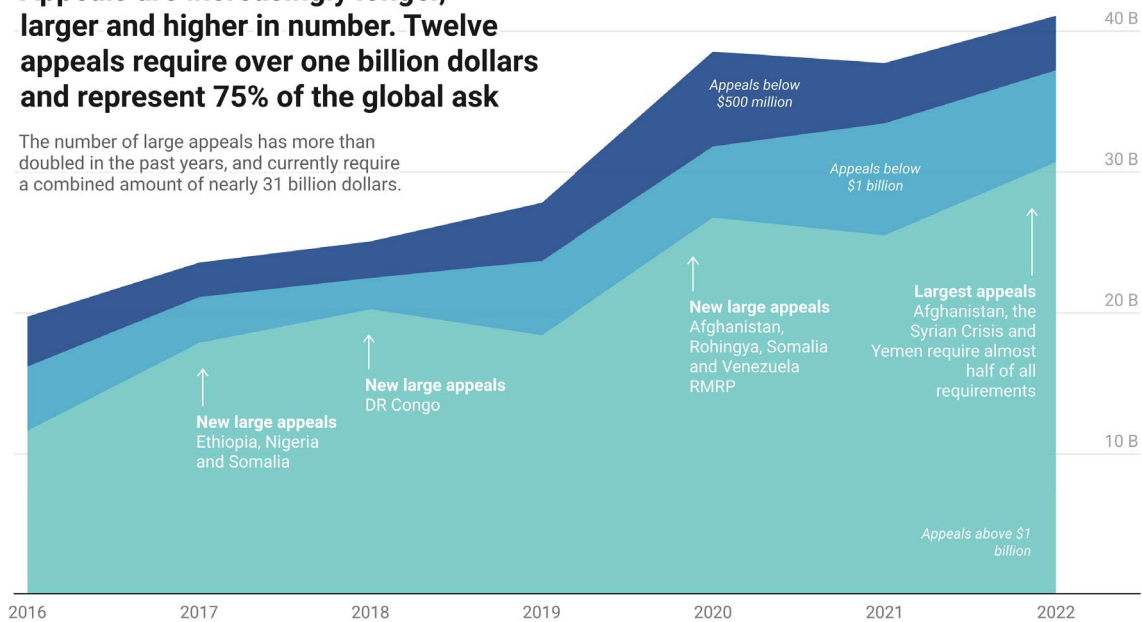


Chart: Global Humanitarian Overview 2022 • Source: Financial Tracking Service

Despite continued efforts to mitigate the risk of famine in **Yemen**, food insecurity continues to remain a key challenge. Acute food insecurity is a reality for 16.2 million people in the country. Even with the current levels of humanitarian assistance, 40 per cent of the population have inadequate food. In **Ethiopia**, climate shocks, unprecedented levels of conflict, insecurity and disease outbreaks coupled with a deteriorating economy continue to exacerbate humanitarian needs for 25.9 million people. Many of the 4.3 million IDPs seek shelter in urban areas, further increasing pressure on vulnerable families within host communities.

People in **Myanmar** are facing an unprecedented political, human rights and humanitarian crisis, with needs escalating dramatically since the military takeover and a severe COVID-19 third wave in 2021. Humanitarian assistance is needed by 14.4 million people. In **Haiti**, 43 per cent of the population needs humanitarian assistance. The country is experiencing a profound and disturbing deterioration of the socioeconomic, political and security context coupled with the effects of the pandemic and a 7.2-magnitude earthquake that affected more than 800,000 people.

South Sudan is facing its highest levels of food insecurity and malnutrition since the country declared independence 10 years ago. Macroeconomic shocks, three years of consecutive flooding, disease outbreaks and increasing subnational violence have resulted in 8.4 million people in need and a growing number of threats against humanitarian workers.



Inter-Agency Coordinated Appeals: Humanitarian Response Plans (2022)

Appeal ▲	Type	People in need	People targeted	Requirements (US\$)	Requirements (2017-2021)
Afghanistan	HRP	24.4 M	22.1 M	4.5 B	
Burkina Faso	HRP	3.5 M	3.0 M	561.4 M	
Burundi	HRP	1.8 M	947.0 K	183.0 M	
Cameroon	HRP	4.0 M	2.8 M	371.5 M	
CAR	HRP	3.1 M	2.0 M	461.3 M	
Chad	HRP	5.5 M	3.5 M	500.0 M	
Colombia	HRP	7.7 M	2.0 M	200.0 M	
DRC	HRP	27.0 M	8.8 M	1.9 B	
El Salvador	HRP	1.7 M	912.2 K	114.3 M	
Ethiopia	HRP	25.9 M	22.3 M	2.8 B	
Guatemala	HRP	3.8 M	1.7 M	153.7 M	
Haiti	HRP	4.9 M	2.5 M	373.5 M	
Honduras	HRP	2.8 M	1.8 M	143.1 M	
Iraq	HRP	2.5 M	990.0 K	411.0 M	
Lebanon	ERP	1.9 M	641.7 K	220.8 M	
Libya	HRP	800.0 K	200.0 K	75.3 M	
Madagascar	FA	1.6 M	1.3 M	64.5 M	
Mali	HRP	6.3 M	4.8 M	576.0 M	
Mozambique	HRP	1.5 M	1.2 M	388.5 M	
Myanmar	HRP	14.4 M	6.2 M	826.0 M	
Niger	HRP	3.0 M	2.1 M	475.0 M	
Nigeria	HRP	8.3 M	5.4 M	1.1 B	
oPt	HRP	2.1 M	1.6 M	510.0 M	
Somalia	HRP	7.7 M	5.5 M	1.5 B	
South Sudan	HRP	8.4 M	6.7 M	1.7 B	
Sudan	HRP	14.3 M	10.9 M	1.9 B	
Syria	HRP	14.0 M	12.0 M	4.2 B	
Ukraine	HRP	2.9 M	1.8 M	190.0 M	
Venezuela	HRP	7.0 M	4.5 M	708.1 M	
Yemen	HRP	20.7 M	16.0 M	3.9 B	

Table: Global Humanitarian Overview 2022 • Source: Humanitarian Insight

Inter-Agency Coordinated Appeals Regional Response Plans (2022)

Appeal ▲	Type	People in need	People targeted	Requirements (US\$)	Requirements (2017-2021)
Afghanistan <i>Regional</i>	RRP	5.7 M	5.7 M	623.0 M	
DRC <i>Regional</i>	RRP	2.4 M	1.4 M	531.7 M	
Horn of Africa and Yemen <i>Regional</i>	MRP	303.8 K	164.0 K	43.9 M	
Rohingya <i>Bangladesh</i>	JRP	1.4 M	1.4 M	875.0 M	
South Sudan <i>Regional</i>	RRP	2.6 M	2.6 M	805.1 M	
Syria <i>Regional</i>	3RP	20.1 M	11.4 M	5.6 B	
Venezuela <i>Regional</i>	RMRP	8.4 M	3.8 M	1.8 B	

Financial requirements, people in need and people targeted include all HRP, RRP's components of countries without HRPs, and other appeals. Changes to the population figures and financial requirements for the RRP have occurred because of the overlap with HRPs. The regional appeals components included are as follows: Afghanistan RRP, Syria 3RP and Venezuela RMRP: fully included. DRC RRP: Angola, Republic of Congo, Rwanda, Tanzania, Uganda, Zambia components included. Burundi excluded. South Sudan RRP: Kenya, Uganda and Ethiopia components included, DRC and Sudan excluded. Regional Migrant Response Plan for the Horn of Africa and Yemen: Ethiopia and Djibouti included, Somalia partly included, Yemen excluded. The full figures of the RRP can be found on their respective GHO 2022 pages, and in Humanitarian Insight. The HRPs for El Salvador, Guatemala, Honduras, Lebanon and Madagascar are part of multi-year plans covering 2021 and 2022. Figures for the Afghanistan, Colombia, Iraq, oPt, Somalia, Syria and Venezuela HRPs are provisional. Figures for the Niger HRP and regional appeals are estimates.

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service

Inter-Agency Coordinated Appeals Overview per region (2022)

Region	Appeals	People in need	People targeted	Requirements (US\$)
Asia and the Pacific	2	38.8 M	28.3 M	5.3 B
Eastern Europe	1	2.9 M	1.8 M	190.0 M
East and Southern Africa	7	61.2 M	48.9 M	8.5 B
Latin America and the Caribbean	6	27.9 M	13.4 M	1.7 B
Middle East and North Africa	6	42.0 M	31.4 M	9.3 B
West and Central Africa	8	60.8 M	32.4 M	5.9 B
Regional Appeals	7	40.9 M	26.4 M	10.2 B

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service



Part two: Inter-Agency Coordinated Appeals

Inter-Agency Coordinated Appeals Consequences of Underfunding

As crises unfold, humanitarian actors work to provide coordinated and tailored multi-sectoral assistance, identifying the areas where affected people face the most needs, from safety and protection, to food insecurity, shelter or cash assistance. Funds are the cornerstone of a feasible humanitarian response; without sufficient financial commitments, not all needs will be met.

Experience shows that when a crisis fades from the news, so does the attention of the global community. In 2010, a 7.0-magnitude earthquake struck Haiti, affecting 3 million people. Coverage generated by local journalists was widely picked up by the international media through social media channels, amplifying the voices and stories of people impacted by the disaster. Following this, 73.9 per cent of funding requirements for Haiti were met. But since then, despite protracted needs and continuous natural disasters, such as Hurricane Laura in 2020 and a 7.2-magnitude earthquake in 2021, funds for Haiti have never reached the 2010 figure. Currently, it is the second most underfunded HRP only after Zimbabwe, with 27 per cent funding coverage in November 2021.¹

Bunyan, Syria. This young girl lives with her family of twelve people in Bunyan camp in the northern countryside of Idlib. She was displaced with her family from Maarat al-Numan two years ago to the camp due to the bombing of their village. Despite her young age, Fatima is now taking care of her younger siblings because she loves them and fears for them from the war, from which she remembers moments of terror because of the bombing. Despite increasing humanitarian needs in Syria, as of mid-November, the Humanitarian Response Plan is funded at only 45%, a significant decrease from the past years. *OCHA/Bilal Al Hammoud*

Funding for the Afghanistan appeals increased by 150% since the start of the political turmoil in August 2021

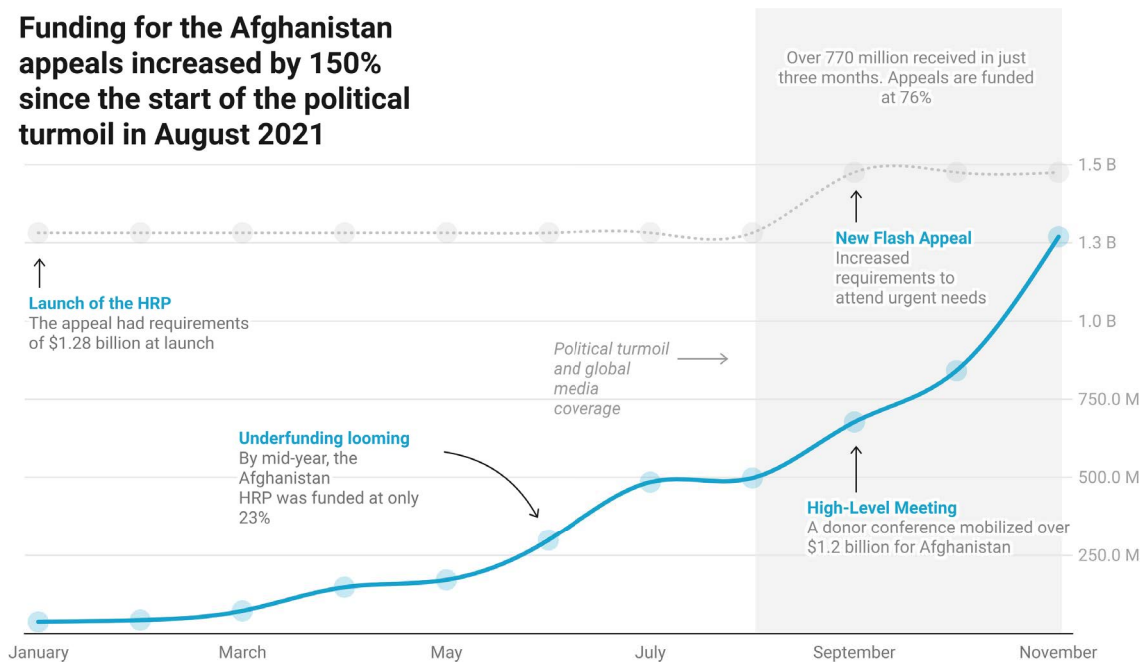


Chart: Global Humanitarian Overview 2022 • Source: Financial Tracking Service

Similarly, in May 2021 more than 35 per cent of the Afghan population were facing emergency or crisis levels of food insecurity, and the Afghanistan situation was among the world's top 10 most underfunded UNHCR emergencies.² The withdrawal of US and global partners from the country in August 2021 and the ensuing images and footage prompted private and public donors to increase their funding. In September, nearly 100 Member States and over 30 regional and international organizations pledged more than \$1.2 billion in humanitarian and development aid in total to Afghanistan.³ The UN Secretary-General, António Guterres, described the pledge as a “quantum leap”, as it almost doubled the initial \$606 million Afghanistan Flash Appeal.⁴

Nine other emergency situations remain on UNHCR's underfunded list for 2021. The stark reality is that by August 2021, less than half of the funding requested and needed by UNHCR for 2021 was received. Iraq was 34 per cent funded, Syria 39 per cent, South Sudan 41 per cent, DRC 42 per cent, Nigeria 43 per cent, Somalia 46 per cent, Myanmar 47 per cent, Venezuela 48 per cent and Burundi 50 per cent. These funding deficits make it harder to provide 340,000 Iraqis and 2 million Syrian IDPs and refugees with life-saving winterization assistance; 950,000 South Sudanese refugees with access to running water; and cash assistance, fuel and basic goods to 120,000 Burundians.⁵

The cost of inaction hits humanitarian response hard. In acute humanitarian settings, urgent life-saving and life-sustaining needs are prioritized over early recovery and resilience-building plans. This often leads to a vicious circle of dependence on humanitarian financing and little or no progress on ending persistent crises.

Most underfunded HRP (2021)

Country	Requirements (US\$)	Funding (US\$)	Funding coverage [▲]
Zimbabwe	507.0 M	93.9 M	19%
Haiti	235.6 M	64.3 M	27%
Pakistan	332.0 M	90.8 M	27%
Chad	617.5 M	185.7 M	30%
DRC	2.0 B	713.0 M	36%
Sudan	1.9 B	705.2 M	36%
Venezuela	708.1 M	259.6 M	37%
Mali	563.3 M	212.4 M	38%
Niger	523.2 M	205.6 M	39%
Burkina Faso	607.9 M	248.7 M	41%

Showing appeals with requirements above \$200 million

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service

An estimated 19.6 million people require assistance and protection across the Democratic Republic of the Congo, a country beset with some of the world's most acute and prolonged crises. Acute levels of humanitarian need stem from overlapping crisis drivers, including armed conflict and violence, epidemics and natural disasters.

In the last four years, the number of people requiring humanitarian assistance has almost tripled, rising from 7.3 million in 2017 to 19.6 million in 2021. Yet during this same period, the percentage of people targeted against people in need has decreased dramatically from 92 per cent to 49 per cent. Since 2018, annual funding received has been less than half of the projected requirements, or even a third – only 36 per cent of required funds were contributed in 2021.

Consecutive years of funding shortfalls have deepened the humanitarian crisis in DRC. Only one in three former child combatants was able to access a socioeconomic or school reintegration package in 2021. Nutritional surveys have been drastically cut back, limiting malnutrition updates in underserved areas. Food security needs are not being met and rations are being halved.

More than seven years after the armed conflict began in eastern Ukraine, there is still no comprehensive political solution in sight. Approximately 3.4 million people on both sides of the “contact line”, in Donetsk and Luhansk oblasts, confront critical humanitarian needs.⁶

As a result of the conflict, 2 million people have been exposed to landmines and explosives, 3,390 civilians have been killed and over 7,000 injured. While the political standoff persists, Ukrainian families in the east face daily risks to their lives, limited access to essential basic services, limited livelihood opportunities and economic shutdowns. COVID-19 and its effects are yet another layer of hardship on top of the protracted conflict.



Mosul, Iraq. Young boys are seen fleeing the old city of Mosul after fighting broke out, back in June, 2017. The situation affecting millions of Iraqis currently or formerly displaced by the 2014-2017 ISIL crisis remains broadly stagnant. Some 1.2 million people remain internally displaced, including 1 million outside formal camps. Returns continue to be slow, with the number of displaced Iraqis only decreasing by 35,000 so far this year. *UNHCR/Cengiz Yar*

Despite the severity of the situation and increasing needs, the HRP is only 55 per cent funded. Just \$92.1 million has been received from the \$168 million required. This funding shortfall carries dire consequences for local populations. It means that more than 1.3 million people will be denied quality and life-sustaining health-care services, including psychosocial and mental health support. More than 620,000 people will be at heightened risk of water shortages and resulting hardships caused by cuts to water and sanitation services, and 400,000 conflict-affected children and teachers on both sides of the “contact line” will have no access to safe and inclusive learning environments, increasing the risk of dropouts and the creation of a “lost generation”.

Ten months into 2021, humanitarian partners had received only 55 per cent of the funding for Iraq, affecting critical sectors including education and food security. All IDPs in the targeted camps have received assistance, ranging from legal assistance, cash for work, agricultural supplies or shelter maintenance. In contrast, roughly 74 per cent of IDPs living outside of the camps and only 43 per cent of returnees targeted through the 2021 HRP have been reached.

The pandemic has severely affected funding for refugees and asylum seekers. In 2021, UNHCR projected that \$924 million would be required to protect people from the fallout of the disease. However, by August 2021, only 33 per cent was funded, leaving a gap of \$623 million. This has led to a deterioration in employment for refugees and asylum seekers, food insecurity, limited access to health services and education, as well as growing gender-based violence and violence against children.⁷ Vaccination rates among refugees and other people of concern are low, with around 350,000 vaccine doses administered by September 2021. This not only creates health implications but also social disadvantages, placing these individuals at risk of exclusion and isolation.⁸



Guayaquil, Ecuador. A Venezuelan woman receives her first dose of COVID-19 vaccine at a vaccination centre in Guayaquil, Ecuador. *UNHCR/Santiago Arcos Veintimilla*

The 2022 funding requirements must be met in full and on time. Last year's GHO received only 46 per cent of its funding requirements, a discouraging figure for humanitarian workers on the ground coping with endless needs and shortages. Prolonged emergency situations will only cost more in the future. Steady and stable financing is needed to plan with certainty, address critical long-term needs, and deliver humanitarian response in 2022 and beyond to people in urgent need.

References

¹ Financial Tracking Service – Haiti HRP 2021.

^{2,7,8} [UNHCR'S most underfunded situations in 2021](#) (September 2021). For HRP financial requirement tracking, please visit FTS.

³ [UN News - \\$1 billion pledge a 'quantum leap' in commitment to Afghanistan: UN chief.](#)

^{4,5} [Secretary-General's transcript of the Secretary-General's press conference on the High-Level Ministerial Meeting on the Humanitarian Situation in Afghanistan.](#)

⁶ [Ukraine Humanitarian Funding Priorities](#) (August - December 2021).



Part two: Inter-Agency Coordinated Appeals

Asia and the Pacific Regional Overview

Across the Asia and the Pacific region, humanitarian needs and vulnerabilities are increasing. The impacts of climate change, protracted crises, and the health and economic shocks of COVID-19 continue to take a heavy toll on the world's most populated region.

COVID-19 has exacerbated humanitarian need in the region, and even countries with fewer reported cases have still experienced severe impacts on livelihoods, household income, poverty and food security. In many countries, the pandemic has also further constrained access to medical care for maternal and child health care, and increased the risk of child-protection issues in addition to sexual and gender-based violence.

The Delta variant dealt a major blow to many countries that initially fared well against COVID-19 in 2020. Countries struggled to maintain pandemic controls, resulting in massive death totals in the region during 2021 and in social-economic shocks in a number of countries, further exacerbating poverty rates and the vulnerabilities of people and communities. As many parts of the world reopened following a rise in vaccination rates, much of Asia and the Pacific remained under strict lockdown measures, curtailing domestic and international trade and travel, and access to countries including for disaster response.

Fasl-e-Bolan, Afghanistan. A 7-year-old boy in Fasl-e-Bolan, Hilmand Province. When asked if he goes to school, he replied: "How can I go to school? It burned during the fighting." *OCHA/Pierre Peron*



Mrauk-U Township, Myanmar. A girl from an IDP site in Rakhine State receives relief assistance from the World Food Programme. *WFP*

Asia and the Pacific is home to one quarter of the world's conflicts and several protracted crises. Displacement and violence drive humanitarian needs across the region, which has 4.4 million refugees and the world's largest refugee settlement, in the Cox's Bazar District of Bangladesh. The region also hosts over 3.7 million Internally Displaced People (IDPs).¹ Conflicts in Asia and the Pacific have typically been localized, leading to millions of people in protracted crisis settings requiring humanitarian assistance and protection, but with limited cross-border impacts. However, this changed in 2021 following a rapid deterioration of the crises in Afghanistan and Myanmar. The humanitarian needs in each country were severely impacted, with the potential for repercussions across the region as civilians seek to flee conflict and instability.

Some 77 per cent of the world's disaster-affected people live in the Asia and the Pacific region. From 2015 to 2019, disasters affected 700 million people across the region, resulting in 44,000 deaths, 3.5 million people losing their homes, and damaged totalling US\$286 billion. In 2020, 69 per cent of the global population newly displaced by disasters lived in Asia and the Pacific region. This includes some 4.4 million people temporarily displaced in the Philippines due to natural disasters. This is the world's second-highest number, after China. In Indonesia alone, disasters directly affected over 5 million peoples in 2020, and some 148 million people live in hazard- and disaster-prone areas.

As a result of climate change, heatwaves, droughts, floods and tropical cyclones are becoming increasingly frequent and intense. The region's dependence on natural resources and agricultural sectors, its densely populated coastal areas and its high rates of poverty make it the world's most vulnerable area to the impact of climate change. The Pandemic and its socioeconomic and humanitarian impacts have increased people's vulnerability to the effects of natural disasters, as coping capacities have been eroded and people have experienced multiple compound disasters.

The number of people in need of humanitarian assistance in Asia and the Pacific nearly quadrupled over the last two years

In 2022, a total of 28.3 million people will be targeted for humanitarian assistance within the two HRPs for the region

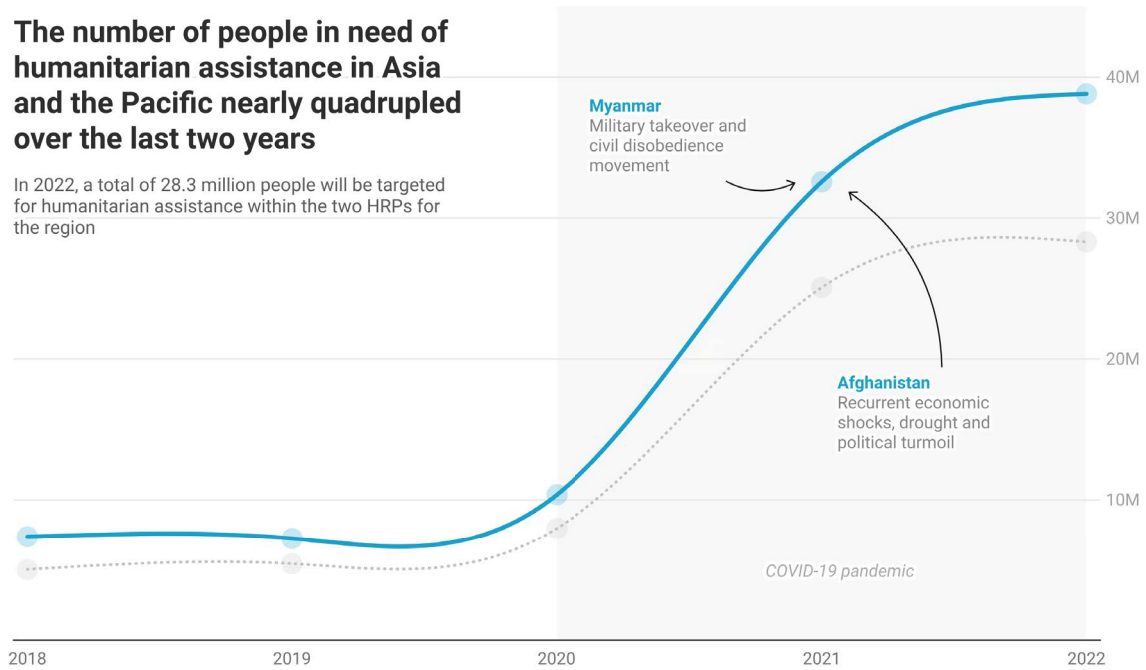


Chart: Global Humanitarian Overview 2022 • Source: Humanitarian Insight

Projected situation in 2022 and beyond

COVID-19 and its impacts will continue into 2022 due to unequal vaccination rates and the emergence of new variants. This will create far-reaching public health consequences, and vulnerable communities will require more immediate, life-saving assistance. Escalating conflict and the pandemic could also bring waves of cross-border migration and internal displacement. Many countries will likely face multiple, compound disasters in 2022, eroding coping capacities and raising the possibility that more people will require humanitarian assistance. Afghanistan, DPR Korea and Myanmar are facing acute food insecurity situations, which are likely to deteriorate further by the year's end.

Inter-Agency Coordinated Appeals: Asia and the Pacific (2022)

Country	Type	People in need	People targeted	Requirements (US\$)	Requirements (2017-2022)
Afghanistan	HRP	24.4 M	22.1 M	4.5 B	
Myanmar	HRP	14.4 M	6.2 M	826.0 M	

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service



Zheray district, Afghanistan. A young boy and his baby sister wait outside a mobile clinic, where nutrition assistance is being provided. *OCHA/Charlotte Cans*

In Pakistan increasing inflation rates compounded by recent flooding, droughts, locust outbreaks and loss of livelihoods due to COVID-19, has caused food insecurity for 3.8 million people. Countries including Bangladesh, Cambodia, Nepal, and Sri Lanka are also at risk of increased food insecurity, partly due to climatic shocks and socioeconomic challenges. A number of countries including Papua New Guinea and Timor-Leste, have been identified as being at high risk of La Niña which, depending on the country, could bring higher or lower than average rainfall, raising the risk of flooding, drought and exacerbating food insecurity. These challenges risk eroding the coping capacities of the most vulnerable segments of the population, increasing their chances of requiring life-saving humanitarian assistance and the need for timely or even anticipatory humanitarian action. The region also remains highly vulnerable to large-scale disasters, such as earthquakes and tsunamis, that would overwhelm the capacities and resources of in-country partners and require international humanitarian assistance.

References

¹ UNHCR, *Operational Data Portal*, as of 30 June 2021



Afghanistan HRP

PEOPLE IN NEED

24.4 million

PEOPLE TARGETED

22.1 million

REQUIREMENTS (US\$)

4.47 billion

Total population

41.7 million

Income level

Low income

INFORM Severity Index

4.7 / Very High

Consecutive appeals

2009 - 2022

People reached ^{HRP+FA}

17.5 million (2021)

The combination of conflict, drought, COVID-19, political turmoil and recurrent economic shocks had a devastating impact on the people of Afghanistan. Ruptures in basic services, financial systems and civil service are exacerbating an already dire humanitarian situation.

A staggering 22.8 million people, or 55 per cent of the population, are expected to be in crisis or emergency levels of food insecurity (IPC 3+), a nearly 35 per cent increase from the same period last year. Some 9 million people are projected to be in IPC 4 – the highest number in the world. More than half of all children under 5 years of age are now expected to be acutely malnourished in 2022, a 21 per cent increase since the start of 2021. Twenty-seven out of 34 provinces are seeing acute malnutrition rising above emergency thresholds.

In rural areas, needs are largely driven by drought – the worst of its kind in 27 years – and the cumulative effects of over four decades of conflict. Even after the harvest, 57 per cent of households did not have food reserves that would last for three months. In urban areas, severe economic shocks and resulting income loss have contributed to the rapid deterioration in people’s food security and livelihoods status. Ten out of 11 most densely populated urban areas are anticipated to be in IPC 4. In 2021, all population groups had a negative net income.

Despite the prevalence of more deadly variants of COVID-19 and outbreaks of cholera, 66 per cent of the population reported not having enough water for handwashing. Conflict and COVID-19 have also interrupted schooling for more than 9.3 million children since 2020. Threats to civilians and acute protection needs remain high, and there are grave concerns about the rollback on women’s rights and restrictions on their participation in life and society. Densely populated areas are also contaminated with explosives, putting more people, particularly those trying to return, at risk of death and maiming. Afghanistan already has one of the world’s highest per capita populations of people with disabilities, with 79 per cent of adults and 17 per cent of children believed to live with some form of disability.



Kandahar, Afghanistan. This unemployed father and his daughter were displaced to Kandahar from their hometown due to conflict and war. They now reside in Haji camp, where they do not have a decent home. In recent months the conflict has intensified and spread. The operating space for humanitarian providing life-saving assistance continues to shrink dramatically. *UNICEF/Naqeeb Isahaq*

Projected situation in 2022 and beyond

An estimated 24.4 million people – 59 per cent of the population – will need humanitarian and protection assistance in 2022. This is largely driven by spiraling food insecurity, dangerous levels of malnutrition, eroded livelihood opportunities, as well as conflict-driven displacement and complex protection needs. Results from the 2022 Joint Inter-Sectoral Analysis Framework indicate that all 34 provinces are in severe or critical need, with 82 per cent of all provinces considered to have critical multisectoral needs. Similarly, all provinces across the country are projected to be in IPC 3 or 4.

Simultaneously, the political transition has disrupted basic services and critical development programmes – all on the backdrop of a crippling economic shock that has led to significant drops in income and evaporation of reserves across all income quintiles. Surging prices for food and other core commodities and severed remittances are drastically reducing people's purchasing power.

The outlook for 2022 and beyond remains grim. People's limited reserves have been expended, and many have already exhausted basic and even harmful and irreversible coping mechanisms to survive. Some 16.2 million people require protection assistance. Without continuity or appropriate alternative systems to maintain basic service provision, life-saving services are at risk of collapse. If all services cease, humanitarians expect a staggering 10 maternal, 55 neonatal and 112 child deaths each day. Forecasts indicate a potential second La Niña season ahead, causing a consecutive drought year and delivering a devastating blow to the population.

Response priorities in 2022

In 2022, humanitarian partners plan to reach 22.1 million people (91 per cent of PIN), requiring US\$4.47 billion.¹ The increase in planned reach is mostly driven by the sharp increase in the number of people in acute food insecurity. Active conflict, access challenges (particularly for female humanitarian staff), and banking and liquidity constraints have periodically impeded partners' operations, but humanitarians have maintained their presence and delivered assistance in 387 of 401 districts in the third quarter (July – Sept) of 2021. By year's end, partners plan to reach 17.5 million people (111 per cent of the initial 2021 HRP target).

Evolution of needs and requirements (2016–2022)

HRP	People in need	People targeted	Requirements (US\$)	Funding coverage
2022	24.4 M	22.1 M	4.5 B	
2021	18.4 M	17.7 M	868.7 M	77%
2020	9.4 M	7.1 M	732.6 M	52%
2019	6.3 M	4.5 M	611.8 M	76%
2018	6.5 M	4.2 M	598.9 M	78%
2017	9.3 M	5.7 M	409.4 M	81%
2016	8.1 M	3.5 M	490.9 M	88%

Figures for the 2022 HRP are provisional.

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service

Limited humanitarian funding in previous years had driven a prioritization of low-cost and higher reach activities. People were reached with some form of assistance, but overall vulnerabilities did not improve. As a result, several sectors have revised their assistance modalities to increase volume and duration or include more comprehensive packages that more appropriately match the depth of people's vulnerabilities and are more cost-effective in the long term. The response will also continue to emphasize the need to expand work on accountability to affected populations, reinforce the importance of protection from sexual exploitation and abuse, and strengthen gender, mental health and disability inclusion.



Dand, Afghanistan. The 6,000 IDPs in Dand are some of the tens of thousands of people displaced from southern Afghanistan, forced to flee conflict in October last year. Many were farmers who were able to support themselves and their families before. But when they fled, they left behind their homes, land and livestock. Now they are internally displaced and living in tents with no access to their livelihoods. *OCHA/Fariba Housaini*

Achievements and innovations

Since 2020, the humanitarian community has made considerable progress in enhancing vulnerability-focused response, and it has improved analysis of chronic needs requiring social assistance to avert slippage into life-threatening categories. This year, humanitarians made an honest evaluation of the impact of past assistance on people's living conditions. This showed that while assistance had offered an immediate lifeline, it was not sufficient to cover people's basic needs. Assessments² revealed that 69 per cent of households who received winterization assistance found it necessary to still take out loans to survive, and 59 per cent reported being unable to heat their homes. Similarly, post-distribution monitoring reports showed that past food assistance – provided at half rations and for shorter rounds – had not substantially improved people's food security and nutritional status.

As a result, humanitarians have revised the volume, duration and quality of core assistance packages commensurate to deepened vulnerabilities. The response will also modestly increase the range of costlier packages – such as shelter and water system repairs – which remain life-saving, offer medium-term relief and are cost-effective in the long run, by reducing future needs.

References

¹ 2022 requirements are provisional.

² Reach Initiative (June 2020). Winterization Evaluation (an evaluation of the winter assistance in 2019-2020).



Myanmar HRP

PEOPLE IN NEED

14.4 million

PEOPLE TARGETED

6.2 million

REQUIREMENTS (US\$)

826 million

Total population

54.8 million

Income level

Lower middle

INFORM Severity Index

4.0 / High

Consecutive appeals

2013 – 2022

People reached ^{HRP+ERP}

2.2 million (2021)

The people of Myanmar are facing an unprecedented political, human rights and humanitarian crisis, with needs escalating dramatically since the military takeover and a severe COVID-19 third wave in 2021. This has generated new needs in new areas with increased displacement due to the spread of conflict.

The military takeover and the large-scale civil disobedience movement that followed have heavily impacted the already fragile public service sector, further restricting the access of people in need to basic services. The twin crises of COVID-19 and the military takeover have also deepened pre-existing needs among already vulnerable groups, including stateless Rohingya people and protracted IDPs in the country’s north-east. New needs have also been identified as a result of the new national frame of analysis that uses food insecurity as a measure to vulnerability.

The economic and political turmoil of 2021 has combined to drive almost half the population into poverty, wiping out gains made since 2005. Increasing numbers of vulnerable people are exhausting their coping capacity and are now slipping into humanitarian need. Price hikes, COVID-19 movement restrictions and ongoing insecurity have forced the most vulnerable people to resort to crisis or emergency coping mechanisms to access food and basic services. Prices for key household commodities have increased significantly, making food unaffordable for many. Monsoon floods in July and August 2021 hit communities already in need of humanitarian assistance in various parts of the country, resulting in loss of crops and increased food insecurity. This multidimensional humanitarian crisis is now affecting the whole country, posing grave protection risks for civilians, limiting access to services and deepening food insecurity. This requires a broader national needs analysis and a scaled-up humanitarian response to stop people slipping into life-threatening need.



Yangon, Myanmar. A family have lunch at their home in an informal settlement in Hlaingtharyar Township, Yangon. A combination of the pandemic and civil unrest, following the February 2021 military takeover is pushing Myanmar's economy and the most vulnerable people into financial distress and worsening food insecurity. Food prices are increasing and food availability is becoming limited in conflict-affected areas. *WFP/Kaung Htet Linn*

Projected situation in 2022 and beyond

The political, socioeconomic and protection crisis in Myanmar is fuelling growing humanitarian needs. The outlook for 2022 remains dire, with the key drivers of need – conflict, COVID-19, economic stress and statelessness – all continuing to negatively affect the population. The political and security situation is expected to remain volatile, with increased displacement anticipated. The devastating third wave of COVID-19 appears to be breaking as 2021 draws to a close. However, a damaging fourth wave due to low vaccination rates is a significant risk in 2022. Associated COVID-19 precautions and restrictions are likely to be a continuing factor for the people of Myanmar and the response in 2022. The general trend of price hikes of basic food items and agricultural inputs is expected to continue, reducing food affordability.

Women, children and people with disability are particularly vulnerable amid this economic and protection crisis, exposing them to risks of exploitation and abuse, including sexual and gender-based violence. Learning has been disrupted for almost 12 million children due to widespread COVID-19 school closures. Needs that were unmet in 2020 and 2021 because of access constraints have directly contributed to escalating needs heading into next year.

The expanded nature of the crisis has prompted the Humanitarian Country Team to apply a wider national vulnerability lens to the needs analysis. In the absence of national multisectoral needs assessments, food insecurity data was mostly used as a proxy basis for determining intersectoral vulnerability. The joint intersectoral analysis process identified 14.4 million people in humanitarian need in Myanmar in 2022. It is important to note that figures for 2022 are not comparable to previous years due to the change in scope and methodology.

Response priorities in 2022

After a significant scale-up to respond to new needs after the military takeover, the humanitarian community expects to have reached 2.2 million people out of 3 million targeted for assistance by the end of 2021. This wider reach is predominantly the result of increased food distributions in new conflict areas and urban locations. Humanitarian organizations stand ready to further step up their efforts and have set an ambitious target of assisting 6.2 million people in 2022. Humanitarian partners require US\$826 million to support this more ambitious programme covering new people in new areas. The financial ask is more than double the requirement in 2021. This is a reflection of deeper needs being observed, a wider response being planned, inflation and increased cost of delivery.

Evolution of needs and requirements (2016–2022)

HRP	People in need	People targeted	Requirements (US\$)	Funding coverage
2022	14.4 M	6.2 M	826.0 M	
2021	1.0 M	944.5 K	276.5 M	73%
2020	986.0 K	848.0 K	215.0 M	68%
2019	941.0 K	941.0 K	214.4 M	85%
2018	863.0 K	832.0 K	183.4 M	75%
2017	525.0 K	525.0 K	150.3 M	74%
2016	1.0 M	1.0 M	139.5 M	59%

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service

The focus of the 2022 response will be to save lives and improve the overall health and mental and physical well-being of people affected by COVID-19, conflict and natural disasters through timely and integrated assistance. Vulnerable people's living standards will be improved and their resilience strengthened. Partners will work to ensure that protection risks are mitigated, protection needs are monitored and met, and respect for international humanitarian law is promoted. Targeting will be continuously reviewed and refined with the possibility of a further revision in the first half of 2022.

The expanded response will require improved access and reduced red tape. Access to affected people for the delivery of assistance and people's access to life-saving services and support remains limited in many parts of the country, with constraints being most severe in areas of active conflict where there is now a heavy reliance on support from local and national partners. Staff safety in these areas is a serious concern due to active fighting, landmines, intimidation and threats. Bureaucratic impediments are also affecting the pace and effectiveness of the response, and COVID-19 movement restrictions have limited access.



Part two: Inter-Agency Coordinated Appeals

Eastern Europe Regional Overview

Humanitarian needs arising from armed conflict in eastern Ukraine remain critical, exacerbated by the continuing impact of COVID-19. Living conditions continue to deteriorate on both sides of the “contact line”, the 427 km front line that divides eastern Ukraine into areas under Government control (GCA) and beyond Government control (NGCA).

Restrictions on movement across the “contact line” widen the rift between the now-divided population, severing previously interdependent networks of services and markets, and cutting people off from the cities they once depended on for social benefits and essential services. Now in its eighth year, the protracted armed conflict has faded from global headlines, causing mistaken perceptions that it is “frozen”. People living in the conflict-affected oblasts risk falling victim to active hostilities, as the ceasefire brokered in July 2020 has become increasingly fragile. The number of civilian casualties has returned to pre-ceasefire levels, and civilian objects, including housing, schools, health facilities, and electrical and water infrastructure, frequently come under fire. Widespread contamination by unexploded ordnance and mines remains a serious concern and is responsible for nearly 70 per cent of civilian casualties during the 14 months following the ceasefire. Eastern Ukraine has become one of the most mine-contaminated areas in the world, ranking fifth worldwide for casualties due to landmines and other explosive remnants of war.



Ukraine

HRP

PEOPLE IN NEED

2.9 million

PEOPLE TARGETED

1.8 million

REQUIREMENTS (US\$)

190 million

Total population

43.5 million

Income level

Lower middle

INFORM Severity Index

3.6 / High

Consecutive appeals

2014 – 2022

People reached

1.4 million (2021)

The socioeconomic impact of COVID-19 in eastern Ukraine has become increasingly pronounced due to the prolonged closure of the “contact line”, movement restrictions and decreasing livelihood opportunities.

Access to essential services has been severely hindered, particularly across the “contact line” in NGCA. The shock of COVID-19 has added pressure on the weakened health-care system, while the provision of social services has struggled.

An estimated 2.9 million people are projected to need humanitarian assistance in 2022, with the majority living in NGCA. The severity of needs is lower in GCA, particularly in the areas farther away from the “contact line”, leading to a lower number of people who need humanitarian assistance there, partly due to the support provided by the Government of Ukraine, civil society and development actors. Severe humanitarian needs remain in areas close to the “contact line” where active hostilities continue. Older people, people with disabilities, female-headed households and children living in isolated villages are particularly vulnerable due to their limited mobility and economic challenges.

Humanitarian needs in NGCA remain severe and continue to deteriorate. NGCA residents have been most impacted by COVID-19-related movement restrictions across the “contact line” imposed since March 2020. The restrictions have separated a population with a significant proportion of underemployed and older persons from the rest of Ukraine, cutting them off from social services and entitlements, including pensions, which they can access only once physically present in GCA. With only two of the five crossing points partially operational, the number of people crossing the “contact line” has dropped precipitously. Monthly crossings are averaging less than 7 per cent of the 1.2 million monthly crossings in 2019. The limited opportunities for crossing the “contact line” have forced some NGCA residents to travel to GCA through the Russian Federation – an expensive journey that can take more than 24 hours. The resilience of the most vulnerable people on both sides of the “contact line” has been worn thin, leading to greater reliance on humanitarian assistance.



Sievierodonetsk, Ukraine. A nurse checks on an older man infected with COVID-19 in a clinic in Sievierodonetsk, Luhanska oblast. *OCHA/Yevhen Maloletka*

Projected situation in 2022 and beyond

Amid the increasingly fragile ceasefire, it is likely that the armed conflict will continue with low or medium intensity in 2022. With the harsh winter fast approaching and a worsening COVID-19 epidemiological situation – which is reported to be especially acute in NGCA due to the limited capacity of hospitals and laboratories – the operational environment has become increasingly complicated. As the winter season draws closer, Ukraine faces an energy crisis on multiple fronts which could lead to political instability. The conflict continues to be extremely politicized, and underfunding and persistent access constraints remain serious challenges to humanitarian operations in eastern Ukraine. COVID-19 continues to be used as an excuse to justify a greater level of control over humanitarian projects and aid delivery, limiting humanitarian access to people in need.

The “contact line” will likely remain mostly closed throughout 2022, continuing to restrict the population’s free movement. The severity of humanitarian needs, especially in NGCA, is expected to deepen due to ongoing hostilities, insufficient investment in civilian services infrastructure and the impact of COVID-19. The politicization of humanitarian issues and the lack of progress on peace talks will likely result in less conducive operational conditions for humanitarian response.

Response priorities in 2022

The 2022 response will focus on saving lives, ensuring people’s access to basic services, and strengthening protection to those affected by the conflict and COVID-19. In GCA, humanitarian actors will continue to support the Government, local authorities and civil society to strengthen service delivery and provide humanitarian response, with the goal of phasing out international humanitarian assistance in GCA by the end of 2023.

Evolution of needs and requirements (2016–2022)

HRP	People in need	People targeted	Requirements (US\$)	Funding coverage
2022	2.9 M	1.8 M	190.0 M	
2021	3.4 M	1.9 M	168.0 M	55%
2020	3.4 M	2.0 M	157.8 M	60%
2019	3.5 M	2.3 M	163.6 M	53%
2018	3.4 M	2.3 M	186.9 M	38%
2017	3.8 M	2.6 M	203.6 M	37%
2016	3.1 M	2.5 M	297.9 M	35%

Table: Global Humanitarian Overview 2022 · Source: Financial Tracking Service

This goal recognizes the strong capacity, particularly of the regional and local authorities, the development opportunities that are present and the progress made on the humanitarian-development-peace collaboration. In 2022, humanitarian partners aim to assist 1.8 million people (including 144,000 internally displaced persons), similar to the response target of 2021, with a funding requirement of US\$190 million.



Part two: Inter-Agency Coordinated Appeals

Middle East and North Africa Regional Overview

Years of conflict continue to cause crippling humanitarian consequences in the Middle East and North Africa region. Vulnerable people's ability to cope and meet their basic needs is hampered by the effects of COVID-19, macroeconomic decline and the climate crisis.

Over 55 million people across the region need humanitarian assistance, including more than 12 million people who are internally displaced and facing a myriad of challenges. Hostilities are devastating communities, increasing protection risks and concerns in oPt, Syria and Yemen, and exacerbating civilian suffering, deaths and injuries. Children and people in need are in extreme danger from daily indiscriminate attacks on schools and hospitals, preventing meaningful access to services. Many displaced people in Iraq, Libya, oPt, Syria and Yemen live in poor conditions in camps and settlements, with limited access to basic services and the potential risk of eviction.

The effects of conflict are compounded by recurring climatic shocks and extreme weather conditions, including floods and extended dry conditions. The frequency and magnitude of these shocks increases year on year. In Syria, erratic rainfall and tensions over water resource management have resulted in low water levels in the Euphrates River, affecting up to 5 million people. Floods in Yemen have displaced 34,000 families and spread preventable waterborne diseases, such as cholera.

Saada, Yemen. Students at the Aal Okab School sit in a former classroom, which was destroyed during the conflict. Students now attend lesson in UNICEF tents nearby. *OCHA/Giles Clarke*

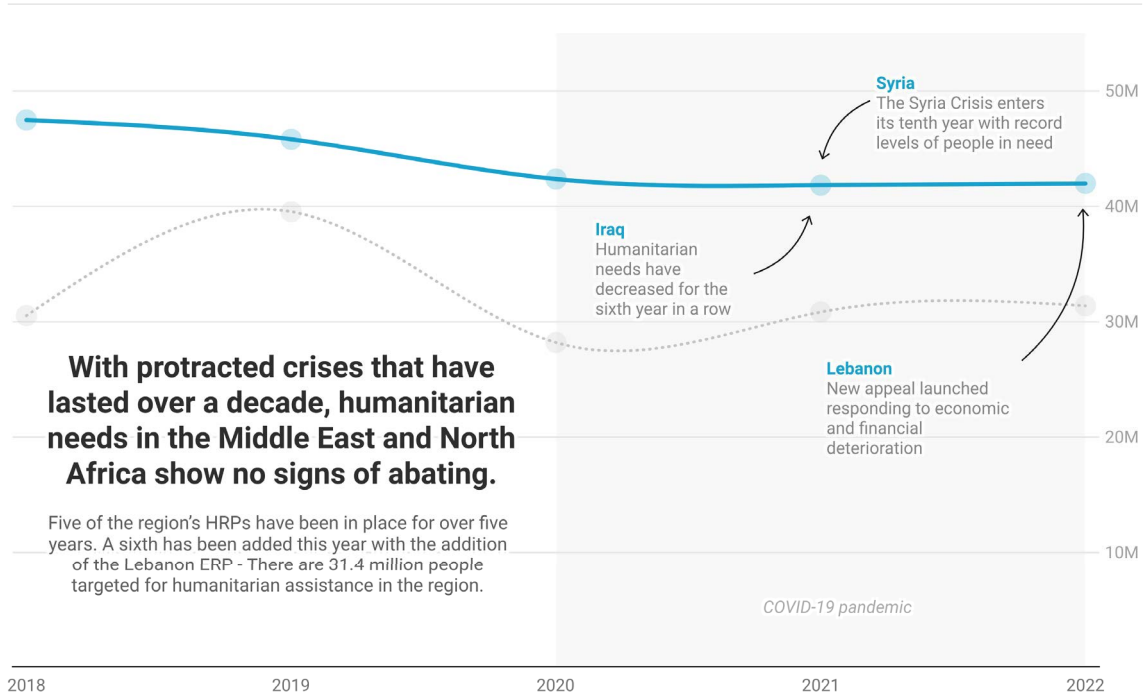


Chart: Global Humanitarian Overview 2022 • Source: Humanitarian Insight

The socioeconomic impacts and containment measures associated with the pandemic have increased pre-existing vulnerabilities and stretched already weakened health-care systems. Vaccination rates remain low and vaccines difficult to access. Across the region, many countries are battling economic collapse, including soaring food and fuel prices, currency depreciation, limited household revenue and rising unemployment. Families cannot afford basic goods and services including food, health care, education and water. Food insecurity and nutrition have continued to worsen, with millions of people in Lebanon, Syria and Yemen on the brink of hunger and resorting to negative coping mechanisms. Famine-like conditions are evident in parts of these countries.

Inter-Agency Coordinated Appeals: Middle East and North Africa (2022)

Country	Type	People in need	People targeted	Requirements (US\$)	Requirements (2017-2022)
Iraq	HRP	2.5 M	990.0 K	411.0 M	
Lebanon	ERP	1.9 M	641.7 K	220.8 M	
Libya	HRP	800.0 K	200.0 K	75.3 M	
oPt	HRP	2.1 M	1.6 M	510.0 M	
Syria	HRP	14.0 M	12.0 M	4.2 B	
Yemen	HRP	20.7 M	16.0 M	3.9 B	

Figures for Iraq and Syria are estimates and pending launch of their HRP's.

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service



Tripoli, Libya. A doctor performs a medical examination at a migrant health clinic in Tripoli. Lack of funding hampered programming and affected health facilities' ability to remain fully operational. *OCHA/Giles Clarke*

Humanitarians continue to deliver assistance to affected people and minimize human suffering against a backdrop of challenges due to conflict, insecurity, the impact of sanctions on humanitarian response, blockades and bureaucratic impediments. Into 2022, the region is expected to face significant challenges. These will result in increasing humanitarian needs that require greater humanitarian effort in tandem with development assistance. Political solutions to the conflicts in oPt, Syria and Yemen are yet to materialize. As a result, millions of people cannot return to their homes or explore other durable solutions. Food insecurity persists and is expected to deteriorate, particularly in Yemen. Meanwhile, economic contraction is likely to worsen the standard of living for millions of people who will need additional humanitarian assistance.



Iraq HRP

PEOPLE IN NEED

2.5 million

PEOPLE TARGETED

1 million

REQUIREMENTS (US\$)

411 million

Total population

41.2 million

Income level

Upper middle

INFORM Severity Index

4.3 / Very High

Consecutive appeals

2014 – 2022

People reached

1.2 million (2021)

Four years after the conclusion of large-scale military operations against ISIL, millions of Iraqis have yet to recover from the years of extreme violence and widespread displacement. Recovery and reconstruction remain incomplete, social tensions are often high, and security is complex and fragmented.

Iraq’s political future is uncertain and evolving, with parliamentary elections completed in October 2021. The country’s economy is gradually recovering from numerous shocks in 2020, however, many structural economic challenges continue. Climate change is a growing threat in Iraq. Displaced and returnee communities continue to be disproportionately vulnerable to and impacted by shocks in the context.

The situation affecting millions of Iraqis currently or formerly displaced by the 2014-2017 ISIL crisis remains broadly stagnant, as compared to 2021. Some 1.2 million people remain internally displaced, including 1 million outside formal camps. Returns continue to be slow, with the number of displaced Iraqis only decreasing by 35,000 so far this year. Many IDPs and returnees face significant barriers that prevent them from finding durable solutions. These barriers include missing civil documents, contamination from unexploded ordnance, and insufficient housing, basic services and livelihoods in their area of displacement or at home. Vulnerable internally displaced persons (IDPs) and returnees alike also are at increased risk for other serious protection risks.

Throughout 2021, the Government of Iraq, UN development agencies, the international humanitarian system, national and international NGOs and donor representatives have accelerated efforts to expand engagement and support to end displacement. The need for humanitarian assistance will continue until this goal is fully achieved, and through collaboration, advancements are foreseen over the next year.



Erbil, Iraq. Local workers at the ICRC warehouse load rice sacks into a truck that will head to Baghdad for a food distribution. *Finnish Red Cross/Saara Mansikkamäki*

Projected situation in 2022 and beyond

Using tightened criteria to define and assess humanitarian need, evidence shows that some 2.5 million Iraqis¹ remain highly vulnerable and in need in 2022. This translates to about half of all IDPs (180,000 in-camp IDPs plus 550,000 out-of-camp IDPs) and one third of all returnees (1.7 million) being highly vulnerable and in need. The number of people in acute need decreased by nearly 60 per cent year-on-year, from 2.4 million to 960,000. These reductions are the direct result of the revised methodological approach rather than the result of an improved context. Many people previously assessed as being in need remain so, often for socioeconomic or other medium-term support, and should be assisted in 2022 through Government and development action. Twenty-seven formal camps remain open in Iraq: 25 in the Kurdistan Region of Iraq and two in federal Iraq at the time of writing. Only 1 per cent of in-camp IDPs have noted an intention to return to areas of origin in 2022. Some additional camps may close or consolidate in the coming months, and some may see services transferred to the Government. However, all in-camp IDPs are expected to remain in need of humanitarian assistance in 2022.

Among the 1 million IDPs living outside camps, 55 per cent are assessed as being highly vulnerable and in need of humanitarian assistance in 2022, using the tightened criteria. Their situation is often more precarious than IDPs living in the camps due to greater challenges accessing services or livelihoods in their host communities, risks of eviction, and exposure to protection risks, including higher reliance on negative coping mechanisms. IDPs living in critical shelter, including several hundred informal sites throughout Iraq, and those who lack core civil documentation are also of particular concern and focus. Many of the 1.7 million returnees who remain in humanitarian need do so because of the conditions in the areas of return, where many continue to live in critical shelter, without access to essential services or livelihoods and where the resumption of safe and dignified living is not yet feasible.

Response priorities in 2022

The 2021 Iraq Humanitarian Response Plan (HRP) targeted 1.5 million people, with 1.2 million people projected to be reached with assistance by year's end. Response gaps are largely attributable to lack of funding and partner capacity. The approach and criteria used for targeting people for humanitarian interventions in 2022 have been revised through a tighter definition of needs and a more realistic prediction of humanitarian implementation capacity, funding, access and reach. Initial analysis shows that the 2022 Iraq HRP will likely target around 990,000 Iraqis with humanitarian assistance. This would include all in-camp IDPs, 230,000 acutely vulnerable out-of-camp IDPs and 580,000 acutely vulnerable returnees who face a multitude of humanitarian needs.²

Evolution of needs and requirements (2016–2022)

HRP	People in need	People targeted	Requirements (US\$)	Funding coverage
2022	2.5 M	990.0 K	411.0 M	
2021	4.1 M	1.5 M	607.2 M	55%
2020	4.1 M	1.8 M	520.0 M	92%
2019	6.7 M	1.8 M	701.2 M	98%
2018	8.7 M	3.4 M	568.7 M	98%
2017	11.0 M	5.8 M	984.6 M	95%
2016	10.0 M	7.3 M	1.1 B	88%

The 2022 figures are estimates and pending the launch of the HRP.

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service

The strategic objectives of the 2022 Iraq HRP continue to focus on supporting IDPs and returnees to live in safety and dignity, access essential services and meet their basic needs. Within this framework, specific objectives will capture the different levels of support needed for in-camp IDPs, out-of-camp IDPs and returnees.

In addition to providing life-saving and life-sustaining humanitarian support, the humanitarian community in Iraq will continue to work closely with development and stabilization entities to operationalize the nexus, including through the area based coordination groups, and to contribute to the adoption of a shared understanding of and coordinated action in response to the priority drivers of need.

References

¹ The 2022 number of people in need is a decrease of 40 per cent, as compared to the 4.1 million identified in 2021.

² The targets and costs presented in this document reflect preliminary estimates that may be further adjusted as the Iraq HCT reviews and vets the draft programmatic response and targeting for 2022, as the HRP is being finalized.



Lebanon ERP

PEOPLE IN NEED

1.9 million

PEOPLE TARGETED

0.6 million

REQUIREMENTS (JAN-JUN, US\$)

221 million

Total population

6.8 million

Income level

Lower middle

INFORM Severity Index

3.6/ Very High

Multi-year requirements (US\$)

383 million (2021-2022)

Lebanon is facing the impacts of economic and financial collapse, COVID-19, the Beirut Port explosions and the Syrian crisis. In addition, political deadlock fuels popular protests and hampers meaningful reform and recovery efforts.

In this context, the situation of ordinary people in Lebanon is worsening day by day. Secondary data analysis¹ indicates increasing humanitarian needs within Lebanese and migrant communities. In addition, the preliminary findings of the 2021 Vulnerability Assessment of Syrian Refugees in Lebanon reveal a dire situation. Half of 879,598 Syrians registered as refugees with UNHCR are considered food insecure and about two thirds have to reduce the number of meals consumed per day.

Since October 2019, the Lebanese pound has lost more than 90 per cent of its value, leading to a year-on-year inflation of 120 per cent between May 2020 and May 2021. Assessments indicate that unemployment among migrants was up to 50 per cent, with significant job losses in the final quarter of 2020. The sharp devaluation in the Lebanese pound has eroded living standards and wiped-out life savings, as residents grapple with triple-digit inflation rates for 15 consecutive months. Food and non-alcoholic beverages, which account for the bulk of poor households' expenditures, witnessed a staggering 253 per cent annual average inflation rate in 2020.

Amid growing scarcity, an increasing number of families cannot afford increasingly limited basic goods and services including food, health, education, electricity, water and hygiene items. The minimum wage in Lebanon is equivalent to a mere US\$35/month, while the population is bearing the brunt of the removal of subsidies on crucial imports. The price of 20 litres of gasoline and a tank of cooking gas now represents respectively almost half and more than a third of the monthly minimum wage. This has pushed the population into poverty, with an estimated 35% now below the extreme poverty line. Electricity outages due to the fuel shortage are jeopardizing the availability of health care and drinking water for almost everyone in Lebanon. Many hospitals have been forced to reduce their operations to the bare minimum. The public water and wastewater treatment systems, which rely heavily on fuel, have also been drastically cut across the country, leaving millions of people without access to water in the middle of the COVID-19 pandemic.



Tripoli, Lebanon. A woman prepares tabbouleh – Lebanon’s national dish of parsley, burghul, tomatoes and oil. These ingredients are among the many items facing a sharp price increase. Her daughter says: “Before COVID-19 and all that is happening, everything in Lebanon was somehow affordable.” She recalls that in early 2019, a supermarket visit did not mean spending the minimum wage (equivalent to \$34) on just a couple of staple items. *WFP/Giulio Origlia*

The situation has considerably increased the number of violent inter and intra community incidents linked to competition over goods and services. In addition, an increase in irregular migration is already reported with frequent incidents observed in 2020 and 2021.

Projected situation in 2022 and beyond

The current downward spiral of socioeconomic conditions cannot be assessed in isolation of the evolving political developments and existing sectarian divides within the Lebanese society. Delays in forming the Government have put the country’s priorities in jeopardy, from IMF negotiations to electricity sector reform, to elections being held on time. Until the elections, due in March 2022, a multiple exchange rate system and continued deterioration of the socioeconomic situation is likely to result in further impoverishment and acute supply shocks across basic services.

Unfortunately, to date, Government-led emergency measures required to alleviate the suffering of millions of residents are yet to be put in place. The economic outlook is bleak for 2022, as IMF technical talks are at their infancy and formal negotiations on a multi-year IMF support programme are expected to take several more months in a best-case scenario. The pre-electoral period is also likely to fuel continued popular unrest and further increase the politicization of the reform and aid agenda. In 2022, increased competition over employment and intracommunal tensions within Lebanese communities are likely to worsen in a context of persistent shortages of basic essential goods and services. Tensions between host communities and refugees are also likely to increase. Overall, it is anticipated that in 2022 the increasing tensions and sporadic violence will further reduce the operational space for humanitarian actors, who already face an increasing number of access challenges. Such trends will ultimately further increase the number of people in need of acute humanitarian assistance.

Response priorities in 2022

The Emergency Response Plan (ERP) is envisaged as a time-bound exceptional response to the current situation, pending thWernment-led sustainable solutions to the crisis, including a full-fledged comprehensive and inclusive Government-led social protection strategy. The plan aims at linking with and preparing the transition towards such solutions to address the root causes of the crisis. The ERP is strictly humanitarian in nature and activities are implemented in full compliance with the HCT-endorsed Joint Operating Principles. It complements other humanitarian activities implemented in UNRWA programs and the UNHCR/UNDP-led Lebanon Crisis Response Plan. As such the ERP PIN and number of beneficiaries targeted have been calculated by taking those other plans into consideration.

The strategic objectives of the ERP are threefold, namely to:

- Provide essential short-term support to most vulnerable people affected by the economic crisis for them to meet their critical needs in terms of health care, food, nutrition, education and water.
- Support the response capacity of the Lebanese health system in coping with the COVID-19 emergency.
- Enhance timely, unhindered and equitable access to protection assistance for migrants.

The intervention sectors included in the ERP are health, food security, nutrition, WASH, education, child protection and gender-based violence, logistics and a chapter focusing on migrants' specific protection needs. The activities mostly comprise direct support to beneficiaries, this includes distribution of food and cash assistance for basic needs, including access to basic services including, health, water electricity.

In line with the Inter-Agency Standing Committee's commitments on accountability to affected populations (AAP) and protection from sexual exploitation and abuse, the Humanitarian Country Team is collectively accountable to people with humanitarian needs in Lebanon. The humanitarian community will look to enhance a collective AAP approach in implementing the ERP, building on available mechanisms and tools and ensuring synergies with current platforms. Collective AAP mechanisms will support both a people-centred and a community-centred approach to a) ensure equitable and meaningful access to available information and services, b) leverage the participation of affected people, including marginalized groups and hard-to-reach communities, and c) promote two-way communication between humanitarian partners and the affected communities, using their preferred languages and assistance modalities.

The ERP aims to ensure that the specific and diverse needs, capacities and priorities of women, girls, men, boys and gender non-conforming individuals are identified and responded to. Integrating gender equality in the ERP also reinforces a human rights-based approach, which improves programming. Attention to gender equality will be prioritized in all aspects of the ERP, including needs assessments, strategic planning, coordination, implementation, and monitoring and evaluation. Sex-, age-, and disability-disaggregated data will be collected and



Beirut, Lebanon. This man is a shop owner who received assistance from WFP after the deadly blast that rocked Beirut a year ago, plunging millions of people across Lebanon into poverty. His bakery was wrecked in the blast and he finds it hard to be optimistic about the future. "We are waiting for a miracle to happen". The economic crisis in Lebanon has taken a toll on everyone. People are losing their homes and sources of income, leaving many unable to buy enough food for themselves, let alone their families. Slowly, he was able to repair the shop and get back on his feet to some degree. Operating at only 25 percent efficiency compared to before the explosion, he continues to open the door to his bakery in the hope of one day fully returning to the way things were. The shop is more than a source of income, it is a part of who he is. "There is no reason for us to open, yet we are open. We chose to stay with whatever we have. This is my business. My soul is in it. I was born for this work." *WFP/ Photolibrary*

analysed, to the extent possible, across sectors and used to improve access and impact to diverse marginalized groups. Humanitarian coordination, technical assistance, information management and advocacy efforts related to gender equality will be supported by Lebanon's Gender Working Group and the LGBTIQ+ Task Force (sub-working group), which oversees gender-related coordination across the humanitarian-development and peace interventions.

Multipurpose cash assistance (MPCA) is critical in assisting households affected by multiple vulnerabilities requiring a holistic response. Assistance will be distributed based on clear targeting and eligibility criteria by NGOs and UN agencies working collaboratively across sectors, drawing upon lessons from the recent response following the August 2020 Beirut Port explosions, where cash assistance, particularly MPCA, enabled a timely response to urgent needs. Under the framework of the 2021-2022 ERP, partners will provide about US\$140 million in direct cash assistance, which is approximately a third of the ERP's overall funding requirement. Of this amount, \$27.25 million (20 per cent) is planned to be distributed in the form of MPCA, complementing other assistance including sector-specific cash and voucher assistance.

References

¹ The current analysis for the ERP (August 2021-July 2022), has been based largely on secondary data. Under the leadership of the HCT, OCHA is currently partnering with REACH to conduct a Multi-Sector Needs Assessment, with results expected by the end of 2021 to be used to update the ERP in early 2022



Libya HRP

PEOPLE IN NEED

0.8 million

PEOPLE TARGETED

0.2 million

REQUIREMENTS (US\$)

75.3 million

Total population

7 million

Income level

Upper middle

INFORM Severity Index

3.9 / High

Consecutive appeals

2015 – 2022

People reached

0.5 million (2021)

Since the ceasefire agreement was signed in October 2020, the overall humanitarian situation has seen some improvement across Libya, highlighted by the continuing trend in the number of internally displaced persons (IDPs) returning to their areas of origin.

The number of IDPs decreased nearly 25 per cent to 213,000 people compared to some 278,000 at the start of 2021. This is an encouraging trend, but challenges remain in ensuring that returnees and vulnerable populations have access to essential services, such as health care, safe drinking water and suitable housing. Planned and often forcible evictions targeting IDPs is of critical concern, leading to a heightened risk of secondary displacement and insecurity over housing, land and property rights. Returns continue but the trend is slowing as those still displaced face systemic impediments, including personal security and social cohesion, and require durable solutions.

According to IOM's Displacement Tracking Matrix, nearly 598,000 migrants are in Libya. The trend of migrants and refugees attempting the dangerous journey to cross the Mediterranean to seek economic opportunities has continued. By the end of September 2021, the Libyan Coast Guard had intercepted and returned almost 26,000 migrants and refugees to Libya. At the same time, the number of migrants and refugees held in detention centres run by the authorities has increased significantly since the beginning of the year and more so in recent months, as authorities mount security operations to round up migrant populations in Tripoli. As of 17 October, over 7,000 migrants and refugees were held in dire conditions in detention centres, without access to due process, compared to some 1,000 detainees in January.

Libya continues to struggle with the challenges of the COVID-19 pandemic, straining the already fragile health system. Libya only began its vaccination campaign in April 2021. Vaccination remains slow (5.7 per cent fully vaccinated) and the pandemic will continue to pose risk for the population and operational challenges for the response. With no national budget approved for 2021, the lack of funding hampered programming and impacted health facilities' ability to remain fully operational.



Awenia, Libya. This doctor was appointed as the Director of the Mashasheya hospital in Awenia. Before 2011, over 100 staff served a community that numbered around 15,000 people. This mountainous region saw some of the heaviest fighting during the 2011 revolution. The Mashasheya hospital suffered major damage and remained closed until October 2018. The doctor, who had recently returned from Tripoli, offered to re-open part of the damaged facility. Despite the fact there was no electricity or running water, he treated patients with basic injuries. *OCHA/Giles Clarke*

Vulnerable families are negatively impacted by the rise of the Minimum Expenditure Basket, which increased by 2 per cent by July. Between June and July, a 2.2 per cent raise was noted in the price of the food components. The price of some components decreased, but it remains 13 per cent higher than pre-COVID-19 levels, which, combined with the loss of income and lack of work opportunities, has increased coping mechanisms. Primary infrastructure requires urgent rehabilitation. Armed groups and criminals increased their attacks on water and sanitation infrastructures, which led to the stoppage of regular water supply in some areas, coupled with deteriorating desalination plants and electricity cuts. This affected approximately 1.6 million people.

Projected situation in 2022 and beyond

An estimated 800,000 people need some form of humanitarian assistance next year, a 36 per cent decrease compared to 2021. Based on the multisectoral severity scale, the highest needs are found in Bani Waleed and Rigdaleen Baladiya in the west region; Ghat and Ubari in the south; and Albayda, Tazirbu, Derna and Jalu in the east. The most vulnerable groups are IDPs, migrants and refugees.

If the political reconciliation continues, some of the most pressing humanitarian concerns should decrease, especially for non-displaced and returnee populations. Access to services would likely improve as increased revenue, specifically from the oil sector, would allow more investment in public services delivery. If conflict returns, an estimated 1.6 million people could be affected. Preparedness efforts are in place for a rapid response in case needed. The main challenges are the limited presence of operational partners on the ground and safe storage facilities that could allow the pre-positioning of supplies.

Response priorities in 2022

IDPs, returnees, migrants, refugees and non-displaced people are currently affected in Libya and will remain the priority vulnerable groups from January to May 2022. The Humanitarian Response Plan (HRP) will target some 211,000 of the most vulnerable people in the first five months of 2022. Challenges remain for displaced persons with critical protection risks increased by forced evictions and conditions of returns not meeting basic standards; and exposing IDPs, returnees, migrants and refugees to family separation, arbitrary arrest, as well as intimidation by unregulated armed groups.

Evolution of needs and requirements (2016–2022)

HRP	People in need	People targeted	Requirements (US\$)	Funding coverage
2022	800.0 K	200.0 K	75.3 M	
2021	1.3 M	451.0 K	189.1 M	73%
2020	880.0 K	340.0 K	110.0 M	100%
2019	823.0 K	552.0 K	201.6 M	50%
2018	1.1 M	940.0 K	312.7 M	25%
2017	1.3 M	941.0 K	151.0 M	71%
2016	2.4 M	1.3 M	183.1 M	39%

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service

The need for a durable solutions approach encompassing physical, material and legal safety remains a priority for the identified groups, many of whom struggle with accessing services or sustainable livelihoods.

The HRP funding requirement from January to May 2022 will be US\$75.3 million. The HRP will complement the Libyan Government and private sector efforts to assist the most vulnerable people in need from January to May, while developments on the ground will determine the scale and scope of any future appeal.



occupied Palestinian territory HRP

PEOPLE IN NEED

2.1 million

PEOPLE TARGETED

1.6 million

REQUIREMENTS (US\$)

510 million

Total population

5.2 million

Income level

n/a

INFORM Severity Index

4.3 / Very High

Consecutive appeals

2003 – 2022

People reached ^{HRP+FA}

1.2 million (2021)

The occupied Palestinian territory (oPt) remains a protracted protection crisis, where too many men, women, boys and girls struggle to live in dignity, with constrained access to basic services.

The crisis is characterized by 54 years of military occupation, insufficient respect for international humanitarian and human rights law, internal Palestinian political divisions, and recurrent escalations of hostilities between Israeli forces and Palestinian armed groups.

In Gaza, the humanitarian situation deteriorated in 2021, with the most intense escalation of hostilities since 2014. Beyond the human toll, the 11-day conflict in May aggravated chronic shelter and infrastructure needs. According to the oPt 2021 Multisectoral Needs Analysis (MSNA), the conflict affected the livelihoods or assets of half of the households in Gaza, including some 8,250 people who remain displaced as a result of the escalation. At the same time, the humanitarian needs in all sectors persist, with the blockade on Gaza by Israeli authorities who cite security concerns, entering its fifteenth year.

In the West Bank, including East Jerusalem, 2021 witnessed a spike in Palestinian casualties by Israeli forces, raising concerns about excessive use of force. Attacks on Palestinians and their property by those known or believed to be Israeli settlers has increased. Threats of forced evictions in East Jerusalem and demolitions or seizures of structures and property by the Israeli authorities in Area C and East Jerusalem has also increased, with several significant mass demolitions recorded. Many of these and other Israeli practices in the West Bank including East Jerusalem are linked to the presence of Israeli settlements, which intensifies the coercive environment on vulnerable communities, accentuating the risk of forcible transfer.

The impact of the COVID-19 pandemic has also intensified, with a third wave underway in Gaza and a fourth in the West Bank, burdening the already-stretched health-care system and increasing poverty levels. The pandemic is also intensifying needs and vulnerabilities, with 62 per cent of households in the oPt reporting that their monthly income had decreased as a result of COVID-19.

The Fatah-Hamas divide remains unresolved, undermining basic services in Gaza. Humanitarian response in Gaza was at times restricted by Hamas. In the West Bank, the killing of a prominent Palestinian critic of the Government in June and the subsequent use of force against those



Gaza, occupied Palestinian territory. A young boy picks up a schoolbook from the rubble following the Israeli air strikes in May 2021. Every time there is a conflict in Gaza, intense air bombardments destroy basic infrastructure, homes, hospitals and factories. It takes aid agencies several years to rehabilitate their premises, and many homes and livelihoods are never rebuilt. *UNRWA/Mohamed Hinnawi*

protesting the incident has raised concerns of heightened human rights abuses by the Palestinian Authority. The Israeli authorities maintained physical, administrative and laws or military orders which can in effect limit humanitarian programming. Despite current financial constraints, UNRWA has continued providing basic services at scale for Palestinian refugees both in Gaza and the West Bank including East Jerusalem from its own Programme Budget which is supported by voluntary contributions.

Projected situation in 2022 and beyond

Notwithstanding the ceasefire in May, there were no political advances or major improvements on the ground in 2021. The drivers of the humanitarian crisis in Gaza remain. In the absence of a political process, improvements are not expected in 2022, increasing the risk of additional escalations.

In the West Bank, including East Jerusalem, levels of Palestinian casualties, settler violence and demolitions have increased. In East Jerusalem, nearly 1,000 Palestinians also face the threat of forced eviction by the Israeli authorities, largely due to court cases initiated by settler organisations. Together with the financial uncertainty of both UNRWA and the Palestinian Authority, these factors could lead to further destabilization, potentially expanding to Gaza, as was the case in 2021.

The key drivers of the humanitarian crisis combined with COVID-19, have deepened the vulnerability of Palestinians and in turn have increased the demand for humanitarian assistance across the oPt, a trend likely to continue in 2022. Overall, 2.1 million Palestinians, 1.3 million in Gaza and 750,000 in West Bank, will need assistance in 2022. Some 63 per cent of all Gaza

residents, and 23 per cent of those in the West Bank require humanitarian assistance. Needs related to living standards contribute to 64 per cent of the PIN, followed by those related to physical and psychological well-being (19 per cent) and coping mechanisms (17 per cent). A deterioration in livelihoods conditions is spurring an increase in cash and voucher assistance.

Throughout the oPt, the most vulnerable people are those living below the poverty line (1.4 million - World Bank 2020. Estimate for 2021 following May escalation project poverty increase in Gaza from 57.2 to 59.4 per cent): refugees, female-headed households, small-scale farmers, people with disabilities and those who were displaced as a result of their homes being entirely demolished or damaged due to the May 2021 escalation.

Response priorities in 2022

In 2021, humanitarian partners aimed to reach 1.8 million Palestinians with assistance through the Humanitarian Response Plan (HRP). As of August, partners had reached 1.15 million people, i.e. 64 per cent of people targeted are estimated to have received humanitarian assistance.

Key achievements included: legal aid services enabled nearly 80 per cent of targeted households facing demolition and eviction orders to delay the implementation of the order; more than 30,000 IDPs received emergency shelter support during and after the escalation of hostilities; 277,988 students (138,230 girls) benefited from emergency educational supplies; some 27,000 patients received front-line emergency and trauma hospital care, exceeding the target of 23,000 patients; 98 per cent of those targeted for food and cash assistance were reached and access to WASH services improved for more than 300,000 people.

Evolution of needs and requirements (2016–2022)

HRP	People in need	People targeted	Requirements (US\$)	Funding coverage
2022	2.1 M	1.6 M	510.0 M	
2021	2.4 M	1.8 M	417.6 M	71%
2020	2.4 M	1.5 M	348.0 M	71%
2019	2.5 M	1.4 M	350.6 M	79%
2018	2.5 M	1.9 M	539.7 M	44%
2017	2.0 M	1.6 M	551.9 M	47%
2016	2.3 M	1.6 M	570.7 M	50%

Table: Global Humanitarian Overview 2022 · Source: Financial Tracking Service

The 2022 plan is based on the assumption that the delivery of UNRWA services and assistance under its Programme Budget will continue across the oPt. Any reduction in this assistance would significantly impact all assumptions of humanitarian needs in Gaza and West Bank, including East Jerusalem upon which the HRP is based.



Gaza Strip, occupied Palestinian territory. A boy looks at the camera in one of the 12 family centres located throughout the Gaza Strip. Since 2009, humanitarian organizations have offered integrated psychosocial support and child-protection services to the boys and girls most affected by mental and psychosocial distress in the Gaza Strip, including children impacted by COVID-19. The protection services and life-skills education include safe and interactive activities that are culturally and age-appropriate to help children and their families recover from stress and return to everyday life.
UNICEF/Anas El Baba

In 2022, an estimated 2.1 million Palestinians across the oPt will require humanitarian assistance; 64 per cent of whom live in Gaza. The refined targeting methodology used for 2022 has slightly reduced the PiN compared to 2021, but the severity of vulnerabilities to be addressed have significantly increased due to the deterioration of the socio-economic situation on the ground impacted by COVID-19 and further exacerbated by the escalation of hostilities and unrest across the oPt in May 2021.

Of the total number of people in need, humanitarian partners will aim to assist the most vulnerable (1.6 million people), with a financial requirement of US\$510 million. People's needs will be addressed through multisector efforts - to protect the rights of Palestinians living under occupation, provide access to essential services for the most vulnerable, and support their ability to cope with the effects of the crisis while more sustainable solutions are sought through a nexus approach and the development of the first Sustainable Development Cooperative Framework. The 2022 HRP will maintain the centrality of protection in delivering humanitarian response.



Syrian Arab Republic HRP

PEOPLE IN NEED

14 million

PEOPLE TARGETED

12 million

REQUIREMENTS (US\$)

4.2 billion

Total population

21.7 million

Income level

Low income

INFORM Severity Index

5.0 / Very High

Consecutive appeals

2012 – 2022

People reached

6.7 million (2021)

A decade into the crisis, factors driving humanitarian needs among Syria’s population have multiplied. The March 2020 Idleb ceasefire agreement led to a reduction in hostilities and large-scale displacement compared to the peak of the crisis.

However, during the second half of 2021 hostilities have re-intensified along front lines in northern and southern Syria, triggering new displacements and destruction as well as continued violations of IHL and IHRL. At the same time, the long-standing needs of an estimated 6.9 million IDPs remain staggering, particularly for the over two million people in 1,760 informal settlements and planned camps, often hosted in inadequate shelters and limited access to basic services. Further, the needs of overstretched host communities and those who have returned to their – often destroyed – places of origin continue to face inadequate living standards.

Throughout 2021, the macroeconomic context has continued to deteriorate sharply. The combined effects of currency depreciation, soaring prices, reduced fiscal spending, widespread job loss and unilateral coercive measures have plunged additional segments of the population into humanitarian need, notably in areas historically less affected by hostilities and displacement. People’s ability to meet basic needs and access basic services has decreased further. Assessment data from August 2021, for example, indicates that the income gap has intensified across the country, with average household expenditure now exceeding available income by 50 per cent compared to 20 per cent in August 2020. As a result, families have taken on more debt and they increasingly resort to harmful coping mechanisms. These include child labour, child marriage and the sale of productive household assets. Food insecurity has grown; Syria ranked among the 10 most food insecure countries globally by mid-2021, with an estimated 12.8 million people considered food insecure.

Basic service delivery across Syria continues to be vastly inadequate and hampered by damaged infrastructure, lack of critical supplies and, increasingly, financial unaffordability. One of the most pressing concerns is the scarcity of technical staff required to deliver and maintain basic services, due to displacement, death and/or impairment, and the lack of technical training. By way of example, in almost half of all sub-districts in Syria, the number of health-care workers (doctors, nurses and midwives) is less than 11 per 10,000 people. This is catastrophically below



Northwest Syria. This boy and his family have been displaced three times due to constant shelling. Each time they moved his parents had to register him at a new school. His mother said: “He used to be an excellent student back in our village, but now he’s behind. He should be in sixth grade, but he has had to change schools so many times.” Despite the challenge of living through a decade of war, he remains optimistic: “My friends and I study together for our exams. My biggest hope in life is to become a doctor – or a soccer player.” *IRC/Abdullah Hammam*

emergency standards of at least 22 per 10,000 people. With just 2 per cent of the population fully vaccinated against COVID-19 and the country recording its highest weekly case numbers as of late October, the pandemic continues to overburden the fragile health system.

In 2021, climatic shocks affecting natural resources, particularly water, have intensified and exacerbated humanitarian impact. In north and north-east Syria in particular, insufficient rainfall combined with historically low water levels in the Euphrates River have not only reduced access to water for drinking and domestic use for over 5 million people, but also triggered substantial harvest and income losses, an increase in waterborne diseases and additional protection risks. In the medium to long term, these developments are expected to worsen high food insecurity and malnutrition rates in the region.

Humanitarian access in Syria continues to be challenged by geopolitical dynamics, periodic border-crossing closures and COVID-19 measures. The number of border-crossing points authorized by the UN Security Council for UN-delivered assistance and supplies remains limited to one (Bab al Hawa at the Turkish border), which is a reduction from four in 2019.

Projected situation in 2022 and beyond

Downward trends are expected across all major need drivers in 2022. New or recurrent displacements across the country are likely to remain similar to those recorded in 2021 – an estimated 800,000 IDPs and 250,000 IDP return movements are expected in 2022. However, needs for humanitarian assistance to populations residing along or moving away

from front lines are expected to increase. In a context where 90 per cent of the population is estimated to live below the poverty line, the socioeconomic deterioration is expected to trigger further increases in extreme poverty, and to aggravate already alarming food insecurity and malnutrition rates and protection concerns.

Basic service delivery will remain inadequate, albeit with significant geographic variations, and hampered by the lack of infrastructure, investment, human resources and, increasingly an unreliable electricity supply. If political agreements sustaining the functionality of critical water stations serving these areas are not found, regular access to safe water through public networks will remain a particular challenge for over 500,000 people in north-eastern Al-Hasakeh Governorate, as well as for an estimated 184,000 people in Al-Bab subdistrict in Aleppo Governorate. With COVID-19 vaccination coverage expected to grow slowly throughout 2022 and continued poor adherence to preventive measures, the population – particularly health-care professionals and front-line workers – will remain at heightened risk of contracting COVID-19, and health services will continue to be disrupted.

Response priorities in 2022

The humanitarian response in Syria – reaching 6.7 million people on average each month in 2021 – is estimated to have prevented a more pronounced deterioration in humanitarian indicators and served as a vital lifeline for millions of people. However, the response currently remains insufficient to stem or revert the downward trends described here. This is partly due to historic underfunding of the 2021 HRP – funded at only 44 per cent of total requirements as of 20th November 2021 – which is expected to have contributed to a slight decrease in the number of people reached each month (6.7 million in the first half of 2021 compared to 7.4 million in the same period in 2020).

Evolution of needs and requirements (2016–2022)

HRP	People in need	People targeted	Requirements (US\$)	Funding coverage
2022	14.0 M	12.0 M	4.2 B	
2021	13.4 M	11.1 M	4.2 B	44%
2020	11.0 M	9.0 M	3.3 B	58%
2019	11.7 M	11.7 M	3.3 B	64%
2018	13.0 M	11.2 M	3.4 B	63%
2017	13.5 M	12.8 M	3.4 B	57%
2016	13.5 M	13.5 M	3.2 B	55%

The 2022 figures are estimates and pending the launch of the HRP. The UN estimated the population figures to inform humanitarian planning in the absence of recent census data, using the datasets and triangulation methodologies which were available to the UN at the time. The Government of Syria has expressed its reservations over the data sources and assessment methodologies which are used to inform the HNOs and HRPs for Syria.

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service



Aleppo, Syria. A visually impaired couple and their son wait at a food distribution point in Aleppo. He was born blind, while she has 1 per cent vision (their son is not visually impaired). The couple have lived in Aleppo throughout the conflict and receive WFP support for their basic needs. She says: "I love nature and sounds of birds. I can distinguish colours to a very small extent, so I love greenery and spacious areas, where you can smell grass. When mortars were falling, the sounds were terrifying. Those seconds of silence afterwards were the deadliest feeling I have ever experienced. Then we would start hearing screams of passers-by who might have been injured. Now, while walking together, we smell dust a lot. We feel rocks under our feet, so we know there is a destroyed building nearby. We feel shattered glass on the ground when we step on it, and it breaks our hearts." *WFP/Jessica Lawson*

At the same time, needs related to basic service delivery, livelihoods and income generation have grown consistently across all population groups, as has the need for durable solutions for IDPs and returnees specifically. These needs require a more comprehensive, longer-term response, including through non-humanitarian instruments.

Adjusting to this reality, humanitarian planning for Syria will shift towards a two-year HRP, covering 2022 and 2023. While the three HRP Strategic Objectives (SOs) will remain the same (save lives, protect people, and improve access to livelihoods and basic services), a two-year humanitarian planning horizon for Syria is expected to enable a more strategic expansion of resilience and early recovery-oriented programming under SO 3 in particular, and strengthen advocacy for multi-year funding/commitments. In 2022, out of an estimated 14 million¹ people in Syria who require humanitarian assistance, the UN and humanitarian partners aim to assist an estimated 12 million people,² at an approximate cost of US\$4.2 billion.³

References

¹ Estimate – the 2022 HNO process, including intersector PiN estimation, was ongoing at the time of publication.

² Estimate – the 2022-2023 HRP process, including intersector target estimation, was ongoing at the time of publication.

³ Estimate – the 2022-2023 HRP process, including cost estimation, was ongoing at the time of publication. The figure presents estimated costs for the first year (2022) of a multi-year Syria HRP for 2022 and 2023.



Yemen HRP

PEOPLE IN NEED 20.7 million	PEOPLE TARGETED 16 million	REQUIREMENTS (US\$) 3.85 billion
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Total population 30.5 million	Income level Low income	INFORM Severity Index 4.9 / Very High	Consecutive appeals 2008 – 2022	People reached 10.9 million (2021)
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The crisis in Yemen remains extremely severe, with over 20.7 million people in need of humanitarian assistance. The crisis is fuelled by conflict and is further exacerbated by the economy’s decline, natural hazards such as floods or drought, and epidemics, notably COVID-19.

Though Yemen had pre-existing vulnerabilities, the conflict’s increasingly protracted nature has resulted in economic collapse, increased poverty and the breakdown of national social-protection systems and community safety nets. It has exacerbated long-standing vulnerabilities and severely frayed Yemen’s social fabric. Loss of revenues, depreciation of the Yemeni rial and import restrictions resulted in loss of income and rising prices for most basic household items, including food. Millions of people are now in a situation where they can no longer meet their basic needs, with potential serious detrimental impacts on groups in society with limited social capital and protection mechanisms. This increases risks of adopting harmful coping strategies, such as debt, selling of assets, early/forced marriages, school dropout and child labour, with grave long-term impacts especially on women, children, older persons, persons with disabilities and marginalized communities.

In 2021, the conflict escalated in several areas along fluid lines of control, with continued breaches of international humanitarian law and consequent impact on the protection of civilians. As of October, 48 districts across Yemen are crossed by active front lines, an increase from 45 in 2020 and 35 at the end of 2019. Escalated hostilities and shifting front lines continue to challenge sustained humanitarian programming and resulted in aggravated humanitarian needs and increasing levels of new displacement. As of the end of September 2021, there were an estimated 1,498 civilian casualties in Yemen, including 401 children and 228 women, and at least 16 attacks affecting schools and hospitals. Large-scale destruction of civilian homes and infrastructure has created shelter needs, including for internally displaced persons (IDPs) who may consider returning to their place of origin.

The conflict has displaced around 4 million civilians, including at least 158,000 in 2021. Some of the highest levels of vulnerability are concentrated among the estimated 1.3 million IDPs living in some 2,000 IDP sites, after being subjected to multiple displacements.



Dar Saad, Yemen. A 13-year-old girl in the Amin Bin Yassar informal settlement in Dar Saad. She said: "I live with my father and my seven brothers and sisters. My mother passed away a year ago. That was the most difficult thing for us. Since then, our life has changed. The eight of us live in a tent. We do not feel safe in the tent because it is exposed, and anyone can steal from us. What makes us happy is having food. I do not study but I like to learn. I cannot study now because I am the one who plays the role of my mother in the house. I want to be a doctor when I grow up." *OCHA/Giles Clarke*

In most sites few services are available, leading to precarious living conditions and continuous threats of eviction. An estimated 141,000 asylum seekers and refugees are at extreme risk, with shrinking asylum and protection space, and they remain highly reliant on humanitarian aid.

In addition, flooding devastated southern communities and fuelled the spread of diseases such as cholera, dengue, malaria and diphtheria. More than 34,000 families, most of them IDPs who fled conflict areas, lost their shelters, incomes and livelihoods. Floods are becoming annual events that will require contingency planning and response. Current projections show that locusts pose an unprecedented threat to agriculture-based livelihoods and food security.

The operating environment in Yemen has remained extremely challenging in the first nine months of 2021. During this period, 870 cases involving bureaucratic impediments were reported. Despite such impediments, there has been significant progress in authorities' approval of projects and assessments, which enhances the timely delivery of principled humanitarian aid.

Despite continued efforts to mitigate the risk of famine, food insecurity continues to remain a key challenge. It is most severe in areas of active conflict and surrounding areas where humanitarian access is limited by the security situation. The Integrated Phase Classification (IPC) analysis of acute food insecurity (conducted in 2020, projected Jan - June 2021) projects that 16.2 million people in Yemen face high acute food insecurity (IPC Phase 3 and above) in 2021, driven by conflict, environmental shocks, economic collapse, and weak social, economic and governance systems. Even with the current levels of humanitarian assistance, 40 per cent or more of the population have inadequate food consumption. Humanitarian partners are currently collecting data for a new IPC analysis, which is expected to be finalized by early 2022.



Taiz City, Yemen. An injured man in Al Thawra hospital, Taiz City. Rebel fighters have targeted the hospital many times since 2016; it is located just 1 km from the front line that ran through the city. *OCHA/Giles Clarke*

The COVID-19 pandemic continues to place additional pressure on Yemen's already fragile health system, where only 50 per cent of health facilities are functional. By mid-October 2021, nearly 9,635 cases of COVID-19 were recorded in Yemen, with above 1,831 associated deaths and 6,143 recoveries. These numbers represent only a small fraction of total infections, given limitations in testing and other surveillance mechanisms. Some 470,000 people are at least partially vaccinated against COVID-19 in Yemen.

Projected situation in 2022 and beyond

In 2022, the situation is expected to deteriorate further, and the severity of needs is expected to increase unless there is conflict de-escalation, improvements in the economy, revenue collection to sustain the public sector, and available humanitarian funding.

With the grave humanitarian situation combined with economic collapse, sustained scale-up of humanitarian assistance is needed now and in 2022. Aid agencies' famine-prevention efforts were successful, but lack of sustained support now and in 2022 could aggravate the situation further by losing the progress achieved. Sectors such as health, water, sanitation and hygiene (WASH), education, protection and other critical sectors remain severely underfunded. Fuel shortages could impact the provision of water and the capacity to run hospitals. Proportionate to the needs, funds for food insecurity remain critical in mitigating the effects of seven years of conflict, as the underlying drivers of hunger continue to deteriorate. In parallel, the international community must seize immediate opportunities to stem Yemen's economic collapse. Robust economic support is feasible in Yemen and could quickly and substantially reduce the scale of humanitarian needs.

Response priorities in 2022

During 2022, more than 170 partners across Yemen plan to assist 16 million people.¹ Until the end of August 2021, an average of 10.9 million people were reached with humanitarian assistance in Yemen per month. On a monthly average, 10.2 million most vulnerable food insecure people are receiving life-saving emergency food assistance. However, most of these beneficiaries have been receiving assistance every two months instead of monthly. Over 3.48 million people received WASH services; 530,000 people were supported by Health Cluster partners; 773,750 received nutrition services; more than 275,000 people were reached through different protection services and engagement, despite access challenges and capacity gaps in specialized services; almost 600,000 people were supported by humanitarian actors in some 440 IDP sites through services and maintenance work; and 1.1 million people, including IDPs, returnees and vulnerable host-community members, received shelter and NFI support.

Evolution of needs and requirements (2016–2022)

HRP	People in need	People targeted	Requirements (US\$)	Funding coverage
2022	20.7 M	16.0 M	3.9 B	
2021	20.7 M	16.0 M	3.9 B	57%
2020	24.0 M	15.6 M	3.2 B	59%
2019	24.1 M	24.1 M	4.2 B	87%
2018	22.2 M	13.1 M	3.6 B	81%
2017	18.8 M	10.3 M	3.1 B	75%
2016	21.2 M	13.6 M	2.3 B	63%

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service

The humanitarian response in 2022 will continue to focus on preventing famine and disease outbreak; reducing mortality and morbidity; malnutrition; restoring livelihoods; improving the housing situation; enhancing access to basic and public services; and providing specialized protection services and assisting civilians in need.

With the protracted displacement, it is equally critical to analyse, strategize and support progress towards durable solutions to displacement, where feasible. Humanitarian partners will also escalate global advocacy for robust economic support to reduce humanitarian needs – including the risk of famine – more sustainably.

References

¹ Figures for people in need, people targeted and requirements are pending the finalization of the 2022 HNO and HRP.



Part two: Inter-Agency Coordinated Appeals

Latin America and the Caribbean Regional Overview

Latin America and the Caribbean is the world's most economically unequal region and the second-most disaster-prone region. Recovery from the pandemic has been challenging. Despite comprising only 8.4 per cent of the global population, Latin America and the Caribbean has been the world's hardest-hit region, with 18.5 per cent of all global COVID-19 cases and 30.3 per cent of all deaths.¹

The pandemic's effects have had a significant impact on the region's poverty, displacement, food insecurity and violence. As the response in 2021 pivoted to longer-term operations, it is highly likely that the humanitarian community will be operating in a post-pandemic Latin America and the Caribbean for years to come. Challenges to economic growth, unequal access to or acceptance of COVID-19 vaccines and the threat of severe climate-related risks remain ever present. Diseases, such as cholera. The socioeconomic impacts and containment measures associated with the pandemic have increased pre-existing vulnerabilities and stretched already weakened health-care systems. Vaccination rates remain low and vaccines difficult to access.

The region is still experiencing the impacts of the higher number of sudden-onset disasters and the record-setting Atlantic hurricane season in 2020. Targeted multisectoral response has been mounted to help address the growth in needs caused by the various impacts of 2020.

Saada, Yemen. Students at the Aal Okab School sit in a former classroom, which was destroyed during the conflict. Students now attend lesson in UNICEF tents nearby. OCHA/Giles Clarke

The number of people in need of humanitarian assistance in Latin American and the Caribbean nearly tripled over the last three years

Six HRPs are in place this year for the region - five years ago, only Haiti had an HRP. In 2022, a total of 13.4 million people will be targeted for humanitarian assistance in the region.

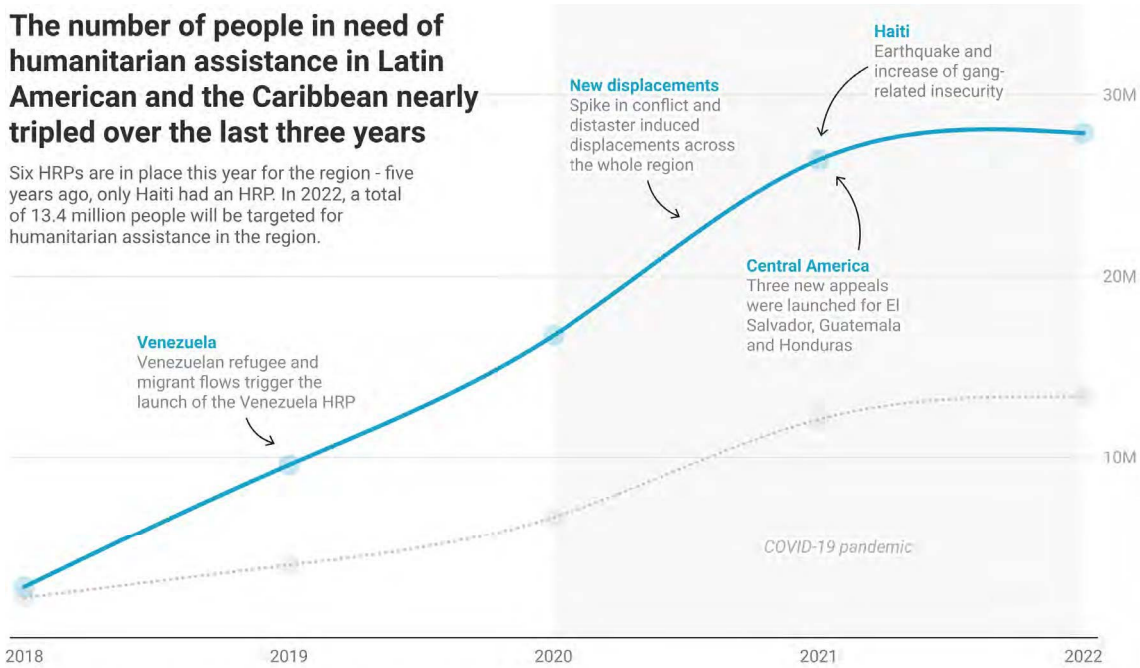


Chart: Global Humanitarian Overview 2022 • Source: Humanitarian Insight

El Salvador, Guatemala and Honduras alone saw their populations in need grow by 60 per cent in 2021. This unprecedented increase prompted the launch of Humanitarian Response Plans in these countries, totalling \$588 million in requirements for 2021-2022. However, the plans have collectively received only 11 per cent funding so far.

The ongoing presence of La Niña is contributing to disruptions in global climate patterns and to South America’s second warmest year on record. The Gran Chaco lowlands area, which is roughly twice the size of California and spans parts of Argentina, Bolivia and Paraguay, saw one of its worst droughts in 60 years.

Inter-Agency Coordinated Appeals: Latin America and the Caribbean (2022)

Country	Type	People in need	People targeted	Requirements (US\$)	Requirements (2017-2022)
Colombia	HRP	7.7 M	2.0 M	200.0 M	
El Salvador	HRP	1.7 M	912.2 K	114.3 M	
Guatemala	HRP	3.8 M	1.7 M	153.7 M	
Haiti	HRP	4.9 M	2.5 M	373.5 M	
Honduras	HRP	2.8 M	1.8 M	143.1 M	
Venezuela	HRP	7.0 M	4.5 M	708.1 M	

Figures for Colombia and Venezuela are estimates and pending launch of their HRPs. The appeals for El Salvador, Guatemala and Honduras are part of multi-year plans covering 2021 and 2022.

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service



Chuxolop, Guatemala. A man holds up one of hundreds of fish that have died in Chuxolop lagoon, in Guatemala. Severe drought is causing the lagoon to dry up, and the receding water doesn't have enough oxygen to keep the fish alive. *WFP/Miguel Vargas*

This has aggravated seasonal wildfires and disappearing water supply sources, and it is affecting agricultural production and drying up waterways vital to services, commerce and food security. An estimated 2 million people exposed to severe drought in this area may require humanitarian assistance, leading to a scale-up of monitoring and operational readiness.

These recurring and increasingly drastic climate shocks come against a backdrop of challenging conditions. According to the UN Economic Commission for Latin America and the Caribbean, the region's 5.9 per cent growth in GDP and 6.7 per cent growth in employment in 2021 will not be enough to offset the world-leading declines.² Many countries in the region are managing to get their economies slowly back on track thanks to COVID-19 vaccination roll-outs - reaching more than 50 per cent of their populations. Despite this, less than half of the region's population is fully vaccinated, with countries facing obstacles to securing vaccine supplies, logistics challenges and, in some cases, vaccine hesitancy.

Unequal vaccine access is also hampering vaccination efforts. This particularly affects marginalized groups such as rural communities and indigenous people, who already experience long-standing disadvantages in receiving adequate health coverage. The few countries that do provide specific vaccination data on indigenous people cite low numbers. Guatemala reports 134,000 fully vaccinated indigenous people, just 2 per cent of the country's indigenous population. In Brazil, about one in every three indigenous people was vaccinated as of August 2021.

There has been a 9 per cent increase in moderate-to-severe food insecurity, which now affects 267 million people across the region – the world's sharpest increase from 2019 to 2020. State response capacities are becoming increasingly strained due to weakened institutions and significant tax revenue losses, while chronic violence is returning to pre-pandemic levels in certain countries.



Tapachula, Mexico. A family from Central America waits at a shelter in Tapachula, southern Mexico. UNHCR/Gabo Morales

Gender-based violence risks are increasing for women, initially caused by prolonged confinements with their aggressors during the 2020 COVID-19 lockdowns. Women continue to be subjected to unequal labour opportunities during the recovery in 2021, which would otherwise grant them greater autonomy. Latin America and the Caribbean is one of the world's most dangerous regions for women. The regional rate of 4.6 female homicides per every 100,000 women is double that of the world rate of 2.3. Risks for women are even higher in Central America, which records 5.8 as the subregional rate.

Children are also experiencing hardship. The region has had the world's longest uninterrupted school closures due to COVID-19-mitigation measures. These closures have left 86 million children out of classrooms and caused the loss of 153 in-person schooldays. Only 22 per cent of the region's countries have fully opened their schools. This is the lowest number for any region in the world not currently on an academic break. In 2021, internal displacement flows grew to historic levels. The Internal Displacement Monitoring Centre placed Brazil, Cuba, Guatemala and Honduras among the 25 countries in the world with the highest number of new displacements due to disaster or conflict in 2020. In Honduras, 937,000 people were displaced due to disasters, almost a tenth of its population.

According to the United States border authorities, the Mexico-US border saw the arrival of a record 1.7 million migrants from October 2020 to September 2021. This is 20 per cent more than the number of arrivals in 2020 and 2019 combined. Children and adolescents accounted for more than 149,000 of these migrants. Throughout 2021, the number of underage migrants has grown each month. An increasing number of migrants in countries across the region originate from Haiti, triggering calls for a region-wide and coordinated humanitarian response. Given its position as a country of transit, joining South America and Central America, Panama expects 150,000 migrants, mostly from Haiti, to cross the treacherous Darien jungle in 2021. This is almost equivalent to the number of migrants who previously entered Panama between 2009 and 2020.



Gonaive, Haiti. This baby's mother says few buyers brave the insecurity and roadblocks to reach the Plateau market in Gonaives, a primary marketplace for much of northern Haiti, where she sells her produce. "We do not live well, we do not eat well, and we cannot even move around normally because of the chaos in the country," she said. She grows fruit and vegetables on her small plot of land outside Gonaives, the largest city in Haiti's Artibonite Department. "We used to sell what we harvested in our fields, but now we can't." WFP/Alexis Masciarelli

This situation, together with the ongoing plight of millions of Venezuelan refugees and migrants in host countries across the region, may escalate further. An increasingly contentious socio-political landscape in Nicaragua and deteriorating conditions have already caused thousands of people to flee to neighbouring countries since April 2018.

The majority of the region has not seen widespread conflict in decades and has a comparatively higher degree of political stability. However, countries including Antigua and Barbuda, Argentina, Barbados, Bolivia, Brazil, Cuba, Ecuador, El Salvador, Guatemala, Panama, Peru, and St. Vincent and the Grenadines saw protests or violence in 2021. These were related either to gaps in pandemic response, slow vaccination rates, insufficient measures to offset the pandemic's socioeconomic impacts, or opposition to political or economic reform.

2022 will be critical in responding to the region's growing needs, as its various crises continue to play out during an arduous recovery from a global pandemic. Economic rebounds are expected to slow down in 2022 in the context of deepening structural issues across the region and downward pre-pandemic economic and employment rates. Across the region, more than 287 million people (46 per cent of the population) are now in poverty or extreme poverty. Financing in the region must scale up to tackle continued structural problems and limits to Government assistance, as well as growing climate risks, food insecurity and displacement. Action is needed from middle-income countries to scale up, as their Governments face mounting needs among people living in vulnerable conditions facing recurrent shocks and natural hazards.

References

¹ As of October 2021

¹ World declines of 6.8 per cent GDP and 9.0 per cent employment in 2020.



Colombia HRP

PEOPLE IN NEED

7.7 million

PEOPLE TARGETED

2 million

REQUIREMENTS (US\$)

200 million

Total population

51.3 million

Income level

Upper middle

INFORM Severity Index

4.5 / Very High

Consecutive appeals

2020 – 2022

People reached

1.1 million (2021)

Over the past decade, Colombia has witnessed significant development advances. The 2016 Final Agreement to End the Conflict, signed by the Colombian Government and the former FARC guerilla, brought a period of relief not seen in decades.

Despite this progress, surging socioeconomic needs in peripheral and urban areas due to COVID-19; the expansion and strengthening of organized non-State armed groups (NSAGs) in parts of the country; an increased impact of natural disasters; social unrest; and the integration of 1.8 million Venezuelan refugees and migrants have been the key drivers of an increase in humanitarian needs in Colombia.

In 2021, organized NSAGs have expanded rapidly in peripheral areas of the country, creating an increase in hostilities and violence affecting civilian populations, particularly ethnic minorities. Increased use of explosive ordnance, including improvised landmines, has been reported, particularly in rural areas and regions bordering neighbouring countries, where illicit crops and other illegal economies are located. In 2021, indigenous communities have been gravely affected by explosive ordnance, recording a 20 per cent increase in indigenous casualties compared with 2020.¹ The increase in recruitment of minors has also been reported.² 2021 witnessed the highest number of people affected by mass displacements and confinement in the last decade and a continuous trend in confinement affecting more than 113,000 people this year.³

The frequency and severity of meteorological events due to climate change are also driving humanitarian needs and exacerbating the vulnerability of communities (Colombians and refugees and migrants from Venezuela). Extreme weather events, such as Hurricanes Eta and Iota in 2020, and the development of La Niña in the last quarter of 2021, have had significant consequences on the lives and livelihoods of affected communities, particularly due to the impact of severe floods and torrential rains, mainly in coastal areas. Access to health care, including emergency health care, is also a major concern and poses increased risks to lives. So far in 2021, disasters have affected approximately 600,000 people.



Unión Bakiasa, Rio Opogadó, Chocó, Colombia. This photograph was taken during a humanitarian mission by Consorcio MIRE and Alianza por la Solidaridad (APS). During the mission, APS built and rehabilitated several community water houses, distributed several water purification filters to the community, and conducted personal hygiene workshops. The population is under constant threat from illegal armed groups. Armed confrontations, violence and antipersonnel mines force people to move or to live in confinement, without access to basic services and with a high risk of protection and human rights violations. *MIRE/APS/Gisselle Sartori*

Record numbers of transcontinental population movements in the Americas were witnessed in 2021. These flows that comprise a large number of persons from different countries (mainly Haitian, Cuban and Venezuelan nationals, as well as other nationalities crossing Colombian territory end route to Central and North American countries have generated significant protection risks, especially as they traverse across the dangerous Darién Gap on foot. However, despite the official closure of the Colombia-Venezuela border for most of the pandemic, population flows of Venezuelan refugees and migrants into Colombia continued, mostly through irregular border crossings. Significant advances were made in granting Temporary Protection Status to Venezuelans, which will facilitate their access to basic services and job opportunities for socioeconomic integration.

The COVID-19 pandemic has increased the demands on the Government and affected the most vulnerable people in Colombia, leaving significant socioeconomic impact and compounding the existing humanitarian challenges.⁴ Due to the pandemic and the reconfiguration of emergencies, there is significant strain on health personnel, surveillance systems, information, and response efforts. There is an urgent need to continue supporting health personnel, communities, institutions and health authorities, particularly in geographically dispersed areas facing difficulties accessing health services. Rising levels of food insecurity⁵ and malnutrition and decreased livelihood opportunities, among other affectations, have specially affected to 3.8 million women and 2.4 million children, and increased school dropout rates due to a lack of access to virtual education have exposed children to high risks of recruitment by NSAGs



La Guajira, Colombia. Two women, cook over a wood fire. For decades, life in the desert peninsula of La Guajira, home to the Wayúu indigenous community, was marred by conflict and paramilitary violence. Driven by fear, people would cross the border into Venezuela, where many sought – and found – safety and a better life. However, when things deteriorated in her adopted homeland, she was among the hundreds of thousands of Colombians who decided to return. Marginalized, indigenous people are often disproportionately affected by poverty. According to the World Bank, they account for just 5 per cent of the world’s population but comprise 15 per cent of the extremely poor, and a third of the world’s rural poor. *WFP/Michael Bloem*

and increased cases of teenage pregnancies. The Pacific region, which includes Cauca, Valle del Cauca, Chocó and Nariño Departments, is particularly impacted by these dynamics. These humanitarian challenges have increased the number of people in need - from 6.7 million people in 2020 to 7.7 million people in 2021. These numbers exclude Venezuelan refugees and migrants in Colombia, which are analysed in the Refugee and Migrant Response Plan 2022.

Projected situation in 2022 and beyond

Humanitarian needs are expected to continue throughout 2022, underpinned by four drivers: internal armed violence, disasters, migratory movements (transcontinental mixed population movements, continued movements of Venezuelan refugees and migrants, and Colombian and binational returnees), and the economic and socioeconomic effects of the COVID-19 pandemic. No major changes to Government policies are expected in the coming year due to forthcoming elections.

In this challenging year ahead, vulnerable communities will remain a priority for humanitarian partners. These communities include in particular those in rural and isolated settings and in hard-to-reach areas under the influence and control of NSAGs; communities near entry points for Venezuelan refugees and migrants; and areas where humanitarian access constraints persist for both State entities and humanitarian actors. This is due to the limited coping capacity of these vulnerable communities as well as the existing intersectoral needs of Afro-Colombian and indigenous communities, particularly women, boys and girls. The proposed response will be coordinated and underpinned by intersectoral complementarity.

Violence and disasters exacerbated by the impact of climate change are likely to intensify in 2022. The impact of humanitarian emergencies will mostly affect the lives of communities living in high-risk areas, underpinned by in-depth analysis outlined in the HNO 2022. This will significantly impact protection, food security, livelihoods opportunities and coping mechanisms of affected communities, including indigenous peoples and Afro-Colombian communities. In turn, the rapid increase of transcontinental refugees and migrants transiting through Colombia will generate serious protection concerns for these vulnerable communities. As a result, the estimated PIN of humanitarian assistance in 2022 is 7.7 million people, including internally displaced persons, confined people, disaster-affected people, populations under NSAG control, as well as women, children, ethnic groups, persons with disabilities, transcontinental migrants and host communities.

Considering that these drivers are related to historical and structural situations caused by the actions of NSAGs, climate change and migratory flows to North American countries, it is estimated that humanitarian needs will continue beyond 2022.

Evolution of needs and requirements (2020–2022)

HRP	People in need	People targeted	Requirements (US\$)	Funding coverage
2022	7.7 M	2.0 M	200.0 M	
2021	6.7 M	1.4 M	174.0 M	30%
2020	5.1 M	1.1 M	209.7 M	32%

The 2022 figures are estimates and pending the launch of the HRP.

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service

Response priorities in 2022

In 2022, the humanitarian response in Colombia will continue to focus on communities living in rural areas, as well as in hard-to-reach areas where hostilities persist, and areas with limited coping capacities, high impacts from disasters, recurrent transcontinental migratory flows, and dynamics of multiple causes for intersectoral impact. Humanitarian actors will develop a strategy that is dedicated to the Pacific Coast, where major humanitarian impacts are expected to continue, and with greater emphasis on supporting Colombia's Afro-Colombian and indigenous peoples, as they are disproportionately affected by violence. Humanitarian actors will aim to provide a more integrated multisectoral response, which protects and saves lives through humanitarian assistance and protection, and contributes to lasting solutions, with particular consideration to protection, age and gender needs. Humanitarian actors will further engage in prevention and disaster preparedness measures. Enhancing rapid response mechanisms in the most affected territories will also be a priority. Humanitarian actors will continue to work closely with peace and development actors to maximize resources and attempt to facilitate lasting solutions for those most in need.



Achievements and innovations

Mobility restrictions of humanitarian personnel throughout 2020 and part of 2021 due to the COVID-19 pandemic had a profound impact on remote civilian populations. This was due to deteriorating insecurity caused by the territorial expansion of armed groups and the socioeconomic impact of COVID-19. The overall message of communities in peripheral rural areas of Colombia was that they felt abandoned. Many reported that the presence of humanitarian partners in their areas served as mitigating factor for abuses and the impact of the control exerted by armed groups.

As a result, the Humanitarian Country Team developed a protection-by-presence strategy aimed at ensuring a greater monitoring and presence by the international community - with the accompaniment of national entities, such as the Ombudsman Office. Combined with increased inter-agency missions to critical areas, as well as the implementation of the Multi-Sector Needs Assessment, this has helped to obtain key information on the daily struggles of many of these communities and to inform response strategies to attempt to mitigate their effects.

References

¹ UNMAS, [Boletín Mensual Colombia August 2021](#).

² OCHA data collected through humanitarian partners and clusters.

³ OCHA data collected through humanitarian partners and reviewed by Triangulation Table Information cut-off September 2021.

⁴ COVID-19 generated a decline of nearly a decade in the incidence of moderate and extreme poverty. The incidence of moderate poverty at the national level reached 42.5% of the population, and extreme poverty rose to 15.1%, totalling an increase of 3.6 million people living in moderate poverty and 2.8 million in extreme poverty (Source: DANE 2021).

⁵ According to WFP, first results of COVID-19's impact on food security and nutrition evaluations (WFP, February 2021), 1.6 million Colombians were in a situation of severe food insecurity, and 22 million in moderate food insecurity. The situation for the Venezuelan population in Colombia is equally worrying: almost 340,000 people are in severe food insecurity and around 850,000 people in a situation of moderate food insecurity.



El Salvador HRP

PEOPLE IN NEED

1.7 million

PEOPLE TARGETED

0.9 million

REQUIREMENTS (US\$)

114.3 million

Total population

6.5 million

Income level

Lower middle

INFORM Severity Index

3.1 / High

People reached

48,000 (2021)

Multi-year requirements (US\$)

156 million (2021-2022)

El Salvador is among Latin America’s most densely populated countries and faces a diverse array of challenges due to high socio-economic exclusion rates, inadequate urban and infrastructure planning, qualitative and quantitative housing deficits and significant overcrowding.

Poverty and food insecurity rates are increasing as purchasing power and livelihoods decrease mainly due to the impact of COVID, further aggravating vulnerabilities and humanitarian need. Approximately 656,000 people live in extreme poverty, representing nearly 10 per cent of the country’s population. The country is also prone to recurring climate shocks such as droughts, tropical storms and seismic activity, as manifested by the compounded impact of the drought 2018-19, Tropical Storms Amanda and Cristobal, and the Nejapa landslide in 2020. The country suffers from high environmental degradation, making it prone to erosion and landslides.

Amid the COVID-19 pandemic, the loss of employment and the increase in food costs due to supply chain disruptions directly affected the nutritional status and overall health of people, especially vulnerable groups such as children under 5 years of age, pregnant women and the elderly. A combination of negative coping mechanisms along with food shortages led to an increase in the number of food-insecure people. The COVID-19 crisis continues to deepen pre-existing vulnerabilities, including gaps in equitable access to address basic needs such as safe drinking water, and inadequate nutrition and health services, including sexual and reproductive health, protection services and other response services for survivors of gender-based violence (GBV). Existing inequities in education have also deepened, including high dropout rates and lack of education resources, such as access to the Internet and quality education infrastructure.

Crime and other types of violence and insecurity (femicides, infanticides, GBV and violence against children) continue to threaten social development and economic growth. Homicide rates have dropped significantly since 2019, but in 2020 there were 19.8 homicides per 100,000 inhabitants, and a national survey reveals that 63 out of every 100 women interviewed had experienced sexual violence. The prevailing level of insecurity continues to drive high levels of forced internal and cross-border displacements. Salvadorans continue to leave the country seeking international protection, and approximately 38,200 were apprehended at the US border between January and September 2021.



Cacaopera, El Salvador. Years of recurring droughts and an erratic climate have taken their toll on the Torola River, which courses through the Morazán department, in eastern El Salvador. This woman works as a subsistence farmer and is treasurer of Women with Hope, a cooperative born of the efforts of a group of women who clubbed together to weave and sell hammocks after climate change destroyed their crops. She said: "It is a beautiful river – it used to be very large, it had fish, but now the water's gone down so much." Food insecurity in this area is around 2 per cent higher than the national 7 per cent average. *WFP/Nick Roeder*

Projected situation in 2022 and beyond

The 2021/2022 Humanitarian Needs Overview identified 1.7 million people in need of humanitarian assistance (25 per cent of the Salvadoran population). This is a staggering 164 per cent increase from the 643,000 people in need identified in 2020, before the COVID-19 pandemic and the impacts of Tropical Storms Amanda and Cristobal multiplied existing vulnerabilities. If left unaddressed, these needs will continue to grow in 2022 and beyond, with severe consequences for the most vulnerable groups.

According to projections from September 2021 to February 2022, close to 600,000 (10 per cent of the population) will experience high levels of acute food insecurity (IPC Phase 3 or above). The situation is expected to deteriorate from March 2022 onwards, when 900,000 (14 per cent of the population) will experience a high level of acute food insecurity entering the lean season for the coming months. This season is characterized by high food prices, low labour opportunities, and the likely continued impact of the COVID-19 pandemic. The presence of La Niña through early spring 2022 threatens to bring heavy rainfall, floods and landslides in parts of the country that would affect the agricultural sector.

If poverty, low access to food among households and other conditions of deprivation continue or increase, malnutrition in children and pregnant women will rise, leading to long-term consequences, significantly increasing public expenditure on health and negatively affecting national economic performance.

The number of internally displaced people and people at risk of displacement is projected to increase due to growing insecurity and violence, coupled with aggravated socioeconomic conditions. In 2020, 33,200 Salvadorans applied for asylum mainly in Mexico and United States, bringing the overall number of asylum seekers from El Salvador with pending applications to 149,265.

Response priorities in 2022

In 2022, the humanitarian community seeks to assist 912,200 of the most vulnerable people (around 54 per cent of people in need), many of whom have needs related to livelihoods, protection, health, nutrition, education, and basic water and sanitation. The 2021/2022 Humanitarian Response Plan (HRP), requiring US\$156 million, aims to protect and save lives through the provision of protection services and access to rights for people with specific needs according to age, gender, diversity and location. Resources were mobilized quickly for food security and protection within the 2021 portion of the 2021/2022 HRP. However, funding for the other eight sectors would ensure a comprehensive response to multidimensional needs.

The strategic objectives and multisectoral response approach aim to provide coordinated and targeted assistance to address critical needs in high-priority areas prone to the impact of disasters and violence. Additionally, the HRP’s actions seek to support and strengthen sustainable solutions through humanitarian-development collaboration to restore essential services and systems, and to strengthen community and institutional resilience.

Evolution of needs and requirements (2021–2022)

HRP	People in need	People targeted	Requirements (US\$)	Funding coverage
2022	1.7 M	912.2 K	114.3 M	
2021	1.7 M	912.2 K	42.2 M	50%

The appeal is part of a multi-year plan covering 2021 and 2022.

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service



Guatemala HRP

PEOPLE IN NEED

3.8 million

PEOPLE TARGETED

1.7 million

REQUIREMENTS (US\$)

153.7 million

Total population

18.2 million

Income level

Upper middle

INFORM Severity Index

3.5 / High

People reached

0.1 million (2021)

Multi-year requirements (US\$)

210 million (2021-2022)

Multiple overlapping crises continue to extract a devastating toll on the most vulnerable people in Guatemala. Approximately 8.5 million people – half of the country’s population – live in poverty, dramatically weakening people’s resilience and ability to mitigate their exposure to risk and withstand recurrent shocks.

In 2020, COVID-19 and back-to-back Hurricanes Eta and Iota exacerbated pre-existing humanitarian conditions. The twin storms left 1.8 million people in need of humanitarian assistance. Recurrent climatic shocks, displacement and migration, and food and nutrition insecurity continue to be the main drivers of crisis, as the scale and severity of needs grow among vulnerable people exposed to multiple emergencies. In 2021, the number of Guatemalans estimated to be acutely food insecure (IPC Phase 3 or above) peaked at 3.45 million people. Chronic undernutrition affects 47 per cent of children under 5 years of age, the highest rate in Latin America and the Caribbean. That figure reaches 58 per cent among indigenous children.

In recent years, the deepening of pre-existing vulnerabilities has triggered a staggering increase in mixed population movements and return migration. Between January 2020 and July 2021, more than 235,400 Guatemalan nationals were apprehended at the US-Mexico border. In 2020, more than 8,500 unaccompanied children and adolescents were apprehended by US authorities. Nearly 46,000 people were returned to Guatemala from the US and Mexico in 2020, including more than 4,500 unaccompanied children and adolescents. Returnees confront significant protection risks due to forced recruitment by criminal organizations and different forms of violence, including gender-based violence (GBV).

Almost 2.4 million people have urgent protection needs in Guatemala. Women, children and adolescents, people with disabilities, LGBTIQ+ people, migrants, displaced people, refugees and returnees, and indigenous and Afro-descendant groups have the greatest protection needs. In targeted departments, rates of violent crime, mainly homicides, as high as 934 victims per 100,000 inhabitants were reported in 2021.



Calico, Guatemala. A young mother prepares a meal in Calico, near the Mexican border. Huehuetenango Department has the second-highest level of people in need, and is one of the 16 departments out of 22 in IPC Phase 3 levels of food insecurity. Huehuetenango was also one of the departments most affected by Hurricanes Eta and Iota. *ACF/Lys Arango*

Projected situation in 2022 and beyond

The 2021/2022 Humanitarian Needs Overview identified 3.8 million people in need of humanitarian assistance, a 15 per cent increase compared to the 3.3 million people in need in 2020. In 2022, the humanitarian situation is expected to worsen due to a lack of livelihood opportunities, crop failures and interruptions in access to food, and limited coverage of social protection programmes.

The absence of mass vaccination, especially in rural areas and mid-sized cities, places people's health and livelihoods at risk and threatens to overwhelm an already strained health system. Currently, around 25 per cent of the population is fully vaccinated against COVID-19.

Acute food insecurity was projected to decline between September 2021 and January 2022. However, the number of people classified as "stressed" (IPC Phase 2) is expected to grow by 12.5 per cent compared to May-August 2021, increasing from 7.7 million people to 7.9 million. Cyclical episodes of severe drought and intense hydrometeorological events, facilitated by the presence of La Niña through early spring 2022, will likely continue to affect agriculture, food output and livelihoods, reversing potentially short-lived improvements in acute food insecurity.

Displacement is projected to rise from around 429,000 people in 2020 to more than 578,400 in 2023 (an increase of nearly 35 per cent) due to escalating violence and a deteriorating socioeconomic and human rights situation. Increased migration flows will expose growing numbers of people on the move to significant protection risks, including GBV, trafficking, exploitation and sexual abuse, and reintegration challenges for returnees.

Response priorities in 2022

In 2022, the Humanitarian Country Team (HCT) will respond to the most pressing humanitarian needs of 1.68 million people. This represents around 44 per cent of the 3.8 million people in need.

The 2021-2022 Humanitarian Response Plan (HRP), requiring US\$210 million, strategically prioritizes vulnerable groups and geographic areas hardest hit by Eta and Iota, Dry Corridor communities subject to recurrent climatic shocks, and areas with a significant presence of people on the move. Despite initial funding being provided in 2021, several key sectors and cross-cutting issues remain significantly underfunded, including housing, nutrition, GBV, health and livelihoods, leaving critical response gaps that must be addressed.

The HRP's strategic objectives aim to protect and save the lives of affected people, while also strengthening resilience and the linkages between humanitarian and development actions. The HRP delivers integrated assistance through interventions at the household level to address urgent multisectoral needs, and in the most affected communities to help recover and rehabilitate critical systems and services.

Evolution of needs and requirements (2021–2022)

HRP	People in need	People targeted	Requirements (US\$)	Funding coverage
2022	3.8 M	1.7 M	153.7 M	
2021	3.8 M	1.7 M	56.3 M	44%

The appeal is part of a multi-year plan covering 2021 and 2022.

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service

Based on needs assessments and analysis, the HRP prioritizes response actions in five departments, targeting the most vulnerable groups, such as children and adolescents, pregnant and lactating women, subsistence farmers and informal workers, indigenous and Afro-descendant communities, people on the move and people with disabilities. Amid high levels of violence and insecurity, including femicide, GBV and violence against children, protection is a key cross-cutting issue prioritized across the response.

Through the HRP, the HCT is improving access to critical services, including education, health and WASH, re-establishing the food security of families in need through cash transfers and in-kind food assistance, and implementing recovery actions for livelihoods and basic services with a Build Back Better approach.



Haiti HRP

PEOPLE IN NEED

4.9 million

PEOPLE TARGETED

2.5 million

REQUIREMENTS (US\$)

373.5 million

Total population

11.4 million

Income level

Lower middle

INFORM Severity Index

3.6 / High

Consecutive appeals

2010 – 2022

People reached ^{HRP+FA}

1.8 million (2021)

Regularly exposed to natural hazards and the effects of climate change, Haiti faces recurrent socioeconomic and political challenges that are anchored in deep-rooted structural problems.

In 2021, the country experienced a profound and disturbing deterioration of the socioeconomic, political and security context. Compounded by the COVID-19 pandemic, and a 7.2-magnitude earthquake that affected more than 800,000 people on 14 August, humanitarian needs have exacerbated, especially in the country's southern region.

The activities of armed groups in the Port-au-Prince metropolitan area, which resulted in the displacement of more than 18,000 people, gained momentum with the assassination of President Jovenel Moïse on 7 July. This compromised humanitarian access particularly on the road to southern departments affected by the earthquake, roads which are under the control of armed groups and often the site of territorial fighting. In October, transport unions and the public protested and struck due to the growing insecurity. Armed groups (with political demands, among others) blocked access to roads leading to Port-au-Prince's oil terminals and significantly hampered fuel distributions. This severely impacted the functioning of health-care services, telecommunications, public transportation, bank services, and humanitarian and emergency relief operations. If this situation continues or is repeated, it could have serious consequences for the country, particularly regarding the humanitarian operations. The worrying increase in kidnappings is adding to the sense of insecurity among the population and poses a growing threat to the protection of civilians and humanitarian workers. Insecurity and violence led to internal displacements and lack of safe and appropriate shelters, and increased the risk of gender-based violence (GBV) in a context where essential services are very limited and already stretched.

In addition, inflation, poor harvests due to below-normal rainfalls, Tropical Storms Elsa (July) and Grace (August), and the recent earthquake have all contributed to increased vulnerabilities throughout the country. In September 2021, around 4.3 million Haitians were acutely food insecure, 1.3 million of whom were in a situation of emergency (IPC4), with reports projecting this number to rise to 4.6 million in March 2022.

With more than 900 schools damaged or destroyed by the earthquake (and some used as emergency shelters), between 40 and 70 per cent of schools in the southern part of the country were unable to reopen for the new school year, while 300,000 children were expected to return



Port-au-Prince, Haiti. A woman stands in front of the mountains outside Port-au-Prince, Haiti. *UN/Logan Abassi*

to school. This is causing a delay in the school programme, a risk of dropout and withdrawal from school, and an increased risk of violence against children, including sexual exploitation and unwanted pregnancies.

The low levels of access to safe drinking water have caused the transmission of diarrhoeal diseases while aggravating acute malnutrition. The low rate of vaccination against measles, hepatitis and polio (less than 80 per cent in 2021) exposes Haitians, particularly children under 5 years of age, to various diseases and contaminations. Access to health-care structures is a major concern. Damage to health facilities in the earthquake-affected areas further limits the population's access to health services, particularly emergency obstetric and neonatal care, in an already critical context for maternal health (Haiti's maternal mortality rate is 529 deaths per 100,000 live births, the highest in the region).

At the end of October 2021, Haiti had 23,406 confirmed COVID-19 cases and 658 deaths (as officially reported). Even though the number of infected persons remains relatively low compared to other countries, the pandemic poses a major risk to already weakened health structures. Despite a vaccination programme officially launched in mid-July, Haiti has the lowest vaccination rate against COVID-19 in the Americas (0.6 per cent).

In addition to this alarming situation, Haiti is facing a serious migration crisis. Between 19 September and 19 October 2021, IOM Haiti, in support of the National Office for Migrations, received and provided post-return assistance to more than 10,800 Haitian migrants (6,586 men, 2,456 women, 920 boys and 869 girls) repatriated from the United States, Mexico, Cuba, the Bahamas, and the Turks and Caicos Islands. This number adds to the 18,358 Haitian migrants who have been repatriated or expelled between the beginning of the year and mid-September mainly from the Dominican Republic, United States and Mexico, among other countries.

Projected situation in 2022 and beyond

In 2022, the humanitarian situation in Haiti will be influenced by developments in the country's socioeconomic, political and security situation, particularly the ongoing violence by armed groups and the elections expected to be held next year. The drivers that underpinned the vulnerability of the Haitian population in 2021 will persist in 2022, with more than 4.9 million people (43 per cent of the population) projected to be in need of humanitarian assistance.

Insecurity and violence are likely to persist in 2022, with potential consequences in terms of protection (including GBV), displacement, food insecurity, malnutrition and access to basic services. In addition, there are the climatic hazards and risks related to the natural threats that impact Haiti, as well as a projected 2022 active hurricane season, in conjunction with a stronger La Niña between July and October 2022.

While the entire country is exposed to multiple vulnerabilities, these will intensify in areas where there are overlapping crisis factors, such as in the South, Nippes and Grand'Anse departments affected by the earthquake, as well as the Port-au-Prince metropolitan area and regions with a high level of food insecurity.

Evolution of needs and requirements (2016–2022)

HRP	People in need	People targeted	Requirements (US\$)	Funding coverage
2022	4.9 M	2.5 M	373.5 M	
2021	4.4 M	1.5 M	235.6 M	27%
2020	4.6 M	2.1 M	252.5 M	33%
2019	2.6 M	1.3 M	126.2 M	32%
2018	2.8 M	2.2 M	252.2 M	12%
2017	2.5 M	2.2 M	192.2 M	40%
2016	1.6 M	688.0 K	332.8 M	35%

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service

Response priorities in 2022

In 2022, humanitarian partners will aim to target 2.5 million of the 4.9 million people in need of humanitarian assistance. The response will focus on three priority areas of intervention: (i) acute food insecurity, (ii) needs generated by insecurity and violence and (iii) residual needs following the earthquake. The latter focuses on the return to school, the provision of shelter for the most vulnerable people, the strengthening of health services and the restoration of livelihoods, while ensuring coordination with reconstruction activities and guaranteeing a transversal protection for affected people.



Les Cayes, Haiti. Patients, families and medical staff in two hospitals in Les Cayes receive food and cash assistance. This mother was one of hundreds of people at the hospital, mostly mothers and children, crammed into a large room lined with mats after the paediatric ward was damaged in the August earthquake. Her four-year-old son's head was wrapped in a bandage due to a deep wound, his eyes nearly swollen shut. She explained: "Our house was completely destroyed with my three children inside; one of my children is now in critical condition. We lost everything. He needs help, he needs medicine." WFP/Marianela Gonzalez

Humanitarian partners will strive to achieve the four strategic objectives that the Humanitarian Country Team has identified for the response over the period 2021-2022:

1. Reduce acute vulnerabilities and strengthen resilience through joint efforts of humanitarian and development actors, considering the structural nature of humanitarian needs in Haiti.
2. Increase people's capacity to meet their basic needs through strengthening access to basic services, improving food security, and decreasing mortality and morbidity due to preventable diseases.
3. Enhance accountability to affected people, particularly to the most vulnerable groups, by strengthening their access to protection services, engaging them in all phases of the response and increasing their self-reliance.
4. Strengthen emergency preparedness and response to restore access to services and autonomy following a disaster, and to contribute to the empowerment of institutions and civil society.

Throughout the response, humanitarian actors will strive to integrate key cross-cutting approaches through dedicated cross-cutting groups (cash, accountability to affected people, access, prevention of sexual exploitation and abuse, and inclusion of persons with disabilities), which will play a leading role in the implementation of these strategic objectives. They will also commit to support the operationalization of the nexus in Haiti by coordinating their actions with development actors to operationalize public policies in relation to social protection, food security and food sovereignty, as well as in the framework of risk reduction linked to natural threats. Finally, partners will engage with national and departmental actors in preparedness and contingency for natural hazards and other scenarios related to the deteriorating situation in the country.



Honduras HRP

PEOPLE IN NEED

2.8 million

PEOPLE TARGETED

1.8 million

REQUIREMENTS (US\$)

143 million

Total population

10.1 million

Income level

Lower middle

INFORM Severity Index

3.4 / High

People reached ^{HRP+FA}

0.7 million (2021)

Multi-year requirements (US\$)

156 million (2021-2022)

The COVID-19 pandemic and Hurricanes Eta and Iota worsened long-standing multidimensional humanitarian conditions in Honduras and significantly weakened the State's and communities' coping capacity.

The combined effects of a pandemic that caused more than 37,000 COVID-19 cases per every 100,000 inhabitants (the third highest rate in Central America and Mexico), and the back-to-back impacts of two major hurricanes that left 2.8 million people with urgent needs created a dire situation in an already complex humanitarian landscape.

Poverty and violence are rising, while access to basic services is shrinking. The hurricanes damaged or destroyed 10 hospitals and 404 primary health-care facilities, which, added to the partial or temporary closure of health centres during the COVID-19 pandemic, is creating a health coverage deficit. Increasing trends towards protracted droughts linked to El Niño, as well as increasingly heavy rains from tropical storm activity, have had devastating effects on health, food security and livelihoods. An estimated 70 per cent of the population, or some 6.6 million people, were living in poverty at the end of 2020, an 11 per cent increase from the 59.3 per cent reported in 2019. With the COVID-19 crisis wiping out more than 500,000 jobs and causing the economy to contract by 6.3 per cent at the end of 2020, livelihoods and economic resilience are likely to continue deteriorating. Some 2.8 million people were suffering crisis levels of food insecurity or worse in February 2021, a number that could grow to 3.2 million at the end of 2021. Extended school closures are affecting more than half a million children, many of whom benefited from school feeding and social protection programmes, which assisted around 1.4 million students before COVID-19. Honduras's 37.6 homicides per 100,000 inhabitants ranked third among Latin American and Caribbean countries in 2020. That rate includes the highest femicide rate in the region, at 6.2 deaths per every 100,000 women.

More than 937,000 people were internally displaced due to disasters in 2020, the highest number of new displacements in Latin America and the Caribbean. Moreover, Honduras is increasingly becoming a country of transit and destination for people on the move on the region, a situation that could escalate due to deteriorating conditions in Nicaragua. With Honduras set for general elections in November 2021, its socio-political landscape may see renewed turmoil similar to the months-long violence that followed controversial elections in 2017.



Jesús de Otoro, Honduras. This woman is a community leader in El Aguacate, part of the Jesús de Otoro municipality of Intibucá Department. Humanitarian partners in the region are active in protection, especially with female and GBV-prevention activities, and training local NGOs in women's rights. *Organización Intibucana de Mujeres Las Hormigas*

Projected situation in 2022 and beyond

Currently, 2.8 million people need humanitarian assistance, more than double the 1.3 million people in need estimated for the Humanitarian Needs Overview issued in early 2020, prior to the COVID-19 pandemic and the impacts of Eta and Iota. Should these needs remain unmet, especially in rural and remote communities, conditions are sure to deteriorate and have a multiplying effect in 2022 and beyond. Vulnerable populations such as women, children, informal workers, indigenous and Afro-descendant people, as well as people living with disabilities, are historically among the people most disproportionately affected by humanitarian situations and will thus require targeted and differentiated response in 2022.

More broadly, structural poverty and weakened resilience capacities will continue to have adverse effects on livelihoods and food security, which will further exacerbate inequality and drive migration within and across borders. The Famine Early Warning Systems Network expects Dry Corridor communities in Honduras to remain in crisis levels of food insecurity at least through January 2022.

Protection is likely to remain a pressing concern. More than 942,000 people require some form of protection due to rampant violence, including gender-based violence and forced displacement. The number of people fleeing the country in search of protection or better conditions has already risen past pre-pandemic levels, as shown by the nearly 320,000 Hondurans detained at the Mexico-United States border between October 2020 and September 2021, surpassing the combined totals of 2019 and 2020 by 19 per cent. Tens of thousands of returnees face protection and basic needs, while burdening already weakened local communities.

The COVID-19 pandemic is showing a general decline in cases and deaths, but a comparatively late start to vaccination rollouts has led to Honduras reaching only 39 per cent of its population with the complete vaccine scheme, the third lowest coverage in Latin America as of October. In addition to delaying economic recovery, this could continue to draw valuable health response resources and limit response capacities and access to health care, which may exacerbate the spread of other diseases such as dengue, which caused a significant outbreak prior to COVID-19.

Evolution of needs and requirements (2021–2022)

HRP	People in need	People targeted	Requirements (US\$)	Funding coverage
2022	2.8 M	1.8 M	143.1 M	
2021	2.8 M	1.8 M	78.9 M	36%

The appeal is part of a multi-year plan covering 2021 and 2022.

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service

Response priorities in 2022

The Humanitarian Country Team will seek to respond to the needs of 1.8 million people, including 612,000 women and 828,000 children across Honduras through the 2021-2022 Humanitarian Response Plan (HRP), requiring US\$222 million. The HRP also seeks to strengthen the resilience of social services, communities and affected people, while also prioritizing close coordination with the UN-supported Sustainable Development Reconstruction Plan. The multisectoral response under this plan is targeting those with the most severe needs in 127 priority municipalities, selected out of Honduras's 298 municipalities following thorough analyses of areas most affected by COVID-19, violence and natural disasters.

The HRP is placing a special emphasis on the most affected people, especially those in rural, remote and hard-to-reach communities. Vulnerable groups will be prioritized, such as women, children, displaced people, people living with disabilities, and indigenous and Afro-descendant populations. Food security, WASH, protection and health are the key areas of activity.

Given the current severity and scope of the needs across Honduras, the HRP requirements exceed the combined requirements of Honduras's last two appeals to respond to Eta and Iota (\$90.1 million with \$71.5 million funding for 79.3 per cent coverage) and the COVID-19 pandemic (\$98 million with \$24.5 million funding for 25 per cent coverage). Some initial funding was received in 2021 to kick-start the 18-month plan, but more is needed to ensure a comprehensive response that keeps pace with the growing needs.



Venezuela HRP

PEOPLE IN NEED¹

7 million

PEOPLE TARGETED

4.5 million

REQUIREMENTS (US\$)

708 million

Total population

28.4 million

Income level

n/a

Consecutive appeals

2019 – 2022

People reached

4 million (2021)

Prolonged and significant economic contraction, chronic inflation with episodes of hyperinflation, political polarization and localized violence remain key drivers of humanitarian needs in Venezuela.

In 2021, a modest recovery in oil production and a series of liberalizing economic measures have slightly improved economic performance and helped curb inflation. The GDP contraction in 2021 is estimated at 4 per cent, up from -30 per cent in 2020, with the economy expected to grow in 2022.² However, the continued economic contraction and the impact of broad sectoral sanctions continue to impact the provision of essential services such as health care, water and sanitation, education and domestic gas, fuel and electricity supply. The deterioration of public service delivery has negatively impacted the lives and livelihoods of vulnerable families. Protection-related services to address violence, abuse, neglect and exploitation, including mental health and gender-based violence (GBV) have also been affected.

COVID-19 has also aggravated the humanitarian situation, with quarantine measures leading to reduced economic activities, including formal employment opportunities, impacting production and trade and increasing domestic violence. People's incomes, savings and purchasing power have been affected. While food and non-food items are available, vulnerable families face difficulties accessing these due to decreased purchasing power. The informal dollarization of the economy has also led to increased prices, and while there have been regular adjustments to the minimum wage, accompanied by social cash transfers, these are not sufficient for vulnerable families to cover their basic needs, especially for those without access to foreign currency.

Food security and nutrition remain a key concern, since the rate of undernourishment has increased from 2.5 per cent in 2010-2012 to 27.4 per cent in 2018-2020.³ During 2021, the COVID-19 pandemic heavily strained the health-care system.⁴ As of 15 November 2021, 419,745 cases had been confirmed and 5,026 people had died. New variants of the virus have generated new waves of the pandemic.⁵ In October, the country reported the highest weekly increase in new cases since the pandemic began, putting pressure on ICU capacity. Limited early access to vaccines constrained the country's initial response. However, as of 12 November, the vaccination rate has increased, with 32.3 per cent of the population fully vacci-



San Joaquin de Navay, Venezuela. A mother holds her smiling son while he receives a measles vaccination at a health clinic in southern Venezuela. She said: "I brought my son for immunization because I don't want him to fall sick. I know that immunization will strengthen his immune system, which will help him fight other diseases." *OCHA/Gema Cortés*

nated.⁶ Key challenges in the COVID-19 response include limitations in regular access to energy, safe water and safe waste-disposal services in health facilities, limited diagnostic capacity and personal protective equipment, and the departure of qualified health personnel. The focus on COVID-19 curtailed the provision of other essential health services, particularly in the case of chronic diseases and access to sexual and reproductive health, and the implementation of the regular vaccination programme, impacting recent gains in the control of vectorborne diseases.

The pandemic also affected people's well-being, with an increase in mental health and psychosocial support consultations for children, adolescents and caregivers. School closures to mitigate the spread of COVID-19 affected 6.8 million students in the country.⁷ Estimates indicate that at least 20 per cent of students had difficulty completing the school year through remote modalities, with children in remote areas, with disabilities and from indigenous communities being the most affected. The return to in-person classes started on 25 October 2021. Ensuring safe conditions in educational facilities and supporting teachers, and vulnerable children and adolescents are critical elements for attendance and retention in the school system.

Mixed migration flows continue, including people intending to leave, returnees and/or people engaged in cross-border pendular movements. The closure of the borders with neighbouring countries throughout most of 2021 forced people to use irregular routes and crossings, which increases protection risks, including human trafficking and gender-based violence.

In 2021, the rainy season affected thousands of people due to overflowing rivers, landslides and floods in several areas of the country, including Apure, Bolivar, Cojedes, Merida, Yaracuy and Zulia states among others.

Projected situation in 2022 and beyond

Humanitarian needs are likely to continue due to the prolonged economic and sociopolitical situation and the impact of COVID-19. Critical issues include the delivery of basic services, food insecurity and malnutrition, human mobility and protection needs.

The country's GDP is expected to grow 1 per cent in 2022⁸ after eight consecutive years of contraction, which could help stabilize the humanitarian situation in 2022. However, sustainable improvements in the economy will depend on lasting progress in the political dialogue and the evolution of international sanctions. Factors such as the extent of economic reform measures, inflation trends, fuel and electricity supply and the ability to rekindle oil production are key for sustained economic changes.

Response priorities in 2022-2023⁹

In 2022, the humanitarian community in Venezuela will focus on:

1. Providing life-saving assistance with critical health, including sexual and reproductive health, nutrition, food security, protection and WASH interventions.
2. Improving living standards by strengthening livelihoods, maintaining safe and effective access to essential goods and services, and ensuring safe and dignified shelters for people on the move.
3. Prevention, mitigation and protection, including those related to GBV and violence, abuse, exploitation and neglect of children and adolescents. Differentiated needs by age, gender and diversity will be considered.

The Humanitarian Response Plan (HRP) will be multi-annual (2022-23), with the aim of promoting better coordination between humanitarian and development interventions, including an increased focus on the delivery of basic services and institutional capacity-building in essential service areas, including protection services.

Evolution of needs and requirements (2019–2022)

HRP	People in need	People targeted	Requirements (US\$)	Funding coverage
2022	7.0 M	4.5 M	708.1 M	
2021	7.0 M	4.5 M	708.1 M	37%
2020	7.0 M	3.5 M	750.0 M	24%
2019	7.0 M	2.7 M	222.7 M	34%

The people in need figure is a 2019 estimate. The 2022 targeted population and financial requirement figures are estimates based on 2021 data and pending the launch of the 2022-2023 HRP

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service



Cardenas, Venezuela. A vulnerable family in front of their house in Cardenas, where living conditions are precarious. While the economic contraction has affected people's capacity to access food, COVID-19 has turned thousands of lives upside down. The pandemic has hampered the capacity of this mother of three to put food on the table, every morning she worries about how to feed her family. *OCHA/Gema Cortés*

Strengthening humanitarian access, especially for NGO partners, will continue to be a priority. The main humanitarian challenges include attempts to politicize humanitarian aid, administrative and bureaucratic impediments, fuel shortages, the temporary suspension of cash-based interventions, the lack of access to official data on needs and the slow implementation of the resolution enabling international NGOs to register in the country.

Humanitarian funding also remains a challenge to scaling up the humanitarian response. The HRP funding gap is currently 63 per cent, with total funding against HRP requirements \$260 million, and an additional \$119 million going to other humanitarian partners (as of 26 November). The establishment of the Venezuela Humanitarian Fund in 2020 mobilized \$14 million and facilitated funding opportunities for local partners.

References

- ¹ The number of People in Need is an estimate from 2019. An updated analysis is ongoing to reflect the most recent humanitarian situation; total population figures are from [ECLAC's Statistical Yearbook](#).
- ² Economic Commission for Latin America and the Caribbean (ECLAC), [Economic Survey of Latin America and the Caribbean 2020: Labour dynamics and employment policies for sustainable and inclusive recovery beyond the COVID-19 crisis](#), p. 101.
- ³ FAO, [State of Food Security and Nutrition in the World \(SOFI\) Report 2021](#). The Government does not agree with these findings.
- ^{4,5} ECLAC-PAHO, COVID-19 Report: [The prolongation of the health crisis and its impact on health, the economy and social development](#), October 2021.
- ⁶ PAHO, [COVID-19 Vaccination in the Americas](#), as of 29 October 2021.
- ⁷ UNESCO, [Global monitoring of school closures caused by COVID-19](#).
- ⁸ ECLAC, [Economic Survey of Latin America and the Caribbean, 2021 \(LC/PUB.2021/10-P/Rev.1\)](#), Santiago, 2021, p. 103.
- ⁹ The 2022 figures are estimates and will be updated pending the launch of the HRP 2022-2023



Part two: Inter-Agency Coordinated Appeals

Southern and East Africa Regional Overview

In Eastern Africa, conflict and violence continued to force people to flee their homes in 2021, including around 9.6 million internally displaced people and 4.7 million refugees and asylum seekers. Every country in the region is either in conflict or neighbouring a country in conflict.

In 2021, the crisis in Ethiopia drove millions of people from their homes, causing a spike in displacement in a region where the crises in Somalia, South Sudan and Sudan had already forced millions of people to flee in recent years. The Horn of Africa also remains a major route for mixed movements to and from the Arabian Peninsula and to Europe. Grave violations against civilians continued to be committed in the region, including conflict-related sexual violence. The conflict in Ethiopia saw reports of widespread use of rape as a tactic of war, including in Tigray by Eritrean and Government forces and in Amhara by Tigrayan forces. In South Sudan, gender-based violence is deliberately used to humiliate women and girls; over 65 per cent of South Sudanese women have experienced sexual or physical violence—double the global average.

The region is experiencing a major food insecurity crisis, with more than 100,000 people in South Sudan and 400,000 people in Ethiopia facing Catastrophic food insecurity (IPC Phase 5), according to the latest IPC analysis. At least 33.8 million people are severely food insecure, and an estimated 12.8 million children are acutely malnourished, across the region. Despite

Saada, Yemen. Students at the Aal Okab School sit in a former classroom, which was destroyed during the conflict. Students now attend lesson in UNICEF tents nearby. *OCHA/Giles Clarke*

The number of people in need of humanitarian assistance in Southern and East Africa increased by 70% in the past two years

The increase is mainly driven by the deteriorating situation in Ethiopia and Sudan, representing nearly two thirds of the 62.4 million people in need of humanitarian assistance in the region

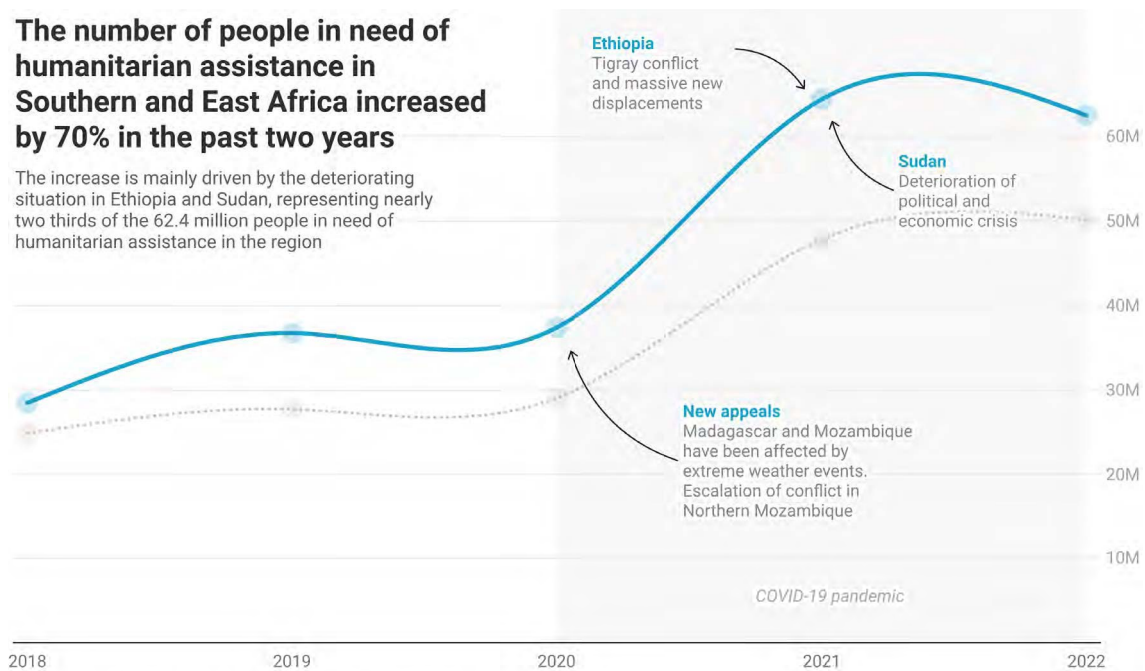


Chart: Global Humanitarian Overview 2022 • Source: Humanitarian Insight

significant progress, the severe desert locust upsurge continues to threaten livelihoods and food security in Somalia, Ethiopia and, to a lesser extent, Kenya. At the same time, multiple areas of the region have been impacted by back-to-back below-average rainy seasons and are likely to see drought conditions increase in the period ahead.

Core health services, including immunization, sexual and reproductive health care and long-term and palliative care, have been jeopardized during COVID-19 and as a result of ongoing conflict in many areas. Meanwhile, COVID-19 containment measures have compounded the challenges faced by children, especially girls, whose risk of child marriage has increased by 25 per cent due to school closures. COVID-19 has also sparked a precipitous rise in gender-based violence.

In Southern Africa, communities are on the coal face of the global climate crisis. During the 2020-2021 cyclone season in the South-West Indian Ocean, tropical weather systems affected at least 681,000 people and brought heavy rainfall to Southern Africa, including in Botswana, Eswatini, Madagascar, Mozambique, South Africa and Zimbabwe, causing death, displacement, flooding, landslides and damage to homes, infrastructure and livelihoods.

In December 2020, at least 96,000 people across the region were affected by Tropical Storm Chalane, which hit Madagascar (139 people affected), Mozambique (73,254) and Zimbabwe (22,683). In January 2021, Tropical Cyclone Eloise, swept through large parts of the region, bringing heavy rainfall and strong winds, including in Madagascar, Mozambique and South Africa. Eloise killed at least 12 people (one in Madagascar and 11 in Mozambique) and affected more than 467,000 people across the region, including 2,800 in Madagascar, 441,690 in Mozambique, 3,200 in South Africa and 20,270 in Zimbabwe. Mozambique's central provinces,

Inter-Agency Coordinated Appeals: Southern and East Africa (2022)

Country	Type	People in need	People targeted	Requirements (US\$)	Requirements (2017-2022)
Burundi	HRP	1.8 M	947.0 K	183.0 M	
Ethiopia	HRP	25.9 M	22.3 M	2.8 B	
Madagascar	FA	1.6 M	1.3 M	64.5 M	
Mozambique	HRP	1.5 M	1.2 M	388.5 M	
Somalia	HRP	7.7 M	5.5 M	1.5 B	
South Sudan	HRP	8.4 M	6.7 M	1.7 B	
Sudan	HRP	14.3 M	10.9 M	1.9 B	

Figures for Somalia are estimates and pending the launch of the HRPs. The appeal for Madagascar is part of a multi-year plan covering 2021 and 2022.

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service

which were still recovering from the devastation wrought by Cyclone Idai in 2019, were hardest-hit by Tropical Cyclone Eloise. The heavy rains also exacerbated the African Migratory Locust (AML) outbreak in Botswana, Namibia, Zambia and Zimbabwe.

In some parts of the region—especially southern Madagascar and southern Angola—erratic and uneven rainfall has caused severe drought. The Grand Sud of Madagascar is experiencing its most severe drought in more than 40 years, leaving an estimated 1.3 million people severely food insecure—more than double the number in the same period of 2020—of whom at least 28,000 are facing Catastrophic (IPC Phase 5) food insecurity, according to the Integrated Food Security Phase Classification (IPC) analysis. In a worst-case scenario, Ambovombe-Androy District will be at risk of famine from October, according to an IPC analysis carried out in June 2021. In Angola, hunger is on the rise as the country experiences its worst drought in decades, with below average rainfall in Cuanza Sul, Benguela, Huambo, Namibe and Huíla provinces driving rising needs in the western-southern part of the country.

COVID-19 has had major consequences for Southern Africa. South Africa has had the highest number of recorded COVID-19 cases and deaths on the African continent, while COVID-19 containment measures have caused protection concerns and hampered access to basic healthcare, including for sexual and reproductive health.

Meanwhile, the conflict in Mozambique continues to cause a large-scale humanitarian crisis, with potential regional ramifications. Despite the recent intervention by SADC and Rwandan forces, the situation is expected to remain highly volatile in the coming months, and more than 745,000 people remain displaced by insecurity and violence. At the same time, other countries in Southern Africa are facing challenging domestic situations, especially Eswatini, which has faced significant civil unrest since May 2020.



Jur River County, South Sudan. A young girl grinds flour from sorghum to make food for her family displaced by intercommunal conflict in South Sudan's Jur River County. *OCHA/Anthony Burke*

Projected situation in 2022 and beyond

In Eastern Africa, needs are likely to rise in 2022 due to conflict, political fragility and economic challenges. The conflict in Ethiopia is likely to have major repercussions, with displacement and needs expected to rise unless a negotiated settlement is realized. In Sudan, the situation is precarious following the military coup in October 2021, and needs were already increasing due to conflict, climatic events and the economic crisis. In Somalia, heightened political tensions and the continued military offensive against Al-Shabaab in central and southern areas, continue to drive displacement, while Kenya is approaching highly contested elections and the continued threat of Al-Shabaab. In South Sudan, despite the ongoing implementation of the 2018 Revitalized Agreement on the Resolution of the Conflict on the Republic of South Sudan (R-ARCSS), conflict continues to impact communities in multiple parts of the country.

At the same time, the climate crisis is expected to have devastating consequences for communities in Eastern Africa in the year ahead. Four countries in the Horn of Africa (Eritrea, Ethiopia, Somalia and Sudan) are among the most vulnerable 10 per cent to climate change, according to ND-GAIN. In South Sudan, historical floods—which have inundated large swathes of the country for the third time running—have impacted an estimated 623,000 people in 21 counties since May 2021, with the hardest-hit states including Jonglei, Unity and Northern Bahr el Ghazal. In some areas, the 2021 rains arrived even before the 2020 floods had fully receded. Elsewhere, in parts of Kenya, Ethiopia and Somalia, communities have already experienced two below-average rainy seasons and are likely to endure a third in the coming months, heightening the possibility of a dramatically deepening drought and a return to the levels of need seen during 2016 and 2017.



Beira, Mozambique. A child shelters from rising water in the Praia Nova neighbourhood in Beira, Mozambique. The country had to face Cyclone Eloise while still recovering from the devastation caused by category 4 Cyclone Idai in March 2019, which claimed hundreds of lives and affected 3 million people across Madagascar, Malawi, Mozambique and Zimbabwe. *UNICEF/Ricardo Franco*

In Southern Africa, the 2021-2022 cyclone season is expected to see the development of 8 to 12 weather systems (tropical storms and cyclones), of which 4 to 6 could become tropical cyclones. Recent years have highlighted the possibility of cyclones forming in the south-west Indian Ocean that are stronger, carry more rain, and take different paths than has historically been the case. Madagascar and Mozambique are at greatest risk for cyclonic activity, given their locations. However, as the 2020-2021 season proved, other countries may be impacted and, with a weak La Niña predicted to persist from December 2021 to February 2022, the risk of tropical storms and flash flooding is heightened, especially in parts of Mozambique, Madagascar, Zimbabwe, Eswatini and Malawi.

While above-average rainfall is predicted across much of the region—which should lead to favourable maize harvests in multiple countries—southern Madagascar and southern Angola are expected to continue to face drought. In both of these locations, there is a high probability of humanitarian needs increasing significantly as the countries enter the peak hunger gap from January to April in 2022, and potentially beyond, should the next harvest be below average or fail.

Meanwhile, humanitarian needs are likely to remain high in northern Mozambique, where the conflict situation is still volatile, despite the recapturing of territory by the Government and allied foreign forces in the second half of 2021. At the same time, political challenges are expected to persist in several countries in the region, especially in Eswatini, where people's access to essential services has been hampered by civil unrest.



Burundi HRP

PEOPLE IN NEED

1.8 million

PEOPLE TARGETED

0.9 million

REQUIREMENTS (US\$)

183 million

Total population

13 million

Income level

Low income

INFORM Severity Index

3.9 / High

Consecutive appeals

2016 – 2022

People reached

0.4 million (2021)

In 2021, despite decrease in number of people in need, the vulnerabilities of the population in Burundi has increased compared to previous years due to the combined effects of recurring natural disasters, such as flooding caused by the rising waters of Lake Tanganyika and Rusizi River, frequent epidemic outbreaks, the socioeconomic impacts of COVID-19, as well as increasing refugee returns, which are putting pressure on host communities.

In April and May 2021, floods affected over 52,000 people, including 22,500 displaced people. This represents 82 per cent of all displacements in 2021 as of October. Between May and September 2021, over 33,000 people (50.4 per cent) of 65,000 people affected by floods received multisectoral emergency assistance.

The number of IDPs slightly decreased in 2021 (116,000 in August 2021 compared to 131,000 in August 2020, an 11 per cent decrease). However, protracted displacement and repeated shocks erode resilience and increase dependence on humanitarian aid where durable solutions are not provided. Over 80 per cent of internal displacement in Burundi is caused by climate-related disasters. The effects of climate hazards continue to impact agricultural production, while 90 per cent of the population relies on subsistence farming.

Voluntary returns of refugees increased in 2021, with 60,821 refugees repatriated between January and October 2021, compared to 26,868 in the same period in 2020 (a 126 per cent increase). This puts additional pressure on host communities, particularly in terms of access to food and basic services. In addition, the situation of over 83,000 refugees and asylum seekers remains precarious. Nearly 38 per cent of refugees live in urban areas where the economic situation is fragile. For refugees living in camps, there are few job opportunities, resulting in high dependency on humanitarian assistance.



Higiro, Burundi. Two Burundian returnees in Higiro. UNHCR is assisting the returns. It conducted assessments to ensure the decision to return is voluntary, free and informed, and that repatriation takes place in safety and dignity.

UNHCR/Georgina Goodwin

The downward trend of malaria cases observed in 2020 (thanks to the mass distribution of mosquito nets and the fumigation of homes in 2019, and some good practices within communities) has reversed in 2021. There are 30 per cent more malaria cases in 2021 (as of October) than during the same period in 2020. Considering that 87 per cent of Burundians live with less than US\$1.90 a day, vulnerable people affected by malaria outbreaks depends on emergency response.

Despite improvements in agricultural production confirmed by two successive satisfactory harvesting seasons in 2021, some areas remain at risk of food insecurity. According to the Integrated Food Security Phase Classification (IPC) data, despite improved food security conditions in parts of the country, over 12 per cent of the population (1.4 million people) is severely food insecure (IPC Phase 3 – Crisis).

Between January and June 2021, over 354,000 (33 per cent) of the 1.06 million people targeted in the Humanitarian Response Plan (HRP) 2021 received multisectoral humanitarian assistance. Only 25.7 per cent of the HRP was funded as of 26 October 2021 compared to 34.3 per cent at the same period in 2020. The low level of funding has hampered humanitarian partners' efforts to meet the needs of the most vulnerable people. Based on the reporting to OCHA's Financial Tracking Service, the most underfunded sectors include shelter and non-food items, WASH and protection.

Projected situation in 2022 and beyond

In 2022, about 1.8 million people will need humanitarian assistance, which is a 21 per cent decrease compared to 2021. Food assistance needs have decreased following relatively good harvests that have helped strengthen the population's capacity to cope with future shocks. Nevertheless, the consequences of recurring natural disasters and epidemic outbreaks, including the socioeconomic impacts of COVID-19, are expected to continue to contribute to significant humanitarian needs in Burundi throughout 2022, especially in terms of food security.

According to weather forecasts, drier-than-usual conditions in late 2021 and early 2022, particularly in the eastern and northern parts of the country, risk impacting the first cropping season of 2022, the availability of seeds for future seasons and therefore food security in some areas. The 2022 rainy season is expected to induce new flooding, as the lake's water levels are still high and soils in coastal areas in the western part of the country are saturated with water from previous floods. This may once again impact vulnerable populations in flood-prone areas. Despite efforts to strengthen disaster risk reduction capacity, Burundi's preparedness for emergencies and crises is weak. The country cannot cope with severe shocks such as droughts, epidemics and floods.

In 2022, 70,000 Burundian refugees are expected to return to Burundi, compared to 143,000 in 2021. Overall, 178,000 returnees, including spontaneous returnees and former returnees experiencing acute vulnerability, will continue to need assistance in 2022. Additionally, 116,000 IDPs will continue to depend on aid for their survival and well-being. Due to the lack of durable solutions, humanitarian needs of IDPs and returnees from previous years will remain.

Malaria cases are expected to increase in 2022 if no prevention measures are implemented. This is most likely to affect the most vulnerable populations who have limited access to health care and prevention capacities.

Evolution of needs and requirements (2016–2022)

HRP	People in need	People targeted	Requirements (US\$)	Funding coverage
2022	1.8 M	947.0 K	183.0 M	
2021	2.3 M	1.1 M	194.7 M	35%
2020	1.7 M	887.0 K	104.0 M	45%
2019	1.8 M	712.0 K	106.3 M	70%
2018	3.6 M	2.4 M	141.8 M	58%
2017	3.0 M	1.0 M	73.7 M	65%
2016	1.1 M	400.0 K	73.7 M	99%

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service



Bujumbura Rural Province, Burundi. A woman sleeps with her daughter and four of her grandchildren under a mosquito net. They sought shelter in the nearby school, which was already crowded with families sheltering after flooding displaced about 10,000 people last year. She said: “We’re cold at night. We lost everything; we lost all our blankets and clothes. The water rushed in quickly while we were asleep, so we grabbed the children and made our way to this school.”
OCHA/Lauriane Wolfe

Response priorities for 2022

Burundi’s 2022 HRP will target 947 thousand people out of an estimated 1.8 million people in need of humanitarian assistance, with \$183 million required for the response. The response will prioritize the most vulnerable populations, particularly returnees, victims of natural disasters, including IDPs, and those affected by/at risk of epidemics, food insecurity and malnutrition. Of the 1.4 million people who are food insecure 508,000, will be targeted for food assistance in 2022.

The priority areas of intervention will include provinces classified at severity level 5 (Makamba, Rumonge and Ruyigi), severity level 4 (Bujumbura, Cankuzo, Karusi, Kirundo and Rutana) and severity level 3 (Bubanza, Cibitoke and Muyinga), as identified during the intersectoral severity analysis and endorsed during the Response Planning Workshop.



Ethiopia HRP

PEOPLE IN NEED

25.9 million

PEOPLE TARGETED

22.3 million

REQUIREMENTS (US\$)

2.75 billion

Total population

117.9 million

Income level

Low income

INFORM Severity Index

4.8 / Very High

Consecutive appeals

2017 – 2022

People reached (HRP + NERP)

9.4 million (2021)

A significant portion of Ethiopia’s population urgently needs humanitarian support, with armed conflict, climate shocks (including drought and flooding), disease outbreaks, a desert locust invasion and the continuing socioeconomic impacts of COVID-19 undermining the significant development gains made over recent years.

The impacts of frequent and extreme weather events continue to negatively affect access to food from cultivated crops, access to land for pasture, livestock production and market functionality. Several hundred thousand people are typically displaced each year due to floods, and on average approximately 3 million people experience crisis levels of food insecurity due to poor rains or drought conditions each year. Displacement caused by the intensification and expansion of the conflict in northern Ethiopia in addition to long-standing intercommunal tensions and regional border disputes are the main drivers of humanitarian needs. The displacement trend has increased over the last three years, rising from 3.2 million internally displaced persons (IDPs) recorded in 2018 to 4.2 million at the end of 2021.

Displaced people generally have limited access to nutritious food, protective shelter, safe water and sanitation facilities, as well as basic services to meet their basic needs. Displacement contributes to and exacerbates protection risks, including risks in relation to sexual and gender-based violence; family separation, including unaccompanied and separated children, or elderly persons or persons with disabilities who may be left behind during periods of displacement; housing; land and property issues; loss of civil documentation; and livelihoods concerns. In areas of displacement, elevated socioeconomic poverty further increases the risk of sexual and gender-based violence, particularly for women and girls. In situations of displacement, elderly persons and those living with disabilities may experience abandonment, neglect and unequal access to basic services, notably food and health care. Inability to access education directly impacts displaced children’s safety and well-being.



Gijet, Ethiopia. A health worker evaluates a child during a malnutrition screening in Gijet, Tigray region. The crisis in northern Ethiopia has left millions of people in need of emergency assistance and protection. Access to communities is hindered by the limited availability of fuel, telecoms, supplies, shipments and cash to run humanitarian operations
UNICEF/Nesbitt

Projected situation in 2022

Climate shocks, conflict, insecurity and disease outbreaks coupled with a deteriorating economy will continue to exacerbate humanitarian needs in 2022 for 25.9 million people.¹ Latest available reports of observed and projected short-term rainfall offer a pessimistic outlook. Seasonal forecasts published in September 2021 indicate high confidence that the deyr/hageya season (October to December) will see below-average rainfall in the country's low-lying and southern parts. This would represent a third consecutive poor rainy season, increasing the risks of poor crop performance, the deterioration of livestock conditions and productivity, as well as water shortages for human and animal consumption. The far-reaching humanitarian impacts of armed conflict will continue to affect communities in 2022 across the north of the country and in several other hotspots. An inability to respond at the levels needed will result in further displacement, exacerbate living conditions for existing IDPs and others in vulnerable situations and increase protection risks, including those linked to negative coping mechanisms.

The deepening protection crisis is expected to remain a core driver of humanitarian need, as many Ethiopians continue to flee their homes due to conflict, intercommunal tensions, climate shocks or other factors. Protection concerns are growing, particularly for groups already at risk, including children, women, elderly persons and persons with disabilities, as families lose their socioeconomic and community-support structures. These concerns are being further aggravated by reduced levels of humanitarian access in many areas.

At the end of 2021, there were an estimated 4.2 million IDPs in Ethiopia, with high levels of need also identified among non-displaced people living in conflict-affected areas. Many IDPs have sought shelter in urban areas, further increasing pressure on vulnerable families within host communities. Many are living in overcrowded settlements, at heightened risk of gender-based violence, marginalization, exclusion, health outbreaks, economic hardship or lack of access to basic services. Violations against children are likely to continue, particularly among the 1.7 million displaced children who are out of school and exposed to heightened protection risks. In the absence of peace and stability, people who were already at risk and marginalized will experience heightened exposure to insecurity and related protection concerns.

In 2021, humanitarian access in Ethiopia became more complex due to insecurity related to the conflict in the north as well as in other parts of the country. Current levels of violence and armed conflict are unprecedented in Ethiopia's recent history. They constitute a major impediment to relief operations, preventing millions of people from accessing assistance and further eroding their resilience, while at the same time increasing the need for humanitarian support.

Evolution of needs and requirements (2017–2022)

HRP	People in need	People targeted	Requirements (US\$)	Funding coverage
2022	25.9 M	22.3 M	2.8 B	
2021	19.0 M	14.8 M	1.5 B	49%
2020	8.0 M	6.5 M	973.0 M	58%
2019	8.9 M	8.3 M	844.5 M	76%
2018	7.0 M	7.0 M	1.2 B	56%
2017	5.6 M	5.6 M	1.4 B	47%

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service

Response priorities in 2022

The response priorities for 2022 will primarily focus on multisectoral life-saving and life-sustaining assistance, protection services and resilience-building to support at-risk and vulnerable people, particularly women, children, elderly persons and people with disabilities. People with the most acute humanitarian needs and those in the most life-threatening situations will be prioritized. They include IDPs, returnees, relocated persons, returning migrants and communities directly affected by humanitarian shocks.



Kebritayah, Ethiopia. This woman was born in eastern Ethiopia 25 years ago to Somali parents. Violence in Somalia prompted them to seek shelter across the border. She has never stepped foot inside Somalia and never left Somali region, where her parents settled. She lives in the Kebribayah refugee camp. Established in 1991, it is Ethiopia's oldest camp and home to 15,000 refugees, mostly Somali. For as long as she can remember, she has received food assistance from WFP. It has become a source of stability and familiarity in her life. *WFP/Edward Johnson*

These population groups will be supported with essential protection and conflict-sensitive services. Given the growing levels of food insecurity due to persistent droughts coupled with the desert locust infestation, particular efforts will be made to scale up operations to address malnutrition and avert extreme hunger, and to mitigate the risk of people being forced to resort to negative coping mechanisms. The response strategy is prioritized around the convergence of geographical hotspots and the severity of need, while placing protection and affected people at the centre of the collective response.

The HRP prioritizes 22.3 million² people living in conflict- and climate-affected woredas (districts) presenting the highest levels of severity of need. In particular, IDPs and non-displaced climate- and conflict-affected people will be targeted with urgent life-saving humanitarian assistance and protection services, with a particular focus on the most vulnerable women, girls, boys, elderly persons and persons with disabilities presenting extreme or catastrophic levels of humanitarian need. In addition, displaced and non-displaced population groups, including IDPs, returnees, relocated persons and migrants, presenting severe humanitarian needs will be targeted through multisectoral response by strengthening access to basic services, preventing further deterioration of their humanitarian status and supporting their resilience.

References

¹ The People in Need figure is indicative. The final figures will be reflected in the final HNO and HRP, and in subsequent GHO updates.

² Ibid.



Madagascar FA

PEOPLE IN NEED

1.6 million

PEOPLE TARGETED

1.3 million

REQUIREMENTS (US\$)

64.5 million

Total population

28.4 million

Income level

Low income

INFORM Severity Index

2.8 / Medium

Consecutive appeals

2021 – 2022

Multi-year requirements (US\$)

231 million (2021-2022)

Back-to-back droughts buffeted the Grand Sud of Madagascar during the 2019/2020 and 2020/2021 rainy seasons, leaving at least 1.6 million people in need of humanitarian assistance until May 2022.

Following the failure of the 2019/2020 rains (and May/June 2020 harvest), some 554,000 people were projected to be severely food insecure until September 2020. The situation then dramatically worsened when a second drought, more severe than the first, struck the Grand Sud between November 2020 and January 2021. The region received less than 50 per cent of the normal rainfall, leading to the most acute drought since 1981. By January 2021, extreme drought impacted almost 69 per cent of the Grand Sud.

These consecutive droughts have severely impacted lives and livelihoods. The 2020/2021 drought coincided with the agricultural sowing period, with devastating consequences. In at least three districts, crop losses of up to 60 per cent compared with the five-year average were expected. In addition, farmers are having to contend with fall army worm, locusts and sandstorms, and a Rift Valley fever outbreak in the Atsimo-Andrefana and Atsinana region could severely affect livestock-based livelihoods in these areas, if not treated quickly.

At least 1.31 million people – 47 per cent of the Grand Sud’s population – are expected to face high levels of acute food insecurity from October to December 2021, including at least 28,000 people in Catastrophic food insecurity (IPC Phase 5). In a worst-case scenario, Ambovombe-Androy district will be at risk of famine, according to an IPC pilot analysis. This year marks the first time that people have been recorded in IPC Phase 5 since the IPC methodology was introduced in Madagascar in 2016. In the hardest-hit areas, people have been forced to resort to desperate survival measures, such as eating locusts, raw red cactus fruits or wild leaves. Global acute malnutrition rates have also risen sharply; they remain well above average despite seasonal improvements in the third quarter of 2021. The number of children admitted for treatment for severe acute malnutrition in the Grand Sud in the first quarter of 2021 was quadruple the five-year average. The situation is particularly critical in Ampanihy and Ambovombe districts.



Anjampaly, Madagascar. This man is busy dune fixing. This labour provides income, protects crop fields and builds up savings. Madagascar is suffering from its most acute drought in four decades. With drought conditions persisting into 2021 and a poor harvest, weary communities have few resources to fall back on. Unexpected sandstorms have buried croplands and pastures, undermining any possibility of securing a food source. Vast swaths of arable land are now wasteland. *OCHA/Viviane Rakotoarivony*

The dire humanitarian situation in the Grand Sud is leading to increasing school dropouts, a rise in gender-based violence and child abuse, and displacement from rural to urban areas in a context where access to water and basic services is extremely limited. The child marriage rate in the Grand Sud is the highest in the country; some 49 to 62 per cent of children are involved in child labour; and the risk of child exploitation and abuse has been heightened by the back-to-back droughts. Due to severe debt, people have been forced to sell all their household belongings including pots and pans, –leaving them unable to cook food or feed their families. Many families have left their rural homes and headed towards cities as a survival strategy, increasing the risk of family separation. Since the beginning of 2021, significant displacements to cities such as Ampanihy, Betroka and Taolagnaro (Fort Dauphin) have been recorded. At the same time, there has been an upsurge in criminality by dahalo gangs (cattle rustlers), particularly in the Amboasary and Taolagnaro (Fort Dauphin) districts, limiting access to essential services, such as health and nutrition. The crisis has had a severe impact on the health of communities in the Grand Sud; water shortages and water price increases of about 10 to 15 times the average are forcing families to drink and cook with unsafe water, exposing them to disease outbreaks.

Projected situation in 2022 and beyond

Humanitarian needs will remain high throughout the 2021/2022 lean season (October 2021 to May 2022) and could rise in the period ahead, with the spectre of a third failed season on the horizon. Below-average rains are expected in the first half of the October-to-December rainy season in 2021. This would severely impact the next agricultural harvest, due in May 2022. In addition, an outbreak of migratory locusts has infested more than 48,000 hectares in the Grand Sud, impacting off-season crops planted in March 2021 and the upcoming main planting season.

Within this context, 1.6 million people urgently need life-saving and life-sustaining assistance and protection from January to May 2022. More than 50 per cent of those in need are women and girls, who have been severely impacted by the drought. An estimated 49,500 pregnant women are exposed to excess maternal morbidity and mortality due to lack of access to essential obstetric care in the Grand Sud, while women and girls also have to travel longer distances to access water and food, exposing them to heightened risk of violence. Children are exposed to a significantly heightened risk of acute malnutrition, which could have lifelong consequences, and many have had to drop out of school to support their families during the drought.

Humanitarian partners will closely monitor the situation in the coming months, especially with respect to the prospects of the main harvest. If this harvest is below average – as with the previous two harvests – and if the locust outbreak worsens, the crisis in the Grand Sud is likely to deepen.

Response priorities in 2022

The humanitarian response in the Grand Sud significantly expanded in 2021, with the number of aid workers in the region increasing from just over 200 in January to more than 350 in August. Humanitarian partners assisted nearly 908,000 people with food, almost 410,000 people with cash transfers and 87,500 people with agricultural-revival activities. In addition, nearly 252,000 people now have improved access to clean water, and more than 52,800 children have been treated for acute malnutrition. However, while some 370,000 people in IPC Phases 4 and 5 are now receiving full rations, people in IPC Phase 3 continue to receive half rations. This is concerning in the context of a rapidly deteriorating drought.

From January to May 2022 – which coincides with the peak hunger gap period – the humanitarian response will target 1.3 million people in the most urgent need of assistance and protection in the Grand Sud. Under the Flash Appeal, multisectoral response will be geographically targeted in the nine districts facing IPC Phases 3 and 4 (Amboasary, Betroka, Ambovombe, Tsihombe, Bekily, Beloha, Ampanihy, Betioky and four communes in the Taolagnaro district). Food assistance will also be provided to people facing severe food insecurity (IPC Phase 3 and above) in Toliara II district, with the objective of saving lives and alleviating suffering in the hardest-hit areas.

The response implemented by humanitarian partners will complement and support the Government of Madagascar’s National Response Plan for the crisis in the Grand Sud, which was revised in June 2021 under the leadership of the National Office for Disaster Risk Management. The Government’s revised plan calls for US\$185 million to target 1.6 million people with assistance from June 2021 to May 2022.

Evolution of needs and requirements (2017–2022)

HRP	People in need	People targeted	Requirements (US\$)	Funding coverage
2022	1.6 M	1.3 M	64.5 M	
2021	1.6 M	1.3 M	166.2 M	72%
2019	890.0 K	460.0 K	32.4 M	91%
2017	250.0 K	250.0 K	20.1 M	33%

The Flash Appeal 2022 is part of a multi-year plan covering 2021 and 2022.
Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service

Logistical and physical constraints are the primary challenges to response in the Grand Sud. The Anosy region, in the eastern part of the Grand Sud, is home to most of the hard-to-reach communes. Access is particularly difficult in the Tanadava Madrere commune in the northern areas of Tolagnaro district and the Manevy commune in eastern Amboasary district due to physical access constraints and insecurity linked to banditry. There are no roads to these communes and no available airstrips; access is possible only by foot and/or canoe. An estimated 15,000 people live in these communes (10,356 in Manevy and 4,602 Tanadava Mandrere). The presence of dahalo cattle raiders has also impacted humanitarian access, although humanitarian actors and assets have not been a target of the violence to date. In 2021, violence mostly occurred in Ambovombe, Amboasary and Betroka districts, affecting people’s access to basic services and assistance, and compounding an already dire drought situation. A few communes in the northern areas of Amboasary district (Elonty, Esira, Mahabo, Mahaly, Maromby and Marotsiraka) as well as Betroka district in the northern part of Anosy have been difficult to access due to the insecurity. Road access to these areas remains possible but challenging.



Mozambique HRP

PEOPLE IN NEED

1.5 million

PEOPLE TARGETED

1.2 million

REQUIREMENTS (US\$)

388.5 million

Total population

32.2 million

Income level

Low income

INFORM Severity Index

3.5 / High

Consecutive appeals

2019 – 2022

People reached

1.2 million (2021)

The conflict in northern Mozambique’s Cabo Delgado Province, which began in October 2017, continued to escalate in the first half of 2021, before intervention by foreign forces from July.

The attack by non-State armed groups (NSAGs) and clashes with security in Palma District, which began in late March, forced more than 100,000 people to flee the zone by foot, boat and road to reach safer destinations. The intervention of foreign forces from Rwanda and the Southern African Development Community led to a lull in large-scale attacks. However, confrontations between NSAGs and security forces—particularly in Mocimboa da Praia, Nangade and Palma districts—displaced thousands of people, with over 6,000 people fleeing each week during operations by Mozambican and foreign forces to recapture Mocimboa da Praia in the first three weeks of August. Although there were reports of small numbers of people returning to areas recaptured by the Government and allied foreign forces in the latter half of the year, this information was difficult to verify.

Throughout 2021, the crisis in Cabo Delgado deepened the needs of displaced people — many of whom have been forced to flee multiple times — and host communities, who have continued to show incredible solidarity in the face of increasingly stretched resources and services. According to IOM’s Displacement Tracking Matrix Baseline Assessment Round 13, an estimated 745,000 people were internally displaced in northern Mozambique by September 2021, including 642,404 people in Cabo Delgado, 99,448 in Nampula and 1,221 in Niassa. Children and women accounted for 52 per cent and 27 per cent of displaced people, respectively, and there were nearly 10,800 elderly people, more than 3,800 unaccompanied children, over 3,400 pregnant women and more than 800 people with disabilities among those displaced. Around 80 per cent of displaced people were staying with family and friends in host communities, whose already meagre resources were strained tremendously by the growing influxes. Pemba City, for example, now hosts more than 152,000 displaced people on top of its original population of around 224,000 people, putting the city’s health and education services under immense pressure. In Metuge district, the number of displaced people (127,646) is higher than the original population (101,339).



Pemba, Mozambique. This mother lost everything when Cyclone Kenneth made landfall in Cabo Delgado Province. Floods and heavy rains in northern Mozambique are exacerbating the hardship of people living there - just one year after Hurricanes Kenneth and Idai devastated the region. Violence by armed groups is also on the rise, leading to high numbers of people being displaced. In many East African countries, such as Mozambique, armed conflicts, droughts, floods and plagues of locusts are threatening the livelihoods of many families. *UNICEF/De Wet*

Protection risks remained a grave concern, especially for women and girls, people with disabilities, older persons and people living with HIV/AIDS, with reports of horrific violence against civilians by NSAGs, including killings, beheadings and kidnappings, as well as allegations of violations by Government forces. Civilians attempting to leave Palma faced challenges and were unable to access international protection. The journey was perilous and expensive, with many people walking for days through the bush to reach safer areas. At the same time, people attempting to seek asylum in Tanzania were refouled to Mozambique, with nearly 10,400 Mozambicans forcibly returned from Tanzania to Mozambique between January and September 2021, according to UNHCR. People impacted by the conflict were exposed to gender-based violence and child abuse, and they are more likely to resort to negative coping mechanisms, including transactional sex, and be exposed to exploitation.

The armed conflict has heightened food insecurity and malnutrition, with families forced to abandon their homes and fields, and erratic rainfall in some parts of the region has compounded crop losses, according to the latest IPC analysis. In the three northern provinces – Cabo Delgado, Nampula and Niassa – more than 900,000 people are severely food insecure. In seven southern districts of Cabo Delgado, more than 228,000 people who are either displaced (128,000) or hosting displaced people (101,000) in their households were projected to face severe food insecurity (IPC Phase 3 or above) between April and September 2021. The analysis covered internally displaced people (IDPs) in five districts (Ancuabe, Balama, Chiúre, Metuge and Namuno) and households hosting IDPs in seven districts (Ancuabe, Balama, Chiúre, Metuge, Montepuez, Namuno and Pemba City) and highlighted the severe toll the crisis has taken on host communities.

The escalating violence significantly impacted essential services across Cabo Delgado. For example, in Mocimboa da Praia, widespread destruction of infrastructure – including the airport, hospital, as well as schools, and water and electrical systems – was reported in areas retaken by security forces in August. In other parts of the province, including Macomia, Muidumbe, Nangade, Palma and Quissanga, the delivery of essential services – especially health care and education – was hampered by the absence of key personnel and the destruction of or damage to facilities and equipment. Nearly half of Cabo Delgado’s health centres (43 out of 88) were forcibly closed due to insecurity. In the areas hardest hit by conflict, people were without electricity and telecommunications for most of the year. After 13 months of general blackout, electricity was re-established in Mueda in September 2021, following Muidumbe, Palma, Nangade and Mocimboa da Praia. Partial phone and internet connectivity re-established between Palma and Mocimboa da Praia.

Projected situation in 2022 and beyond

At least 1.5 million people will need life-saving and life-sustaining humanitarian assistance and protection in northern Mozambique in 2022 due to the continued impact of armed conflict, violence and insecurity in Cabo Delgado Province. This includes the 745,000 conflict-displaced people, as well as people in host communities whose coping capacities have been exhausted after three years of opening their homes to those fleeing the violence. While the Government works to combat non-state armed groups and restore peace in Cabo Delgado—with support from the international community and allied forces—some returns of people to areas recaptured are anticipated in 2022. The situation, however, remains volatile and attacks by NSAGs as well as allegations of violations against civilian by security forces continue to be reported. In addition, the conflict and repeated displacement have destroyed livelihoods, disrupted markets, and essential services across the hardest-hit districts, particularly affecting access to education and health services in a region facing endemic disease outbreaks. Therefore, the Protection Cluster continues to emphasize the importance of returns taking place only when security conditions are met and services are restored in line with accepted standards.

Humanitarian needs are concentrated in the districts hardest hit by the conflict – Macomia, Mocimboa da Praia, Palma and Quissanga – as well as those that host the highest number of displaced people, namely Nangade, Metuge, Montepuez, Mueda and Pemba. The unique needs of women and girls are a high priority, with 53 per cent of people in need being female and women-headed households – who constitute one third of families in the three northern provinces – who are faced with specific challenges. The crisis has severely impacted children, with some 59 per cent of people across Cabo Delgado, Nampula and Niassa being under 19 years old, according to the census. While only 3 per cent of people in Cabo Delgado, Nampula and Niassa are over 65 years old, they face multiple unique challenges, including difficulties fleeing conflict as well as constraints on physical access to services. Ensuring access to vital services and holistic support for the estimated 468,000 people (most of whom are women) living with HIV in Cabo Delgado, Nampula and Niassa is critical.



Beira, Mozambique. Escalating violence in northern Mozambique is pushing hundreds of thousands of people into food insecurity. “They sit in cramped areas with no shelter, no sanitation, struggling to process the trauma of horrors they’ve experienced,” said WFP’s Regional Director for Southern Africa. Climatic shocks, which disrupted agriculture, fisheries and livelihoods, are compounding problems: only limited supplies are reaching markets, which means the cost of food and household items is rising fast. *WFP/Sean Rajman*

Response priorities in 2022

Humanitarian organizations significantly scaled up their response in northern Mozambique in 2021, enabling partners to provide life-saving and life-sustaining assistance and protection to 1.23 million people; more than double the number of people reached in 2020 (515,000). More than 957,300 people—52 per cent of them women—received regular food assistance, although underfunding has forced humanitarian organizations to distribute half rations since August. By the end of August, more than 850 aid workers—more than 730 of them Mozambican—were delivering assistance and protection across Cabo Delgado Province (up from just over 300 in October 2020), and by the end of September at least 66 humanitarian organizations were responding (up from 47 in January 2021), of which 58 per cent (38) were international non-governmental organizations (INGOs), 30 per cent (20) national NGOs and 12 per cent (8) UN entities.

A key focus in 2021 was expanding the scale and scope of humanitarian operations in hard-to-reach and partially accessible areas. This was done through a combination of inter-agency rapid assessment and response missions, as well as establishing district-level coordination and response, leveraging the capacity of partners based in the districts in Ancuabe, Balama, Chiure, Ibo, Macomia, Mueda and Namuno. However, humanitarian movements remained constrained in some areas due to insecurity and administrative obstacles. People’s access to essential services—especially health and education—remained inadequate in many parts of Cabo Delgado due to destruction, damage and absence of personnel.



In 2022, the humanitarian response in northern Mozambique will target 1.2 million people in the most urgent need of assistance and protection in Cabo Delgado, Nampula and Niassa. The geographic focus of the response is aligned with the severity of the needs identified, with an emphasis on districts that host the highest numbers of displaced people and districts hardest hit by the conflict.

Evolution of needs and requirements (2019–2022)

HRP	People in need	People targeted	Requirements (US\$)	Funding coverage
2022	1.5 M	1.2 M	388.5 M	
2021	1.3 M	1.0 M	254.1 M	64%
2019	2.6 M	2.4 M	620.5 M	51%

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service

Humanitarian actors will coordinate closely with development actors, who will be working to rebuild infrastructure and re-establish essential services impacted by the conflict in 2022. It will include identifying complementarities with the activities promoted by the Government's Agency for Integrated Development of the North (ADIN). The Agency, with support from the international community, is working with the UN, local authorities, non-governmental organizations, and other local stakeholders to build or rehabilitate public and private services, such as public administration buildings, health and education facilities, access roads, energy and telecommunication systems, water supplies, markets and shops.



Somalia HRP

PEOPLE IN NEED

7.7 million

PEOPLE TARGETED

5.5 million

REQUIREMENTS (US\$)

1.5 billion

Total population

16.4 million

Income level

Low income

INFORM Severity Index

4.6 / Very High

Consecutive appeals

1998 – 2022

People reached

3 million (2021)

Despite progress in recent years, conflict, recurrent climate shocks, disease outbreaks, large-scale evictions and increasing poverty are devastating the people of Somalia. An estimated 7.7 million people will require humanitarian assistance and protection in 2022, and women and children continue to bear the brunt of the crisis.

Throughout 2021, the country saw heightened political tensions in the context of a delayed electoral process, as well as a continued military offensive against Al-Shabaab in central and southern areas. The resulting conflict and insecurity were the main drivers of displacement, forcing 420,000 people to flee their homes by October. An estimated 2.9 million people are internally displaced throughout the country. Most of these people live in informal sites, often facing the danger of eviction by landowners. Women and girls make up half of the displaced population and face a heightened risk of sexual violence and harassment, abuse and intimate partner violence.

Somalia remains on the front line of climate change. It is currently experiencing its third consecutive season of below-average rainfall, with central and southern areas enduring moderate-to-severe drought conditions, water shortages and livestock deaths. One in every five people does not have enough water to cover their basic needs. Critically, climate change is increasingly understood as a major driver of conflict and rapid urbanization. COVID-19 and desert locusts continue to pose a threat.

The combined impact of these recurring stress factors has deepened and widened poverty, with an estimated 71 per cent of the population living below the poverty line, particularly in rural areas and areas where access remains a challenge. Somalia also continues to exhibit some of the highest infant, child and maternal mortality rates in the world.



Somalia. This mother's baby was born a month early and had to stay in an incubator for 33 days. The 10-month-old suffered from medical complications and remained underweight. She received treatment at an IRC-run nutrition clinic and then moved to a local stabilization centre for one week. She continues to receive care at the clinic. "She has made huge progress," said her mother. "When I first brought her, you could easily count her ribs." She now weighs 8 lbs and is growing. *IRC/Kellie Ryan*

Projected situation in 2022 and beyond

With available climate forecasts indicating below-average rainfall in November, it is becoming increasingly likely that a major and worsening drought is unfolding in Somalia. Long-range forecasts for the 2022 Gu rains suggest elevated chances of a fourth below-average rainfall season. Somalia last experienced a four-season drought in 2016/2017, when sustained and early action by the Government and the international community helped avert the worst outcomes.

At the same time, large parts of the country remain prone to severe riverine and flash flooding. Based on a trend analysis of recent years, it is estimated that up to 450,000 additional people will be displaced by floods and up to 96,200 people by droughts in 2022. Conflict and insecurity are also likely to remain a major driver of humanitarian needs and displacement next year. In addition to ongoing political tensions and conflict with Al-Shabaab, the reconfiguration of AMISOM and closure of Forward Operating Bases are likely to leave a security vacuum, which may lead to displacement and impede humanitarian access. Overall, it is expected that up to 280,000 additional civilians will be displaced due to conflict in 2022.

Without humanitarian assistance, nearly 3.5 million people across Somalia are expected to face acute food insecurity at crisis (IPC Phase 3) or worse levels through the end of 2021. In 2022, some 1.2 million children under 5 years of age are likely to be acutely malnourished, nearly 300,000 of whom are projected to be severely malnourished and may be at risk of dying without immediate treatment. Severe drought conditions are expected to cause water to become scarce and pathogens to accumulate in stagnant water. People and cattle will be pushed to use contaminated water, sharply increasing the risk of a cholera/acute watery diarrhoea outbreak. This will also increase women’s and girls’ exposure to the risk of sexual and gender-based violence due to walking longer distances to access water.

Response priorities in 2022

Despite operational and access challenges, humanitarian partners reached some 3 million people (77 per cent of those targeted) with humanitarian assistance in 2021. In 2022, spikes in health, WASH and shelter needs – as well as updated baseline population estimates – have led to an increase in the number of people in need and targeted. The 2022 Humanitarian Response Plan will aim to respond to the most immediate needs of 5.5 million people. The top priority is to provide life-saving assistance for 5 million of the most severely vulnerable people, including 1 million children under 5 years of age, by decreasing the prevalence of hunger, acute malnutrition, public health threats and outbreaks, abuse, violence and exposure to explosive ordnance. In addition, partners will work to sustain the lives of 5.5 million people requiring humanitarian assistance by ensuring safe, equitable and dignified access to livelihoods and essential services.

Finally, the Somali response aims to uphold commitments to the centrality of protection across the humanitarian response through protection mainstreaming, accountability to affected populations and monitoring of the protection environment. Cross-cutting vulnerable groups will be taken into consideration, including a renewed focus on people with minority clan affiliation, marginalized groups, and those residing in rural areas or areas with high access constraints.

Evolution of needs and requirements (2016–2022)

HRP	People in need	People targeted	Requirements (US\$)	Funding coverage
2022	7.7 M	5.5 M	1.5 B	
2021	5.9 M	4.0 M	1.1 B	69%
2020	5.2 M	3.0 M	1.0 B	80%
2019	4.2 M	3.4 M	1.1 B	83%
2018	5.4 M	5.2 M	1.5 B	60%
2017	5.0 M	3.9 M	1.5 B	68%
2016	4.9 M	3.5 M	885.2 M	56%

The 2022 figures are estimates and pending the launch of the HRP.
Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service



Sanaag region, Somalia. A teacher writes on a blackboard in front of his class. School education is a major challenge in Sanaag region. Most children are from pastoralist families and do not have access to education. In Ceerigabo town, NGO partner Candlelight for Environment set up a primary and secondary school in August 2006, for pupils age 5 to 15. In 2021, it enrolled 110 girls and 109 boys. The students pay a school fee, but those who cannot pay and families who have many children receive free education. *Candlelight/Abdinasir Ahmed*

Achievements and innovations

The Joint Analysis Process was modified and strengthened for the Somalia Humanitarian Needs Overview (HNO) 2022 with the implementation of a sequenced and thematic joint analysis process that involved over 20 different primary data sources, as well as a broad range of secondary data. All analysis was conducted in line with processes and categories outlined by the global Joint Intersectoral Analysis Framework (JIAF). To ensure more targeted and intersectoral analyses, data providers (e.g. FSNAU, REACH, IOM DTM, UNHCR PRMN, WFP mVAM and others) were mapped out and categorized as providing data on a number of themes – impact on people, impact on services, access, accountability to affected populations, cash and markets, and inclusion. These themes were based partly on the JIAF sub-pillars and partly on relevant cross-cutting topics.

Data providers then provided a preliminary analysis of their own data sets for each relevant theme, which was then triangulated and combined into joint analysis per theme by technical specialists and relevant cluster leads. A collaboration with the GIMAC DEEP Platform ensured the integration of secondary data sources throughout this process. The resulting intersectoral thematic analyses were presented at the Humanitarian Programme Cycle 2022 Deep Dive Analysis Workshop for Inter-Cluster Coordination Group endorsement, and provided the analytical framework for the HNO report.



South Sudan HRP

PEOPLE IN NEED

8.4 million

PEOPLE TARGETED

6.7 million

REQUIREMENTS (US\$)

1.67 billion

Total population

11.4 million

Income level

Low income

INFORM Severity Index

4.6 / Very High

Consecutive appeals

2010 – 2022

People reached

5.7 million (2021)

People in South Sudan continue to face the multiple compounding shocks of continued food insecurity, macroeconomic shocks, three consecutive years of flooding, disease outbreaks, increased sub-national violence, and threats and attacks on humanitarian workers and assets, resulting in an overall protection crisis.

Implementation of the 2018 Revitalized Agreement on the Resolution of the Conflict in the Republic of South Sudan continues, albeit at a slow pace. Key benchmarks for the transition achieved in 2021 include the appointment of governors for all 10 states and the appointment of legislators for the national parliament. The remaining pre-transitional tasks include the critical formation and graduation of unified forces. The country has embarked on a constitution-making process, and democratic elections are slated to take place in 2023.

South Sudan is facing its highest levels of food insecurity and malnutrition since the country declared independence ten years ago. The Integrated Phase Classification (IPC) report released in December 2020 projected that an estimated 7.24 million people would face acute food insecurity from April to July 2021. Of these people, 108,000 were projected to be in IPC 5, 2.4 million in IPC 4 and 4.6 million in IPC 3.¹ An estimated 1.4 million children under 5 years of age, the highest number since 2013, were expected to be acutely malnourished in 2021.²

As of 19 November, an estimated 809,000 people were reported as affected by floods in 33 counties in eight states since May 2021. Jonglei, Unity and Upper Nile states are the worst affected. These three states account for more than 75 per cent of the total number of people affected. People's livelihoods are being eroded as their livestock are decimated, homes, schools and crops are submerged. Flood-displaced people now sheltering in poor conditions are at risk of exposure to waterborne diseases. Some 100,000 people, mainly from Twic East, who were displaced by the 2020 floods, have not yet returned home as their lands remain underwater. Over two thirds of flood-affected counties were projected to face high levels of acute food insecurity this year, thereby exacerbating the dire humanitarian conditions of an already vulnerable people.



Old Fangak, South Sudan. A pregnant woman sleeps on the floor of a classroom in Old Fangak. Unrelenting floods from weeks of heavy rains swept away homes and inundated farmlands. Families and livestock have been forced to seek safety on higher ground and in neighbouring towns. The effects of the climate emergency are profoundly felt in East Africa. Communities, already struggling, are facing unprecedented floods and storms, unreliable rainfall, and the distress of hotter and drier conditions, as their basic needs and rights to water, food, livelihoods, land and a healthy environment are hit hard. *Action Against Hunger/Peter Caton*

The Bentiu camp for internally displaced persons (IDPs) hosts some 108,000 displaced people. An alarming rise in Hepatitis E (HEV) prevalence and cases of acute watery diarrhoea was driven by a deteriorating water, sanitation and hygiene situation. As of 10 October 2021, a cumulative 1,309 HEV cases, including nine deaths, have been reported since 2019. HEV cases in the camp have risen to over 113 per cent from 2019 to 2020, and by 225 per cent from 2020 to date.

According to the WASH Severity Classification analysis (December 2020 – May 2021), WASH conditions in 51 of 78 counties were classified as phase 4, and 3 were classified as phase 5. The results of this analysis will likely drive an immediate response scale-up to address WASH needs.

Physical insecurity, bureaucratic impediments and threats against humanitarian workers and assets have increased in various counties. From January to September 2021, 415 access incidents were reported. Insecurity forced the relocation of 80 aid workers from Ayod and New Fangak counties in Jonglei State, Nagero and Tambura in Western Equatoria State, and the Greater Pibor Administrative Area. Aggressive and sometimes violent demands by youth for employment opportunities disrupted humanitarian operations in Torit, Renk, Koch, Ulang, Kapoeta, Jamjang, Gumuruk and Bentiu. During this period, four aid workers were killed in the line of duty and more than 200 aid workers were relocated from their areas of operation due to security threats. Between 8 July and 21 August, 312 metric tons of critical food items were looted in several parts of the country, affecting humanitarians' ability to respond efficiently to people in need. Repeated episodes of sub-national violence, such as in Tambura County in Western Equatoria State since June 2021, displaced an estimated 80,000 people. Killings of civilians, including men, women and children, abductions and conflict-related sexual violence



Juba, South Sudan. Community focal points attend a training on gender-based violence (GBV) at the Women's Union. GBV is one of the most critical threats to the protection and well-being of women and children in South Sudan. Many women and girls have experienced non-partner sexual violence, primarily during attacks or raids. The risk of child marriage remains constant due to conflict and the country's economic situation. *UNICEF/Albert Gonzalez Farran*

allegedly perpetrated by armed men were reported, including forced recruitment in Tambura/Ezo targeting men and boys. Multiple testimonies from a protection report reflected high levels of violence included the targeting of civilians based on ethnicity and gender. Initial reports indicate that at least 200 people were killed. Witnesses and survivors report the rape of young women and girls by men in uniforms and civilian clothing with family members forced to witness.

Some 4 million South Sudanese people³ remain displaced due to conflict, insecurity and weather shocks. An estimated 1.7 million people are internally displaced and an additional 2.3 million South Sudanese are refugees in neighbouring countries.⁴ In addition, 91,000 South Sudanese refugees returned, predominantly from Sudan and Uganda, from January to end of September 2021.

Returns are also taking place in remote locations where there is limited infrastructure and access, an absence of housing, land and property, and protection risks that challenge peaceful coexistence with host communities.

Projected situation in 2022 and beyond

A continued deterioration of the humanitarian situation is expected, as needs are likely to increase. Factors likely to contribute to this include climate change and a forecast for continued rains into 2022, resulting in further flooding and more displacement. In addition, the country's weak health system, low water supply coverage, poor hygiene and sanitation services, sub-national violence, reduced access as well as the limited humanitarian assistance footprint will continue to threaten an already vulnerable people.



Pibor, South Sudan. This 13-year-old girl is determined to go to school despite the persistent violence and recurrent flooding. With funding from the South Sudan Humanitarian Fund, she has received psychosocial and other support..
OCHA/Emmi Antinaja

WASH conditions are expected to worsen in 56 counties, remain the same in 14 counties, and improve in two counties. The forecast is primarily based on expected flood damage to existing WASH infrastructure during the wet season and the resulting increase in open-defecation practices, use of surface water for drinking, risk of disease outbreaks, and reduced humanitarian access for WASH actors due to insecurity and flooding.

South Sudanese women and girls are likely to face extreme levels of gender-based violence, exacerbated by armed conflict, organized violence and forced displacement due to flooding. Much of the violence goes underreported, with limited response services available to survivors. This creates conditions for conflict-related sexual violence and barriers for survivors to access gender-based violence response services due to ongoing violence in Tambura County.

Driven by a decline in oil and non-oil sectors and several concurrent shocks, including COVID-19, South Sudan's GDP is expected to contract by 4 per cent in 2021.

Response priorities in 2022

The two-year 2022-2023 Humanitarian Response Plan (HRP) will be guided by three overarching strategic objectives addressing the three humanitarian conditions: physical and mental well-being, living standards and coping mechanisms. The multi-year plan will capitalize on the humanitarian-development-peace nexus efforts in the country and integrate disaster reduction and mitigation measures within programming. Humanitarian and protection needs, especially for women and children, continued to grow in South Sudan in 2021 and are expected to continue in 2022 as a result of recurring conflict and subsequent displacement, a climate emergency, an inability to reach health care and lack of access to schools.



Evolution of needs and requirements (2016–2022)

HRP	People in need	People targeted	Requirements (US\$)	Funding coverage
2022	8.4 M	6.7 M	1.7 B	
2021	8.3 M	6.6 M	1.7 B	67%
2020	7.5 M	7.4 M	1.9 B	64%
2019	7.2 M	5.7 M	1.5 B	75%
2018	7.0 M	6.0 M	1.7 B	70%
2017	7.5 M	5.8 M	1.6 B	71%
2016	6.1 M	5.1 M	1.3 B	92%

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service

Humanitarian organizations reached some 4.8 million people with humanitarian assistance and protection services by the end of September 2021. Key achievements include over 4.1 million people who received food assistance and livelihoods support; over 1.3 million people reached with healthcare; approximately 1 million people assisted with protection services; and some 1 million people provided access to safe water and sanitation. Over 930,000 children, pregnant and breastfeeding women were provided with emergency nutritional assistance; about 832,000 people received essential household items and emergency shelter. Some 720,000 people were reached through camp coordination and camp management services; and over 189,000 children were supported with access to education in emergencies.

Humanitarian access challenges include operational interference, bureaucratic impediments, threats and violence against humanitarian personnel and assets and physical challenges caused by flooding. These challenges hampered humanitarian response to vulnerable people across the country. This year, Jonglei, Central and Western Equatoria experienced an upsurge in violence, affecting the delivery of humanitarian assistance to conflict- and flood-affected people. Humanitarian organizations reached half of their target population in these locations by the end of September. In Warrap State, where people were projected to face record levels of food insecurity during the lean season of May-July 2021, humanitarian organizations faced challenges to reach vulnerable people due to insecurity. Similarly, insecurity hampered the delivery of humanitarian assistance and services to the conflict-affected people in Tambura of Western Equatoria State, where some 80,000 people were displaced by conflict since June.

Since March, there has been a rise in the number of attacks against aid workers, people serving the community, and assets across South Sudan. Humanitarian warehouses and facilities were targeted during violence with humanitarian supplies looted, significantly impacting response operations in conflict-affected and food-insecure areas. Operational interference and threats by youth groups across the country have remained a challenge, leading to suspension of humanitarian activities, and increasing people's vulnerability. Throughout 2021, youth groups continued to demand exclusive local employment with humanitarian organisation, and often



shows aggressive, threatening stances to voice their demands. This behaviour led to the suspension of humanitarian activities and the relocation of workers from some locations. Negotiations between youth, local authorities, community leaders and the humanitarian community are ongoing to find a resolution. Between January and September 2021, more than 200 aid workers were relocated due to security threats.

As of 12 November, the 2021 South Sudan HRP was 64 per cent funded. Despite the relatively good funding received, humanitarian needs continue to grow, outstripping the available funding to respond in an effective and timely manner.

Achievements and innovations

In the context of South Sudan, Accountability to affected populations (AAP) remains of paramount importance to the overall humanitarian response, propelled by the operational responsibilities to promote a rights-based approach and improve aid effectiveness across humanitarian programming. Recent demands and grievances expressed by youth led to significant interference in humanitarian operations in several locations. For those with legitimate concerns, investment has increased in AAP and engagement strategies with the community, including youth representatives, to hear their concerns, respond appropriately and sensitize about how humanitarian activities take place.

In 2021, cluster coordinators engaged in a strategic AAP workshop to review and seek opportunities to strengthen community engagement and participation, with the aim of ensuring that affected populations are at the centre of humanitarian action. The workshop outcomes informed the development of a Humanitarian Country Team (HCT) AAP strategy intended to solidify the HCT's role when leading on AAP across the response. The HCT AAP strategy complements the Centrality of Protection and Gender in Equality Programming in Emergencies road maps. The HCT AAP strategy supports the operationalization of the Inter-Agency Standing Committee's commitments on AAP and the prevention of sexual exploitation and abuse at the response level. It is guided by five strategic objectives:

- Oversight of senior leadership on key AAP issues.
- AAP is mainstreamed throughout the Humanitarian Programme Cycle to enable a community-centred response.
- Ensure decentralized leadership on AAP to State-level coordination mechanisms empowered to ensure AAP strategies are informed by local contexts.
- Collective mechanisms are developed at the response level for a coordinated approach to AAP
- Enhance the communications and community engagement and AAP capacity of national organizations and civil-society actors as well as their role within humanitarian decision-making.



Sudan HRP

PEOPLE IN NEED

14.3 million

PEOPLE TARGETED

10.9 million

REQUIREMENTS (US\$)

1.9 billion

Total population

44.9 million

Income level

Low income

INFORM Severity Index

4.5 / Very High

Consecutive appeals

1993 – 2022

People reached

7.4 million (2021)

During the second year of transition, the Government of Sudan continued its efforts to establish peace in the country, reforming the economy, working towards macroeconomic stability, and supporting the needs of the most vulnerable people.

On 9 June, the government lifted fuel subsidies and completely liberalised fuel prices. This led to a fifty-fold increase in the price of petrol (the subsidized price of petrol was 6.17 SDG and the price after the lifting of the subsidies was 320 SDG). Following these reforms, the exchange rate and the inflation rate were expected to stabilize starting from 2022 and remain moderate for the coming years. On 28 June, the IMF Executive Board announced that Sudan had reached the decision point for the Highly Indebted Poor Countries initiative. Following commitments made by Member States in Paris on 29 June, the IMF and the World Bank approved initial debt relief for Sudan, reducing the country's debt from US\$56 billion to \$28 billion. However, it will take time before the country sees the positive impact of these changes including that of economic reforms.

While the military coup d'état of 25 October 2021 had a limited immediate consequence in humanitarian operations, the pause of development assistance could influence basic social services and programmes supporting people's ability to bear the impact of economic reforms.

Continuing economic crisis, including high inflation, resulted in elevated levels of food insecurity, while hundreds of thousands of displaced people in Darfur and other parts of the country remain in protracted displacement needing specific assistance including protection. Over the past year, parts of the country – including in Darfur and South Kordofan – witnessed increased insecurity and localized violence. Since the beginning of the year, over 365,000 people were displaced, many of whom were already displaced as a result of the crisis in Darfur in 2003-2004, and in South Kordofan in 2011 and onwards. Flooding and concurrent disease outbreaks are straining the limited ability of state institutions to provide basic services. Despite these challenges, the country hosts about 1.2 million refugees and asylum seekers, making Sudan one of the top 10 refugee-hosting countries.



Kassala, Sudan. An early warning system predicted a drought in Kassala, Sudan. Animal health treatments and feed mitigate the impacts of the drought and enable farmers to protect their livelihoods and food security. Sudan has long been known as one of Africa's most arid countries, but rainfall in recent years has become even more erratic. Extreme events, such as drought, are becoming more common. Seventy per cent of rural people in Sudan rely on rain-fed agriculture and livestock-rearing, but the unpredictable and intense conditions, such as those in Kassala, are stretching their coping capacities to the limit. The cumulative effects of this "new normal" are taking a toll; one drought can follow another, each time stripping away hard-earned but limited resources. *FAO/Ahmedalidreesy Abdil*

In 2021, heavy rains and floods affected about 314,000 people. An increase in waterborne and vector borne diseases, including watery diarrhoea, typhoid, malaria and dengue fever, is foreseen in the coming months. During the first nine months of 2021, about 1.6 million cases of malaria were reported across Sudan, while about 2.2 million cases were recorded in 2020. Since the end of August, the national health authorities have reported three concurrent disease outbreaks following the rainy season. Specifically, multiple cases of Hepatitis E, dengue fever and measles were registered in different country states, further exacerbating an already precarious health system.

Projected situation in 2022 and beyond

About 14.3 million people –almost one in every three people-- across the country are projected to need some sort of humanitarian assistance in 2022. Close to 64 per cent of those 9.1 million people in need will require emergency assistance for life-threatening needs related to critical physical and mental well-being. This is quarter increase compared to the previous year, highlighting the enormous hardship that many people face. Meanwhile, 14 million people -- or 98 per cent of those in need -- require life-sustaining support to meet minimum living standards. These figures indicate an increase in needs and a worsening of the severity of needs. The highest needs include water and sanitation, food security and health. Approximately 8 million people in need are women and girls. Particularly vulnerable groups include 2.9 million displaced

people and 1.2 million refugees. Khartoum, North Darfur and South Darfur states account for most of the increase in the number of people in need. Meanwhile, it is estimated that it will take time to find and implement durable solutions for internally displaced persons (IDPs), both protracted IDPs and newly displaced people, as well as the 1.1 million refugees.

The humanitarian situation in Sudan is compounded by deep-rooted poverty and an economic crisis. The country faces several overlapping challenges, including internal population displacement triggered by conflict, and climatic and socio-cultural conditions leading to high levels of food insecurity and malnutrition. However, the economy is the main driver of people in need. For the Humanitarian Needs Overview (HNO) 2022, the drivers of need have been broken down into five main categories: the economy, localized conflict and protracted displacement, natural hazards, disease outbreaks and food insecurity.

According to the International Monetary Fund, the economy in Sudan has been in recession since 2018, with a projected economic growth for 2021 of 0.9 per cent. The near-term economic growth, the key to tackling the economic crisis, will continue to be subdued owing to low consumption and investment owing to factors such as high inflation and unemployment. In 2022, the economic growth is expected to be 3.5 per cent. However, these growth rates are not sufficient in the immediate term to drastically reduce food insecurity levels and other vulnerabilities induced by the economic crisis. It is also estimated that more than 350,000 people are likely to be affected by heavy rains and flooding across Sudan in 2022, with many needing shelter, water, sanitation and other support.

Response priorities in 2022

Humanitarian organizations scaled up assistance in 2021 despite operational challenges posed by COVID-19, the economic crisis and the October 2021 coup d'état. Improvements in humanitarian access under the transitional civilian government have continued, and sustained humanitarian access has been witnessed in areas under non-State armed groups' control.

Evolution of needs and requirements (2016–2022)

HRP	People in need	People targeted	Requirements (US\$)	Funding coverage
2022	14.3 M	10.9 M	1.9 B	
2021	13.4 M	8.9 M	1.9 B	36%
2020	7.5 M	5.6 M	1.5 B	53%
2019	5.7 M	4.4 M	1.1 B	52%
2018	5.5 M	4.3 M	1.0 B	61%
2017	4.8 M	4.1 M	804.0 M	60%
2016	5.8 M	4.6 M	971.8 M	58%

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service



In 2021, operations continued to grow in response to an increment of humanitarian needs driven by unaddressed root causes of the crisis and underlying factors. By June 2021, humanitarians reached more than 7 million people with some form of assistance. In 2022, US\$1.9 billion is required to support the humanitarian response. The funding requirements are backed up by detailed activity-costing with targets at the locality (second administrative level).

In 2022, the Humanitarian Response Plan (HRP) will ensure an inclusive and dignified humanitarian response to the most vulnerable people within Sudan. The response will prioritize life-saving multisectoral assistance in areas with the highest convergence of severity of needs, including response readiness for recurring flooding, conflict and disease outbreaks. Partners will scale up food assistance, disease prevention and response, and emergency response to those newly displaced by conflict or flooding. The response will also prioritize life-sustaining services, such as essential health services, surveillance of and response to waterborne and vector borne diseases, education, livelihood opportunities, water and sanitation, supplemental nutrition and school feeding. Finally, the HRP will prioritize the mitigation of and response to protection needs. Where possible, the humanitarian aid delivery will also aim to build community capacity, sustain durable solutions and promote social peace.

Achievements and innovations

The 2022 HNO and HRP were developed using evidence-based primary and secondary data sources, such as a vulnerability assessment focused on refugees (BANVA), Displacement Tracking and Monitoring, in-depth secondary data review using the Data Entry and Exploration Platform (DEEP), the IPC and a Multi-Sectoral Needs Assessment (MSNA). The 2021 MSNA survey for Sudan overcame most of the challenges faced during the previous year, significantly reducing the phone-based data collection and increasing the geographical coverage. A total of 19,000 households were reached during the survey, a third more than in 2020, with 76 per cent of the survey (14,405 households) using a face-to-face approach despite COVID-19-related challenges.

Additionally, DEEP was introduced in Sudan for the first time, producing a first-level analysis of secondary data available, including key findings aligned with the Joint Intersectoral Analysis Framework. DEEP analysed 162 reports from 2021, cataloguing 7,212 unique data points. The secondary analysis document comprises 10 sections covering everything from the context and humanitarian access to the impact of COVID-19 and priority of needs.



Part two: Inter-Agency Coordinated Appeals

West and Central Africa Regional Overview

West and Central Africa face some of the world's most complex challenges. Acute and prolonged crises are deteriorating, and needs are growing. Millions of people are being driven to the edge of survival due to a confluence of factors, including conflict and violence, extreme poverty, weak governance, chronically high food insecurity and malnutrition, and the impact of climate change.

In conflict-affected regions, civilians are facing a dramatic protection crisis in an increasingly volatile context. The most vulnerable people experience multiple devastating consequences, driving persistent and fast-escalating needs. More than 1 in 10 people living in West and Central Africa (i.e., over 61 million people) will require assistance and protection in 2022.¹

Violence and climate shocks are driving a dramatic food crisis. Millions of people who earn their livelihoods through farming, trade and livestock have been significantly affected. Across the region, more than 58 million people are facing severe food insecurity, the highest number recorded since 2016. The situation could escalate, as millions of conflict-affected people have little or no access to their land and livelihoods. Close to 14 million people are acutely food insecure in the Sahel – more than double the number of two years ago. In the Central Sahel (i.e., Burkina Faso, Mali and western Niger), insecurity has rapidly deteriorated, and displacement has increased by 30 per cent between 2020 and 2021.

Bangassou, Central African Republic. Displaced people who found refuge on an island cross the river to meet with aid workers near Bangassou, CAR. *OCHA/Adrienne Surprenant*

The number of people in need of humanitarian assistance in West and Central Africa increased by twenty million in the past two years

This increase is related to eight protracted crisis and the deterioration of the situation in the DRC and the Sahel countries. Over 60 million people in the region are in need and nearly 32 million are targeted to receive humanitarian assistance.

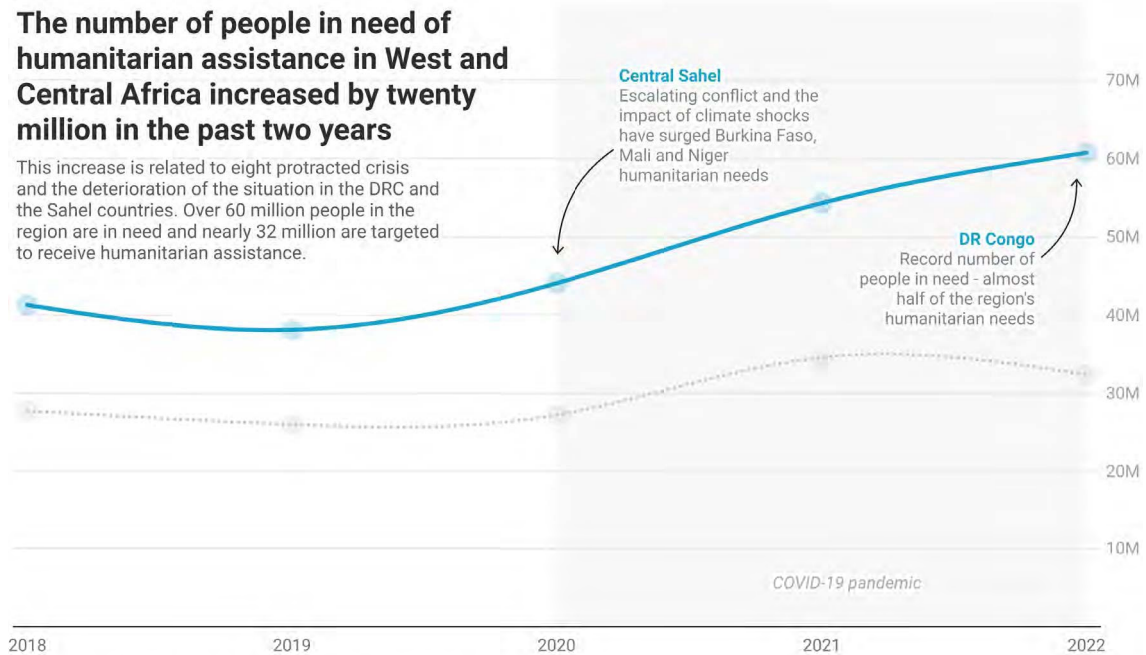


Chart: Global Humanitarian Overview 2022 • Source: Humanitarian Insight

Violence has uprooted more than 15 million people – 2 million more people than one year ago. Insecurity and violence threaten access to health, water, sanitation and hygiene services, depriving communities of access to vital services, increasing human rights violations, and jeopardizing social cohesion. Close to 5.8 million people have been forced to flee their homes across the Sahel in 2021 – more people than ever before. This large-scale displacement places additional strain on weak services and scarce natural resources.

Many of those displaced have been forced to flee several times, further adding to their vulnerabilities. In the Democratic Republic of the Congo (DRC) and the Central African Republic (CAR), long-running conflict and protracted crises continue to affect millions of people, with severe protection risks, forced displacement and high levels of food insecurity. In western Cameroon, violent conflict in the south-west and north-west regions has displaced more than 700,000 people. Since 2015, the number of violent attacks increased eightfold in the Central Sahel and tripled in the Lake Chad basin, leading to additional displacement and needs.

Climate change is compounding these issues, as a scarcity of natural resources, particularly water and pasture, fuels intercommunal tensions and conflicts between herders and farmers. Increasingly severe droughts are more frequent, and rainfall is irregular and more unpredictable. In 2021, flooding affected over 1.2 million people in 13 countries across the region. Heavy rains and floods continue to take a significant toll on human life, property, land and livestock.

This deepening crisis has already affected an entire generation, and the education of millions of children is compromised. Across the Sahel, some 5,412 schools are closed or non-operational² due to violence, jeopardizing children's future, especially girls, who are least likely to return to school after prolonged interruptions. For example, two out of three schools are closed in Cameroon's north-west and south-west regions, affecting up to 700,000 students.

Inter-Agency Coordinated Appeals: West and Central Africa (2022)

Country	Type	People in need	People targeted	Requirements (US\$)	Requirements (2017-2022)
Burkina Faso	HRP	3.5 M	3.0 M	561.4 M	
Cameroon	HRP	4.0 M	2.8 M	371.5 M	
CAR	HRP	3.1 M	2.0 M	461.3 M	
Chad	HRP	5.5 M	3.5 M	500.0 M	
DRC	HRP	27.0 M	8.8 M	1.9 B	
Mali	HRP	6.3 M	4.8 M	576.0 M	
Niger	HRP	3.0 M	2.1 M	475.0 M	
Nigeria	HRP	8.3 M	5.4 M	1.1 B	

The 2022 figures are provisional and pending the launch of the HRP.

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service

Women and girls are at heightened risk of sexual and gender-based violence. In Mali, the number of reported gender-based violence (GBV) cases increased by 40 per cent in 2021 compared to the previous year. In CAR, GBV is the first identified protection risk. The percentage of women and girls who experienced a protection incident doubled compared to the same period in 2020.

Worsening insecurity is constraining humanitarian access. Aid workers face a complex operating environment and are increasingly at risk. Insecurity forced operations to suspend in some locations, leaving communities without access to basic assistance.

Across West and Central Africa, the socioeconomic impact of COVID-19 is amplifying acute needs, exacerbating chronic vulnerabilities and food insecurity. Through COVAX and other channels, vaccination campaigns intensified in 2021, but actual vaccination rates remain at just 6 per cent average across the region.³

Projected situation in 2022 and beyond

In 2022, the situation will remain critical for millions of vulnerable crisis-affected people in West and Central Africa. Trends in the Sahel point towards further deterioration. Spillover effects into coastal countries, as experienced in 2021, will likely increase and affect more and more people.

Political instability persists. The coups d'état in Chad, Guinea and Mali, as well as renewed hostilities across the region's conflict areas and the upcoming elections in 2022, risk placing further strain on the region. In Cameroon's north-west and south-west regions, the fragmentation of non-state armed groups and increasing criminality have led to an increasingly volatile operating environment. In CAR and Niger, the overall protection and humanitarian



Beni, DR Congo. This young man's family is among those who have temporarily moved to Beni. When their village was attacked the children were in school, and they all fled, with no time to return home to find their mothers. Back in the village, they found that their house had been set on fire. "Today we live with our neighbour, who is always on the move in another village," he said. "We fear his return because we have no place to live. It is difficult to find food. It is not easy to endure famine and poverty because of the loss of our means of survival. I am a farmer, and my fields are in an area considered insecure due to the presence of armed men. I no longer have access to it, and part of it was set on fire by these same armed men." *OCHA/Endurance Nji*

situations risk further deterioration due to the absence of a political solution that can address the root causes of the crises. In DRC, national and provincial political dynamics and the reconfiguration of the UN Stabilization Mission in the Democratic Republic of the Congo (MONUSCO) could also influence the protection environment amid the emergence of new conflicts and forced displacement.

Close to 1,000 humanitarian partner organizations are working across the region to respond to affected people's most urgent needs. However, the scale-up of the response is hampered by a lack of funding and resources. Life-saving aid needs to be accompanied by longer-term interventions focused on reducing needs. Humanitarian and development efforts must be complementary, based on the principles of 'do no harm' and community acceptance. Investment is needed to address economic and gender inequalities, lack of access to basic services, human rights violations and non-inclusive governance. More significant resources would also help curb the climate emergency and the worrying rise in hunger.

References

¹ It is important to note that country methodology and geographic scope revisions might explain a change in number of people in need across the region.

² As of September 2021

³ People having received at least one dose of a COVID-19 vaccine.



Burkina Faso HRP

PEOPLE IN NEED

3.5 million

PEOPLE TARGETED

3 million

REQUIREMENTS (US\$)

561 million

Total population

21.5 million

Income level

Low income

INFORM Severity Index

4.1 / Very High

Consecutive appeals

2013 – 2022

People reached

1.6 million (2021)

In 2022, Burkina Faso will continue to confront a multidimensional crisis. Nearly one fifth of the national population now needs humanitarian assistance.

Widespread insecurity, violations of international humanitarian and human rights law, and reduced presence of the State in areas severely impacted by conflict have driven more than 1.4 million people from their homes, and affected access to basic services and livelihoods for an additional 2.3 million people. The conflict has exacerbated chronic vulnerability to climatic variance (drought, flooding). Combined with the effects of COVID-19, this left 2.9 million people severely food insecure (IPC 3+) during the 2021 lean season.

Insecurity now marks over half the country. The reported number of security incidents has risen from 211 in 2019 to 720 in the first eight months of 2021.¹ The number of internally displaced persons (IDPs) increased by 32 per cent between December 2020 (1.1 million) and September 2021 (1.4 million).² Increased violence against civilians in 2021 makes additional large-scale displacements likely. These population movements are often preceded by serious human rights violations, primarily affecting women, children, elderly people, people living with disabilities, and host communities who continue to receive and support new internally displaced persons (IDPs). Nearly 80 per cent of registered IDPs are women and children under 15 years of age (53 per cent female; 54 per cent boys and girls under 15 years of age). The number of Burkinabè seeking asylum in neighbouring countries has also increased, doubling to 38,000 in just six months by October 2021.

In 2021, Burkina Faso has also experienced three major epidemics in addition to COVID-19: measles, vaccine-derived polio virus type 2, and hepatitis E. For more than 900,000 people, access to health care is affected by the closure or reduced capacity of 367 health centres in seven regions, while the number of closed schools increased by 20 per cent to 2,735 in eight regions in October 2021, affecting 316,000 children.



Louda, Burkina Faso. The Louda market garden is part of a resilience activity, aiming to go beyond food assistance. Currently, there are more than 1.1 million IDPs in Burkina Faso due to insecurity. Many of these people have relied on food assistance for more than two years. The market garden project aims to promote social cohesion and reduce the strain that IDPs put on host communities' scarce resources. IDPs and the hosting community work side by side to grow vegetables for home consumption and selling. This project allows people to acquire new agricultural skills, generate an income and have access to nutritious fresh fruits and vegetables. *WFP/Evelyn Fey*

Projected situation in 2022 and beyond

As the crisis continues to spread rapidly, the humanitarian community has adopted a national approach to planning for 2022, in contrast to the focus on specific regions of previous years. It also has decided a stricter targeting and is working to ensure the continuity of approaches across the humanitarian-development continuum. As a result, the total number of people in need of humanitarian assistance stands at 3.5 million in 2022. The most vulnerable groups continue to be IDPs, refugees, people in highly insecure areas without regular access to services, and communities hosting large numbers of IDPs. Women, children and the elderly, as well as people living with disabilities, have the greatest concentration of needs.

Nearing the end of the third year of sustained, large-scale humanitarian consequences of the crisis, 73 per cent of IDP households have been displaced for over 12 months and 34 per cent for over 24 months. More IDPs express their intention to integrate in their host locations (mostly urban settings) rather than return to their places of origin; up to 34 per cent of IDPs now compared to 9 per cent in 2020. This foreshadows the need to shift the type of support towards achieving durable solutions and stepping up nexus-related engagement. Unless further investment in complementary humanitarian and development approaches materializes, continued displacement and limited access to basic services, such as water and sanitation, education, health care and protection, are likely to increase vulnerability and needs in 2022 and beyond.

Inconsistent rainfall in 2021 coupled with a lack of harvests in some areas due to drought and insecurity have had a major impact on agricultural production. In the Nord, production has dropped by 50 per cent on average and up to 80 per cent in some pockets. This will result in additional food and nutritional needs well ahead of the 2022 lean season (July-September). Additional efforts across the humanitarian-development spectrum are required to enhance off-season cultivation and resilience initiatives for affected communities.

Moreover, water scarcity, combined with poor access to clean water and to improved sanitation and hygiene, is increasing the impact of water-related diseases and protection risks for the most vulnerable women and children, who are most often responsible for fetching water for the household.

Evolution of needs and requirements (2016–2022)

HRP	People in need	People targeted	Requirements (US\$)	Funding coverage
2022	3.5 M	3.0 M	561.0 M	
2021	3.5 M	2.9 M	607.9 M	41%
2020	2.2 M	1.8 M	295.0 M	61%
2019	1.2 M	900.0 K	187.0 M	52%
2018	954.0 K	702.0 K	90.3 M	62%
2017	860.6 K	477.8 K	61.1 M	49%
2016	1.6 M	833.0 K	90.5 M	61%

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service

Response priorities in 2022

Despite the continued deterioration of the security environment, the humanitarian community has made considerable effort in 2021 to extend operations to a greater number of people in need and into hard-to-reach areas. As a result, some access improvements have been achieved through improved community engagement and collaboration across CMCoord, UNHAS and logistics platforms, for example in the Sahel and Nord regions.

Cumulatively, the humanitarian community reached at least 1.6 million people in the first half of 2021, or 55 per cent of the annual target, despite funding shortages. The humanitarian team undertook a strict reprioritizing effort for the last quarter of 2021, which is systematically advancing into the 2022 planning. In 2022, it will be essential to further strengthen community engagement and accountability to expand humanitarian acceptance and access, and to reinforce collaboration with development and peace partners to ensure enhanced engagement across the triple nexus and to help address the root causes of the conflict.



The results of the 2021 community perception and satisfaction survey again show that affected communities rank food security, health care and adequate shelter among their most urgent needs, as well as increased access to basic services, including WASH, education and protection. The results also indicate that the inadequacy of available assistance is a source of dissatisfaction, both in terms of the number of people reached and the duration of support.

Achievements and innovations

For 2022, the humanitarian community in Burkina Faso has applied a targeting methodology that takes into account the severity of needs and accessibility of services by populations in need of assistance; conducts a geographic analysis to focus on areas in which populations are on the move (displacement) and/or face challenges in accessing basic services and assistance through regular national structures; and considers the humanitarian community's capacity to respond to these needs.

Through this process, the humanitarian community is enhancing the rigour of our targeting process and thus the credibility of our financing request. Affected populations, national authorities and donors considering the Burkina Faso Humanitarian Response Plan (HRP) can have greater confidence that the humanitarian community has the capacity to deliver the support indicated, and that we are not replacing national systems but prioritizing their extension to people most in need. In tandem, the development community in Burkina Faso is developing the new UN Sustainable Development Cooperation Framework, in collaboration with humanitarian partners, which offers a unique opportunity to bridge from the HRP through the Cooperation Framework to Leave No One Behind and ensure that the triple nexus approach becomes a reality.

References

¹ ACLED, 2021

² CONASUR.



Cameroon HRP

PEOPLE IN NEED

4 million

PEOPLE TARGETED

2.8 million

REQUIREMENTS (US\$)

371.5 million

Total population

27.2 million

Income level

Low middle

INFORM Severity Index

4.2 / Very High

Consecutive appeals

2014 – 2022

People reached

1.6 million (2021)

Nine out of ten regions of Cameroon continue to be impacted by three complex humanitarian crises: the Lake Chad basin conflict, the North-West and South-West (NWSW) crisis and the Central African Republic (CAR) refugee crisis.

Humanitarian needs are compounded by structural development weaknesses and chronic vulnerabilities that further challenge the long-term recovery of the affected people. Despite the response efforts deployed, the severity of humanitarian needs in Cameroon keeps growing due to the prolonged crises, insecurity and displacement, the impact of COVID-19 as well as climate-related effects, such as floods and droughts, weakening remaining household resilience.

The number of people displaced due to the Lake Chad basin conflict continues to increase. As of 30 September 2021, over 607,000 people are displaced in the Far North,¹ an increase of over 47,000 IDPs and returnees since September 2020.²

Conflict over natural resources in the Far North has intensified. In August 2021, intercommunal clashes in Logone-Birni (Logone et Chari) over access to water displaced over 21,000 people, including almost 9,000 who sought refuge in Chad. Furthermore, the Far North region experienced exceptional flooding in 2020 and drought in 2021, severely reducing the crop yields triggering acute food shortages. This heavily affected women, who represent 71 per cent of workers in the informal agricultural sector in Cameroon. Together with the armed conflict and the socioeconomic impact of COVID-19, the effects of the natural disasters have led to a more than 70 per cent increase in projected food insecurity from 2021 to 2022. Over 900,000 people were estimated to be food insecure from June to August 2022, compared to 630,000 people for the same period in 2021.³ Food and access to livelihoods thus remain the main priority for displaced persons as well as host-community members in the Far North.⁴

Cameroon's eastern regions are home to more than 315,000 vulnerable refugees from CAR.⁵ As of 30 September 2021, UNHCR reported the arrival of 14,034 new refugees fleeing instability in the country since December 2020. Access to livelihoods, food, WASH services and education remains limited for these refugees and their host communities. The steadily increasing number of refugees continues to exert significant pressure on natural resources and basic social services in the host areas.



South-West region, Cameroon. An IDP family who have been displaced due to flooding, in the Logone et Chari division, Far North region. *OCHA/Mouange*

The crisis in the NWSW regions has led to the displacement of over 1 million people since 2017,⁶ including to other regions of Cameroon and to Nigeria. Short-term, pendular movement continues within the two regions, but a certain return movement to the NWSW has been observed in 2021, inter alia because of a lack of service and assistance in areas of displacement.⁷

Projected situation in 2022 and beyond

In 2022, 4 million people in Cameroon will need humanitarian assistance, including 2 million people in relation to the NWSW crisis, 1.2 million people in the Far North, and 477,000 people in relation to the CAR refugee crisis. Another 200,000 people will need humanitarian assistance due to the impact of COVID-19 and other epidemics.⁸ Insecurity is expected to remain high in the Far North and NWSW regions in 2022 and will continue to cause population displacement exacerbating limited access to food and other essential needs.

In the NWSW regions, extended lockdowns imposed by non-State armed groups (NSAGs), NSAG attacks and military operations have caused significant humanitarian consequences. Fragmentation of NSAGs and increasing criminality have led to an ever-more fragile and dangerous environment for humanitarians to operate in. Humanitarian access is expected to remain challenging in 2022, with underfunding being an additional impediment to reach people in need.

Thousands of people continue to suffer from human rights violations and abuses in the NWSW. Women, men, girls and boys are acutely affected by distinct protection risks. Food⁹ and drinking water are the top priority needs for the displaced population in these two regions, followed by health and education. An estimated 700,000 students are affected by the closure of two out of three schools in the NWSW regions. Attacks on education have forced

many families to send their children to the Littoral, West, and Centre regions to pursue their education. However, education remains among the top three priority needs of the displaced population in these three regions¹⁰

Response priorities in 2022

The 2022 Humanitarian Response Plan (HRP) will prioritize the most vulnerable 2.8 million people, based on an analysis of the severity of needs across sectors. A total of 1,630,000 people affected by the NWSW crisis are targeted for assistance (80 per cent of the PIN), 320,000 people affected by the CAR crisis are targeted (67 per cent of the PIN), and 776,000 people are targeted in the Far North (63 per cent of the PIN).¹¹ A total of US\$371.5 million is requested to meet the needs of the 2.8 million people targeted for assistance.

Evolution of needs and requirements (2016–2022)

HRP	People in need	People targeted	Requirements (US\$)	Funding coverage
2022	4.0 M	2.8 M	371.5 M	
2021	4.4 M	3.0 M	361.6 M	44%
2020	4.4 M	2.6 M	317.0 M	49%
2019	4.3 M	2.3 M	298.9 M	44%
2018	3.4 M	1.4 M	319.7 M	45%
2017	2.9 M	1.2 M	238.1 M	49%
2016	2.7 M	1.1 M	232.2 M	69%

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service

In addition to meeting the most urgent needs, the approach taken in Cameroon recognizes that humanitarian needs are exacerbated by underlying structural causes, including poverty and gender disparities. The implementation of the humanitarian-development-peace nexus approach has been further strengthened in 2021 in the Far North and eastern regions, and it has been integrated into the humanitarian response strategies in 2022. When and where appropriate, response activities are planned in complementarity with development and State actors to maximize impact in selected geographic areas, boosting the contribution of humanitarian action towards the collective outcome, focusing on providing durable solutions for the populations affected by forced displacement. Regarding durable solutions for refugees, UN agencies and partners will focus on the socioeconomic inclusion of refugees and the voluntary repatriation of 11,000 refugees, including 5,000 Central Africans and 6,000 Nigerians as part of existing responses towards resilience building. Protection against violence and abuse and gender sensitive programming remain priorities in the humanitarian response in Cameroon, including through promoting the centrality of protection and gender mainstreaming.

Achievements and innovations

People affected by crises in Cameroon have significant psychosocial mental health needs. In the 2021 HRP, the education, health and protection sectors, including the child protection and gender-based violence Areas of Responsibility (AoRs), included psychosocial support to people affected by crisis as a priority in their respective sectoral strategies. The sectors committed to work together to provide psychosocial support and mental health care to improve the well-being of people traumatized by violence, and to build resilience among affected populations.

Several projects aiming to improve the mental health of affected people were included in the HRP 2021. In 2021, more than 2,600 primary and secondary schoolteachers in 10 regions have been trained on how to include psychosocial support in the curricula and how to deliver psychological first aid to students, other teachers and community members. It is estimated that trained teachers will reach more than 300,000 students in primary and secondary schools in 2021. Mental health working groups, led by the health sector with the active participation of education and protection partners, were established in 2021 at the national level and in three regions (Far North, North-West and South-West). The health, protection and education sectors plan to further strengthen an integrated approach on mental health programme delivery in 2022.

References

¹ Overall, 607,252 people are displaced in the Far North as of 30 September 2021: 357,631 IDPs (IOM, DTM, July 2021); 114,364 Nigerian refugees (UNHCR, September 2021); 135,257 returnees (IOM, DTM, July 2021).

² Overall, 559,871 people were displaced in the Far North as of 30 September 2020: 321,886 IDP (IOM, DTM, June 2020); 114,496 Nigerian refugees (UNHCR, September 2020; IOM DTM June 2020); 123,489 returnees (IOM, DTM, June 2020).

³ In October 2020, Cadre Harmonisé (Government of Cameroon, WFP, FAO, et al) estimated 629,787 people to be food insecure from June to August 2021. In October 2019, Cadre Harmonisé estimated 324,285 people to be food insecure from June to August 2020.

⁴ IOM, OCHA, MSNA July 2021; IOM, OCHA, MSNA December 2020.

⁵ 315,747 CAR refugees in the East, Adamawa, and North regions, UNHCR, October 2021.

⁶ 347,542 within the NWSW regions (MSNA, OCHA, August 2021); 383,596 returnees (MSNA, OCHA, August 2021); 302,000 to other regions (5,301 to Adamawa (MIRA, August 2019, UNHCR), 60,084 to Yaoundé, Centre (MSNA, CHOI, OCHA, September 2021); 81,298 to Littoral (MSNA, OCHA, September 2021); 81,298 to West (MSNA, OCHA, September 2021)); 67,500 fled to Nigeria (UNCHR, August 2021).

⁷ An increase of return movements to the NWSW since 2019 can be observed: 203,634 returnees were registered in the August 2019 MSNA, 360,547 returnees were registered in the August 2020 MNSA, 333,915 returnees were registered in the February 2021 MSNA, 383,596 returnees were registered in the August 2021 MSNA.

⁸ The figures are rounded up. The exact estimated figures are as follows: The overall PIN for Cameroon is estimated at 3,951,082, for the NWSW at 2,035,495, for the Far North at 1,239,963, for the CAR refugee crisis at 476,734. Other people in need, not related to one of the three crises, are 198,890.

⁹ In 2022, 776,000 and 400,000 peoples are projected to be food insecure in the North-West and the South-West, respectively.

¹⁰ MSNA Littoral and West, OCHA, September 2021; MSNA Centre, OCHA, CHOI, September 2021.

¹¹ The figures are rounded up. The exact estimated target for Cameroon is 2,790,516. The target for the NWSW crisis is estimated at 1,629,132, for the Far North at 776,077, for the CAR refugee crisis at 319,586, for the others in need, not in relation to one of the three crises, the target is 65,721.



Central African Republic HRP

PEOPLE IN NEED

3.1 million

PEOPLE TARGETED

2 million

REQUIREMENTS (US\$)

461.3 million

Total population

4.9 million

Income level

Low income

INFORM Severity Index

4.3 / Very High

Consecutive appeals

2003 – 2022

People reached

1.7 million (2021)

An estimated 3.1 million people need humanitarian assistance in the Central African Republic (CAR). Overall, at the intersectoral level, two thirds of the country’s sub-prefectures have reached extreme severity levels (Severity Phase 4, the remaining one third have reached severe severity levels (Severity Phase 3)).¹

According to data from the 2021 Multisectoral Needs Assessment (MSNA), three quarters of adults are concerned about the safety of their household members. The percentage of women and girls who experienced a protection incident in the past 30 days doubled compared to 2020, with gender-based violence (GBV) now being the first protection risk. Blatant violations of human rights, including on minorities, and international humanitarian law are reported. One in four households recently surveyed experienced movement restrictions. Nearly 1 million people have been affected by shocks, as recorded by the alerts issued by the UNICEF/Rapid Response Mechanism (RRM).

One in four Central African has been uprooted from their homes – either within CAR or in neighbouring countries. This is the highest displacement level ever recorded since 2015. Food insecurity is on the rise, with 73 per cent of the population reporting an insufficient food consumption. Nine out of ten Central Africans have resorted to negative coping mechanisms. Seventy per cent of female-headed households now earn less than XAF 30,000 per month (US\$54); this proportion increased by 30 per cent compared to last year.

The economy has experienced two difficult years due to the combined impact of COVID-19 and the deteriorating security situation. In 2021, the agricultural harvest decreased by 40 per cent compared to 2020. The number of attacks on civilian infrastructure, such as schools and hospitals, has never been so high. Conflict has severely impacted access for affected civilians to already limited basic services. One in three Central Africans does not have access to essential services within an hour’s walk. Security incidents affecting humanitarian workers continued to increase: 364 incidents were recorded from January to October compared to 339 during the same period in 2020. Three humanitarian workers were killed and 24 injured.



Batangafo, CAR. This mother of eight prepares food in front of her house near the sports field at the Batangafo site, CAR. She was part of the first wave of refugees who arrived there in 2014. “We used to sleep like this, with nothing,” says the widow, who sells chikwangué to support her family. “Now there is a bit of calm but still a lot of difficulty finding food for my children.” Batangafo is the city with the second-highest number of IDPs in CAR, with nearly 35,000 people in seven sites. *OCHA/Adrienne Surprenant*

Projected situation in 2022 and beyond

The equation is simple and the result dramatic for the Central African population: as the conflict has intensified since December 2020, all the drivers of the humanitarian crisis have worsened (increasing protection risks, increasingly limited access to essential services, deteriorating security situation, upsurge in violent shocks, loss of purchasing power and growing poverty), further worsening the already extremely dire humanitarian situation faced by CAR’s population.

With a score of 7.8, CAR ranks six in the world in terms of risk level according to the INFORM 2021 index, with very high risks of conflict, socioeconomic vulnerabilities and lack of human capital. The projection of the IPC Analysis conducted by the Food Security Cluster indicates that 2.4 million people will be in need if there is no food assistance provided by humanitarian actors during the lean season. According to World Bank projections, more than 3.44 million people, or 70 per cent of the Central African population, are expected to be living in extreme poverty in 2021-2022. By 2025, GDP per capita is expected to be roughly similar to that of 2003.

In the absence of a political solution, there is a significant risk of further deterioration of the overall protection and humanitarian situation in the country. As a result, violence against civilians, civilian infrastructure and humanitarian actors is likely to continue, as will the pressure on humanitarian actors, who anticipate several simultaneous crises in different parts of the country. The most vulnerable population groups, including minorities, will continue to require a sustained and principled humanitarian response.

Response priorities in 2022

The humanitarian community assisted 1.7 million people (94 per cent of the 2021 HRP target) with multisectoral assistance between January and September 2021, despite ever-growing needs and an extremely insecure operating environment. This assistance was thanks to flexible response approaches and mutualization of resources. Three quarters of beneficiaries have reported feeling safe accessing humanitarian assistance, which is higher than last year, and that they trust humanitarian actors.

Evolution of needs and requirements (2016–2022)

HRP	People in need	People targeted	Requirements (US\$)	Funding coverage
2022	3.1 M	2.0 M	461.3 M	
2021	2.8 M	1.8 M	444.8 M	82%
2020	2.6 M	1.6 M	387.8 M	68%
2019	2.9 M	1.7 M	430.7 M	70%
2018	2.9 M	1.9 M	515.6 M	54%
2017	2.2 M	1.6 M	497.3 M	46%
2016	2.4 M	1.9 M	531.5 M	38%

In 2022, humanitarian actors aim to target 2 million people. They will underpin their response around two pillars: a) strengthened efforts to protect and assist the most vulnerable, including people living with disabilities, and women, girls and boys who are at risk of GBV; and b) a response as close as possible to those most in need, including in hard-to-reach areas, and informed by affected people's choices, feedback and participation. Principled, integrated, flexible and multisectoral response approaches in areas under severity 4 will be further scaled up. In line with identified priorities under the humanitarian-development-peace nexus, humanitarian actors will continue to strengthen area-based approaches and complementarity with durable solutions projects, social protection schemes, funding instruments and disaster risk reduction programmes.

References

¹ Based on the Joint Intersectoral Analysis Framework Severity Reference Scale

Chad HRP

PEOPLE IN NEED**5.5 million****PEOPLE TARGETED****3.5 million****REQUIREMENTS (US\$)****500 million****Total population**

16.9 million

Income level

Low income

INFORM Severity Index

4.2 / Very High

Consecutive appeals

2004 – 2022

People reached

2 million (2021)

Chad continues to be afflicted by prolonged humanitarian crises due to growing insecurity in the country and in neighbouring countries, as well as socioeconomic, health and climate-related challenges in a context of political transition. The combined effects of conflict, health emergencies and climate change affected an estimated 5.5 million people, or one third of the population, in 2021.

In Lac Province, where armed groups operating in the Lake Chad basin are still active, the protection of civilians remains a major challenge and humanitarian access is often affected by the operations of armed actors. Due to insecurity, the number of forcibly displaced people in Chad has reached an unprecedented level, with over 1 million refugees, internally displaced persons (IDPs) and returnees. In Lac, more than 406,500 people, or 60 per cent of the province's population, are internally displaced. In addition, the country hosts over 528,000 refugees and asylum seekers, including 42,700 people who have arrived in 2021. These people, mostly from Sudan, the Central African Republic (CAR), Nigeria and Cameroon, depend primarily on humanitarian assistance. In addition, more than 100,000 Chadians returned to Chad from CAR and Lake Chad basin countries due to insecure social political environment. Expulsions of Chadian nationals from Libya to Chad's Ennedi Ouest Province have continued, with 560 expulsions in 2021 and 1,100 last year.

In 2021, more than 1.8 million people have been affected by severe food insecurity (IPC phase 3 to 5 of the Cadre Harmonisé and 3.3 million people have been "under pressure" (phase 2 of the Cadre Harmonisé). The acute malnutrition level among children exceeds the emergency threshold of 10 per cent for global acute malnutrition (GAM) and 2 per cent for severe acute malnutrition (SAM). At the national level, the prevalence of GAM is 11 per cent and that of SAM is 2.1 per cent, according to the SMART survey results published in October 2021. The prevalence of acute malnutrition remains a concern in 16 of the country's 23 provinces. Malnutrition is exacerbated by the critical under-five mortality rate, which has reached two persons for every 10,000 inhabitants per day in two provinces.



Lac region, Chad. A woman sits on a fishing boat in Lake Chad. OCHA/Naomi Frerotte

Acute malnutrition affects 1 million children under 5 years of age, including more than 270,000 children affected by SAM and 760,100 children affected by moderate acute malnutrition. This is due to several factors, including food insecurity, childhood diseases, conflicts, prolonged displacements and poor access to basic services such as health care, potable water and education.

In Chad, health emergencies affect nearly 2 million people. The most vulnerable among them are children under 5 years of age, pregnant and breastfeeding women, people with disabilities and the elderly. The most recurrent health emergencies are malaria and epidemics such as measles, COVID-19, cholera, leishmaniasis, chikungunya, meningitis, polio and influenza.

Heavy rains in 2021 affected more than 256,000 people and caused flooding that destroyed homes, basic social infrastructure and the livelihoods of many farmers and herders in southern provinces (Tandjile, Moyen Chari, Mandoul, and Logone Oriental) and in the northern part of the country (Borkou and Ennedi-Ouest).

Women and girls are particularly vulnerable to these crises because of harmful social norms and cultural practices that contribute to limiting their access to basic social services (health, education, protection, household economy) and to increasing risks of gender-based violence (GBV).

The humanitarian situation in Chad remains marked by severe and growing needs in a context of underfunding. As of late October, only 22 per cent of the funds required in 2021 had been mobilized. However, despite the lack of resources, humanitarian partners, in coordination with the Government, have managed to provide emergency assistance to 2 million people (out of a target of 4 million) with food, nutritional supplies, shelter, protection, health care, education and WASH. Increased funding would reduce the vulnerability of crisis-affected people and promote anticipatory actions to make them more resilient to shocks.

Projection of the situation in 2022 and beyond

Chad will continue to be affected by four major interconnected crises: population movements, food insecurity and malnutrition, health emergencies and the consequences of climate change.

The security context will continue to be affected by the political landscape and dynamics surrounding the organization of elections after the transition period and the security situation in neighboring countries, including the presence of various rebels groups. The presence of non-state armed groups (NSAGs) in the Lake Chad basin and the military operations against these groups are likely to perpetuate the current displacement situation and trigger new displacements in Lac as well as new influxes of refugees from Nigeria.

Nearly 1 million people will be at risk of protection, some 344,000 of whom are anticipated to require protection from GBV. The active presence of NSAGs in northern CAR will slow down the potential return of Central African refugees from southern Chad and could result in new arrivals of Central African refugees and Chadian returnees during the year. In addition, security instability in Libya will result in new waves of returnees to northern Chad. However, political developments in Sudan could lead to a gradual return of Sudanese refugees from eastern Chad. Intercommunal conflicts, particularly conflicts between farmers and herders, remain important factors of insecurity that could lead to loss of life and property in the east and south of the country. The consequences of climate change, particularly droughts and floods, will affect agroforestry production, with negative impacts on food security and malnutrition. Access to basic social services, especially health related services, are particularly needed due to the persistence of epidemics (such as cholera, measles, leishmaniasis, meningitis and malaria) and education, will remain difficult because of the lack of adequate health care, as well as the inadequacy of school infrastructure and the lack of qualified teachers. The persistence of COVID-19 could further affect the living conditions of the most vulnerable people.

Evolution of needs and requirements (2016–2022)

HRP	People in need	People targeted	Requirements (US\$)	Funding coverage
2022	5.5 M	3.5 M	500.0 M	
2021	5.5 M	4.0 M	617.5 M	30%
2020	4.8 M	2.6 M	500.0 M	44%
2019	4.3 M	2.0 M	476.6 M	58%
2018	4.9 M	2.1 M	543.8 M	46%
2017	4.6 M	2.7 M	588.6 M	41%
2016	2.3 M	1.8 M	541.3 M	52%

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service

Response priorities in 2022

In 2022, the humanitarian response will continue to be guided by the 2017 - 2022 multi-year strategic framework and its objectives: to save and preserve life and dignity through integrated and coordinated multisectoral emergency assistance; to reduce vulnerability by building resilience and resistance to recurrent shocks; and to contribute to the protection of the most vulnerable populations, particularly children, girls and women, and to strengthen accountability to affected populations.

The response will promote an integrated multisectoral approach through defined multisectoral strategies (WASH in nutrition, WASH in school, WASH in health), including for refugees, and will strengthen the complementarity between humanitarian, development and peace action to contribute to the achievement of collective results. This approach will also devote particular attention to the centrality of protection and the fight against GBV. In this context, strengthening the Government's leadership and the search for durable solutions for people in movements situations (IDPs, returnees and refugees) will be a priority.

Planning will be based on, among other things, the specific vulnerabilities of women, girls, boys, children and people with disabilities. It will integrate protection concerns and address the humanitarian impact of the COVID-19 pandemic. The centrality of protection, gender and accountability to affected populations will be reinforced through community-based approaches and disaggregation of data to prevent protection risks and ensure basic human rights, taking into account the situation of people with specific needs. Emergency preparedness, response and risk reduction measures remain vitally important to mitigate the humanitarian consequences of climate change. The use of cash transfer modalities, based on a feasibility and market accessibility study, will be further strengthened. Measures to prevent the sexual abuse and exploitation of aid beneficiaries will be strengthened through sensitizing humanitarian staff and beneficiaries as well as implementing monitoring and complaint management tools.

The humanitarian community estimates that in 2022, 5.5 million people will need humanitarian assistance out of Chad's population of 16.8 million. This figure is calculated based on the projection of people affected by food insecurity (IPC phase 2 and phase 3 and plus of the Cadre harmonisé) as well as updated data on people in displacement situations.

The humanitarian response will target 3.5 million people with an estimated funding requirement of approximately US\$500 million. This funding requirement is less than that of the HRP 2021 (\$617.5 million) and 2020 (\$545.3 million), as the 2022 HRP seeks to complement other planning frameworks, such as the National Development Plan and stabilization programmes under peace building funds.¹

References

¹ The target population and required funding are estimates based on "people in need" adjustments and are subject to change after clusters' final calculations.



Democratic Republic of the Congo HRP

PEOPLE IN NEED

27 million

PEOPLE TARGETED

8.8 million

REQUIREMENTS (US\$)

1.88 billion

Total population

92.4 million

Income level

Low income

INFORM Severity Index

4.6 / Very High

Consecutive appeals

1999 – 2022

People reached

7.1 million (2021)

The Democratic Republic of the Congo (DRC) remains one of the world’s most complex and protracted humanitarian crises. Armed conflict continues unabated in the eastern part of the country, particularly in North Kivu and Ituri Provinces, where the Government has declared a state of siege.

Almost 5.5 million people are still uprooted, the highest count in Africa. In 2021 alone, there were an estimated 1.5 million displacements.¹ DRC also currently hosts 517,790 refugees from neighbouring countries.²

According to the latest IPC cycle, 27 million people face acute food insecurity,³ which remains the highest number for a single country in the world. In addition, an estimated 4 million children under 5 years of age are acutely malnourished, a 17 per cent increase from last year.⁴

Violent conflict, epidemics and natural disasters continue to compound high levels of poverty, weak public infrastructure and basic social services, as well as conflict dynamics over land and mineral resources. Since October 2021, a new Ebola outbreak has emerged in North Kivu with 11 cases,⁵ adding to the complexity of the humanitarian situation in the highly volatile northern part of the province.

COVID-19 continues to place a toll on the population, with at least 57,879 confirmed cases⁶ and expansion throughout the territory. These developments come in addition to recurring epidemics such as cholera and measles. As of October, there have been 6,208 cases of cholera and 50,046 cases of measles registered since the beginning of the year. This is despite the end of the national measles epidemic in August 2020.⁷

Natural disasters have also placed their mark on humanitarian response. On 22 May 2021, the eruption of Mount Nyiragongo led to the temporary displacement of over 400,000 residents of Goma, leaving an estimated 10,000 people homeless.

The volatile security situation, particularly in the eastern part of the country, and poor infrastructure continue to hinder access to affected people. DRC remains one of the riskiest environments for humanitarian workers. At least 260 security incidents directly affecting humanitarian personnel or assets have been reported since the beginning of 2021.⁸



Kotoni, DRC. This man sits at a desk in the primary school where he found refuge with his family of five after fleeing their village. At night, six households (30 to 40 people) gather to sleep here. He said: “The conditions are very bad. We have no money; we came without anything. We only have the clothes we wear. It’s very crowded. We have sent our older children farther away so that they are in security.” Following violent clashes in the surrounding mountains, Kotoni village received more than 9,000 displaced people, doubling its population. Around half of the displaced families have found refuge with host families. The others have built makeshift shelters or are sleeping in the school’s classrooms.

OCHA/Ivo Brandau

Projected situation in 2022 and beyond

Conflicts and population movements in eastern DRC are expected to continue in 2022 with persistent clashes, particularly between armed groups and national armed forces. High levels of acute food insecurity in several parts of the country and the effects of communicable diseases (cholera, measles, malaria, COVID-19) will remain. The situation could be further aggravated by the evolution of new epidemics (e.g the recent Ebola outbreak in North Kivu and the meningitis epidemic in Tshopo) and potential natural disasters, such as floods. Most vulnerable groups include IDPs, returnees and host communities.

National and provincial political dynamics and the reconfiguration of the UN Stabilization Mission in the Democratic Republic of the Congo (MONUSCO) could also influence the protection environment and local contexts. Regional risks include a renewed and increased influx of Congolese nationals expelled from Angola (towards the Kasai region and Kwango Provinces).

The number of people who need humanitarian assistance in DRC in 2022 (27 million) has increased compared to 2021 (19.6 million). This is due to an increased number of people in acute food insecurity (essentially due to increased geographical coverage of the IPC analysis). In addition, ongoing and intensified conflict in some areas (particularly North Kivu and Ituri but also parts of South Kivu and Tanganyika) will continue to severely affect people. Structural underdevelopment and humanitarian crises will continue to limit people’s access to essential goods and services, impacting their capacity for resilience.

Response priorities in 2022

The 2022 response strategy will focus on population movements, food insecurity, malnutrition, epidemics and protection incidents. In 2022, humanitarian partners will aim to assist 8.8 million of the most vulnerable people in DRC, with an estimated financial requirement of US\$1.88 billion. The Humanitarian Response Plan (HRP) has been further prioritized through intersectoral severity analysis and convergence and based on operational capacity to ensure the most severe needs are prioritized.

A key focus of the humanitarian response will be on Ituri, North and South Kivu and parts of Tanganyika, where there is a convergence of humanitarian impacts, deepening humanitarian needs and increasing vulnerability levels. The humanitarian community will deliver targeted, multisectoral assistance, and it will continue to reinforce its accountability to affected people (AAP), prevention of sexual exploitation and abuse, mitigation of gender-based violence risks in programme implementation, inclusion of people with disabilities and localization. Building on progress made since 2019, particularly based on joined efforts in Kasai and Tanganyika Provinces, humanitarian actors will continue operationalizing the nexus approach to help reduce vulnerabilities and decrease humanitarian needs.

Evolution of needs and requirements (2016–2022)

HRP	People in need	People targeted	Requirements (US\$)	Funding coverage
2022	27.0 M	8.8 M	1.88B	
2021	19.6 M	9.6 M	1.98B	36%
2020	15.6 M	8.1 M	1.82B	40%
2019	12.8 M	9.0 M	1.65B	44%
2018	13.1 M	10.5 M	1.68B	49%
2017	7.3 M	6.7 M	813M	59%
2016	7.5 M	6.0 M	690M	60%

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service

Achievements and innovations

During the 2022 Humanitarian Programme Cycle process, the DRC humanitarian community mobilized itself to better understand affected communities' perceptions of humanitarian actors and humanitarian interventions. For this purpose, under the overall coordination of the national and regional inter-clusters, humanitarian actors conducted a perception survey with a sample of women and men from IDP, returnee and host communities in six provinces, as well as a series of focus group discussions (57 groups targeting IDPs, returnees and host communities in six provinces) to collect quantitative and qualitative data to capture perceptions, concerns and information needs by crisis-affected populations.



Iga Barriere, DR Congo. A young man relaxes after spending another day digging for gold, without success. He is an IDP staying at Linji site, near Iga Barriere, in Ituri Province. Linji hosts several thousand IDPs who had to flee their villages. The site is located near small gold mines, and many IDPs go there for day labour or to dig for a lucky find. The fields and paths around the site expose IDPs, particularly women, girls and boys, to great risks. Protection incidents often go unreported. The young man explains: "I came from far away. Our village was completely destroyed. My father was killed. In total, 17 members of my family were killed. I'm alone with my mother and one young sister now. Even after a full day of work here, often I come home without anything. My mother is sick and weak. She cannot work anymore. Before we fled, I was a child. Now I have to take care of my family." *OCHA/Ivo Brandau*

This data, analysed jointly with the results of a Multi-Sector Needs Assessment conducted in one province, revealed a number of useful observations, including on the opinions of IDPs, returnees and host communities on current humanitarian interventions; on their preferences and priorities for future humanitarian interventions; and on priority information needs and preferred means of communication with humanitarian actors. The results were analysed during regional workshops. They will continue feeding into the ongoing planning and programming cycle and into the AAP Working Group at HCT to better inform decision-making, harmonize approaches and strengthen efforts.

References

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² UNHCR, Refugee data as of the end of July 2021.

³ IPC analysis, 20th cycle (July-December 2021), October 2021.

⁴ Bulletin SNSAP (August 2021).

⁵ WHO/MoH Ebola situation report (30 October 2021).

⁶ WHO/MoH situation report 292/2021 (19 October 2021).

⁷ Health Cluster data, epidemiological surveillance (week 41, 2021).

⁸ INSO, UNDSS, OCHA, as of end of September 2021.



Mali HRP

PEOPLE IN NEED

6.3 million

PEOPLE TARGETED

4.8 million

REQUIREMENTS (US\$)

576 million

Total population

20.9 million

Income level

Low income

INFORM Severity Index

4.4 / Very High

Consecutive appeals

2012 – 2022

People reached

2.5 million (2021)

In 2021, the humanitarian crisis in Mali worsened due to an increase in and expansion of intercommunal violence and attacks by non-State armed groups (NSAGs) in the central, southern and western regions.

The crisis was aggravated by the political upheavals marked by two coups d'état in August 2020 and May 2021, and persistent uncertainty of the political transition leaves the State with weakened capacity to meet people's basic needs. Over 90 per cent of the rural population live in a conflict area or fear that the conflict will spread to their locality.¹ The use of improvised explosive devices, the destruction of communication antennas, bridges and roads, the encirclement of villages and markets by NSAGs, and counter-insurgency military operations are hindering populations' access to services and livelihoods and preventing the mobility of personnel and humanitarian commodities.

Internal displacement of people increased by 100,000 in 2021, reaching over 401,000² quadruple the number seen two years ago.³ A total of 156,000 Malian refugees reside in neighbouring countries while Mali hosts and provides protection and assistance to 48,000 refugees. Mali's economic gains eroded, with 900,000 people (0.04 per cent of the population) falling back into poverty due to the socioeconomic impacts of COVID-19. Households' weakened capacity to recover is due to income loss, reduced remittances and a higher cost of living. The World Bank forecasts an increased poverty rate of 4.8 per cent in 2022. The protection crisis worsened with an increase in security incidents. Gender-based violence (GBV) actors reported 5,486 GBV incidents, an increase of 41 per cent of cases reported at the same period in 2020.⁴ The latest United Nations (UN) report⁵ of the UN Secretary-General recorded a 32 per cent increase in human rights incidents compared to 2020.

More than 1,640 schools are closed due to insecurity, affecting more than 2.9 million children, 40 per cent of whom are in four districts of the central Mopti region. In the southern regions, 10 per cent of schools are reported closed in Koulikoro, Koutiala and Sikasso, denying 30,000 children their education. To date, Mali reported over 15,800 COVID-19 cases. In 2021 health-service delivery declined by 22 per cent in comparison to 2020, a decrease of 31 per cent of



Gao, Mali. Displaced children dance and have fun at the camp for people who fled violent clashes in central Mali. They arrived at the site at the end of 2018. According to the 2020 census, the site hosts around 600 displaced households. *OCHA/Michele Cattani*

curative consultations and a decrease of 24 per cent of Penta vaccination coverage.⁶ Twenty-one health centres are non-functional and 82 are partially functional due to insecurity. Despite a decrease in the acute malnutrition rate from 9.4 to 7.2 per cent between 2019 and 2020⁷, 2.6 million people will need curative and preventive nutritional assistance in 2022, an increase of 1.5 million people compared to 2021. In 2021, 1.3 million people experienced an elevated level of acute food insecurity, the highest level since 2015, and 3 million people were affected by the poor rains and an extended lean season.

The humanitarian situation remains hampered by increased needs and low funding, with 32 per cent of funds mobilized as of 31 October 2021. Despite operational constraints, humanitarian partners assisted over 2.45 million of 4.7 million targeted people as of 30 September 2021.

Projected situation in 2022 and beyond

2022 forecasts a worsening multidimensional crisis politically, socio-economically and developmentally. Political and institutional reform implementation, as adopted in the 2 August 2020 “Plan d’Action du Gouvernement”, will be delayed. This will hinder the investment required for a return of State authorities and services throughout Mali, resulting in reliance on humanitarian assistance. The risk of sanctions imposed due to political delays is high. The persistence of State absence, rampant impunity and widespread armed violence will continue to generate multiple and protracted displacements, accentuating the civilian population’s vulnerabilities and negative coping mechanisms and increasing the risk of community tensions.

The combined shocks will reduce households' recovery and resilience capacities in severely crisis-affected areas. Exceptionally high cereal prices undermine households' ability to access sufficient and diversified food. The agricultural harvest of 2021-2022 forecasts a 20-50 per cent drop in crops is observed in the central regions, in the Sahelian strip of Kayes and Koulikoro, Gao, Kidal, Ménaka, Taoudéni and Timbuktu respectively due to floods, water scarcity and abandoned fields as a result of the escalation of violence.

The Humanitarian Response Plan will cover all geographical areas and vulnerable populations including internally displaced persons, returnees, local populations, migrants and refugees. In 2022, of the 12.9 million people affected by the crisis, 6.3 million need humanitarian assistance, which is an increase of 6.8 per cent compared to 5.9 million in 2021.

Evolution of needs and requirements (2016–2022)

HRP	People in need	People targeted	Requirements (US\$)	Funding coverage
2022	6.3 M	4.8 M	576.0 M	
2021	5.9 M	4.7 M	563.3 M	38%
2020	3.6 M	2.9 M	365.6 M	48%
2019	3.2 M	2.3 M	324.0 M	51%
2018	5.2 M	2.9 M	329.6 M	54%
2017	3.7 M	1.4 M	304.7 M	47%
2016	2.5 M	1.0 M	354.1 M	41%

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service

Response priorities in 2022

In 2022, the Humanitarian community is committed to tackle lifesaving needs of forcibly displaced people, to reduce the burden of food and nutrition crisis, to mitigate the consequences of the widespread absence of state authorities and the worsening protection crisis needs such as GBV and grave violations of child rights. To that end four strategic objectives will be the pillars of the humanitarian response:

1. To save and preserve the lives and dignity of at least 80 per cent of vulnerable populations affected by humanitarian crisis or natural disasters through multisectoral assistance by end of 2022.
2. To enable at least 80 per cent of host populations, IDPs, returnees, migrants and other vulnerable groups in crisis-affected areas of central, northern, southern and western Mali to have access to quality basic social services by end 2022.



Dialangou, Mali. This girl used to miss out on her education due to water collecting responsibilities. She said: “We’re so happy to have the new water pump. We’ll have clean drinking water, and our village will be even cleaner. There’ll be fewer illnesses and children will go to school in good health.” In Dialangou village, whose size recently tripled due to the arrival of internally displaced families, women and girls used to fetch stagnant, unsanitary water from a nearby pond, which caused illness in the village. Girls, who are responsible for fetching water, sometimes missed entire days of school. A new water point not only brings clean water to residents and displaced families in Dialangou but is also improving children’s health and helping girls remain in school. *UNICEF/Harandane Dicko*

3. Enable a holistic, cross-cutting, integrated or specialized human rights-based protection approach for at least 80 per cent of affected people across the response, ensuring that protection is at the core of humanitarian action by 2022.
4. Build the resilience of at least 80 per cent of people in at least 75 per cent of regions to cope with shocks, reduce vulnerabilities and improve livelihood strategies and disaster preparedness by 2022.

Based on these provisions, partners through an inter sectoral approach will target the most food insecure, health and nutrition, and education involving emergency response to save lives and safeguard livelihoods of the most vulnerable people affected by the conflict, the IDPs, refugees and host communities. The humanitarian response targeting 4.8 million people requires an overall budget of US\$576 million. It takes into consideration the forecasted needs in a worsening situation in the central and southern regions, and a tighter target of 75 per cent of the overall People in Need figure in comparison to 2021.

References

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³ [UNHRC Data Portal](#)

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⁵ [Report of the UN Secretary General on the situation in Mali](#), October, 1st 2021

⁶ Mali Cluster Health information management system, Periodic, data update, October 2021

⁷ Mali, Enquete Nationale nutritionnelle anthropométrique et de mortalité retrospective (SMART), (Standardized Monitoring and Assessment of Relief and Transitions), SMART Survey, Mali, Octobre 2021



Niger HRP

PEOPLE IN NEED

3 million

PEOPLE TARGETED

2.1 million

REQUIREMENTS (US\$)

475 million

Total population

25.1 million

Income level

Low income

INFORM Severity Index

3.9 / High

Consecutive appeals

2011 – 2022

People reached

1.7 million (2021)

Niger faces a broad range of complex humanitarian needs linked to escalating conflict-related violence, climate-related disasters and socio-economic challenges. The number of people in need has increased by 65 per cent, from 2.3 million in 2019 to 3.8 million in 2021.

Violence related to the activities of armed actors in the country and surrounding areas in Mali, Burkina Faso and Nigeria has led to severe protection concerns and aggravated chronic food insecurity and malnutrition. This is caused by the effects of climate change as well as limited access to essential social services in a context of high-level poverty in certain areas. Moreover, due to insecurity, many farmers, including internally displaced persons (IDPs), cannot carry out the agricultural activities that represent their primary source of livelihood.¹

Despite the returns of around 65,000 IDPs in Diffa and Tillabery in 2021, the number of IDPs in Diffa, Maradi, Tillabery and Tahoua reached over 264,000 in September 2021, a 41 per cent rise compared to September 2019.² The Government plans to organize the return of about 104,600 IDPs by the end of December 2021. Niger is home for almost 250,000 refugees, an increase of 42 per cent over the past three years but over 17 per cent over the past two years.³

The main protection concerns in conflict-prone areas include human rights violations and abuses⁴ affecting civilian populations, especially in Tillabery, Tahoua, Diffa and Maradi. The number of protection incidents has increased significantly over the past two years. From January to July 2021, some 2,375 protection incidents were registered against 1,500 incidents for the whole of 2019, and 705 civilians were killed, surpassing 409 in the whole of 2019.

Food insecurity is a long-standing issue affecting millions of people every year. Overall, 8 million people were under pressure from or affected by food insecurity during the 2021 lean season (June-August), including 2.3 million severely affected (IPC phases 3 and 4), according to the findings of the March 2021 Cadre Harmonisé. Furthermore, 450,000 severely malnourished children out of 1.6 million children are affected by acute malnutrition.



Tillabéri, Niger. In Niger, as in many other countries in the Sahel, livestock herders face a double threat to their way of life. Pastureland is shrinking at an alarming rate as temperatures rise and rainfall decreases due to climate change. At the same time, the presence of armed groups along traditional transhumance routes has made it dangerous to search for greener pastures. This herder has settled in Tillabéri. He explains: “There never used to be any security problems. We herders went wherever we liked. It was rare to see animals die of hunger. Now the pastures are cut off from us.” Increasingly scarce resources, a lack of economic prospects and an ever-growing population have pitted farmers and herders against each other, causing tensions that sometimes degenerate into violent clashes between different groups. *ICRC/Birom Seck*

The global acute malnutrition rate among children under 5 years of age reached 12.7 per cent in 2020, which is above the WHO emergency threshold of 10 per cent. In addition to the COVID-19 pandemic, Niger faces frequent disease outbreaks such as cholera,⁵ measles, meningitis compounded by malnutrition, among other things, and the effects of extreme weather events, especially floods and drought. Finally, Niger is dealing with recurrent floods during the rainy season. As of October 2021, torrential rainfall destroyed 11,521 homes and affected 250,331 people, including 77 deaths. Last year, flooding affected over 630,000 people.

The lingering effects of climate change combined with challenges to address the root causes of the endemic poverty, limited access to essential services and livelihoods, and human rights violations in conflict-affected areas will likely continue to affect the protection of the most vulnerable communities and increase their humanitarian needs.

Underfunding remains a major constraint for humanitarian operations, with the 2021 Humanitarian Response Plan only 39 per cent funded as of mid-November. Despite the limited resources, humanitarian actors, in coordination with partners from State services, assisted about 1.4 million people, or 67 per cent of their target. However, more funding would ensure no one is left behind. It would enable more resilience actions to reverse the trend of increasing humanitarian needs of the most vulnerable communities without adequate and well-coordinated short- and long-term solutions.

Projected situation in 2022 and beyond

Overall, 3 million people will need humanitarian assistance in Niger in 2022. The number of people in need in 2021 was an estimate based on a high probability of the severe socioeconomic impacts of COVID-19. However, the consequences of the pandemic happened to be lower. COVID-19 has been considered as part of the humanitarian contextual analysis for 2022. The number of people in need in 2022 is a provisional figure pending the release of the results of the food security projections through the Cadre Harmonisé and the findings of the national nutrition survey (SMART) in November 2021. The identified needs are multisectoral, and their degree of severity varies across departments and the three affected groups of internally displaced persons (IDPs), refugees and host communities. The erratic rainfall in many agricultural areas in 2021 suggests a poor harvest for crops and fodder, which may increase the number of food-insecure people and malnourished children.

Evolution of needs and requirements (2016–2022)

HRP	People in need	People targeted	Requirements (US\$)	Funding coverage
2022	3.0 M	2.1 M	475.0 M	
2021	3.8 M	2.1 M	523.2 M	39%
2020	3.2 M	1.9 M	373.5 M	73%
2019	2.3 M	1.6 M	383.1 M	58%
2018	2.3 M	1.8 M	338.3 M	53%
2017	1.9 M	1.5 M	287.3 M	80%
2016	2.0 M	1.5 M	260.5 M	51%

The 2022 figures are provisional and pending the launch of the HRP.

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service

Response priorities in 2022

As of 30 September, 926,362 people (72 per cent of the target) received food assistance, and 908,443 people (81 per cent of the target) received WASH assistance. Lack of access and insufficient resources prevented more people being reached, especially in hard-to-reach areas with acute humanitarian needs.

The humanitarian community projects 3 million people will need multisectoral assistance in 2022. The response targets the vulnerable groups in acute need, factoring in their preferences and priorities, the access constraints and the response modalities, the severity of the needs, the gender dimension, and the clusters' operational capacity to deliver. The prioritization has also considered the intersectoral aspect of the need and included strategic outcome-level targets for 2022 to further improve response.



Maradi, Niger. Seventeen days before this picture was taken, this girl was found on the street, severely malnourished. The traditional village chief took her to the health centre in Maradi. A nutrition specialist (next to her in the picture) took care of her. Once the girl recovered, she remembered the name of her parents, social workers are now looking for them. In the meantime, she is staying in the health centre and the nutrition specialist is caring for her as if she were her own daughter. *UNICEF/Frank Delong*

Considering the Government has launched a return operation for people displaced since 2015, contributing to durable solutions for IDPs would be explored where possible, particularly in non-active conflict areas. Moreover, in some regions, the drivers and underlying causes of needs are rooted in structural deficiencies. A coordinated approach among humanitarian, development and peace (HDP) and transition actors is needed to ensure areas with high vulnerabilities are addressed collectively through sequencing and layering of interventions to reduce people's self-defined needs under the framework of the HDP nexus in 2022 for a better complementarity in the response.

References

¹ Niger's economy largely depends on agriculture and livestock, accounting for 40% per cent of its GDP, according to the World Bank.

² UNHCR operational data portal.

³ Refugees are mainly from Nigeria and Mali.

⁴ This includes killings, rape, forced displacement, destruction of properties, illegal tax collection, destruction of public infrastructures such as schools and health centres, and abductions.

⁵ As of mid-September 2021, a cholera epidemic has affected over 4,000 people including 140 deaths.



Nigeria HRP

PEOPLE IN NEED

8.3 million

PEOPLE TARGETED

5.4 million

REQUIREMENTS (US\$)

1.1 billion

Total population

211.4 million

Income level

Lower middle

INFORM Severity Index

4.3 / High

Consecutive appeals

2014 – 2022

People reached

4.8 million (2021)

Twelve years into the humanitarian crisis in north-east Nigeria’s Adamawa, Borno and Yobe States, the needs are as severe and large-scale as ever. The crisis continues unabated, and affected people’s living conditions are not improving; they still live with great unpredictability, privation far beyond chronic poverty, and daily threats to their health and safety.

Crude mortality rates among people arriving from some inaccessible areas are at war-time levels. Food security has improved somewhat, and cautious optimism about the course of the conflict was generated by the ‘surrender’ or escape in mid-2021 of some thousands of ‘fighters’ from non-State armed groups (NSAGs), though the majority are women and children. However, as attacks by NSAGs continue at scale, peace or true stabilization across most of the conflict-affected zones is not yet in sight.

Protection needs are formidable, especially for women and girls, who still lack adequate protection and access to justice and services, and are at risk of violence, abduction, rape, gender-based violence, forced and child marriage, and other violations of their rights. Children are also at risk as unaccompanied and separated minors, and when formerly associated with armed groups, forced recruitment is a further risk.

The operating environment remains extremely volatile: in Borno State all the major supply routes are dangerous for civilians, humanitarian workers, cargo and assets. Security has improved incrementally in parts of Adamawa and Yobe States. Humanitarian hubs and aid organizations’ offices have suffered regular attacks in 2021. Conflict and insecurity continue to cut people off from their main means of livelihoods, agricultural lands. This causes major food insecurity in north-east Nigeria. Protection and livelihoods are linked: women’s and adolescents’ livelihoods tend to be the most fragile, and females are at greater risk of negative coping mechanisms, such as sex work for food or for other survival needs. Boys in desperation are more easily lured into NSAGs.



Gongulong, Nigeria. This mother of eight carries one of her goats. She was displaced from Mafa in 2016 due to the ongoing violence in north-east Nigeria. She trekked to Gongulong for safety and has lived there ever since. Last year, FAO gave her four goats and trained her to care for them. They have since multiplied to eight. But raising her livestock is not without challenges. She explains: “The climate is changing. The dry season is longer and very hot. It affects everything: our environment, our livelihoods and our animals. Before, rain started early and lasted long. Now rainfall is short, it does not start early, but it ends early. Before, we had a high crop yield and enough grass for animals to feed. Now the crop yield is less and there is sparse vegetation. It even affects the trees. There is not enough food, not enough water, not enough animal feed and not enough firewood. It is hard to get water for my animals, the feeding is more expensive, and the heat has caused some goats to have miscarriages. So, we also have to engage in small trade, buying and selling.” *OCHA/Damilola Onafuwa*

Humanitarian funding for Nigeria has been in steady decline since its peak in 2017. Therefore, the Humanitarian Country Team’s new two-year humanitarian strategy must make the most of limited resources and capacity. It will ensure this is done collectively – that humanitarian action in the north-east is more than the sum of its parts. The strategy’s coherence, improved targeting based on vulnerability, and prioritization aim to mitigate expected funding shortfalls.

Projected situation in 2022 and beyond

The comprehensive multi-sectoral needs assessment (MSNA) in mid-2021 projects a slight (5 per cent) decline in people in need in 2022 (8.1 million people), compared to a year ago (8.7 million). Needs are multisectoral and vary in severity across areas and among the three affected groups of internally displaced people (IDPs, who still number over 2 million people), returnees and host communities. The analysis shows 121,000 people in 10 local government areas (LGAs) in the most severe ‘catastrophic’ category. No entire LGA is classified as ‘catastrophic.’ However, 2.7 million people across 28 LGAs are in the ‘extreme’ (severity score 4) category. Fourteen LGAs have overall severity score 4, and 28 have severity score 3 (‘severe’). The Access Working Group deems four LGAs inaccessible due to insecurity.

Response priorities in 2022

To address the gravest threats to life, health and safety, humanitarian partners acting in concert will focus on IDP camp conditions, protection, communicable disease risk, extreme food insecurity and malnutrition, and inability to exercise livelihoods. In parallel, despite near certainty that the conflict and insecurity will continue, it is time to focus on the opportunities (albeit limited) to move some affected people progressively out of crisis.

This strategy is largely one of prioritization, in order to focus funding and implementation on life-saving actions and the most vulnerable people first. The prioritization process in north-east Nigeria focuses on those LGAs and people with multiple severe needs, as identified by the MSNA's inter-sectoral composites of indicators. The sectors will collaborate on challenges that require concerted actions (e.g. communicable disease control). As a secondary priority, actions will address the critical causes of life-threatening conditions. Area-based, intersectoral approaches to coordination, planning, implementation and advocacy will deepen.

Evolution of needs and requirements (2016–2022)

HRP	People in need	People targeted	Requirements (US\$)	Funding coverage
2022	8.3 M	5.4 M	1.1 B	
2021	8.7 M	6.4 M	1.0 B	64%
2020	7.7 M	5.7 M	789.0 M	58%
2019	7.1 M	6.2 M	847.7 M	75%
2018	7.7 M	6.1 M	1.0 B	69%
2017	8.5 M	6.9 M	1.1 B	70%
2016	7.0 M	3.9 M	484.2 M	55%

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service

The third priority is helping people move out of crisis and extreme risk. IDP returns may be possible to the few areas secure enough to be safe for civilians and allow humanitarian and even development actors to create the conditions for return. Resettlement in safe third locations will be possible for some. Integration in communities around the displacement sites is likely to be a larger-scale option in the immediate term. Nexus action and opportunities are highly circumscribed: the rampant insecurity leaves little room for development initiatives, though Adamawa and Yobe States may offer more scope for such activities.

For the majority of people in need, with no feasible durable solution yet, progressing out of crisis consists of greater resilience, mainly in livelihoods – there is no reason why displaced people should remain unemployed and dependent for years amid Nigeria's dynamic economy – and accessing the range of coping mechanisms and supportive services. Not all of these are amenable to humanitarian action, but programmes under this strategy will emphasize those that are.



Maiduguri, Nigeria. A family of IDPs in Stadium camp, Maiduguri. They are exposed to grave protection risks and diseases during the harsh Harmattan season. One in two camps is congested in Borno State and resources are stretched to capacity. Aid workers are increasing advocacy efforts to speed up the registration of new arrivals so that they can provide assistance. They are also advocating for more land to be allocated for humanitarian activities, including building shelters or establishing new IDP camps. *OCHA/Eve Sabbagh*

Achievements and innovations

Humanitarian agencies consult the affected people about the humanitarian response. However, the questions that we ask affected people tend to be granular – which kind of assistance did they prefer, has there been any exploitation to report, etc. We rarely or never ask them how they see the crisis evolving, and how they think they might best endure and eventually overcome it. As part of the Nigeria Humanitarian Country Team’s development of its new two-year humanitarian strategy, partners are convening structured consultations with affected people to obtain and reflect in the eventual strategy, their view on how we might best help them to endure this crisis and, in the medium to long term, overcome it.



Part two: Inter-Agency Coordinated Appeals

Regional Refugee Appeals Overview

In 2022, UNHCR and partners will continue to develop Regional Refugee Response Plans (RRPs) which respond to refugee crises in situations of sudden-onset emergencies and to more protracted circumstances.

This will include the RRP for Afghanistan, the Democratic Republic of the Congo (DRC) and South Sudan. In addition, UNHCR and UNDP will continue to co-lead the Regional Refugee and Resilience Plan in response to the Syria crisis (3RP). The RRP aims to support the efforts of host-governments to address the needs of refugees as well as host communities impacted by crises. The focus will remain on ensuring protection and promoting solutions through multisectoral response activities, supporting the objectives stated in the 2016 New York Declaration for Refugees and Migrants, and ensuring appropriate linkages with the Global Compact on Refugees (GCR).

Many interventions are humanitarian in nature. However, in 2022 stronger linkages with development partners and, where relevant, peace actors are encouraged to ensure progress towards the Sustainable Development Goals (SDGs) and the pledge of Leaving No One Behind. A strong focus on accountability and the empowerment of refugees as well as localization will be key to the successful implementation of these plans.

Amman, Jordan. For this 11-year-old girl, a refugee from Homs living in Jordan, the war has compelled her to take on responsibilities well beyond her years. Her mother said: “She is only 11, but she’s living the life of a 30-year-old woman. It’s because of our situation. I have to support my parents and my brothers. They don’t have anyone else but me.” Her mother earns 5 Jordanian dinars (\$7) for half-days spent cleaning houses, but her father cannot work or look after her siblings due to the lingering physical and psychological effects of his experiences in Syria. This leaves the girl to take on many of the household chores. *UNHCR/Diego Ibarra*

Inter-Agency Coordinated Appeals: Regional Refugee Appeals (2022)

Appeal	Type	People in need	People targeted	Requirements (US\$)	Requirements (2017-2022)
Afghanistan <i>Regional</i>	RRP	5.7 M	5.7 M	623.0 M	
DRC <i>Regional</i>	RRP	2.4 M	1.4 M	531.7 M	
South Sudan <i>Regional</i>	RRP	2.6 M	2.6 M	805.1 M	
Syria <i>Regional</i>	3RP	20.4 M	11.7 M	5.6 B	

Changes to the population figures and financial requirements for the regional appeals have occurred because of the overlap with HRPs. People in need (PIN) and People targeted (PT) figures include registered Afghan refugees and asylum-seekers and a projection of new arrivals, in addition to a portion of targeted undocumented Afghans, Afghans with other status, and members of the host community. Figures are provisional and subject to ongoing planning for 2022. The PIN figure does not necessarily represent all of those in need. For the purposes of the Global Humanitarian Overview, the PIN is taken as the same as the targeted population of the RRP. The population targets in the RRP have been agreed following interagency consultations on the population to be targeted with assistance in 2022. The figure "Afghan refugees and Afghans of other status" includes registered Afghan refugees and asylum-seekers and a projection of new arrivals, in addition to a portion of targeted undocumented Afghans and Afghans with other status. Budget figures are not final and are subject to confirmation. Final figures will be included in the final RRP 2022 document. Financial requirements, PIN and PT for the DRC RRP are preliminary and pending finalization and approval by partners and host countries. Population figures include refugees, returnees and impacted members of host communities. Population figures for Uganda reflect DRC refugees, as well as smaller numbers of other nationalities, including Somali, Rwandese and Burundian refugees; however, does not include South Sudanese. All population figures are provisional and subject to ongoing operational planning for 2022. Financial requirements, PIN and PT for the South Sudan RRP are preliminary and pending finalization and approval by partners and host countries. Population figures include refugees, returnees and impacted members of host communities. They are provisional and subject to ongoing operational planning for 2022. Financial requirements, PIN and PT for the 3RP Syria are preliminary and pending finalization and approval by partners and host countries. Population figures include refugees and impacted members of host communities. While the figures primarily relate to Syrian refugees, the 3RP aims to cover all populations in need, including other nationalities, asylum-seekers and stateless persons. All population figures are provisional and subject to ongoing operational planning for 2022.

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service

Adopting a 'whole-of-society' approach, the 2022 RRP's will be implemented in close collaboration with a wide range of partners, including UN agencies, other international and national organizations, civil-society actors as well as local organizations, many of which are refugee- and women-led, as well as faith-based organizations.

Increased and enhanced partnerships with development and financial institutions and the private sector will continue to be pursued. This will enable response to immediate needs whilst initiating longer-term solutions and addressing the root causes of crises. Emphasis will be placed on delivering comprehensive responses that combine humanitarian and development activities. In the same vein and considering the dual impact on refugees and host communities, efforts will be made to complement and support existing sectoral, regional and national planning instruments, contributing collectively to the implementation of the 2030 Agenda and the SDGs.

The 2022 RRP's will also continue to integrate new health and socioeconomic needs that have been caused by the COVID-19 pandemic - namely for situations where underlying vulnerabilities were already exacerbated by conflict and violence. Programming is made through an integrated age, gender and diversity (AGD) mainstreaming approach, ensuring particular focus on people with disabilities or other specific needs.

Several cross-cutting priorities are included in the 2022 RRP's. A greater understanding of the dynamics of climate change on displacement will help partners to upscale environmental mainstreaming. Where possible and appropriate, they will also strive to ensure protection of displaced people who are exposed to natural disasters and to promote environmental sustainability. Measures to prevent, mitigate and respond to the risks of sexual exploitation and abuse as well as sexual harassment will be prioritized and integrated in all sector programmes within the 2022 plans. Activities to strengthen the empowerment of communities and accountability towards affected populations are core elements of the plans.



Afghanistan Regional RRP

PEOPLE IN NEED	PEOPLE TARGETED	REQUIREMENTS (US\$)
5.7 million	5.7 million	623 million

Type of appeal	Refugees targeted	Host community targeted	Countries covered
Refugee Response Plan	3.9 million	1.8 million	Pakistan, Iran, Tajikistan, Uzbekistan and Turkmenistan

Afghanistan’s neighbouring countries, particularly the Islamic Republic of Iran and the Islamic Republic of Pakistan, host more than 2.2 million registered refugees from previous waves of forced displacement, and a further 4 million Afghans of varying statuses.

This has stretched the capacity of host communities. The majority of Afghans in both countries reside in urban and peri-urban areas, relying on national public services that are largely available to them. Despite their own challenges and their populations’ needs, Iran and Pakistan have upheld their international protection obligations for decades and pursued inclusive policies, notably in areas of education, health care and human capital development. However, the difficult economic situation in these and other neighbouring countries, exacerbated by the COVID-19 pandemic and a growing asylum fatigue in some host communities, is creating further challenges for the host governments to continue their policy of inclusion of Afghans in national systems.

This further highlights the need for programmes aimed at fostering coexistence and alleviating the burden on host communities. In addition, humanitarian programmes to support the existing Afghan populations in the region have been critically underfunded in recent years. In parts of Central Asia, COVID-19 has already triggered unprecedented health, humanitarian and socioeconomic crises, and a refugee influx may further stretch the already overwhelmed government capacities and exacerbate vulnerabilities.

At the same time, the humanitarian situation in the Islamic Republic of Afghanistan deteriorated dramatically in 2021, with significant consequences for the most vulnerable among the population. This year, over 677,000 people (80 per cent women and children) have been internally displaced by conflict, adding to some 2.9 million previously displaced by conflict. One in three Afghans is already food insecure, and 97 per cent of the population could plunge into poverty by 2022. The further deterioration of the socioeconomic situation will likely trigger additional internal and cross-border displacement.



Attock, Pakistan. Two decades ago, this Afghan refugee, Saleema, was one of only a handful of refugee girls attending classes at the Barakat Primary School in Attock, west of Pakistan's capital, Islamabad. Now, age 29, Saleema is speaking to a class of about 30 young refugee girls at her old school, wearing a doctor's coat. "As a child, I was not aware of my refugee status," she said. "But I came to know about it when my classmates were getting admitted to colleges of higher education, and I was not because I'm a refugee." Today, Saleema's story and work are bringing change. Some of the staunchest opponents of girls' education in her community call her to seek health advice for their wives, sisters and daughters. Many now send their daughters to school in the hope that they might follow in Saleema's footsteps. *UNHCR/Amsal Naeem*

Projected situation in 2022 and beyond

With the situation inside Afghanistan showing no signs of improvement, and Afghans and host communities in neighbouring countries facing increased challenges, greater burden and responsibility sharing is required from the international community. As such, within the framework of the 2022 RRP, over 40 partners will focus on a response to refugees and host communities in neighbouring countries, including registered Afghan refugees and asylum-seekers and Afghans of varying statuses, including undocumented people, host communities and potential new arrivals. The RRP builds on the collective work already being done in neighbouring countries and promotes an area- and needs-based approach. Area-based investments are needed in health, education, clean and renewable energy, vocational skills development and social protection to mitigate the impact on national systems and support the inclusive policies of the host governments, benefiting both host communities and refugees. These investments will also build Afghans' human capacity and resilience and eventually enable sustainable return and reintegration when conditions are conducive. In line with the Global Compact on Refugees (GCR)¹, the Solutions Strategy for Afghan Refugees (SSAR), the SSAR Support Platform² launched at the Global Refugee Forum in 2019, and the implementation of the SDGs, the 2022 RRP will support host governments in their efforts to promote resilience. It will aim to ensure that no one is left behind and that the needs of Afghans and their host communities can be met.



Quetta, Pakistan. This 22-year-old girl is an Afghan refugee in Pakistan. She often struggled to continue her education while also helping to provide for her family, but she has now set up an informal school at her family home for around 50 Afghan children. She explains: “Where I live, many children are deprived of education due to poverty. I saw for myself that some families were reluctant to allow their sons to attend my school, as these little boys were bringing in a bit of money each day by working odd jobs. It was even harder to convince some parents to enrol their daughters in school, given the traditional roles associated with women and girls. There has since been some improvement, but the process of change is always slow. But even with a good education, the life of a refugee is very tough. Our degrees do not necessarily help us to get jobs, and we don’t live with the same sense of freedom that others have. Sometimes taunts and other acts of discrimination make us feel isolated and alienated from the society where we live, and which we were born into.” *UNHCR/Humera Karim*

In 2022, the situation inside Afghanistan is likely to remain fluid. According to UNDP’s rapid appraisal on Economic instability and uncertainty in Afghanistan after August 15,³ the country may face universal poverty by mid-2022 and could be on its way to a developmental collapse. An estimated 72 per cent of Afghans are already living below the poverty line, but this percentage is at risk of rising to 97 per cent of the population unless the country’s political and economic crises are urgently addressed. Given this background, borders are likely to remain tightly regulated and movement may take place irregularly, increasing the vulnerability, including to exploitation, of people crossing borders, both during their journey and upon arrival as well as deportation. In neighbouring countries, the difficult situation described above necessitates a scaled-up response from the international community to ensure that the immediate needs of Afghans and their host communities are met, to promote resilience, facilitate solutions and stabilize displaced populations. In accordance with the principle of AAP, communities will be actively engaged in planning, implementing and evaluating the response by soliciting, hearing and acting upon the voices and priorities of women, girls, boys and men, including the most marginalized and at-risk people among affected communities. In addition, measures to prevent, mitigate the risks of and respond to sexual exploitation and abuse will be prioritized and integrated in all sector programmes.



Response priorities in 2022

Reaffirming the regional multi-stakeholder and multisectoral approach that bridges humanitarian and development assistance and builds community resilience, the RRP will deliver concrete actions, with a focus on community-based interventions incorporating an AGD approach, cross-border collaboration, and durable solutions in line with the SSAR and the SSAR Support Platform. The 2022 RRP will aim to:

- Ensure coordinated efforts and support towards durable solutions by enhancing conditions and community-based investments. The response will support the resilience of refugees and host communities, including through investments in key areas of national infrastructure, such as education and health, and by supporting livelihoods for Afghans and host communities, in keeping with the SSAR.
- Support host governments to ensure access to asylum and protection in accordance with international standards, including respect for the principle of non-refoulement, admission, registration and documentation.
- Provide multisectoral humanitarian assistance to targeted populations, anchoring the response in government systems wherever possible in line with the GCR, paying particular attention to the needs of children, youth, women, the elderly, persons with disabilities and other people with specific needs.
- Reinforce government efforts to ensure that emergency preparedness and response measures are put in place to respond to potential new arrivals.

References

¹ UNHCR, [The Global Compact on Refugees](#)

² [SSAR Support Platform](#)

³ UNDP Press release - "[97 percent of Afghans could plunge into poverty by mid 2022, says UNDP](#)", September 9, 2021.



Democratic Republic of the Congo

Regional RRP

PEOPLE IN NEED

2.6 million

PEOPLE TARGETED

1.5 million

REQUIREMENTS (US\$)

585 million

Type of appeal

Refugee Response Plan

Refugees targeted

961,000

Host community targeted

580,000

Countries covered

Angola Burundi, Congo, Rwanda,
Uganda, Tanzania and Zambia

The Democratic Republic of the Congo (DRC) remains one of Africa’s most complex and long-standing humanitarian crises. Ongoing conflicts in eastern DRC, as well as intercommunal violence across different areas of the country, continue to cause forced displacement within DRC and into neighbouring countries.

This has come with tragic loss of life, widespread sexual violence against women and girls, protection risks for the most vulnerable, including children and young people, and destruction of communities. The situation is further aggravated by the COVID-19 pandemic, Ebola and measles outbreaks and severe food insecurity. It is compounded by natural disasters including the 2021 volcanic eruption in the east of the country. Within a fragile socioeconomic context, development challenges and continuous instability characterized by serious threats by armed groups, the underlying drivers of displacement and humanitarian need are expected to persist.

During 2021, nearly 962,000 Congolese refugees and asylum-seekers were being hosted across the African continent, with the majority living in the seven neighbouring countries that form part of the inter-agency Regional Refugee Response Plan (RRP) for the DRC Situation¹: Angola, Burundi, Republic of the Congo, Rwanda, Uganda, the United Republic of Tanzania and Zambia. Asylum-seekers have mostly fled from eastern areas of North and South Kivu and Ituri Provinces, as well as from Kasai, Haut Katanga and Tanganyika Provinces.

New Congolese refugees and asylum-seekers require urgent protection and basic assistance, while those in protracted situations – many for decades – remain in need of solutions and humanitarian support. RRP partners promote self-reliance with the aim of reducing dependence on humanitarian assistance, but this process is slow and mostly underfunded. Therefore, most Congolese refugees continue to rely on multisector humanitarian programmes, and there is an urgent need to increase opportunities for complementary humanitarian-development nexus interventions.



Uganda. Refugees fleeing violence in DRC rest at a reception centre in Uganda. After being received at the centre, refugees are provided with warm food, shelter and safety. *UNHCR/Hannah Maule-Ffinch*

In many host countries, refugee settlements and camps have reached or exceeded capacity; the available basic services are stretched to their limit, including those for affected members of host communities. Food insecurity across the region remains a growing concern for refugees and host communities, compounded by food ration cuts in refugee camps and settlements due to underfunding. Where possible, inclusion into national and local basic and social services remains vital to ensure refugees meet their basic needs and have equal access to quality services, as well as livelihood opportunities. Reports continue of incidents of discrimination and xenophobia in some refugee-hosting countries, which highlights the need to intensify work on social cohesion and peaceful coexistence, improve accountability, address prejudice, and include both refugee and local communities in decision-making.

Projected situation in 2022 and beyond

Moving into 2022, it is expected that in addition to ensuring protection for all refugees and asylum-seekers, there remains a need to continue delivering basic services and humanitarian programmes for the surrounding populations, and promoting resilience and linkages with development programmes. Countries in the region have demonstrated commitment to maintaining open borders for asylum-seekers, and Congolese are expected to continue benefiting from safe access to asylum and international protection in 2022. Governments implemented border closures in 2020 and 2021 as a precautionary measure against the spread of COVID-19, but in most cases refugees and asylum-seekers continued to be granted access to territory. In situations where this may not be the case, RRP partners are committed to engaging with governments to ensure asylum-seekers still have safe access to territory.

Evolution of needs and requirements (2018–2022)

RRP	People in need	People targeted	Requirements (US\$)
2022	2.4 M	1.4 M	531.7 M
2021	1.8 M	1.8 M	534.3 M
2020	2.2 M	2.2 M	578.5 M
2019	2.6 M	2.6 M	700.4 M
2018	726.0 K	726.0 K	464.8 M

DRC RRP: Angola, Republic of Congo, Rwanda, Tanzania, Uganda, Zambia components included. Burundi excluded. Financial requirements, PIN and PT for the DRC RRP are preliminary and pending finalization and approval by partners and host countries. Population figures include refugees, returnees and impacted members of host communities. Population figures for Uganda reflect DRC refugees, as well as smaller numbers of other nationalities, including Somali, Rwandese and Burundian refugees; however, does not include South Sudanese. All population figures are provisional and subject to ongoing operational planning for 2022.

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service

Some host countries – Uganda being a key example – have adopted policies allowing refugees freedom of movement, and the right to work, establish a business, own property and access national services, including primary and secondary education and health care. Some host countries have also taken active steps to provide refugees with land for agriculture and opportunities to engage in the local economy, while others have pledged to strengthen asylum and enhance refugee protection and solutions. These enabling environments promote resilience and increased self-reliance and serve as good practice for the region.

In contrast, some host countries still impose restrictions on freedom of movement, and the right to work, land and property rights, and access to education and justice. RRP partners will continue to advocate for these restrictions to be lifted and for the adoption of policies in the spirit of the GCR that mirror good practices in the region, such as the Southern African Development Community commitments to improve protection of refugees and asylum-seekers.

With regards to solutions, a modest number of Congolese voluntarily repatriated in 2021, and it is anticipated that others will return in 2022, mainly from Angola and Zambia. Yet, the majority of Congolese refugees are expected to remain in their countries of asylum. Resettlement is a possibility for some, but spaces remain very limited. Therefore, local socioeconomic integration remains the most appropriate solution for most Congolese refugees. Meanwhile, for the majority of Congolese refugees and asylum-seekers still living in camps and settlements, the need for site expansion, improved infrastructure and expanded services in camps and settlements will continue into 2022.



Musasa, Burundi. A refugee woman from DRC, now employed in a soap factory in Musasa refugee camp, in Burundi's Muyinga Province. *UNHCR/Will Swanson*

Response priorities in 2022

In the spirit of the GCR and in line with the Refugee Coordination Model (RCM),² host governments will be supported to provide protection and assistance to refugees in their territory and to ensure a comprehensive refugee response. Partners will aim to address the immediate needs of new arrivals, including prevention of expulsion and deportation, and to provide protection and solutions to those in protracted situations. Partners will also seek to assist members of host communities through integrated services, benefiting both refugee and host communities. Particular attention will be paid to identifying and improving opportunities for the most vulnerable, including children, youth and women, as well as for people with specific needs, including those with disabilities.

Protection priorities in 2022 include the prevention and risk mitigation of and response to gender-based violence; strengthening child protection through community-based approaches; registration and documentation support; and prevention of sexual exploitation and abuse. Voluntary repatriation to DRC will be facilitated, where conditions allow. Local integration will continue to be supported where conditions allow, while the cases of people who need resettlement will continue to be processed.

Subject to resources available, partners will seek to adhere to minimum standards of assistance, while strengthening approaches that are accountable to affected populations and localized. Support to communities will include maintaining and improving medical services; enhancing nutritional status; addressing food insecurity through in-kind and cash assistance; improving shelter and basic infrastructure; rehabilitating and constructing water and sanitation facilities; and ensuring quality education through training, infrastructure support and basic supplies. Preparedness and response for the COVID-19 pandemic, as well as other health epidemics, will continue to be included in operations and mainstreamed into regular programming.



Partners will seek to mitigate environmental impacts and address clean energy needs by facilitating and promoting the use of energy-saving stoves and alternative fuels, including solar energy where funds allow. Tree-planting will be expanded in the vicinity of camps and settlements alongside awareness-raising initiatives to address environmental degradation and promote peaceful coexistence with host communities.

Humanitarian assistance remains an essential component of the DRC RRP. However, there will be an increased focus on developing sustainable livelihoods opportunities and promoting socioeconomic inclusion in line with the GCR. This will include, but is not limited to, strengthening partnerships with development actors and international financial institutions to ensure a humanitarian-development nexus approach. The aim is to achieve greater impact by responding to immediate needs while at the same time building resilience and self-reliance.

References

¹ UNHCR Operational Data Portal, [DRC Situation](#)

² Refugee Coordination Model, [Updated Refugee Coordination Guidance Note](#)



South Sudan Regional RRP

PEOPLE IN NEED

3.6 million

PEOPLE TARGETED

3.6 million

REQUIREMENTS (US\$)

1.13 billion

Type of appeal

Refugee Response Plan

Refugees targeted

2.3 million

Host community targeted

1.3 million

Countries covered

DRC, Ethiopia, Kenya, Sudan
and Uganda

2021 marked the tenth anniversary of the independence of South Sudan, and the eighth year of conflict within the country. The security situation, though generally stable, remains fragile in a complex and unpredictable political environment.

Peace largely holds at the national level, but subnational violence linked to localized armed conflict and criminality causes death and widespread human rights abuses. Forced displacement numbers are high scale, with 1.7 million IDPs across South Sudan and continued new refugee influxes into DRC, Ethiopia, Kenya, Sudan and Uganda. At the time of writing, this protracted situation remains the largest refugee crisis in Africa, with close to 2.3 million South Sudanese refugees living in the five main neighbouring host countries.

The operational environment remains extremely challenging, with long-standing humanitarian needs compounded by localized violence, severe floods and the COVID-19 pandemic. Growing funding gaps have led to more acute needs, particularly affecting food security, while operational costs have increased due to logistical constraints, such as weak national infrastructure and bureaucratic obstacles. Since the warring parties signed the Revitalized Agreement on the Resolution of the Conflict in the Republic of South Sudan in September 2018, some 300,000 refugees have returned to South Sudan in a self-organized manner from Ethiopia, Kenya, Sudan and Uganda. However, access to essential services remains woefully insufficient, and conditions are not yet conducive to facilitating voluntary repatriation in safety and dignity to South Sudan.

Despite partial border closures due to the pandemic in 2021, over 130,000 new South Sudanese arrivals have joined refugees from previous waves of forced displacement, in Ethiopia, Sudan and Uganda. Refugees are being generously hosted in countries in the region, but new arrivals have overstretched reception capacities and increased pressures in the main refugee settlements. The increasingly complex regional context due to the COVID-19 pandemic, the outbreak of violence in DRC and Ethiopia, the difficult political and economic situation in Sudan, as well as the stated intention of the Kenyan Government to close its refugee camps by 30 June 2022 pose new challenges for the protection of South Sudanese refugees throughout the region.



Jewi, Ethiopia. A South Sudanese boy stands at the blackboard at a primary school in Jewi refugee camp, Ethiopia.
UNHCR/Eduardo Soteras Jalil

Launched in October 2020 as a flagship activity of the Intergovernmental Authority on Development (IGAD) Support Platform,¹ and with the support of UNHCR, the Solutions Initiative for Sudan's and South Sudan's forcibly displaced² is contributing to creating conducive conditions for sustainable and safe voluntary return while preserving protection and asylum space for refugees and returnees, internally displaced persons, and host-community members in the two countries.

Projected situation in 2022 and beyond

In light of current trends, significant numbers of new South Sudanese refugee arrivals are expected in the five asylum countries in 2022. Most South Sudanese refugees are hosted in relatively remote, underdeveloped and economically underserved areas. Host communities often find themselves in a precarious socioeconomic situation, impacted by food insecurity and malnutrition, suffering from limited access to essential services and economic infrastructure, as well as scarce livelihood opportunities. New refugee influxes could further exacerbate the situation for both the refugee and local community populations by increasing competition over limited social services, livelihood opportunities and natural resources, and contributing to social tensions.

Furthermore, the impact of the ongoing COVID-19 pandemic as well as other health crises, malnutrition, natural disasters and severe resource constraints are likely to further exacerbate the already precarious situation and expose South Sudanese refugees to increased protection risks. Due to the loss of income and livelihood opportunities, prolonged school closures, overcrowded shelters, food insecurity, a lack of domestic energy supply and reduced

humanitarian assistance, gender-based violence (GBV) incidents could rise even further. Refugee children (65 per cent of the population) face particular risks, including child labour, abduction, early marriage and irregular onward movement through smuggling and trafficking. The situation of thousands of unaccompanied/separated children is particularly concerning, as many suffer harassment, exploitation, neglect and abuse. These challenges generate increased needs for mental health and psychosocial services, strengthened child-protection systems, enhanced community structures, and reinforced GBV prevention and response mechanisms. There is also an urgent need to develop sustainable energy solutions and prevent environmental degradation.

Evolution of needs and requirements (2017–2022)

RRP	People in need	People targeted	Requirements (US\$)
2022	2.6 M	2.6 M	805.1 M
2021	3.1 M	3.1 M	866.9 M
2020	3.0 M	3.0 M	1.0 B
2019	4.2 M	4.2 M	1.0 B
2018	2.0 M	2.0 M	1.1 B
2017	1.5 M	1.5 M	1.1 B

South Sudan RRP: Kenya, Uganda and Ethiopia components included, DRC and Sudan excluded. Financial requirements, PIN and PT for the South Sudan RRP are preliminary and pending finalization and approval by partners and host countries. Population figures include refugees, returnees and impacted members of host communities. They are provisional and subject to ongoing operational planning for 2022.

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service

Response priorities in 2022

The 2022 RRP for South Sudan outlines the multi-agency response strategy and financial requirements of 93 partners, including humanitarian and development actors and civil society, supporting host governments to meet the critical needs of over 2.3 million South Sudanese refugees living across the five main asylum countries. In addition, the plan aims to assist over 1.3 million affected members of host communities.

The inter-agency response plan, developed in accordance with the Refugee Coordination Model,³ takes a comprehensive and solutions-oriented approach. RRP partners will reinforce the response to meet the life-saving needs of South Sudanese refugees while strengthening national protection and resilience mechanisms in asylum countries.

Given the need to move beyond emergency assistance to overcome the socioeconomic impact of the pandemic, strengthen the resilience and self-reliance of South Sudanese refugees and support host communities to enhance peaceful coexistence, the 2022 RRP envisages stronger engagement with development and peacebuilding partners. The IGAD Support Platform,⁴ with the pledges made by South Sudan and the five asylum countries, will further contribute to an integrated protection and solutions strategy for South Sudanese refugees.



In line with the Global Compact on Refugees, RRP partners plan to advance refugee integration into national systems, such as education, health, environment, livelihoods, child protection and birth registration. A key priority in 2022 will be promoting socioeconomic inclusion and access to livelihoods opportunities for urban and camp-based refugees, and addressing chronic food insecurity, including by increased agropastoral production. RRP partners will prioritize innovative approaches, expand cash-based interventions to increase refugees' self-reliance, and integrate the refugee response into development plans and initiatives to promote socioeconomic growth. Interventions are also foreseen to ensure sustainable energy and prevent/reverse environmental degradation in refugee settings to the benefit of the larger community.

RRP partners will continue to support national child protection systems, including birth registration, prioritize family reunification and alternative care placement and enhance access to quality education. RRP partners will also intensify measures for the prevention of sexual exploitation and abuse and GBV prevention and response; prioritize support to people with specific needs, including those living with disabilities; consolidate community-based protection mechanisms; and scale up psychosocial and mental health support. Activities to strengthen the empowerment of communities and accountability towards affected populations are core elements of the regional refugee response. The RRP will also facilitate refugees' participation in peacebuilding initiatives, promoting social cohesion between refugee and host communities and national reconciliation efforts in South Sudan.

References

¹ Intergovernmental Authority on Development (IGAD) Support Platform [Press release](#) - December 16, 2019.

² UNHCR Press release - "[Joint Statement by IGAD, UNHCR and the governments of South Sudan and Sudan on the Solutions Initiative for 7 million forcibly displaced people](#)", October 5, 2021.

³ Refugee Coordination Model - [Updated Refugee Coordination Guidance Note](#).

⁴ Intergovernmental Authority on Development (IGAD) Support Platform [Press release](#) - December 16, 2019.

⁵ UNHCR - [The Global Compact on Refugees](#)



Syria Regional 3RP

PEOPLE IN NEED	PEOPLE TARGETED	REQUIREMENTS (US\$)
20.1 million	11.4 million	5.58 billion

Type of appeal	Refugees targeted	Host community targeted	Countries covered
Refugee Response Plan	7.18 million	4.25 million	Egypt, Iraq, Jordan, Lebanon and Turkey

The Syrian refugee situation continues to drive one of the world’s largest humanitarian and development crises. Egypt, Iraq, Jordan, Lebanon and Turkey continue to collectively host over 5.6 million registered Syrian refugees. In addition to Syrians, these countries also host hundreds of thousands of refugees of other nationalities, asylum-seekers, and Stateless persons.

Many of these people have been in displacement for a decade or more, are living in high levels of poverty, and have survived because of the continued generosity of host governments and local communities, supported by the international community.

In addition to hosting large-scale refugee populations, the 3RP countries continue to be significantly impacted by the COVID-19 pandemic and its multiple waves, as well as associated socioeconomic challenges, some of which pre-date the pandemic. At the macro level, economic forecasts for 3RP countries suggest a long period of recovery and slower growth compared to previous years, which has affected the availability of resources to ensure the provision of basic services, such as health and education. At the household level, poverty and unemployment rates remain extremely high, and the overall average household income across the region has decreased sharply compared to previous years. Among refugees particularly, many children remain out of school across the region and face considerable protection risks. Furthermore, this overall situation sharpened inequalities and impacted social cohesion and stability between refugees and host communities.

The 3RP 2022 Regional Needs Overview¹ provides a comprehensive overview of needs in 3RP countries. In addition to the needs of the large-scale refugee populations, the number of impacted host-community members has now reached the highest figure in a decade. Protection-related intersectoral needs, particularly those related to legal status, gender, age and people with special needs, have been highlighted across regional assessments. The need for broader availability and improved access to quality education, livelihoods opportunities, and quality food and health care are all essential. Enhancing local capacities, specifically in



Beirut, Lebanon. Hala, a 35-year-old Syrian refugee, combs her youngest daughter's hair at their home in Beirut. Her family of six all sleep together in a single damp room, the air heavy with the smell of mold that stains the walls and furniture. Hala describes the downward spiral their lives have taken since fleeing the conflict in their home country and coming to Lebanon 10 years ago. "Our main objective was to get out of the war with our lives," she said of their escape from their hometown of Hama in 2011. "In Lebanon there was a little bit of serenity. Our kids were still going to school, they were learning, they would become something in the future and make their mother and father proud." But Lebanon's financial crisis has sent the currency plummeting and prices of everyday basics rising. Combined with the devastating economic effects of the pandemic, the number of Syrian refugees in Lebanon living under the extreme poverty line increased to almost 90 per cent by the end of 2020. "It's like we're living a daily war, a silent, domestic war," said Hala. *UNHCR/Haidar Darwish*

improving basic service provision and expanding social safety net programmes inclusive of all vulnerable people, is necessary to ensure the sustainability and efficiency of the response. And given the protracted nature of their displacement, there must be an increased focus on durable solutions for Syrian refugees.

Projected situation in 2022 and beyond

Given the continued impacts of the COVID-19 pandemic, tough socioeconomic conditions and other compounding crises, it is anticipated that the large rise in needs among refugees and host-community members across the 3RP countries will be sustained and may worsen in some countries. Many people have already lost their livelihoods and have been pushed further into poverty and food insecurity, with the most vulnerable remaining in day-to-day survival mode.

Access to quality basic health and education services will remain challenged. Female-headed households will continue to be more vulnerable in terms of livelihoods, income, food security and violence. Protection risks, such as gender-based violence (GBV), sexual abuse and exploitation, domestic violence, forced and child marriage and child labour may increase in some countries. And social cohesion and stability between refugees and host communities could be further challenged by political and socioeconomic factors in some countries.

Evolution of needs and requirements (2017–2022)

3RP	People in need	People targeted	Requirements (US\$)
2022	20.1 M	11.4 M	5.6 B
2021	10.3 M	10.3 M	5.8 B
2020	9.5 M	9.5 M	6.0 B
2019	5.6 M	5.6 M	5.5 B
2018	5.3 M	5.3 M	5.6 B
2017	4.7 M	4.7 M	5.6 B

Financial requirements, PIN and PT for the 3RP Syria are preliminary and pending finalization and approval by partners and host countries. Population figures include refugees and impacted members of host communities. While the figures primarily relate to Syrian refugees, the 3RP aims to cover all populations in need, including other nationalities, asylum-seekers and stateless persons. All population figures are provisional and subject to ongoing operational planning for 2022.

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service

Against this backdrop of rising needs, funding trends for the 3RP are declining in real terms, impacting the ability of 3RP actors to meet the most urgent needs as well as invest in the resilience of local communities and institutions who deliver basic services to all. The 3RP witnessed a reduction of some US\$350 million in the first half of 2021, and cuts in assistance have been adopted in some countries. With host countries' resources being stretched to their limits – a situation that will likely continue in the coming year – as well as the difficult global funding environment, ensuring financial support to host countries and to the 3RP remains a top priority.

Response priorities in 2022

In support of governments' ongoing efforts, over 270 partners across the five 3RP countries will continue to assist refugees and other vulnerable populations as well as impacted members of their host communities in 2022. This includes, where possible, taking into consideration the needs of all persons of concern, Syrian and non-Syrian alike, including asylum-seekers and Stateless of other nationalities, in the spirit of the Global Compact on Refugees² (GCR) and the 'One Refugee' approach.

Working within a network of partnerships at the regional, national and local levels spanning intergovernmental organizations, government agencies, NGOs, civil-society organizations, international financial institutions and the private sector, 3RP actors will also continue to strengthen the capacity of public institutions to provide access to quality basic services, in line with the GCR and the 2030 Agenda for Sustainable Development.³ These initiatives will further support resilience-building for all and contribute to strengthening national public institutions' response capacities, as well as ensure that no one is left behind.⁴



Istanbul, Turkey. After 10 years of displacement, life is no easier for Syrian refugees, including for this 13-year-old refugee girl who lives in Istanbul, Turkey, with her family. They fled Syria five years ago. She has several brothers and sisters, and she is in fourth grade. *UNHCR/Emrah Gurel*

In particular, the 3RP response priorities in 2022 will aim to make progress in the following four areas:

Protecting people: The protection of people will continue to be at the centre of the 3RP response to ensure no one is left behind. Key programmes and activities in this area will include support for access to territory and asylum and basic rights for refugees, while preventing and reducing statelessness through legally recognized documentation and favourable legal provision. Furthermore, efforts to prevent GBV will be strengthened along with mitigating the risk of its occurrence. Child protection services will be expanded as well as efforts to nurture community protection and refugee and host-community cohesion, while protection from sexual exploitation and abuse (PSEA) will continue to reinforce awareness and trainings on addressing SEA.

Promoting durable solutions: Refugees continue to require access to territory, international protection and support in countries of asylum. Given the protracted situation, opportunities for durable solutions are urgently needed to enable refugees to look to the future with hope and dignity. Key programmes and activities in this area include resettlement and complementary pathways, support for people who take a voluntary and informed decision to return to Syria, as well as promoting local opportunities.

Contributing to dignified lives: As the crisis continues to impact protection and the socioeconomic well-being of vulnerable populations, supporting enabling conditions and opportunities for all to lead a dignified life is a priority for all partners across a range of sectors. To allow families to meet their basic needs, the 3RP will respond in a multisectoral manner (education, health and multipurpose cash assistance), which includes advocating for the inclusion of refugees in social protection programmes. Moreover, efforts will continue towards economic and employability opportunities for refugees and host communities alike while ensuring minimum standards of living for the most affected communities.

Enhancing local and national capacities: Enhancing local and national capacities across the region will remain one of the top priorities of the 3RP – broadening the capacity of national and local institutions and systems to provide protection and essential services.



Tripoli, Lebanon. A Syrian refugee from Homs lives in Tripoli's economically challenged Bab al-Tabbaneh neighbourhood. Syrian refugees in Lebanon struggle to survive amid the worst socioeconomic crisis in decades. Finding a dignified and safe shelter continues to be a struggle, with almost 60 per cent of Syrian refugee families living in dangerous, substandard or overcrowded shelters. *UNHCR/Tripoli*

The 3RP and Lebanon Crisis Response Plan (LCRP)

The unprecedented multi-layered political, economic and public health crises currently facing Lebanon are undermining the subsistence capacity of already vulnerable refugees and host communities across the country, in particular for women, girls and boys. Individuals and families are falling deeper into poverty due to currency depreciation, high inflation, rising food prices and loss of income. The COVID-19 outbreak has exacerbated the situation by reducing vulnerable populations' access to food, livelihood opportunities and other basic services. The 2021 Vulnerability Assessment for Syrian Refugees (VASyR) revealed that nine out of ten refugees continue to live below the extreme poverty line with increasingly negative consequences, including a rise in child labour and incidences of gender-based violence and a drop in individuals accessing legal residency. Threats of evictions are on the rise as families are increasingly unable to pay rent.

Gaps in supply chains (including fuel and electricity) are impacting the operational environment, including access to services for beneficiaries. LCRP partners are facing increased pressure from local authorities and communities amid spiraling needs. Refugee-host community relations in Lebanon are on an increasingly negative trajectory. In August 2021, through the regular



UNDP-ARK perception surveys, 36 per cent of respondents reported negative inter-communal relations compared to 21 per cent of respondents reporting negative inter-communal relations in July 2018. Relationships are becoming increasingly strained, with pressure points ranging from access to services and job competition, to historical grievances between the communities.

The situation in Lebanon continues to look bleak for refugees and host communities in 2022. Delays to government-led social safety nets schemes mean that many Lebanese families will not imminently receive the assistance they have been waiting for. State institutional capacity has been significantly impacted by the compounded crises, with a real risk of health, education and social institutions being unable to provide services. Municipalities that have long been at the forefront of responding to the Syria crisis now face gaps in their ability both to provide services and respond to localized emergencies, given insufficient resources and supply gaps.

In 2022, the LCRP's dual focus on refugees and host communities and the nexus approach will be even more critical to contributing to reducing the tensions and preserving protection space. The LCRP will target 1.5 million Syrian refugees, 207,700 Palestine refugees and 1.5 million Lebanese. The plan will retain a focus on strengthening protection for vulnerable people, including through the provision of legal services and case management for specific groups such as people with disabilities, GBV survivors and children at risk. Ensuring access to basic services, including education and health as well as water and shelter, will continue to be prioritized through interventions that seek to meet needs across the country.

Economically vulnerable refugees and host communities will continue to be supported with cash-based assistance and access to dignified work, ensuring a harmonization of transfer values and currencies of disbursement across sectors, in order to mitigate tensions and protection risks. Support to small- and medium-sized businesses, municipalities and other local entities including social development centres, primary healthcare centres and water establishments will remain a key component of the LCRP's support to host communities, with approaches designed to contribute to social stability in Lebanon.

References

¹ [Regional Refugee & Resilience Plan - Regional Needs Overview 2022.](#)

² [UNHCR - The Global Compact on Refugees](#)

³ [United Nations - The 2030 Agenda for Sustainable Development](#)

⁴ [United Nations - "Universal Values: Principle Two: Leave No One Behind"](#)



Part two: Inter-Agency Coordinated Appeals

Other Appeals Overview

Under the leadership/co-leadership of humanitarian partners, three other appeals are being developed with the aim to respond to the needs of populations at country and regional levels.

UNHCR and IOM will continue co-leading the regional Refugee and Migrant Response Plan (RMRP) for refugees and migrants from Venezuela and the Joint Response Plan (JRP) for the Rohingya humanitarian crisis in Bangladesh. In addition, IOM will continue leading the inter-agency Migrant Response Plan for the Horn of Africa and Yemen (MRP).

The work of the Regional Inter-Agency Coordination Platform for the Response for refugee and migrants from Venezuela (R4V), now composed of over 190 organizations throughout the subcontinent, will continue to complement host countries' efforts. The Platform is providing a coherent and consistent response and global visibility to the needs of Venezuelans and their host communities within the region. Reflective of its inter-agency and multisectoral character, the RMRP 2022 is based on joint needs assessments carried out by RMRP partners at national and sub-regional levels on an ongoing basis, and on continuous exchanges with host governments, civil society actors and affected populations. The RMRP 2022 will continue efforts to provide balanced responses focusing on immediate humanitarian and protection assistance, and activities that bridge the humanitarian-development-peace nexus by responding to the longer-term resilience and integration needs of affected populations and host communities.

Cox's Bazar, Bangladesh. A young Rohingya mother holds her baby. She lives in a shelter in the Kutupalong camp – the world's biggest refugee settlement. *IOM/Muse Mohammed*

Inter-Agency Coordinated Appeals: Other Appeals (2022)

Appeal	Type	People in need	People targeted	Requirements (US\$)	Requirements (2017-2022)
Horn of Africa and Yemen <i>Regional</i>	MRP	759.7 K	494.8 K	66.9 M	
Rohingya <i>Bangladesh</i>	JRP	1.4 M	1.4 M	875.0 M	
Venezuela <i>Regional</i>	RMRP	8.4 M	3.8 M	1.8 B	

Changes to the population figures and financial requirements for the regional appeals have occurred because of the overlap with HRPs. The Horn of Africa and Yemen MRP components are as follows: Ethiopia and Djibouti included, Somalia partly included, Yemen excluded. Venezuela RMRP: People in need (PIN) corresponds to refugees and migrants from Venezuela in destination (PIN: 4.60 million / PT: 2.55 million), pendulars (PIN: 1.12 million / PT: 202,000) and Colombian returnees (PIN: 645,000 / PT: 241,000), as well as host communities (PIN: 2.03 million / target: 824 million). For additional information concerning refugees and migrants from Venezuela in transit (PIN: 458,000 / PT: 348K), please see the Regional Refugee and Migrant Response Plan (RMRP). Rohingya JRP: Financial requirements, people in need and people targeted for the Rohingya JRP are preliminary and pending finalization and approval by partners and the host country. Population figures include Rohingya refugees and impacted members of host communities. They are, however, provisional and subject to ongoing operational planning for 2022.

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service

Bangladesh has generously hosted and provided safety to Rohingya refugees from Myanmar for several decades, particularly in the aftermath of the events of August 2017 in Myanmar. Under the leadership of the Government of Bangladesh, the humanitarian community will continue to strengthen protection and assistance for Rohingya refugees and vulnerable host communities.

Reflecting on an inter-agency strategy and in support of governments' efforts in the Horn of Africa and Yemen, the MRP 2022 provides a strategic framework to ensure a whole of society approach to address the needs of vulnerable migrants and host communities in the key countries along the Eastern and Horn of Africa (EHOA) and Yemen route and ensure continuity of services and urgent life-saving humanitarian and protection interventions along the route.

The 2022 RMRP, JRP and MRP will integrate responses to the COVID-19 pandemic across programming with the aim to address health and socioeconomic needs of the populations. Moreover, an age, gender and diversity (AGD) mainstreaming approach is taken by response actors, focusing on persons with disabilities and specific needs. Several cross-cutting priorities are also included in the 2022 Plans: integration of environmental concerns and mitigation strategies; enhancing measures to prevent, mitigate the risks of and respond to sexual exploitation and abuse; and strengthening the empowerment of communities and accountability towards affected populations (AAP).



Horn of Africa and Yemen MRP

PEOPLE IN NEED

0.8 million

PEOPLE TARGETED

0.5 million

REQUIREMENTS (US\$)

66.9 million

Departing migrants

Targeted: 11,776

Transiting migrants

Targeted: 99,681

Migrants at destination

Targeted: 22,885

Returning migrants

Targeted: 121,902

Host communities of returning migrants

Targeted: 238,514

The Horn of Africa and Yemen is a region of origin, transit and destination for hundreds of thousands of migrants, the majority of whom travel in an irregular manner. They often rely on smugglers to facilitate movement along the Eastern Route (originating from Ethiopia and Somalia and transiting through Somalia, Djibouti and Yemen) with the intention of crossing the Gulf of Aden towards the Kingdom of Saudi Arabia to seek better livelihood opportunities.

Movement restrictions imposed as part of COVID-19 containment measures were eased in 2021, but widespread economic challenges, scarcity of regular migration opportunities, protracted conflict and cyclical natural hazards persisted. They were the main drivers of irregular migration, with 16,080, 60,961 and 23,182 migrants arriving in Yemen, Djibouti and Somalia respectively in 2021.¹ Over 100 deaths and several disappearances were also reported in 2021. Throughout their journey, migrants face extreme weather conditions and harsh terrain, and they are exposed to protection risks and human rights violations, including but not limited to physical assault, xenophobic and discriminatory attacks and attitudes, human trafficking, abduction, forced labour, various forms of exploitation, arbitrary arrest and detention, various forms of gender-based violence (GBV), and the risk of death while crossing the Bab-el-Mandeb strait to the Gulf of Aden. As they pass through Yemen, migrants are also exposed to the effects of the ongoing armed conflict.

The deteriorating situation in transit and destination countries has resulted in limited access to life-saving assistance and protection interventions, such as shelter, medical care, water, hygiene and sanitation (WASH), and food and non-food items (NFIs), and limited support from local communities. This leaves migrants with the difficult choice to either continue with their journey or return home, further exacerbating their vulnerability.



Obock, Djibouti. Transiting migrants sit on a beach in Obock, Djibouti. Throughout their journey, migrants face extreme weather conditions and harsh terrain and are exposed to protection risks and human rights violations, including human trafficking, abduction, various forms of exploitation, arbitrary arrest and detention, as well as gender-based violence.

IOM/Alexander Bee

The large-scale return of Ethiopian migrants from the Kingdom of Saudi Arabia further exacerbates the situation of migrants who often arrive in a vulnerable state. As of October 2021, 75,300 returnees were registered, including 675 unaccompanied and separated children (UASC). Between August and September, 80 per cent of the returnees were females, many travelling with infants and young children, increasing the need to provide life-saving assistance and specialized protection interventions to returnees.

In addition, the situation of returnees to Ethiopia is compounded by the ongoing conflict in some areas of return, particularly in Tigray and parts of Amhara and Afar regions, where 37 per cent of all returnees in 2021 came from. The volatile security situation in these conflict-affected areas has compromised capacities for safe return and augmented humanitarian and protection needs, risks and vulnerabilities in areas where migrants have temporarily found refuge.

Projected situation in 2022 and beyond

With the heightened vulnerability of migrants in transit and destination countries, migrant flows are anticipated to reach pre-COVID-19 levels, with 759,748 people projected to be in dire need of life-saving assistance and protection interventions. This projected figure includes 395,345 migrants and 364,403 host/returnee-community members. The deteriorating economic situation, new and protracted conflicts and cyclical natural hazards will continue to be the main drivers of irregular migration, with a projected figure of 91,436 migrants leaving countries of origin to seek better livelihood opportunities in the Kingdom of Saudi Arabia. Since the number of Ethiopian migrants stranded in transit and destination countries during the pandemic has increased, so will the number of Ethiopians returning from Saudi Arabia, with a projected figure of 7,160 returnees per month.

The ongoing conflict in northern Ethiopia, which is expected to continue into 2022, will result in a deteriorated protection environment for civilians currently in the three states affected by the crisis, and at the same time hinder the sustainable reintegration of returnees, providing an impetus for irregular migration and re-migration. Additionally, access to Djibouti through the Afar Region will be more difficult, with a higher risk of migrants being caught up in active fighting. As such, migrants will have to pay more money to smugglers to use longer routes. Migrants from conflict-affected areas are at high risk of becoming stranded and vulnerable without access to safety networks and basic needs and services. A wide range of assistance and specialized protection interventions, including but not limited to family tracing and reunification (FTR) and mental health and psychosocial support (MHPSS), will become more critical if the conflict continues and migrants' return home is delayed.

Evolution of needs and requirements (2020–2022)

MRP	People in need	People targeted	Requirements (US\$)	Funding coverage
2022	759.7 K	494.8 K	66.9 M	
2021	613.7 K	311.0 K	68.2 M	14%
2020	200.0 K	200.0 K	43.3 M	34%

Changes to the population figures and financial requirements for the regional appeals have occurred because of the overlap with HRPs. The Horn of Africa and Yemen MRP components are as follow: Ethiopia and Djibouti included, Somalia partly included, Yemen excluded.

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service

Response priorities in 2022

In 2022, MRP partners will prioritize the provision of life-saving assistance, including food and NFIs, WASH services and specialized protection interventions, such as MHPSS, primary health care, multipurpose cash assistance, FTR for UASC, and legal support for 494,758 migrants and members of the host communities in targeted countries along the migration route. MRP partners will also foster an environment of cooperation and agreements between Governments and among partners, and strengthen Government and non-governmental institutional capacities in reinforcing migrants' access to protection interventions in line with established standards.

Furthermore, the response will support the development of policies and laws to improve the protection of migrants' rights, while strengthening community-based protection structures to support return and long-term reintegration and strengthen referral mechanisms between locations along the route. The assistance will be provided to migrants in vulnerable situations, such as UASC, GBV survivors and victims of trafficking, at response points set/established/rehabilitated along the route and to ensure a continuity of services along the route.



Aden, Yemen. An Ethiopian migrant sweeps the streets in Aden city, in front of a young Yemeni girl. He is enrolled in a cleaning campaign – a project for immigrants in Yemen, supported by IOM in Aden city. *OCHA/Ayman Fouad*

Engaging host communities will be key to the response in 2022. This will be done by implementing community-based reintegration projects, community conversations and support programmes; improving access to livelihood opportunities; establishing hotlines for the national referral mechanisms; and providing alternatives for migration and safety nets. As a result, MRP partners will contribute to addressing the root causes of migration, targeting hotspots of migration and areas of return and helping to build synergies between the humanitarian and development activities. The collection, analysis and sharing of migration data on mobility patterns, root causes, routes, migrant numbers, the protection-related needs, risks and vulnerabilities of migrants as well as partnership-building will continue to be enhanced to ensure informed, coordinated and comprehensive assistance and protection interventions to migrants and host communities along the Eastern Route.

References

¹ [Impact of COVID-19 movement restrictions on migrants along the Eastern corridor](#)



Rohingya JRP

PEOPLE IN NEED

1.4 million

PEOPLE TARGETED

1.4 million

REQUIREMENTS (US\$)

875 million

Type of appeal

Joint Response Plan

Refugees targeted

902,947

Host community targeted

541,021

Countries covered

Bangladesh

Bangladesh has generously provided safety to Rohingya refugees from Myanmar for several decades, most notably in the aftermath of the events of August 2017. Moving into the fifth year of the crisis in the neighbouring country, the Government of Bangladesh and the humanitarian community are providing critical support in an increasingly resource-strained environment.

The humanitarian community is committed to supporting Bangladesh in leading the humanitarian response for over 900,000 Rohingya refugees until conditions allow for their return to Myanmar in a safe, voluntary, dignified and sustainable manner.

Rohingya refugees reside in 34 congested camps within Cox's Bazar District and on the island of Bhasan Char. They are entirely reliant on humanitarian assistance. When the COVID-19 pandemic began, the Government and humanitarian actors scaled up the emergency health response and effectively curtailed its spread in the camps and surrounding areas. Rohingya refugees continue to benefit from the roll-out of the national COVID-19 vaccination campaign. However, in line with strict national COVID-19 measures for significant parts of 2020 and 2021, lockdowns resulted in a drastic reduction of activities in the camps. Similar to other situations globally, this contributed to a deterioration in the protection environment in the camps and heightened the vulnerabilities of women, children, older persons and those with disabilities.

Cox's Bazar District has a Bangladeshi population of 2,650,000, approximately 514,000 of whom reside in Ukhiya and Teknaf Upazilas, where the refugee camps are located. Humanitarian operations have increased local employment and economic opportunities for local populations. However, the growing multifaceted needs of Rohingya refugees and the COVID-19 pandemic have compounded existing socioeconomic challenges, exacerbating pressures on some public services and infrastructure. In particular, multisector needs assessments indicate that host communities members report that some of their most significant needs are access to food, shelter materials and income-generating activities. To prevent potential tensions between communities, it is critical that support continues to be extended to vulnerable Bangladeshi communities.



Cox's Bazar, Bangladesh. Two sisters inside the shelter that they share with their family in Cox's Bazar. When they arrived in the settlement at the height of the monsoon season in 2017, the all-female household had to hire day labourers to build their shelter, which is made of bamboo and thin, ripped polythene sheets. Without any money of their own they relied on private donations from Bangladeshis, who have helped many vulnerable families. *IOM/Olivia Headon*

Projected situation in 2022 and beyond

In 2022, sustained and strengthened assistance will continue to be required in areas including food, nutrition, health, safe water and adequate sanitation, education, shelter and non-food items. The Government and the humanitarian community have effectively managed the COVID-19 response until now, but the trajectory of the virus remains unpredictable. The humanitarian community will continue to be vigilant and maintain its emergency health response capacities.

The overall protection and security environment in the camps has deteriorated over the year, and this is likely to continue without a comprehensive community-led approach. Quality education, including the planned roll-out of the Myanmar Curriculum Pilot, skills development and self-reliance activities will contribute towards mitigating some of these challenges in Bangladesh while also ensuring that the community is better prepared for an eventual and meaningful repatriation and reintegration in Myanmar. Addressing the specific needs of those most vulnerable, including women, girls and boys, as well as persons with disabilities, will remain critically important.

Over the years, Bangladesh has made immense strides to mitigate the loss of life and property due to weather-related hazards, such as cyclones and heavy monsoons that result in landslides, flooding and a spike in communicable diseases. The Rohingya refugee camps and surrounding areas are particularly vulnerable for a variety of reasons, including monsoon floods, fires and climate change more broadly. Building on Bangladesh's well-established and effective disaster response capacities, efforts to scale up a multi-hazard preparedness and response capacity and to combat the impact of climate change will be essential.

Following the signing of the memorandum of understanding between the Government of Bangladesh and UNHCR (on behalf of the UN) in October 2021, efforts will also need to be stepped up to support refugee communities in Bashan Char. 2022 in particular will require critical investments to set up logistical and other systems on the island.

Response priorities in 2022

Under the leadership of the Government of Bangladesh, the humanitarian community will continue to strengthen protection and assistance for Rohingya refugees and vulnerable host communities. Five strategic objectives will guide the response across all sectors: Work towards the sustainable repatriation of Rohingya refugees to Myanmar, focusing on developing refugees' capacities through the Myanmar curriculum, developing skills that will support their reintegration upon return, and strengthening community-based efforts; Strengthen the protection of Rohingya refugee women, men, girls and boys, placing affected communities at the centre of the response; Deliver life-saving assistance to populations in need, including maintaining and rationalizing services to ensure equal access to humanitarian assistance; Strengthen disaster risk management by improving preparedness for multi-hazard crises and addressing the impacts of climate change within the refugee camps and host communities; Foster the well-being of host communities, including through facilitating access to quality services, strengthening public service infrastructure and supporting livelihoods.

Evolution of needs and requirements (2017–2022)

JRP	People in need	People targeted	Requirements (US\$)	Funding coverage
2022	1.4 M	1.4 M	875.0 M	
2021	1.3 M	1.3 M	943.1 M	60%
2020	1.8 M	1.8 M	1.1 B	64%
2019	1.2 M	1.2 M	920.5 M	75%
2018	1.3 M	1.3 M	950.8 M	72%
2017	1.2 M	1.2 M	434.1 M	73%

Financial requirements, people in need and people targeted for the Rohingya JRP are preliminary and pending finalization and approval by partners and the host country. Population figures include Rohingya refugees and impacted members of host communities. They are, however, provisional and subject to ongoing operational planning for 2022.

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service

A protection framework will guide the response, ensuring a focus on critical protection issues, delivery of targeted protection activities, and promoting community-led, needs-based and participatory approaches to assistance. The humanitarian response will also be underpinned by age, gender and diversity mainstreaming, disability inclusion, a comprehensive approach to protection from sexual exploitation and abuse, and enhancing community engagement and accountability to affected populations.



Venezuela Regional RMRP

PEOPLE IN NEED

8.4 million

PEOPLE TARGETED

3.8 million

REQUIREMENTS (US\$)

1.79 billion

Type of appeal

Regional Refugee and Migrant Response Plan

Refugees and migrants targeted

3 million

Host community targeted

824,218

Countries covered

Argentina, Aruba, Bolivia, Brazil, Chile, Colombia, Costa Rica, Curacao, Dominican Republic, Ecuador, Guyana, Mexico, Panama, Paraguay, Peru, Trinidad and Tobago and Uruguay

Since its creation four years ago, the Regional Inter-Agency Coordination Platform (also known as the Response for Venezuelans, or R4V)¹ and its partners have continuously expanded efforts to respond to the unprecedented outflow of refugees and migrants from the Bolivarian Republic of Venezuela (hereinafter, Venezuela).

By the end of 2021, an estimated 6.5 million refugees and migrants from Venezuela will be outside their home country. Seventeen countries of Latin America and the Caribbean covered by the regional Refugee and Migrant Response Plan (RMRP)² 2022 are hosting an estimated 84 per cent, or 5.4 million people, of this population. The large outflows caused by the complex political, human rights and socioeconomic situation inside Venezuela, compounded by the impact of the COVID-19 pandemic over the past 18 months in the entire region, have severely tested the capacities of authorities, host communities and the international aid community to respond to the needs of refugees and migrants.

Considering recent trends in Venezuela, as well as political and socioeconomic developments in several key host countries, the outlook for 2022 remains complex and volatile. Due to pandemic-related border closures and continued travel restrictions, refugees and migrants from Venezuela have adopted riskier coping strategies, including irregular means of travel and border crossings, which expose them to increased protection risks. As a result, a growing number of Venezuelans are in an irregular situation in countries of transit and destination.

In the described context, those refugees and migrants from Venezuela who are considered most vulnerable include survivors of gender-based violence (GBV), victims of human trafficking, persons with disabilities, pregnant and lactating women, young children with nutritional deficiencies, members of traditionally marginalized communities (including the indigenous, elderly and LGBTQI+ communities), as well as those who face a broad range of protection risks and challenges in accessing available services due to their irregular situation.



Simón Bolívar International Bridge, Venezuela-Colombia border. A mother crosses the Simon Bolivar Bridge with her child. The ongoing political and socioeconomic developments in Venezuela have led to the flow of millions of Venezuelans into neighbouring countries and beyond. Some Venezuelans have obtained documentation, which allows them to stay legally, but many who left their country have no regular status. This makes them more vulnerable to any form of exploitation, abuse, violence, trafficking and discrimination. *UNHCR/Siegfried Modola*

Projected situation in 2022 and beyond

The 2022 RMRP takes into account national dynamics (including country-specific socioeconomic, political and response capacity-related elements) within an agreed regional planning outlook. Through a participatory survey with R4V partners³ in all 17 host countries and dialogue with key interlocutors, the following key assumptions were elaborated and guide the RMRP 2022:

- 2022 will be characterized by continued outflows from Venezuela at an overall moderate rate amid a gradual lifting of COVID-19 travel restrictions across the region. This will further aggravate the challenging situation faced by host countries, affected communities, refugees and migrants.
- Challenges related to irregularity will further increase in 2022, including for newly arriving individuals from Venezuela who cannot meet entry requirements, as well as for refugees and migrants already in countries of transit and destination in an irregular situation.
- Secondary and/or onward movements of refugees and migrants from Venezuela, relocating from one host country to another and on new routes, including northwards, will increase.
- New outflows and onward movements will outnumber by far possible return movements to Venezuela.



Tarauaru, Brazil. This mother of four found sanctuary in Brazil after abandoning her hometown of Sampay, Venezuela, after armed groups in a nearby city opened fire on protesters, killing and wounding several of her neighbours. Her baby was born just days after she was forced to leave. As of October 2021, a combination of violence, insecurity, and a lack of food, medicine and other services in Venezuela had forced more than 5.9 million people to leave the country, creating one of the world’s largest displacement crises. More than 80 per cent fled to other countries in Latin America and the Caribbean, with Colombia and Peru home to the majority. *UNHCR/Viktor Pesenti*

Given this context, the Regional Platform considers that in the countries covered by the RMRP there are some 8.4 million persons in need of assistance. This number includes 4.6 million persons projected as being in-destination, 1.12 million in pendular situations, 645,235 returnees from Venezuela and 2.03 million affected host communities. Of these persons in need, 3.81 million will be targeted to receive sectoral or multisectoral assistance from R4V partners coordinated through the RMRP. This target population comprises 2.55 million in destination, 202,417 in pendular situations and 241,350 returnees. It is also estimated that 824,218 affected host communities will be targeted to receive some form of assistance.

Evolution of needs and requirements (2019–2022)

RMRP	People in need	People targeted	Requirements (US\$)	Funding coverage
2022	8.4 M	3.8 M	1.8 B	
2021	7.0 M	4.5 M	1.4 B	45%
2020	3.8 M	2.5 M	1.4 B	47%
2019	1.3 M	587.7 K	737.6 M	55%

People in need corresponds to refugees and migrants from Venezuela in destination (PiN: 4.60M / target: 2.55M), pendulars (PiN: 1.12M / target: 202K) and Colombian returnees (PiN: 645K / target: 241K), as well as host communities (PiN: 2.03M / target: 824M). For additional information concerning refugees and migrants from Venezuela in transit (PiN: 458K / target: 348K), please see the Regional Refugee and Migrant Response Plan (RMRP), available at: <https://r4v.info>

Table: Global Humanitarian Overview 2022 • Source: Financial Tracking Service

Response priorities in 2022

The RMRP 2022 will bring together an unparalleled number of 192 partners (compared to 159 in 2021) – including 117 NGOs and 23 refugee- and migrant-led diaspora and community-based organizations – to carry out 11,829 proposed activities to benefit 3.81 million refugees, migrants and host communities. The total financial ask of these 192 partners amounts to US\$1.79 billion. The response is organized across nine sectors – Education, Food Security, Health, Humanitarian Transportation, Integration, Nutrition, Protection, Shelter, and Water, Sanitation and Hygiene – and three sub-sectors of the Protection Sector (Gender-Based Violence, Child Protection, and Human Trafficking and Smuggling). The RMRP 2022 also incorporates cross-cutting modalities (such as cash and voucher assistance, or CVA) and cross-cutting themes and priorities, including gender, the environment, communication with communities, centrality of protection, accountability to affected populations and the prevention of sexual exploitation and abuse, to ensure that these considerations are incorporated across all response activities.

Due to the general health and COVID-19 situation affecting refugees and migrants from Venezuela across the region, addressing primary health care, reproductive health and mental health will be another crucial priority under the RMRP 2022. Direct health interventions, in combination with CVA, will be used to respond to and assist with the costs of treatments, medicines and vaccines. R4V partners across the region will support host authorities in the roll-out of COVID-19 vaccines to all refugees and migrants from Venezuela, irrespective of their situation, including with logistics, equipment (such as refrigeration units) and outreach for immunization campaigns.

Moreover, the RMRP 2022 will prioritize and improve accountability and transparency, including through enhanced mechanisms used to monitor and report on activities implemented and funds received under the response (RMRP Activity Explorer).⁴ For the first time, in 2022, the RMRP will also include a results framework linked to the 2030 Sustainable Development Goals to measure the impact and effectiveness of assistance provided by R4V actors. Meanwhile, activities and people reached by R4V partners will continue to be reported monthly through public databases, such as the 5Ws dashboard available on R4V.info,⁵ and funds received⁶ by R4V partners in support of the RMRP 2022 will be reported using UNOCHA's Financial Tracking Service.

Regularization and Integration

By 2022, the majority of refugees and migrants from Venezuela will have spent multiple years in their host communities. As a result, their needs go beyond immediate life-saving interventions and include access to regularization and documentation, protection, self-reliance and integration. For this reason, supporting national regularization and documentation initiatives for refugees and migrants from Venezuela in an irregular situation, as part of a process to facilitate successful local integration, is a key priority under the RMRP 2022. R4V partners in countries including Brazil, Colombia, the Dominican Republic, Ecuador, Peru, Mexico, and Trinidad and Tobago, among others, will work collaboratively with host governments to ensure



Bogotá, Colombia. A Venezuelan mother from Puerto Cabello cares for her newborn son at Bogotá's maternity hospital. The Colombian Government enacted a measure that seeks to ensure that children born on Colombian soil to Venezuelan parents are now granted Colombian nationality, which eliminates barriers to accessing education, health care and other essential rights enjoyed by Colombian citizens. *UNHCR/Daniel Dreifuss*

that refugees and migrants from Venezuela have access to regularization and documentation through multiple channels, but including through residence permits (permanent or temporary), humanitarian visas, refugee status determination and asylum procedures, as well as complementary protection statuses.

Based on encouraging developments in a number of countries in 2021, R4V members will advocate for these measures to include as many refugees and migrants from Venezuela as possible. In collaboration with international financial institutions and other development actors, R4V partners will also work towards the socioeconomic integration of refugees and migrants and their inclusion into public policies and services, including COVID-19 recovery and vaccination plans, as well as more long-term social protection systems, such as health, education, housing and other essential services.

References

¹ [Response for Venezuelans site](#)

² [Inter-Agency Coordination Platform for Refugees and Migrants from Venezuela - Refugee and Migrant Response Plan \(RMRP\)](#)

³ [Inter-Agency Coordination Platform for Refugees and Migrants from Venezuela - Key Resources RMRP 2022](#)

⁴ [Inter-Agency Coordination Platform for Refugees and Migrants from Venezuela - 2021 RMRP Activity Repository and Explorer](#)

⁵ [Inter-Agency Coordination Platform for Refugees and Migrants from Venezuela - Dashboard RMRP 2021](#)

⁶ [Inter-Agency Coordination Platform for Refugees and Migrants from Venezuela - Funding RMRP 2021](#)



Part three

Delivering Better

Humanitarian response, and the systems behind it, are constantly evolving to ensure coordinated and principled assistance quickly reaches those who need help the most. Increasingly, processes that include work with local actors, anticipatory action and improved data analysis and protection help the system to deliver better.

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Part three: Delivering better

Pooled Funds and Humanitarian Emergencies

The Central Emergency Response Fund (CERF) and the Country-Based Pooled Funds (CBPFs) remain key instruments that ensure coordinated and principled humanitarian assistance quickly reaches people caught up in crises.

As of 28 October, CERF has allocated over \$491 million directly to 36 countries. The CBPFs have allocated \$506 million to 19 country contexts. Eleven UN agencies have received CERF funding, targeting 50 million people.¹ Apart from UN agencies, CBPFs funds in 2021 benefited 260 international NGOs, 196 national partners and four Red Cross/Red Crescent national societies, targeting 59.1 million people.

In 2021, weather events, conflicts, disease outbreaks and the impacts of COVID-19 continued to contribute to high levels of humanitarian needs. Several countries were struck by new emergencies, while others witnessed deteriorating humanitarian conditions that required support from OCHA's pooled funds. In response to the rapidly deteriorating situation in Afghanistan and Ethiopia, several time-critical CERF and CBPFs allocations have been approved since December 2020 by the ERC and the relevant HC for an overall amount of more than \$276 million.²

Sana'a, Yemen. This young father from Yemen keeps a brave face for his wife and three daughters. He cannot afford rent or much food for his family. He says of his children: "They know our situation, they rarely ask for anything. If one of them wanted something and I said I had no money, they accept and just walk away." After years of escalating conflict, Yemeni people continue to bear the brunt of ongoing hostilities and severe economic decline. In 2021, OCHA's pooled funds allocated more than \$96 million to fund 70 humanitarian projects in Yemen. *WFP/Marco Frattini*



Pooled Funds allocations (2021)

Country	Total	CERF	CBPFs
Afghanistan	123.1 M	92.7 M	30.3 M
Syria Cross-border	101.3 M	-	101.3 M
Yemen	95.9 M	40.0 M	55.9 M
Ethiopia	89.0 M	39.6 M	49.4 M
South Sudan	78.9 M	29.4 M	49.5 M
DRC	74.5 M	33.6 M	40.9 M
Somalia	66.0 M	27.0 M	38.9 M
Syria	55.5 M	20.0 M	35.5 M
Nigeria	35.9 M	32.6 M	3.3 M
Global	30.0 M	30.0 M	-
oPt	26.5 M	4.5 M	22.0 M
CAR	24.4 M	8.0 M	16.4 M
Myanmar	22.0 M	10.0 M	12.0 M
Lebanon	18.8 M	4.0 M	14.8 M
Sudan	15.9 M	6.5 M	9.4 M
Bangladesh	14.0 M	14.0 M	-
Iraq	13.5 M	-	13.5 M
Haiti	12.9 M	12.9 M	-
Venezuela	11.5 M	8.0 M	3.5 M
Burkina Faso	11.0 M	11.0 M	-
Mozambique	10.2 M	10.2 M	-
Niger	8.5 M	8.5 M	-
Madagascar	8.0 M	8.0 M	-
Chad	7.0 M	7.0 M	-
Guinea	6.0 M	6.0 M	-
Kenya	5.0 M	5.0 M	-
Angola	5.0 M	5.0 M	-
Cameroon	5.0 M	5.0 M	-
Ukraine	4.1 M	-	4.1 M
Nepal	3.2 M	3.2 M	-
Jordan	2.0 M	-	2.0 M
Colombia	2.0 M	2.0 M	-
Armenia	2.0 M	2.0 M	-
Azerbaijan	2.0 M	2.0 M	-
Burundi	1.5 M	1.5 M	-
Pakistan	1.5 M	-	1.5 M
St. Vincent and the Grenadines	1.0 M	1.0 M	-
Equatorial Guinea	994.5 K	994.5 K	-
Fiji	500.0 K	500.0 K	-

Data as of end-October 2021. All figures in US dollars.



Maarrat Misrin, Syria. This 10-year-old boy was one of a number of people injured two years ago when an airstrike targeted a village to which he and his family had been displaced. Before this, the family lived in the southern countryside of Idlib. He moved to Turkey for treatment and he is currently residing in the Al-Ghadfa camp near Maarrat Misrin.

OCHA/Bilal Al-Hammoud

Regionally hosted pooled fund. This concept was developed building on the success of the CBPFs approach. It mirrored many of the CBPFs' practices and consisted of a series of funding "envelopes" for countries within the region. Regional funds will introduce greater agility and stability to the provision of pooled fund services. The fund launched its first country envelope in Niger (\$14 million) following endorsement by the ERC and a director-level round table. This allocation was made in view of the country's large and deteriorating humanitarian crisis, with 3.8 million people in need of assistance in 2021, the highest figure in five years.

GBV programming received a special allocation of \$25 million from CERF's Rapid Response window. Under this allocation, UNFPA received \$17 million and UN Women \$8 million, with the requirement that at least 30 per cent of the funding be passed through to women-led organizations working on GBV. An independent review found that CERF's designation of a GBV-specific allocation was key to increasing attention for GBV in humanitarian settings. The review also underlined the considerable value of the block grant approach, its multi-country nature and the unique opportunity it provides for countries to apply global guidance across multiple settings.

People living with disabilities received targeted support through a dedicated disability envelope in 2021. The ERC allocated \$10 million to seven countries (Afghanistan, Colombia, DRC, Nigeria, South Sudan, Syria and Venezuela) participating in CERF's first Underfunded Emergencies round. This was in addition to \$125 million allocated to all 12 countries participating in the round (Afghanistan, Burkina Faso, Cameroon, Chad, DRC, Ethiopia, Madagascar, Mozambique, Nigeria, South Sudan, Syria and Venezuela). All CERF-funded projects are expected to mainstream support for persons with disabilities, taking into consideration their specific needs. Work in support of people living with disabilities was informed by an Inter-Agency Disability Contact Group, which OCHA created in 2021. An independent review will assess the initiative in 2022.

Top contributions to Pooled Funds (2021)

Country	Total	CERF	CBPFs
Germany	341.1 M	119.4 M	221.7 M
United Kingdom	182.5 M	88.5 M	94.0 M
Netherlands	148.9 M	75.2 M	73.7 M
Sweden	121.6 M	65.5 M	56.1 M
Norway	99.6 M	49.8 M	49.8 M
Canada	83.6 M	23.4 M	60.2 M
Belgium	69.8 M	20.6 M	49.3 M
Denmark	67.5 M	27.2 M	40.3 M
Ireland	46.7 M	12.1 M	34.6 M
Switzerland	25.0 M	5.5 M	19.5 M

Data as of end-October 2021. All figures in US dollars.

Support to local and national actors

CBPFs have become a key vehicle for supporting direct funding to local and national actors. In 2021 CBPFs allocated \$138.5 million to local and national NGOs (27 per cent of total CBPFs funding), continuing to be the largest source of direct funding for such organizations. The Syria Cross-Border Fund provided \$50.3 million to local and national NGOs, accounting for 50 per cent of their \$101 million allocation in 2021. While localization is recognized as a secondary aim of CBPFs, their overarching goal remains to support partners best placed to respond in a timely, efficient and accountable manner. OCHA has sought to empower local actors with greater agency in shaping the humanitarian response and promoting local solutions, such as by increasingly involving them in the governance of funds, providing higher-quality funding to local actors and providing capacity support. In 2019, UN agencies engaged 588 local and national partners in the implementation of CERF funding, the highest number ever recorded.³ This included 377 national or local NGOs, 196 Government entities and 15 Red Cross/Red Crescent societies. The majority of sub-granted CERF funding (\$73 million, or 14 per cent of annual CERF funding) went to national and local partners in 2019.

Protection from Sexual Exploitation and Abuse

CBPFs use targeted allocations to contribute to PSEA efforts. The DRC Humanitarian Fund supported the implementation of the National PSEA Strategy through an allocation made in March 2021. This provided support to a PSEA network at national and regional levels and strengthened community engagement, including public awareness and sensitization, case management and survivor assistance. In June, the fund supported PSEA training for humanitarian actors.



Stadium IDP Camp, Nigeria. UNICEF, in partnership with local NGO Goal Prime and CERF funding, has set up a Child Friendly Space to help children in this IDP camp continue having an education and a safe space where they can play, learn and have access to clean water. They also receive psychosocial support. Children here come from various villages and towns in Borno State. Some are displaced with their families, but some others have lost their families and went through trauma. The center helps children who were forcibly recruited by non-state armed groups recover and rebuild a normal childhood and social life. Adults and caregivers also receive support in this center. *OCHA/Eve Sabbagh*

Similarly, a May 2021 allocation to the Sudan Humanitarian Fund established safe spaces for women and girls in underserved areas, upgraded services for GBV survivors and promoted PSEA work. OCHA mainstreams PSEA approaches across funded projects. For example, it requires that pooled-funding recipients develop and maintain appropriate mechanisms for reporting and addressing SEA-related complaints.

Accountability to Affected People

OCHA is committed to promoting AAP. Pooled-fund recipients are required to consider the appropriate operational steps for engaging with affected communities when developing and implementing projects, and AAP measures must be demonstrated throughout the programme cycle.

The CERF secretariat ensures that IASC commitments are tracked through project proposals, and it collects information on joint AAP mechanisms at the allocation level. These should capture inter-agency feedback-and-complaints mechanisms, benefiting the entire humanitarian response in each country operation. CERF also tracks agency-specific feedback-and-complaints mechanisms through project documents. AAP output indicators have also been included in a recently developed list of CERF standard indicators.

CBPFs have included AAP across the different stages of the allocation cycle. At the fund level, allocation strategy papers ensure AAP mainstreaming. Under the existing CBPFs global guidelines, all funds are required to implement a feedback mechanism that can be used by affected



Chad. A UNICEF project, sponsored by CERF, has brought hope for youth affected by violence, whilst also tackling protection and economic empowerment. One hundred young people are learning how to build filters, fix water points, make soap and build latrines to improve sanitation in the Lake Chad region. The project aims to respond to the immediate needs of the population, access to clean water and promotion of good hygiene practices. It also integrates protection through WASH activities by providing skills development opportunities to youth abducted by Boko Haram. These skills can then support the youth with income generation revenue activities. *UNICEF/Bahaji*

people, and allocations are requested to demonstrate how they strengthen response-wide collective AAP. Allocations can include targeted support to AAP efforts. For example, the Syria Cross-Border Fund supported improved monitoring and community consultations to strengthen AAP in a March 2021 allocation. At the partner level, capacity assessment questionnaires require partners to demonstrate AAP policies and proof of their implementation.

The Centrality of Protection

OCHA recognizes that protection is one of the main purposes and intended outcomes of humanitarian action. The protection of all people affected and at risk informs humanitarian decision-making and is an integral part of the responses funded by OCHA's pooled funds.

CERF funding to the protection sector reached \$75 million during the first 10 months of 2021.⁴ This represented over 15 per cent of all CERF funding during the year, compared to 2020⁵ when 10 per cent (or \$82 million) of all funding went to the protection sector. The number of people targeted with CERF-funded life-saving assistance in the protection sector reached 2.8 million in 2021, of whom 1.7 million (or 60 per cent) were female. CBPFs allocated \$65.6 million to protection activities (13 per cent of total funds allocated), targeting nearly 4.6 million people in need. In particular, CBPFs provided \$8.7 million to support child-protection activities in different emergencies.

Gender Equality and Gender-Based Violence

In 2021, gender equality and support to GBV continues to be an important focus area for OCHA's pooled funds. OCHA established an inter-agency Gender Contact Group that explored ways for OCHA's pooled funds to strengthen their support to women and girls.

The CBPFs allocated \$385 million (around 76 per cent of total allocations) to projects that intend to contribute to gender equality with consideration to age groups. This is in line with the IASC Gender with Age Marker (GAM) assessment. Of the 59 million people targeted by CBPFs' partners partners, 630.7 million are women and girls (52 per cent). CBPFs have allocated \$15.6 million to projects that include GBV programming. CBPFs actively promote the participation of women in governance arrangements. Across the 19 funds, women represent international NGOs in 19 advisory boards and national NGOs in 11 advisory boards.

Allocations by Gender and Age Marker (2021)

Gender and Age Marker	CERF	CBPFs
GAM Code 4 <i>Likely to contribute to gender equality, including across age groups</i>	159.6 M	384.1 M
GAM Code 3 <i>Likely to contribute to gender equality, but without attention to age groups</i>	175.3 M	97.6 M
GAM Code 2 <i>Unlikely to contribute to gender equality (no gender equality measure but includes age consideration)</i>	78.9 M	7.9 M
GAM Code 1 <i>Unlikely to contribute to gender equality (no gender equality measure and no age consideration)</i>	59.3 M	9.8 M
GAM Code 0 <i>Does not systematically link programming actions</i>	18.6 M	4.8 M

Data as of end-October 2021. All figures in US dollars.

Gender also continued to be a priority for CERF in 2021. All submissions were informed by a gender analysis, with data disaggregated by sex and age, and they had completed the mandatory GAM. Of the 97 million people targeted with life-saving assistance through CERF in 2021, approximately 53 per cent were women and girls. CERF also actively promotes the concerns of women and girls through targeted allocations, such as GBV earmarking in allocations from its Underfunded Emergencies window in 2020. In addition, CERF provided \$25 million in block grants to UN Women and UNFPA to combat GBV. At the time of writing, CERF remains the single largest direct funder towards the GBV sub-sector, with \$35 million provided so far in 2021.⁶ Similarly, CERF was the largest direct donor to GBV, with \$28 million in total funding.⁷

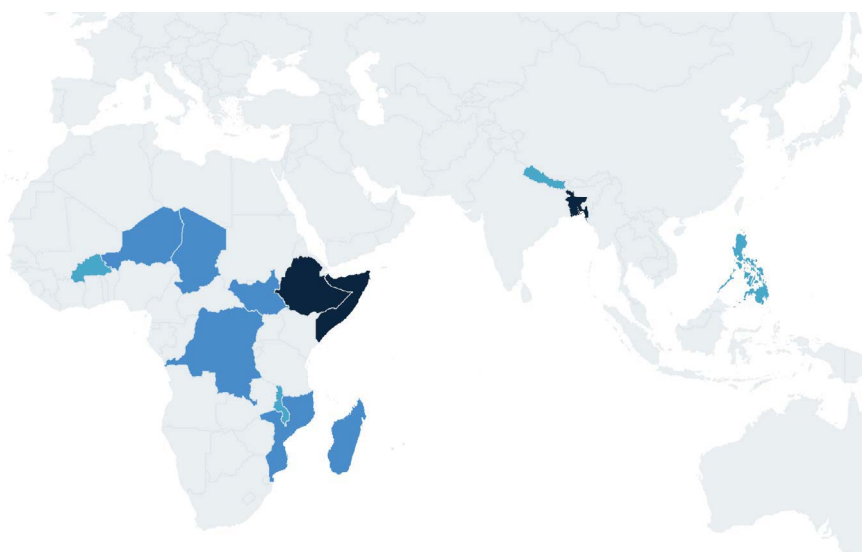
Anticipatory Action

In recent years, the humanitarian community has actively pursued ways to help people get ahead of predictable crises by taking anticipatory action. In 2021, OCHA continued to coordinate, facilitate and mobilize resources for collective anticipatory action. OCHA-managed pooled funds have played a catalytic role. CERF financed collective anticipatory action ahead of drought in Ethiopia and Somalia, allocating \$20 million in each country. This brings its total anticipatory allocations to \$60 million since June 2020.⁸ OCHA currently facilitates collective anticipatory action pilots in 11 countries and in one thematic area (cholera).

Anticipatory Action Pilots

- Activated
- Endorsed
- In development

Drought	Cholera
Burkina Faso	DR Congo
Chad	Mozambique
Ethiopia	
Niger	Cyclones
Somalia	Philippines
Dry Spells	Floods
Malawi	Bangladesh
	Nepal
Plague	South Sudan
Madagascar	



References

¹ CBPF beneficiary figures are calculated on a project-by-project basis which may lead to some people being counted more than once. The above figures is, therefore, a preliminary estimate. A comprehensive review of beneficiary figures is undertaken on a yearly basis prior to the publication of final figures in the CBPF annual report.

² In response to the escalating conflict in Tigray, Ethiopia, the ERC approved a time-critical CERF allocation of \$13 million in December 2020 following conflict escalation. CERF released another \$15 million in June 2021 to assist the most affected communities in the region following improved access for humanitarian operations. This was complemented by an allocation from the Ethiopia Humanitarian Fund, which provided a reserve allocation in March 2021 of \$2 million to expand humanitarian access; a standard allocation of \$45 million in April in response to the situation in Tigray and the risk of climate- and weather-related events; and a reserve allocation of \$20 million in August to enable a scale up of the humanitarian response in Tigray, Afar and Amhara regions. Support from OCHA's pooled funds was also instrumental in responding to the rapidly deteriorating situation in Afghanistan. At the beginning of 2021, over 18 million people—almost half of the country's population — needed humanitarian assistance. During the first six months of the year, an additional 550,000 people were forced into displacement. To respond to the fast-evolving context, CERF has allocated over \$90 million to humanitarian responses in the country in 2021, including \$20 million in August from the Rapid Response window to enable the Afghanistan country team to “stay and deliver” and maintain and scale up the humanitarian response. In September, CERF released another \$45 million from the Rapid Response window to prevent a collapse of the country's health-care system and ensure continued provision of life-saving health services. Similarly, the Afghanistan Humanitarian Fund released a \$3.1 million reserve allocation in February 2021 to provide air transportation, expand humanitarian access, and facilitate security relocations and medical evacuations. This was followed in May by a \$20 million reserve allocation to respond to intensifying conflict, combined with weather-related disasters. Lastly, in August 2021, the Afghanistan Humanitarian Fund approved a reserve allocation of close to \$23 million to scale up life-saving programmes, an innovative rolling allocation designed to approve proposals on an ongoing basis in response to a rapidly changing situation.

³ 2019 is the most recent year for which complete data is currently available.

⁴ CERF allocations to protection in 2020 totaled \$82 million, but this figure covers the entire 12-month period of the year. 2021 figures cover the 10 months until end October.

⁵ CERF: Allocations by Sector 2021

⁶ Financial Tracking Service, Protection - Gender-Based Violence 2021 as of 2 November 2021

⁷ Financial Tracking Service, Protection - Gender-Based Violence 2020 as of 3 November 2021.

⁸ \$15 million for Somalia in 2020; \$5.2 million for Bangladesh in 2020; \$20 million for Ethiopia in 2020/2021; \$20 million for Somalia in 2021.



Part three: Delivering better

Delivering Better for Women and Girls and Prioritizing GBV Prevention

Women and girls have greater representation in humanitarian prioritization and response, but more women are needed in leadership roles, and underfunding for GBV mitigation and prevention remains of critical concern.

The enhanced HPC approach has helped to better represent gender, age and disabilities in humanitarian prioritization and response, through the improved collection of disaggregated data.

In 2021, 100 per cent of HNOs reflected analysis of the humanitarian impacts on women and girls¹ and 89 per cent of HNOs reflected GBV risks and impacts, a great improvement from the previous year.² Regional- and country-level gender working groups and networks are producing analysis and working to increase the participation of women-led organizations in humanitarian decision-making and programming in Afghanistan, Cameroon, CAR, Chad, Jordan, Myanmar, Nigeria, oPt, Philippines, Somalia, Syria, Ukraine, Yemen and the MENA and Asia-Pacific regions.

Despite this, stronger gender analysis is needed to further place the spotlight on women and girls, particularly those with multiple needs including adolescent girls, young women, and women and girls with disabilities.

Women-led organizations

The first system wide [Inter-Agency Humanitarian Evaluation on Gender Equality and the Empowerment of Women and Girls](#) called for greater efforts to address the gap in the representation of women-led organizations in humanitarian decision making. Despite noting progress since 2017, including an uptick in consultations with women, the evaluation concluded that they were still not sufficiently represented.

The ERC has called for the inclusion of women-led CSOs in HCTs to ensure their engagement in humanitarian decision-making processes. The IASC also produced new guidance on '[Strengthening participation, representation and leadership of local and national actors in IASC humanitarian coordination mechanisms](#)'. Enhanced efforts from partners have resulted in increased engagement of local women-led organizations and their meaningful participation in HPC design and planning as well as HCTs - particularly in Ethiopia, Iraq, Yemen, Myanmar, and Syria.

Humanitarian Guidance and Mechanisms

The first-ever thematic evaluation on women and girls in emergencies



The [Inter-Agency Humanitarian Evaluation \(IAHE\) on Gender Equality and the Empowerment of Women and Girls \(GEEWG\)](#) has assessed progress on the operationalization of its agenda since 2017. The IAHE also captures best practices and provides recommendations to further mainstream GEEWG into humanitarian action. The evaluation highlights areas including gender equality in humanitarian action, the meaningful participation of women and girls in humanitarian decision-making, and technical gender expertise in onset and protracted crises. The evaluation also looked at gender capacities at cluster and HCT levels, funding for programming and coordination, and accountability for mainstreaming GEEWG at country and global levels. Recommendations are being implemented, with progress integrated and tracked using the IASC Gender Accountability Framework. *OCHA/Damilola Onafuwa*

Funding shortfalls

Lack of funding for the response to and the mitigation and prevention of GBV remains of critical concern. The IASC continues to advocate for funding and scrutinize and remove the impediments to GBV response, including societal/cultural stigma, lack of survivor-centred approach, and limited meaningful engagement of women-led organizations and women affected by conflict in humanitarian design. However, funding for GBV has only reached above 20 per cent of the global requirements, severely limiting the capacity to save lives and meet the needs of GBV survivors in humanitarian contexts.

Aid in Action

IASC Gender Standby Capacity Project



GenCap continues to be an important gender mainstreaming resource for Humanitarian Country Teams (HCT). In 2021, it provided strategic and operational support to 18 country-level contexts, all of which had inter-agency coordinated appeals. GenCap senior advisers supported humanitarian operations in Afghanistan, Burkina Faso, Cameroon, CAR, Chad, DRC, northern Ethiopia, Haiti, Honduras, Mali, Mozambique, Niger, Nigeria, Somalia, South Sudan, Syria Cross-Border Response (Turkey), Yemen and Zimbabwe.

In Mali, GenCap supports the HCT to implement the IASC policies on gender-equality and the empowerment of women and girls in humanitarian action. GenCap consulted more than 40 key informants to establish baselines, collective priorities and targets for the HCT to produce a road map on gender equality programming in emergencies (GEPiE). Stakeholders included humanitarian leadership, clusters, technical experts, CSOs, local and international NGOs, UN agencies, donors and Governments. GenCap also supports the localization of humanitarian response through reinforcing local capacities. The Mali GEPiE road map is being implemented, with several NGOs leading or co-leading areas and activities. GenCap will continue providing support to enhance outcomes, as well as the monitoring and evaluation of the interventions and their impact. *OCHA/Giles Clarke*

To follow through on the humanitarian system's commitments to combat GBV and the chronic issue of underfunding, a High-Level Round Table led by the ERC with IASC Principals and donors was convened. This resulted in improved visibility and tracking of GBV funding, including through the new [Financial Tracking Service \(FTS\)](#) page, which provides comprehensive information on system-wide funding allocations for GBV programming. The FTS page presents the funding requirements for GBV mitigation, prevention and response, providing a comprehensive overview of the global sector requirements for all HRP and appeals in the GHO. More features will be added to the page shortly which will make it easier to download data for enhanced analysis.

Aid in Action

Women leaders push for positive policy changes in cross-border humanitarian response



Female teachers in north-west Syria often earn low salaries – on average the equivalent of \$150 per month. Many work long hours and are the sole breadwinners for their families. Without these teachers, many children in north-west Syria would not receive an education. In 2000, six female elementary school principals from Idlib, Syria, led an initiative to lobby local authorities and NGOs for better working conditions. They filmed a video showing the plight of teachers in Idlib, which reached a wide international audience and caught the attention of high-level officials.

The women inspired a group of female Syrian humanitarian workers, who joined forces with them to further amplify advocacy efforts. This led to a change in human resources policy, including granting maternity leave and improving working conditions for around 5,000 women across north-west Syria. The group then expanded its scope of work. It began advocating for a more gender-sensitive approach to programming and a stronger focus on girls and women in the needs assessment and planning stages of humanitarian responses, as well as stronger representation of women in humanitarian decision-making forums. The Women's Advisory Board for the Humanitarian Liaison Group (the HCT for the cross-border humanitarian response) was created in 2021, comprising of 20 women based in north-west Syria and south-east Turkey. They each hold senior positions with humanitarian organizations operating in Syria, striving to accomplish positive policy and strategic changes in the cross-border humanitarian response.



The Central Emergency Response Fund (CERF) has increased pooled funding for GBV response through its Underfunded Emergencies window and a CERF allocation to UNFPA and UN Women. CERF's Underfunded Emergencies window allocation of \$100 million for 10 countries earmarked \$9.6 million for GBV priorities and included \$30 million allocated to Yemen to exclusively address issues for women and girls, including public health. The total amount allocated by country operations to GBV-related programming increased from an earmarked \$9.6 million to \$21.7 million, including indirect GBV outcomes under the health sector. CERF funding of \$25 million was allocated to UN Women and UNFPA to address GBV across 11 countries affected by humanitarian emergencies and to support 770,000 affected people. An estimated 40 per cent of that funding – \$10 million – has been allocated to women-led organizations and women's rights organizations in 2021-2022. Going forward, CERF has committed to ensuring 30 per cent of funding to local women's organizations for projects related to GBV.

CBPFs have achieved considerable results in gender equality and GBV. In 2020, the CBPFs allocated \$863 million in total, all of which required the use of the IASC Gender with Age Marker (GAM) to ensure gender equality was a key consideration. Using the GAM, 66 per cent of funding aimed to contribute to gender equality. In 2020, 38 local women-led organizations were eligible to receive funding in 18 CBPFs (9 per cent of all partners). GBV was the main objective of 9 per cent of CERF-funded projects in 2020, with 62 per cent including a GBV component. CBPF is currently reviewing the global guidelines to better encourage and improve access for local women-led organizations to CBPFs and to promote the participation of women-led/women's rights organizations in governance arrangements, including advisory boards and project review committees.

References

¹ Annual Humanitarian Programme Cycle Quality Scoring exercise undertaken by OCHA, UK FDCO, USAID, ECHO, UNICEF, WHO, IOM, UNFPA, and UNHCR.

² Analysis of Gender-Based Violence in 2021 Humanitarian Needs Overviews and Humanitarian Response Plans, GBV AOR, June 2021.



Part three: Delivering better

Ensuring Funding and Capacity for AAP and PSEA in Every Humanitarian Response

Accountability to affected people (AAP) and protection from sexual exploitation and abuse (PSEA) must remain firmly embedded in every humanitarian response.

Humanitarian action is accountable to the women, men, girls, and boys – of all ages and abilities – affected by humanitarian crises. It is critical that their voices are heard and that they have active participation in all areas of response that affects their lives and well-being.

New or escalating humanitarian crises in Ethiopia, Afghanistan, Myanmar and Haiti, and persisting crises in Syria, Yemen, South Sudan and DRC have reinforced the need for robust community engagement and accountability in 2021. Strong measures are required to prevent, respond to and mitigate the risks of sexual exploitation and abuse to ensure that humanitarian operations are safe and effectively respond to the needs and priorities of all affected people.

Health emergencies such as the COVID-19 pandemic cause vulnerabilities to grow and the risks of gender-based violence and sexual exploitation and abuse increase. As the COVID-19 crisis persisted in 2021, adding to the needs and challenges of 2020, risks of SEA were further compounded and are likely to continue into 2022.

Jalalabad, Afghanistan. A humanitarian worker talks with a woman displaced to the Surkh Rod area in Nangahar Province. The community will receive core relief items to help them during the winter. Implementing partner IMC is delivering the aid, supported by the Afghanistan Humanitarian Fund. *OCHA/Charlotte Cans*

Developments in policy and operations

AAP is vital to realign the asymmetry of power that currently defines the relationship between humanitarian agencies and communities. It is essential to meet long-standing organizational and collective standards and commitments, including through the work of the Grand Bargain. In 2021, the IASC Principals agreed to issue a statement on the centrality of collective AAP to principled humanitarian action, based on the recommendations to strengthen system-wide accountability produced by the IASC Operational Policy and Advocacy Group (OPAG). Throughout 2021, the Results Group 2 on Accountability and Inclusion provided technical support, guidance and tools to humanitarian leaders and responders through the [Portal](#) and [Service Directory](#), which strengthens AAP at the country level, including in the HPC. During 2021, an increased proportion (32 per cent) of HCTs have reported having a collective AAP strategy or framework in place. Forty per cent have either a framework, working group or coordination mechanism. Three

Humanitarian Guidance and Mechanisms

System-wide accountability across Asia and the Pacific



In 2021, a collective workplan was developed to improve the commitment to and implementation of system-wide accountability across the Asia-Pacific region. Developed by the Asia-Pacific Inter-Agency Coordination Group on AAP and PSEA¹ and endorsed by the IASC Regional Directors, the workplan included nine strategic workstreams to ensure countries and operations establish and roll out collective AAP and PSEA strategies and action plans. Comprising over 160 regional and country experts from 18 countries, the Coordination Group provides intensive support that includes capacity-building, mentoring, knowledge exchange and design of accountability toolkits to improve humanitarian responses. The group is also partnering with a start-up organization to support the design of an inter-agency platform for community feedback and complaints. Indonesia, Myanmar, Nepal and the Philippines are also exploring the use of such a system.

In the picture, Gustavo Gonzalez, UN RC/HC in the Philippines, talks with a woman during a visit to Albay Province, a week after it was battered by Super Typhoon Goni. OCHA/Martin San Diego

regional inter-agency AAP coordinators are working as AAP/PSEA focal points in OCHA offices in Latin America and the Caribbean, Asia Pacific, and Southern and Eastern Africa. Each coordinator supports countries and operations by providing strategic and technical support. AAP is included in 27 HRPs.² PSEA is a core part of the humanitarian system's commitment to AAP and the 'do no harm' approach. It should be integrated as a priority cross-cutting component of every humanitarian response.

Humanitarian Guidance and Mechanisms

A tool to express needs and priorities of the affected people in Ethiopia

In Ethiopia, the [Collective Platform for Community Voices](#) is an inter-agency tool to respond to the expressed needs and priorities of affected people. With wide input from humanitarian agencies and NGOs, the platform was endorsed by the Ethiopia HCT. The platform analyses data provided by organizations on the current needs and challenges of affected people within the humanitarian response. Insights are provided, which help humanitarian responders make decisions and adapt programming. The Collective Platform comprises three sections that include: Community voices: an interactive dashboard provides details related to a number of variables, disaggregated by age, gender and other vulnerability characteristics, to understand the needs and priorities of the affected communities by location; Recommendations for actions: for humanitarian responders and decision makers, including the Ethiopia HCT, Inter-Cluster Coordination Group, Humanitarian International Non-Governmental Organizations Network and other relevant coordination forums, to act upon community feedback; Corrective actions: documents key milestones, including successes and challenges, on how agencies and decision makers have made course corrections in response operations. The platform will be updated each month to ensure that real-time feedback from communities informs the response planning and decision-making process. *In the picture, a humanitarian worker meets with the local community in Melka Soda Woreda, Ethiopia. OCHA/Jordi Casafort*

The [IASC Plan for Accelerating PSEA in Humanitarian Response](#) calls for strengthened collective action at the country level. PSEA networks are required to produce joint annual UNCT/HCT PSEA action plans to strengthen SEA prevention and response at the country level. The percentage of PSEA networks with an action plan in place has increased from 58 per cent in 2019 to 76 per cent in 2021.³ In 2021, inter-agency PSEA coordinators provided technical and strategic support in more than 20 countries.⁴ In complex emergencies, such as Ethiopia and DRC, PSEA coordinators are also deployed to operational hubs to strengthen collective actions at the front line of response. The percentage of PSEA networks led by a PSEA Coordinator has increased to 73 per cent in 2021.⁵ However, due to funding limitations, PSEA coordinator deployments often remain short term and unsustainable.

PSEA has been increasingly integrated into the HPC, with country-level PSEA priorities, coordination and activities reflected in 24 HRPs in 2021. The percentage of PSEA networks that have integrated PSEA into HRPs has increased to 70 per cent in 2021.⁶ Despite this, there is still

Humanitarian Guidance and Mechanisms

IASC External Review of PSEAH

The IASC Independent External Review on Protection from Sexual Exploitation and Abuse and Sexual Harassment (PSEAH) is sponsored by UNFPA as IASC 2021 PSEAH Champion. It was initiated to identify successful collective efforts over the last decade and to recommend further collective action for improvement. The review provides recommendations to the IASC leadership and broader humanitarian system to: ensure a common action plan on PSEAH; address the lack of accountability and improve investigations, and ensure funding for PSEA programmes in 15 priority contexts where SEA risks are the highest, to ensure sustained support for and implementation of PSEA measures. The review also emphasizes that SEA risk management and mitigation is integrated into all areas of the humanitarian response and support for SEA victims and survivors should be scaled up.

limited consideration of funding for PSEA activities, with only eight countries including PSEA funding through HRPs in 2021. PSEA actions were also supported through humanitarian pooled funds in CAR, DRC, Ethiopia and Lebanon, while CERF funds were used for Ethiopia, Haiti, Mali, Somalia and Nigeria. Other operations obtained funding from donors or UN agencies. The IASC PSEA Field Support Team, comprised of UN entities and NGOs, continues to provide dedicated technical support and advice to strengthen PSEA programmes in priority-country contexts.

Gaps in funding

AAP and PSEA approaches still struggle to secure predictable, multi-year, flexible funding across the HPC even though few resources are required to lead to the more effective and accountable programming needed to adapt to feedback and allow for more iteration, learning and time to build trust within communities. AAP and PSEA coordinator deployments are predominantly reliant on short-term funding, which makes planning and implementation unsustainable.

Ways forward

If humanitarian actors are to meet individual agency- and system-wide PSEA and AAP commitments, three areas require immediate action: An enhanced and more accountable response leadership of HCs and HCTs that is adequately supported and prioritizes collective AAP and PSEA in HCT compacts and performance appraisals; A more inclusive architecture that builds on existing coordination structures, supports more area-based coordination approaches, and includes and supports local leadership (particularly national women-led and women's rights organizations), including within the HCT; Adequate quality funding for in-country collective approaches and for the creation of dedicated PSEA and AAP capacity to support United Nations Resident Coordinators/Humanitarian Coordinators (RC/HCs), and to further develop available technical capacity through collective inter-agency mechanisms.

Aid in Action

Funding allocations strengthen PSEA in DRC and CAR



In DRC, a \$1.5 million allocation to the DRC Humanitarian Fund has strengthened ways for survivors to submit complaints safely and confidentially through a toll-free hotline. Operators have received training, and survivors are using the hotline to report their cases and seek assistance. The allocation also provides for medical supplies for survivors through established GBV services. The same project aims to prevent and mitigate SEA risks in newly emerging crises. During the October 2021 Ebola outbreak and the Angola-returns crises, front-line aid workers received PSEA training. Women-led and community-led associations helped establish and strengthen community-based complaints mechanisms; PSEA focal points conducted risk assessments; and awareness-raising campaigns were implemented through mass media. Capacity-building for investigations is planned for local NGOs in dire need of guidance and support.

In CAR, a \$4.1 million CBPFs allocation has strengthened prevention and response in active-conflict areas, IDP sites and hard-to-reach areas, where women and girls are particularly exposed to GBV and SEA. This includes \$3.25 million to projects that provide psychosocial, economic, medical and legal support to survivors of GBV and SEA, and \$742,000 to purchase post-exposure prophylaxis kits and provide capacity-building for health experts who manage rape cases.

In the picture, the coordinator of a local NGO talks to a crowd during a workshop in Kananga to empower women victims of GBV. In central Kasai, whenever a woman has a relationship outside of marriage, she must pay a fine to the customary chief in order to be able to return to her home. The NGO succeeded in obtaining the commitment of customary chiefs to “alleviate” the fines imposed on women by custom. This is a first step in a deeply traditional area. OCHA/Alioune Ndiaye

References

¹ AAP is co-chaired by OCHA and Plan International; PSEA is co-chaired by IOM, UNFPA and UNICEF.

² See [Note on IASC coordination structures at country level in 2020](#)

^{3,5,6} Calculation is based on an average of 33 countries with humanitarian crises reporting to the [IASC PSEAH Dashboard](#) on key indicators annually.

⁴ The number of PSEA coordinators deployed varies throughout the year due to funding availability, contract modalities and other factors.



Part three: Delivering better

Local Actors Play a Key Role in Humanitarian Action

Local actors play a key role as first responders in a crisis and the providers of long-term support. In 2021, work continued through the IASC and the Grand Bargain to deliver on commitments that complement international action with ongoing nationally and locally led responses at the country level.

In 2021, local actors were critical to and at the forefront of the response to COVID-19, particularly in sustaining humanitarian operations. Steady progress has been made in localization, backed up by sustained political support. International actors are making changes, particularly in the flexibility of partnership agreements, to better support local leadership and delivery. It is critical to continue strengthening principled engagement with national/local authorities to ensure a more relevant and sustainable response. Despite this, some local and national NGOs have encountered Government hindrance in accessing resources or operational space.

In July 2021, the IASC released its [Guidance on Strengthening Participation, Representation and Leadership of Local and National Actors in IASC Humanitarian Coordination Mechanisms](#). Over 100 national and local NGOs were consulted for the guidance, which was translated into four

Gongulong, Nigeria. Two women make climate-friendly cooking stoves in Gongulong, Maiduguri. In response to climate change and rising temperatures, FAO and partner organizations provide increased access to energy for IDPs, returnees and host communities in Borno State through improved and innovative energy technologies. FAO supports activities focused on providing technical assistance and policy advice to develop crops, livestock, fisheries and forestry subsectors. Emphasis is given to institutional capacity-building and developing local skills and expertise to ensure sustainability in camps and local communities across Nigeria. *OCHA/Damilola Onafuwa*

languages. The IASC also agreed to start measuring global progress against indicators set out in the guidance. In the second half of 2021, work continued on the roll-out and further dissemination of the guidance as well as the production of a global snapshot. To ensure local and national NGOs were fully involved in IASC processes, eight local and national NGOs were included in the membership of the IASC Results Group 1 sub-group on localization.

Good practice IASC Results Group 1 established an [online repository](#) to serve as a platform for strengthening resource and information sharing on localization and coordination. The repository includes guidance, policies, good practices, case studies and information on localization initiatives and projects, with a specific focus on the representation of relevant national and local actors in leadership and coordination structures.

Grand Bargain reconfirms commitment to localization

In 2021, the Grand Bargain (GB) workstream on localization continued its work. Following the GB annual meeting in July 2021 and the launch of GB 2.0, the newly appointed Eminent Person of the Grand Bargain, Jan Egeland, outlined that two of his three priorities concerned localization: the cascading of funding through better intermediation, and quality funding for local and international actors. These will be addressed through newly created GB caucuses.¹

Humanitarian Guidance and Mechanisms Using the IASC Guidance in Somalia



In Somalia, the IASC guidance was used to encourage more participation of local actors. A Localization Task Force was created to strengthen and advance the localization agenda, with a focus on partnerships, funding, capacity strengthening and local voice in the highest decision-making levels and in collaboration with the Government in Somalia. *In the picture, women in Galkayo wait to receive cash entitlements. Cash transfers empower people with choice and help the community by supporting and stimulating local trade in areas where markets still function. WFP/Karel Prinsloo*

Financing for local actors

OCHA-managed CBPFs continue to be a vital vehicle for localization in 2021, given that local and national actors' opportunities to access funding have not grown at the expected pace. CBPFs continue to meet their target of allocating 25 per cent of direct funding to local and national actors; this stood at 39 per cent in 2021. Almost all CBPFs had at least one or more local or national NGO on their advisory boards.

Other pooled funds, such as the NGO START Network Fund, continued to promote nationally driven solutions. They also allow indirect support costs to be subgranted to these organizations. Denmark, Save the Children and NEAR have worked on establishing locally managed pooled funds in Somalia and West Africa to enable a greater flow of funds to local actors. Oxfam has been piloting a pre-financing rapid response facility that allows it to disburse funds more rapidly to local actors in acute emergencies.

As funding to local actors has increased, there is a greater need to better manage the risks associated with access to greater volumes of international funds. The inclusion of increased overhead/core costs for local partners is key to empowering them as leaders of humanitarian response, allowing for investment in staff development, institutional systems or policy engagement. Without predictable and flexible core funding, local organizations will continue to be trapped in a cycle of

Aid in Action

NRC Implements Capacity Development Programme



Norwegian Refugee Council is implementing a multi-year capacity-development programme for national NGOs and CSOs in the Lake Chad basin. Organizational development experts were deployed to Chad, Niger and Nigeria to focus on strengthening local actors' capacity. CSOs identified their needs and received systemic training on monitoring and evaluation, programme and financial management, as well as training on protection, GBV and AAP for 36 organizations, over 20 of them led by women. *NORCAP/Alassane Guindo*

project-based approaches, and they will suffer from the consequent staff turnover, loss of institutional knowledge and the inability to build the capacity of their staff and their organization. Good practice examples exist from across constituency groups. In CARE Philippines, an emergency response fund mechanism and humanitarian partnership platform allow local actors to access resources and respond within the first 48 hours of a disaster onset.

Localization and gender

Support to women's rights and women-led organizations, including refugee women-led organizations, has been a focus of organizations such as ActionAid, CARE and Oxfam in their localization efforts. CARE's [Women Lead in Emergencies](#) programme empowered grassroots organizations and women's collectives to ensure that women have a voice in decisions that affect their own lives. CRS, InterAction and IRC engaged local actors on PSEA, including working with local partners to build capacities.

Aid in Action

New Approach Piloted by Christian Aid and DanChurchAid



Crisis-affected communities receive support to develop their emergency response and longer-term resilience, through [local-to-global](#) protection and a community-led crisis response approach. Christian Aid, DanChurchAid and other partners provide support that includes emergency group cash transfers, and rapid provision of emergency response skills such as conflict resolution, psychosocial support and technology management. They help communities to connect and network with others, including the private sector, and support community-based information, mobilization and learning. Qualitative evaluations in five countries found that the programme has enabled communities to obtain what they needed more quickly and at a lower cost than external actors could achieve. In 2021, the programme expanded to include occupied Palestinian territories, Sudan, the Philippines, Kenya, Haiti and Myanmar. *In the picture, a DanChurchAid member talks to a representative from a Bedouin tribe in the West Bank. DanChurchAid*

Aid in Action

First Line Emergency Response in Rakhine State



In Myanmar, ECHO HIP is funding an innovative crisis response governance structure: 'First Line Emergency Response'. Led by ActionAid and Christian Aid, together with Phyu-Sin Saydanar Action Group (PSSAG), Pandita Development Institute (PDI) and Rakhine Youth New Generation (RYNGN) (national NGOs in Myanmar), the programme links emergency preparedness mechanisms at the township level in Rakhine, delivering a combination of [group cash transfers](#) for self-protection designed and led by crisis survivors and NNGOs as first responders. ECHO scaled up the mechanism with additional household cash programming to cover all of Rakhine State and expanded this as part of a wider INGO consortium in Northern Shan states. *IRC/Kaung Htet*

Localization and the private sector

Local businesses are increasingly engaged in crisis response and recognized as key actors. In the Philippines, a local business network, the Philippine Disaster Resilience Foundation (PDRF), is an observer on the HCT and is included in the HCT's appeals and HRPs. PDRF is a member of the [Connecting Business initiative \(CBI\)](#), which is jointly supported by OCHA and UNDP and engages the private sector before, during and after emergencies to increase the effectiveness of response and recovery in a coordinated manner. During the flash floods that hit Sri Lanka in June 2021, the local CBI private sector network, A-PAD SL, quickly organized emergency assistance in partnership with the local hospitality sector, [providing hot meals to thousands of affected people](#).

References

¹ See Criteria for establishing Grand Bargain 2.0 caucuses in the [Grand Bargain 2.0 Framework](#), page 8.



Part three: Delivering better

Protection at the Centre of Humanitarian Response

Protection must be central to humanitarian response. Conflict, basic rights violations and prevailing gender inequality remain today's biggest drivers of protection challenges. Throughout 2021, humanitarian crises grew deeper due to the converging challenges of armed conflict, the pandemic, climate-induced displacement, economic downturn and rising inequality, including the significant rollback of women's and girls' rights.¹

A shared responsibility to prioritize protection and contribute to collective protection outcomes is emphasized in the [IASC's Policy on Protection in Humanitarian Action](#) (2016). The need to implement this commitment across the HPC is underlined, including in assessments, planning, programming, implementation and monitoring. Gender- and age-sensitive protection analysis and strategic protection objectives should inform and be reflected in all aspects of the HNO and HRP.

There has been significant progress, notably in developing joint analysis frameworks, such as the [JIAF](#) and the [Protection Analytical Framework](#), developed through the Global Protection Cluster (GPC). A number of HCTs also developed centrality of protection strategies, such as [South Sudan](#) and [Somalia](#). Despite this, a number of critical areas still require more focus and

El Progreso, Honduras. A mother is embraced by her daughter, in front of their home in El Progreso, Honduras. She has just found out the bank will take her home as she can no longer afford to pay her rent. In recent years, an increasing number of children and families from the Northern Triangle countries of Central America – El Salvador, Honduras and Guatemala – are migrating northwards through irregular pathways, hoping to resettle in the U.S. Some are fleeing pervasive gang violence in their home communities, while others are trying to escape endemic poverty. *UNICEF/Bindra*

Humanitarian Guidance and Mechanisms

Independent Review of IASC Protection Policy Implementation

The IASC adopted a Policy on Protection in Humanitarian Action in 2016. The policy was part of a concerted effort to address the most complex and severe risks of violence, coercion and deprivation. It provides the overarching framework for humanitarian actors to fulfil their responsibility to place protection at the centre of humanitarian response, spelling out core principles, approaches, roles and responsibilities. There have been some advances since its introduction, but challenges remain in implementing aspects of the policy and achieving protection outcomes collectively.

Against this background, the IASC agreed to review the policy's implementation under the leadership of Results Group 1 on Operational Response and with support from an advisory committee comprising senior experts from IASC organizations. Expected in spring 2022, the final report will include concrete recommendations on operationalizing the policy.

In November 2021, the review team published a paper that outlined priority protection issues. These are not presented as conclusions but rather as the basis for discussions in the review's next phase. The paper highlights eight priority areas: leadership, accountability, conceptualization, the protection gap between protection challenges faced by humanitarians and their capacity to address them, protection architecture, results and impact, working with other actors on protection, and localization.

Despite challenges in fully implementing the IASC protection policy, including mobilizing all the necessary actors to respond to critical protection issues in a cohesive manner, country operations have taken significant steps and initiatives to ensure protection remains at the centre of humanitarian action. Country operations are often operating in challenging contexts characterized by conflict, access issues, scarcity of funding and a shrinking humanitarian space. Increasingly, they are engaged in advocacy, negotiation, multi-sectoral approaches and community-driven protection responses to address the protection needs of the affected populations.

In the picture, a woman walks with her daughter at the Bakassi Camp, Maiduguri. OCHA/Damilola Onafuwa



Chermalyk, Ukraine. Nataliia hugs her three children in the yard of her house located right at the “contact line.”
OCHA/Yevhen Maloletka

investment, including protection analysis, particularly in ensuring a shared understanding and systematic collection of information and flow across sectors and actors. Better data collection, including more systematic sex-, age- and disability-disaggregated data, and monitoring are also needed, as well as greater articulation of impact and outcomes that reduce risks for affected people in response planning.

Increasingly, tools and guidance are being developed to support the integration of protection across humanitarian programmes, for example the [Global Protection Cluster Protection Mainstreaming Toolkit](#), [Child Protection Minimum Standard Pilar 4 for Working Across Sectors](#) and the [Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action](#). Improved access to and more consistent use of such tools are now needed to strengthen coordination efforts and contribute to more holistic and systematic action to prevent and respond to protection risks.

The [Review of IASC Protection Policy Implementation](#) and the UN Secretary-General's [Call to Action for Human Rights](#) can help foster collaboration and stimulate progress within the humanitarian system to address some of these areas. The Call to Action reiterates that human rights must be at the heart of all UN action, including in times of crises. It provides momentum to deepen and advance the centrality of protection in practice, particularly through the related process under way to develop an Agenda for Protection.



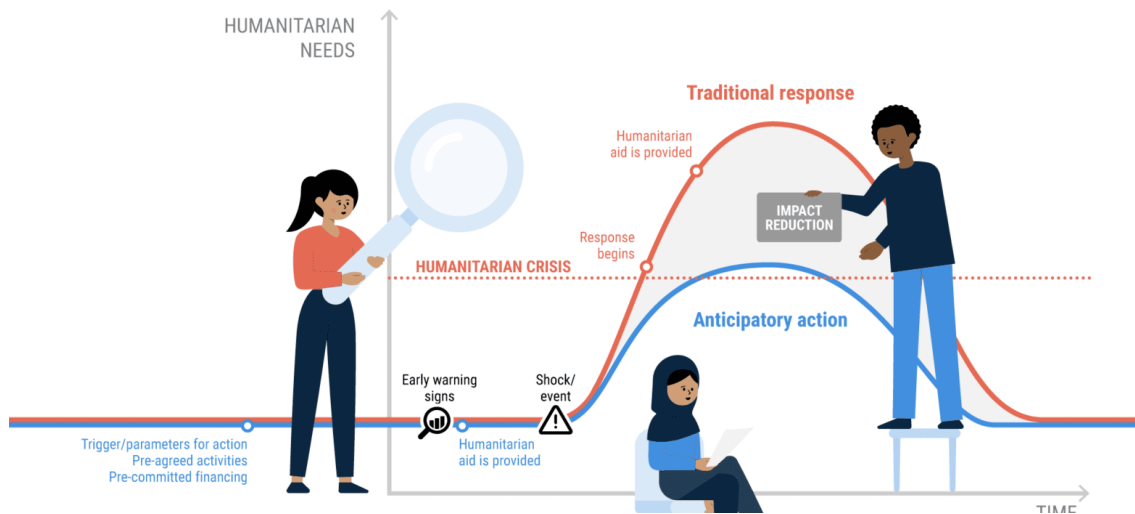
Part three: Delivering better

Anticipatory Action: Fast, Effective and Dignified

An estimated half of all today's crises are somewhat predictable and 20 per cent are highly predictable. However, less than 1 per cent of the financing for these crises is pre-arranged. As the gap grows between humanitarian needs and the resources required to meet them, anticipatory action offers a way to make these resources more efficient.

Anticipatory action is a set of humanitarian interventions triggered once a pre-agreed forecast threshold is crossed. Supported by pre-agreed finance, anticipatory action prevents or mitigates potential disaster impacts before a shock, or before acute impacts are felt. Acting early mitigates the shock impact and reduces humanitarian needs, helping to protect hard-won development gains and enhance resilience. A [High-Level Event on Anticipatory Action](#) took place in September 2021, attended by officials from 75 UN Member States and leaders from 60 international CSOs. A clear political will was expressed to act ahead of predictable crises in addition to an explicit recognition of the transformative potential of this approach.

Satkhira, Bangladesh. A family rests under a mosquito net on the boat where they slept after their house was submerged. In early 2020, this family lost the only land they owned to river erosion. This phenomenon is made worse by climate change and more intense monsoons. They had taken a three-year lease for new land in their village. But later that year, the house they had just built was submerged in a second round of flooding that impacted thousands of people living in low-lying areas. They were among those who received a cash payment from WFP, which allowed them to buy food and stay safe as they waited out the flooding. Cash transfers empower families to prepare for looming hard times by purchasing essential supplies, such as food and medicine, strengthening their shelters, protecting their assets and moving to safer areas. *WFP/Sayed Asif Mahmud*



Anticipatory Action Toolkit. First steps of an Anticipatory Action framework.

In 2020, the ERC committed to invest up to \$140 million from CERF over a two-year period in a set of anticipatory action pilots that demonstrate how collective and coordinated anticipatory action could work at scale. The pilots will also evaluate to what extent anticipatory action is faster, cheaper and more dignified than the traditional response. Pilot countries include Bangladesh (monsoon floods), Burkina Faso (drought), Chad (drought), DRC (cholera), Ethiopia (drought), Madagascar (plague), Malawi (dry spells), Mozambique (cholera), Nepal (floods), Niger (drought), the Philippines (cyclones), Somalia (drought) and South Sudan (floods).

Rigorous learning from the pilots so far has revealed that anticipatory action is:

Fast. In Bangladesh, finance was approved within four hours – the fastest-ever CERF allocation – enabling agencies to distribute aid one to five days before a rapid-onset flood struck the most vulnerable people.

Cost-effective. In Bangladesh, agencies were able to procure ahead of peak needs. This meant that prices were lower and the transport of relief items was cheaper. UNFPA saved 12 per cent and FAO increased its reach by more than 10 per cent due to lower unit costs. In Somalia, the initial anticipatory funding of \$15 million helped mobilize an additional \$181 million. Collectively, these funds helped prevent 500,000 people from sliding into IPC Phase 4 between July 2020 and January 2021.

Impactful. In Somalia, WHO found that outbreaks of key epidemic-prone diseases, especially acute watery diarrhoea, malaria, severe acute respiratory infections and bloody diarrhoea, were reduced in the target districts, compared to a similar time in the previous two years. IOM found that the anticipatory rehabilitation and upgrading of boreholes has improved household finances, increased mental health, kept livestock healthier, reduced water-related disputes and mitigated drought-related migration.



Doolow, Somalia. Since late 2020, delayed and erratic rainfall has affected many parts of Somalia. This caused devastating water shortages, with widely depleted water reservoirs, and loss of pasture and livestock, and led the Government of Somalia and the United Nations to declare drought in April 2021. To mitigate the worst humanitarian impacts of the drought, UN agencies and partners are implementing anticipatory action with a CERF allocation of \$20 million. Activities focus on mitigating loss of livelihoods and declines in food consumption, ensuring continued access to water, preventing school dropouts, detecting and controlling disease outbreaks, and mitigating protection risks.*IOM/Tobin Jones*

Dignified. Beneficiaries who received support before peak flooding in Bangladesh were able to prepare themselves and face the crisis on their own terms. Spillover effects are also evident: some 76 per cent of women and girls who received hygiene kits were more likely to access regular health care, continue school, generate income, or participate in social and community activities compared to non-recipients.

Improving the quality of programming and localization. Advanced planning leads to better collaboration between UN agencies and their implementing partners during the programme design phase. In Bangladesh, UNFPA designed dignity kits specifically for the transgender community, because it knew the profiles of target beneficiaries in advance. Bangladesh-based agencies also now look at joint targeting at the household level instead of area-based coordination of programming only.

Encouraging accountability. The rigorous approach to learning and documentation that OCHA and partners apply to anticipatory action sets future standards in increasing AAP. Pilots in Bangladesh, Ethiopia and Somalia show that if learning is planned and integrated from the outset, better accountability and programming can be achieved.



Part three: Delivering better

Joint Intersectoral Analysis Framework

Humanitarian systems can respond more appropriately if they understand and acknowledge the multiple and different ways in which people and communities experience shocks. Understanding the needs of different groups of people also helps support decisions on the timing and sequencing of humanitarian assistance as well as appropriate response modalities, and gets aid to where it is needed most. This approach is referred to as intersectoral analysis.

Everyone experiences crisis differently

Devastated by 40 years of war, recurrent natural disasters, chronic poverty, drought and COVID-19, Afghanistan was already suffering one of the world's worst humanitarian crises before the sharp increase in hostilities during mid-2021. As the Taliban made rapid territorial gains, widespread displacement, the destruction of homes, health facilities and schools, and a roll back of fundamental rights resulted in restricted access to services, particularly for women and girls. By 15 August, when the Taliban took control of the capital, Kabul, nearly half of the population needed humanitarian and protection assistance. As humanitarian conditions deteriorated, no one in Afghanistan experienced the crisis in the same way. Differences in age, gender, disability, socioeconomic situations, living conditions, physical and mental well-being,

Libenge, DRC. A humanitarian worker talks with Libenge residents after floods hit the region. Heavy rains caused the Oubangui River to overflow, affecting 73 villages on its banks. The waters began to recede after a few weeks, leaving behind fragile earth and clay-brick homes, which often need partially or completely rebuilding. *OCHA/Alioune Ndiaye*



Yakou, Chad. A humanitarian worker and Yakou's Sous-Préfet discuss the best way to reach IDPs in Fouli Department, Lac Province. *OCHA/Augustin Zusanne*

and coping mechanisms determined each person's specific needs and coping abilities. At the same time, when different needs overlapped, their impacts were often magnified: without safe shelter, physical and mental health conditions were exacerbated; without safe access to schools, education stalled; without water, food provision and hygiene were compromised.

This example illustrates how humanitarians identify needs: start with an overview of the context, then analyse the shock or stressors and their immediate impacts and consequences on the population's humanitarian conditions. Then, as granularly as possible, disaggregated by age, gender and diversity characteristics.

JIAF evolves

The first iteration of the Joint Intersectoral Analysis Framework (JIAF) was introduced for the 2020 HPC. One year on, humanitarian actors are coming together with a common aspiration: to improve the effectiveness of humanitarian action. From CAR to Colombia, Yemen to Ukraine, South Sudan to Syria, and in dozens of crises around the globe, a robust, more people-centred joined-up analysis of people's needs is taking place.

In 2021, 25 country teams continued to advance joint analysis, delivering on the promise of enhanced quality HNOs and more strategic HRP through evidence-based needs assessments. Based on country office feedback, revised and strengthened JIAF guidance was released to help humanitarian communities work towards a more holistic and intersectoral analysis. Country teams have found new ways to provide a contextually rich overview of people most vulnerable, where they live and the complex multiplicity of needs they face. Local communities are now more actively engaged, bringing their unique perspectives into HNOs. In some countries, peace and development actors are also coming to the table to discuss the immediate, underlying and root causes of crises with humanitarians.

Humanitarian Guidance and Mechanisms Iraq HRP: Adopting the JIAF methodology



For 2022, amidst a changing context, increasing focus on durable solutions and decreasing humanitarian capacities and funding, the humanitarian community in Iraq significantly revised its processes to determine humanitarian needs and ensure strict prioritization for programmatic interventions. These processes were revised to be more strictly data driven using a common methodology; guided by strategic priorities; transparent; and inclusive of all key stakeholders.

Based on the globally agreed JIAF methodology, the HCT, Inter-Cluster Coordination Group and donors jointly considered the context and its impacts, analysed the consequences for humanitarian needs, and agreed on a set of needs indicators that would inform the intersectoral PiN and severity. The results of the intersectoral and cluster-specific analytical frameworks were reviewed by a panel led by the HC and consisting of HCT representatives from UN agencies, international and national NGOs, and donors. Preliminary findings were adjusted to ensure a focus on people with multiple needs for emergency humanitarian response, and the intersectoral PiN was raised to include needs found by clusters that fit those criteria but had not been captured by the initial intersectoral model. This resulted in a final proposal for PiN and severity, which was then further reviewed in a full session with all HCT members, cluster coordinators and donor representatives, after which a final agreement was reached on the figures.

A similar approach to reviewing cluster response activities and targeting is also being used to produce a strictly prioritized response strategy, which can serve as a high-impact, yet realistically achievable plan of action for 2022. In developing their response plans and targets, clusters were asked to use capacity, access, achievement and needs analysis data sets as the foundation for their response plans. The HC-led panel will repeat its review and feedback process, with follow-on sessions with the entire humanitarian community, to ensure full participation, transparency and agreement on the final response priority activities, targeting and financial requirements. *OCHA*



Paraguachón, Venezuela. A humanitarian worker talks with a Venezuelan returnee at the border's temporary shelter for people who recently returned from Colombia. *OCHA/Naomi Frerotte*

Promising practices and emerging trends from the field

In CAR, the JIAF was guided by a comprehensive community consultation and participation strategy in 2021. Affected populations participated in the analysis dialogue through household and individual interviews, focus groups and open community dialogues. Children were directly consulted on their situation, their perspectives and the protection risks they face. During community dialogues, community members' recommendations were presented. A similar process took place in Burundi, where local actors participated throughout the JIAF process.

In Afghanistan, the country team used the JIAF as the basis for joining up needs analysis with development actors to highlight the number of people in humanitarian need, as well as people in need of a social safety net. The Afghanistan example illustrates how joining forces and bringing different perspectives can enrich the overview of people's needs and help plan a comprehensive response.

Looking towards the future

The humanitarian community, including UN organizations, cluster leads and participants, NGOs and donors, is committed to joint intersectoral analysis. To meet this commitment with rigor and transparency, an independent expert review of the methodology took place in 2021. Its findings and recommendations are guiding further refinement and enhancement of the methodology, its guidance and supporting tools.

The JIAF will continue to be strengthened year on year. It will require continued commitment and engagement from the whole humanitarian community to consolidate the promising gains achieved so far towards a credible, transparent analysis that truly helps us deliver better.



Part three: Delivering better

Reviewing the HRPs Costing Methodology

Humanitarian Response Plans (HRPs) outline how humanitarian agencies will coordinate action to meet the priority needs of an affected population in a country over a defined period of time. The estimated financial amount required to achieve a HRP's objective is called the financial ask.

The most recent guidance on how field teams should establish the HRP financial ask dates back to 2017. At the time, the IASC Principals decided that HCTs should choose the most appropriate costing method, whether unit/activity based, project based or a combination of the two, as the basis for estimating a HRP's financial requirements. In the absence of operational guidance, HCTs select the costing methodology based on context, capacity and preferences.

Recognizing that the different methodologies offer advantages and disadvantages, OCHA, with partners, initiated an independent two-year HRP Costing Review in 2020. The review's ambitious process includes a multitude of stakeholders at HQ and field level, from HQ donor representatives to field-level national NGOs, by means of a comprehensive online survey in French and English, and interviews. The review includes: A stock take of methodologies used by HCTs (current and past); Identification of the advantages and disadvantages of these methodologies; Documentation of the wider impact of using different costing methodologies from one country



Barsalogo, Burkina Faso. A humanitarian worker talks with women from Barsalogo. Conflict in Burkina Faso has triggered massive population displacement and an unprecedented humanitarian emergency. *OCHA/Otto Bakano*

to another in terms of inter-agency humanitarian coordination, monitoring and financial tracking; Identification of the success factors, problems and gaps in applying costing approaches and ways to overcome these problems.

The review is expected to contribute to strengthening sound and transparent HRP monetary forecasting procedures in the long term that can explain a HRP's financial ask in a transparent manner. Preliminary results are being compiled, with recommendations for inter-agency and cluster review expected in early 2022.



Part three: Delivering better

Disaster Response During a Pandemic: Hurricanes Eta and Iota in Central America

In November 2020, Hurricanes Eta and Iota battered Guatemala and Honduras, capping off the most active Atlantic hurricane season on record. The back-to-back storms compounded a challenging humanitarian scenario in a region still reeling from the devastating impacts of COVID-19.

Despite the pandemic, local humanitarian organizations played a pivotal role in saving lives, providing humanitarian assistance through local partners and using technology to communicate with affected populations.

Eta and Iota made landfall as major hurricanes in Nicaragua on 3 and 16 November, respectively, before moving west over Honduras and Guatemala. The storms affected at least 7.3 million people in Guatemala and Honduras alone, including nearly half of Honduras's population. Hundreds of communities hit by the twin storms remained cut off from assistance well into 2021. With thousands of children, women and men displaced to temporary shelters, their increased exposure to COVID-19 and reduced access to critical health services became a major concern.

San Pedro Sula, Honduras. Choloma's San Pedro Sula neighbourhood was among the hardest hit by Hurricanes Eta and Iota. In Honduras, climate change is one of many factors sparking displacement. With hurricanes and other extreme weather events becoming ever more powerful and frequent, increasing numbers of people in Honduras are fleeing their homes. *UNHCR/Nicolò Filippo Rosso*



San Pedro Sula, Honduras. An elderly woman in front of her house in Choloma, one of the most dangerous neighbourhoods of San Pedro Sula, Honduras. The area was severely affected by Hurricanes Eta and Iota. Older people in Guatemala and Honduras are often ill-equipped to deal with extreme weather events. *UNHCR/Nicolò Filippo Rosso*

According to PAHO/WHO, more than 400 health facilities across Honduras reported damage after Eta and Iota, with at least 120 health facilities rendered inoperative. Honduras and Guatemala alike suffered from weak health systems prior to the pandemic; these were already overrun when Eta struck. Honduras soon saw a second wave of COVID-19 infections after the hurricanes' impact, leading to a rise in hospitalizations. In the aftermath of the devastation, the number of COVID-19 consultations doubled in the Cortés Department after the end-of-year holiday season.

Following Government requests for assistance, OCHA deployed staff members from the region to Guatemala and Honduras as part of UN Disaster Assessment and Coordination (UNDAC) teams and as surge support, both onsite and remote. The unprecedented dynamics in responding to a large-scale disaster amid a pandemic created a series of challenges and lessons that will be carried forward into future responses:

Standard COVID-19 protocols must be in place and respected as a key first step in preventing aid workers from contributing to infection rates. UNDAC and OCHA teams followed strict measures and procedures to prevent COVID-19 transmission, support duty of care and minimize risk for those on the ground delivering humanitarian response. Aid workers were regularly tested to monitor and prevent potential COVID-19 transmission and they limited the number of face-to-face meetings.



El Progreso, Honduras. Volunteers from *Jovenes Contra la Violencia* distribute stickers in El Progreso. The stickers display testimonies from people who have been forced to flee. One testimony reads: “They gave us 24 hours to leave our home.” – Karen, 24 years old. Another reads: “My son had to go to live in another city because they wanted to kill him here.” – Wil, 67 years old. *UNHCR/Nicolo Filippo Rosso*

Local NGOs and private sector groups played a key role in responding to needs. Localization became more important than ever, as COVID-19-related movement restrictions hampered international organizations and larger agencies. Local partners, grassroots organizations, community leaders, volunteers and CSOs informed operational planning and directly responded to the crisis. Localization of aid again proved to be paramount in delivering a timely, context-appropriate response, with local actors responding quickly, empowered by their first-hand knowledge of affected communities.

In Honduras, local coordination teams were established in Cortés and Santa Bárbara, the two most-affected departments. In San Pedro Sula, Cortés’s capital and the country’s industrial hub, OCHA set up an office with large spaces to facilitate meetings with partners in compliance with COVID-19 protocols. Preventative health brigades were organized in the most affected communities, with direct support from the Ministry of Health. OCHA teamed up with local NGO ADASBA to lead the Local Coordination Team in a partnership that demonstrated how organizations in the field are essential to effective coordination during a crisis. UNHCR worked with local leaders to facilitate access to communities plagued by high levels of criminal violence and provide humanitarian assistance to people in need.

In neighbouring El Salvador, Save the Children used a cascade strategy, training volunteer leaders on responding to GBV needs, case management and protection. The volunteers then defined case identification criteria with local and municipal leaders and created approach strategies for face-to-face response via psychosocial support, cash transfers and/or shelter assistance.



Comayagua, Honduras. The 33-year-old Director of Jovenes Contra la Violencia visits a family in Comayagua affected by heavy rain and flooding. His organization helps young people escape gang violence. *UNHCR/Nicolo Filippo Rosso*

Technology helped bridge distances, speed up community outreach and target specific groups, mitigating the effects of COVID-19 restrictions. In Guatemala and Honduras, localization was accompanied by the effective use of technology to offset pandemic-related limitations. OCHA staff quickly adapted to facilitating virtual coordination and planning forums for local and global partners, based on protocols developed in the regional office. Organizations such as Action Against Hunger found that technology could offer direct virtual contact with affected people, particularly in urban areas. Technology also helped to shorten and simplify time- and resource-intensive processes, such as identifying target populations. Organizations in Guatemala set up booths in remote areas to conduct needs assessments and gather community feedback via mobile phones, thus limiting contact and potential exposure to the virus. PAHO in Honduras also implemented the Telesalud (TeleHealth) system. This allowed patients to receive remote medical consultations and save time and money, while reducing COVID-19 exposure for patients and medical staff.



Part three: Delivering better

High-Level Task Force on Preventing Famine

The worst food crises for decades are taking place simultaneously and on multiple fronts. Since the High-Level Task Force (HLTF) on Preventing Famine was created in March 2021, it has focused on advocating for famine prevention resources and improved access to people in need. It has also worked to join up efforts to share data and real-time information.

This work draws on the collective efforts of the IASC members and has provided an opportunity to jointly raise awareness and come together to avert famine. The HLTF has repeatedly rung the alarm bell at the highest levels, exposing the seriousness of the situation through a number of actions: A joint FAO-WFP Call for Action to Prevent Famine in March 2021; Briefings to the Group of Friends on Action on Hunger and Conflict; A letter from the UN Secretary-General to all Member States, calling for action on famine prevention; A high-level advocacy event on famine prevention; Coordination of advocacy efforts with partners beyond the HLTF.¹ These actions have been complemented by calls to donor capitals, missions by the IASC Principals to the affected countries and media outreach. A coordinated campaign of weekly digital content has

Northern Bahr El Ghazal, South Sudan. In South Sudan, people in need often live in remote and hard-to-reach areas. Poor infrastructure leaves vast areas of the country isolated during the rainy season, meaning vulnerable communities can remain cut off from assistance for months. To overcome these challenges, WFP piloted the use of an amphibious all-terrain vehicle that can easily overcome obstacles. It carries up to 1 ton of cargo, has low fuel consumption and can travel 500 to 600 km on a full tank. A fleet of 10 vehicles is stationed in swampy areas of Old Fangak, Ganyiel and Nyal. This enables WFP to deliver food to places that have so far been reachable only by air, cutting transport costs considerably. *WFP/Gabriela Vivacqua*



Maiduguri, Nigeria. Workers offload a food truck in the WFP warehouse in Maiduguri. UN agencies and partner organizations work around the clock to provide access to food for the most vulnerable communities affected by violence and food insecurity across Nigeria. *OCHA/Damilola Onafuwa*

been produced and Member State briefings and events organized, including during the ECOSOC Humanitarian Affairs Segment in June. OCHA leads resource mobilization efforts on behalf of the HLTF. The system has been able to collectively scale up in high-risk countries, thanks to donors' generous support. However, resources received were often below the amounts required or imbalanced in their allocation, leading to difficult trade-offs in some contexts:

In **South Sudan**,² humanitarian action brought six counties back from the brink of famine through a targeted, multisectoral scale-up in the most food insecure areas. Over 500,000 severely food insecure people facing catastrophic levels of acute food insecurity (IPC Phase 5) received life-saving assistance, and 100,000 families received livelihoods assistance. Lack of additional funding has come at a cost for people in non-IPC Phase 5 areas. Resources, including reduced food rations for IDPs in camps, were re-prioritized, resulting in gaps and potentially increased vulnerability in other parts of the country.

Humanitarians in **Yemen**³ are reaching approximately 10.9 million people each month with food security and agriculture assistance across the country's 333 districts. However, additional funds are urgently required to maintain this vitally needed assistance. Without additional funding, 5 million people may see cuts in assistance by the end of 2021.⁴

On behalf of the HLTF, OCHA has developed a comprehensive overview of access constraints and context-specific access analysis for each country concerned. Conflict and insecurity remain the major drivers of access constraints in almost all countries at risk of famine. If humanitarians' access is restricted, they cannot respond to food insecurity and nutritional needs at the speed required. Enhanced security measures, coordination with authorities, and local outreach and community engagement are just some of the actions humanitarians take to try to mitigate access constraints.

FAO and WFP continue to strengthen their collaboration around data to create an evidence base



Al Noeyah, Yemen. Beneficiaries receive food packages at the Al Noeyah distribution point, supported by the World Food Programme. *WFP/Ayman Fuad*

for timely alerts. The jointly issued FAO-WFP hunger hotspot reports⁵ analyse countries and situations, assessing where and why acute food insecurity is likely to deteriorate over the coming months. The annual and midyear issues of the Global Report on Food Crises provide further evidence of the increasingly intense and widespread nature of acute food insecurity at a global level.

Despite these efforts, the situation has only grown more urgent and the outlook for 2022 is grim. Since 2020, there has been a considerable rise in the numbers of people in Crisis or worse (IPC/CH Phase 3 or above), affecting around 161 million people in 42 countries/territories in 2021.⁶ However, given the worsening situation at the end of 2021 and that IPC analyses do not cover all the countries at risk, if additional contexts are factored in, numbers are likely to be even higher and up to 283 million people could be acutely food insecure or at high risk in 2021 across 80 countries. Latest projections⁷ indicate that as acute hunger spikes around the world, the number of people on the very edge of famine (IPC Phase 4/Emergency or worse) in 43 countries has risen to 45 million. This number is up from 41 million earlier in 2021 and 27 million in 2019. Alarming, the number of people in Catastrophe (IPC/CH Phase 5) is now also more than four times higher than the estimates for 2020. New data reveals a dire trend, with 584,000 people across four countries – Ethiopia, Madagascar, South Sudan and Yemen – facing starvation and death.⁸ It is extremely likely that without scaled-up and sustained action to avert famine now, 2022 will witness humanitarian needs far exceeding those seen in the last decade.

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¹ This has happened through the IASC RG 3 and examples include ICVA Open Letter and the Joint statement of the Global Food Security, Health, Nutrition, and WASH Clusters on Famine and Food Crises

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³ OCHA, Famine High Level Event - Yemen. As of 1 October 2021

⁴ WFP, 3 million people in Yemen could face ration cuts in October unless new funding arrives, WFP Chief says

⁵ FAO and WFP, Hunger Hotspots - March-July 2021, Hunger Hotspots - August-November 2021

⁶ FSIN, Global Report on Food Crises 2021, September 2021 update, p. 1

^{7,8} WFP, Press Release, 8 November 2021



Part three: Delivering better

Operationalizing the Nexus Through Basic Social Services and Durable Solutions

With humanitarian crises around the world increasingly protracted, humanitarian operations can last for 10 or 20 years, sometimes longer. This creates the risk of entrenched humanitarian dependencies, not least for the tens of millions of people around the world living in protracted displacement.

Therefore, humanitarian actors must redouble their efforts to ensure assistance not only meets humanitarian needs but reduces them by contributing to sustainable national and local systems and to durable solutions for displaced populations. It is key that humanitarian actors work alongside development and peacebuilding actors. This will help to ensure that people can access basic social services and progress to self-sufficiency, guided by the promise of Agenda 2030 to “reach the further left behind first.” Lack of access to adequate basic social services is a challenge in many countries with Humanitarian Response Plans and Refugee Response Plans. While the primary responsibility for the delivery of these services lies with Governments, they can struggle to live up to this responsibility due to gaps in territorial control, exclusionary policies or weak administrative capacity.

Aleppo, Syria. A man is seen working in his newly rehabilitated blacksmithing workshop in Karm Al-Qaterji. Karm Al-Qaterji neighbourhood in east Aleppo city used to be an important commercial hub, hosting many industries including metal, textile, and food. However, a decade of conflict has taken a heavy toll on the neighbourhood, just like the rest of the city, damaging homes, businesses, and infrastructure, and forcing people to flee. Over the past four years, UNDP has been supporting a series of integrated projects to help families to return home and rebuild their lives through improving their access to basic services, enhancing their resilience and supporting their livelihoods. *UNDP Syria*



Taiz, Yemen. A displaced man sews a cap inside his shelter at an IDP camp in Taiz governorate. OCHA/Mahmoud Fadel

When development actors, particularly international financial institutions, withdraw from financing the delivery of basic social services through Governments, this often shifts the responsibility to humanitarian actors, who already have high caseloads and are chronically under-resourced.¹ While humanitarian organizations usually focus on delivering immediate life-saving assistance, collaboration with development actors is required to ensure the sustained delivery of basic social services. Collaboration with peacebuilding actors may be needed to ensure the governance and security required to deliver these services. With each actor working according to their mandate, humanitarian, development and, where appropriate, peace collaboration (the HDP nexus) can contribute to not only meeting people's basic needs but to reducing underlying risks and vulnerabilities and ensuring resilience. Strengthening national and local systems to deliver basic social services and respond to future shocks is the most sustainable way to achieve this.

With the number of IDPs and refugees at a record high and millions of these people living in protracted displacement, the advancement of durable solutions is critical. In September 2021, the report by the UN Secretary-General's High-Level Panel on Internal Displacement pointed to an "imperative for durable solutions." The panel called for a shift towards a more development-oriented approach and for more predictable engagement of development actors in the early stages of displacement crises. Development and peace actors must work alongside humanitarian actors and focus on strengthening public systems and basic social services to assist IDPs together with refugees and other persons of concern and their host communities.

The panel called for a stronger role for UN RC/HCs in driving nexus approaches to advance durable solutions for displaced populations at the country level. In many countries, RC/HCs, UN Country Teams and HCTs have successfully implemented strategies to achieve 'collective outcomes' between humanitarian, development and peace actors, including through joint analysis and better joined-up planning, programming and financing.



Benghazi, Libya. This man was 20 years old when he fled what he calls “the persecution of the residents of Tawergha.” He was driving towards Sirte to join his family, who had fled Tawergha shortly before him, when a missile struck the area. Since then, he has had difficulty moving his tongue, drastically affecting his speech. His injuries make it difficult for him to find work and look after his family. Despite this, he remains thankful that he survived the attack and now has a family. Epitomizing the resilience of most people in the Qaryounis settlement, he said: “My family are healthy, so I have nothing to complain about.” *OCHA/Giles Clarke*

Several countries have agreed on collective outcomes to strengthen basic social service delivery, including Cameroon, DRC, Libya and Somalia. Other countries offer good practice for humanitarian actors working together with Government, development and peacebuilding actors to ensure the delivery of basic social services. For example, in CAR, the Government and partners committed to investing in redeploying the territorial public administration, relaunching public services and restoring State authority. This was done in parallel with efforts towards the recovery of local communities and socioeconomic resilience, particularly in marginalized and remote regions most affected by the crisis. A Social Protection Working Group also meets at national and local levels to ensure complementarity between humanitarian and development cash assistance.

In Iraq, a structure with area-based coordination mechanisms has been set up in areas of high return of displaced people to ensure complementarity of humanitarian, development and Government action on the ground. The UN Sustainable Development Cooperation Framework has added a fifth chapter on durable solutions to stress the importance of finding durable solutions to end displacement in Iraq by 2024.

In some countries, the formulation of collective outcomes on internal displacement has helped drive collaborative approaches towards durable solutions. In Somalia, a collective outcome has been agreed at the national level to reduce the risks and vulnerabilities of displaced populations, contributing towards solutions. Durable solutions are one of the three priority areas for the operationalization of the HDP nexus in the country. The focus on solutions has created high-level political momentum and resulted in the March 2021 launch of the national Durable Solutions Strategy.²

Humanitarian Guidance and Mechanisms

Burkina Faso: Cooperation Framework to Leave No One Behind

In 2022, the humanitarian community in Burkina Faso has applied a targeting methodology that takes into account the severity of needs and accessibility of services by populations in need of assistance; conducts a geographic analysis to focus on areas in which populations are on the move (displacement) and/or face challenges in accessing basic services and assistance through regular national structures; and considers the humanitarian community's capacity to respond to these needs. Through this process, the humanitarian community is enhancing the rigour of its targeting process and thus the credibility of its financing request. Affected populations, national authorities and donors considering the Burkina Faso HRP can have greater confidence that the humanitarian community has the capacity to deliver the support indicated, and that it is not replacing national systems but prioritizing their extension to people most in need. In tandem, the development community in Burkina Faso is developing the new UN Sustainable Development Cooperation Framework, in collaboration with humanitarian partners, which offers a unique opportunity to bridge from the HRP through the Cooperation Framework to Leave No One Behind and ensure that the triple nexus approach becomes a reality.

In the picture, community members and IDPs work together and acquire new agricultural skills at a land-rehabilitation project at Sirighin, Burkina Faso. This is part of a WFP resilience activity that aims to go beyond food assistance. Internal displacement is growing in Burkina Faso due to insecurity. Many of the displaced people have been relying on food assistance for more than two years. WFP

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Part three: Delivering better

Towards Enhanced Data Responsibility in Humanitarian Action

Data responsibility in humanitarian action is the safe, ethical and effective management of personal and non-personal data for operational response. It is a critical issue for the humanitarian system to address, and the stakes are high.

Data is an important component of humanitarian response. Data management relating to crisis contexts, affected people and humanitarian operations allows the humanitarian community to respond more effectively and efficiently. However, as organizations manage increasingly large volumes of data, they also face more complex challenges and risks. Irresponsible data management in humanitarian response can place already vulnerable people and communities at greater risk of harm or exploitation and expose key vulnerabilities. This is of particular concern when humanitarian actors handle sensitive data¹ – data that is likely to lead to harm when exposed.

Personal and non-personal data can be sensitive in humanitarian action. While the humanitarian system has a common understanding regarding the sensitivity of personal data, determining the sensitivity of non-personal data is more complex. For example, data on the locations of medical facilities in conflict settings can expose patients and staff to risk, whereas this information is typically less sensitive in natural disaster response settings. Therefore, it is critical that the humanitarian

Mogadishu, Somalia. An internally displaced Somali woman holds her registration card while waiting for humanitarian supplies that were flown to Mogadishu. *UNCHR/Siegfried Modola*

Humanitarian Guidance and Mechanisms

IASC Operational Guidance on Data Responsibility in Humanitarian Action

In February 2021, the IASC launched its [Operational Guidance on Data Responsibility in Humanitarian Action](#) — the first-ever system-wide guidance to ensure data responsibility in all phases of humanitarian action. It provides concrete guidance on how to maximize the benefits of data for humanitarian action while avoiding harm to already vulnerable populations. More than 250 stakeholders from the humanitarian sector were involved in developing the guidance. *In the picture, a woman from Vanuatu shows her card from the Unblocked Cash programme implemented by Oxfam and the Vanuatu Resilience Business Council (VBRC) in the aftermath of Tropical Cyclone Harold. OXFAM/Arlene Bax*

system addresses data responsibility — including data protection, data privacy and cybersecurity — in humanitarian action. Data responsibility can also be a powerful enabler of trust, ensuring that data is treated in a principled manner, kept confidential and used solely for humanitarian purposes.

In recent years, humanitarian actors have developed principles, policies and strategies for data responsibility. These include system-wide guidance, such as the [IASC Operational Guidance on Data Responsibility in Humanitarian Action](#). Other global strategies and policies also guide data management within the UN system, such as the [UN Secretary-General's Roadmap for Digital Cooperation](#), the [Strategy of the UN Secretary-General for Action by Everyone, Everywhere \(2020-2022\)](#) and the [OCHA Data Responsibility Guidelines](#).

Despite considerable progress, gaps remain between global frameworks and their practical application in field operations. Technological and policy solutions are needed that can safely secure humanitarian data against cyber operations, enable partnerships with private sector vendors, and ultimately secure a neutral, impartial and independent humanitarian cyberspace.

Increasing Cyber Threats Call for Scaled-Up Investment in Data Responsibility in Humanitarian Action

Proliferating offensive cyber operations have ‘potentially devastating’ humanitarian consequences if they disrupt critical infrastructure that supports essential public services, such as medical facilities, financial services, energy, water, transport and sanitation. This was noted by the Open-Ended Working Group on Developments in the Field of Information and Telecommunications in the Context of International Security.² Over the past decade, humanitarian organizations have increasingly been exposed to adverse cyber activity that has grown in sophistication and scale.³ Save the Children and Human Rights Watch experienced data theft as part of the 2020 Blackbaud hack,⁴ a ransomware attack that likely went undetected for several months.

Humanitarian Guidance and Mechanisms

IASC Operational Guidance on Data Responsibility in Humanitarian Action



The [OCHA Data Responsibility Guidelines](#) offer a set of principles, processes and tools to support OCHA’s data work. They also address how OCHA should implement the IASC Operational Guidance on Data Responsibility in Humanitarian Action. The guidelines are informed by research and field testing conducted over the past several years. This includes OCHA offices in 10 operational contexts piloting a working draft of the guidelines in 2019 and 2020. Several OCHA offices have already adopted important aspects of the guidelines. In Iraq, OCHA worked with the Assessment Working Group to incorporate data responsibility actions into the Multi-Cluster Needs Assessment process. In Somalia, OCHA worked with the HCT to agree on an [Information Sharing Protocol](#), which includes a data and information sensitivity classification for data generated about the crisis. In Cameroon, OCHA and its partners developed two different Information Sharing Protocols for the responses in the country’s Far North and north-west/south-west regions. OCHA’s Centre for Humanitarian Data supports OCHA offices with adopting the guidelines through advisory services, support missions, trainings, templates and tools. For more information on how OCHA supports data responsibility, visit the [Centre’s website](#). *In the picture, a humanitarian worker conducts an assessment at the Al Sha’ab IDPs collective center in Aden, Yemen. OCHA/Matteo Minasi*



The United States Agency for International Development (USAID), Catholic Relief Services and over 150 organizations were affected by the 2021 USAID-Nobelium hack, which may have compromised beneficiary information and staff data.⁵

Many humanitarian organizations struggle to diagnose when a cyberoperation has occurred against them, and they may lack basic cybersecurity standards.⁶ HRP contexts are among those least prepared for cybersecurity threats, according to the Global Cybersecurity Index of the UN's International Telecommunication Union.⁷ Growing nation State cyber militarization, increased use of cyber operations by non-State actors, and evolving and sophisticated cyber capabilities present a grave threat to people affected by and working in humanitarian crises.⁸

Addressing data responsibility, including data protection, data privacy and cyber security, in humanitarian action is therefore critical for the humanitarian system. It can also be a powerful enabler of trust, ensuring that data is treated in a principled manner, kept confidential and used solely for humanitarian purposes.

Since 2020, principles, policies and strategies have been developed for data responsibility in humanitarian action. These include system-wide guidance, such as the Inter-Agency Standing Committee Operational Guidance on Data Responsibility in Humanitarian Action, as well as global strategies and policies to guide data management within the UN system, such as the [Secretary-General's Roadmap for Digital Cooperation](#), the [Data Strategy of the Secretary General for Action by Everyone, Everywhere \(2020-2022\)](#),⁹ and the [OCHA Data Responsibility Guidelines](#).

Despite considerable progress, gaps remain between global frameworks and their practical application in field operations. Technological and policy solutions are needed which can safely secure humanitarian data against cyber operations, enable partnership with private sector vendors and ultimately secure a neutral, impartial and independent humanitarian cyberspace.

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**“We are on the edge of an abyss. And we
are moving in the wrong direction.**

The world must wake up.

**Now is the time to restore trust. Now
is the time to inspire hope. Now is the
time to deliver.”**

António Guterres

United Nations Secretary-General

Remarks at the UN General Assembly, 2021

