

CONTEXT

- The UN estimates that 7.5 million people across Mali—or nearly 40 percent of the country’s population—require humanitarian assistance in 2022, representing a nearly 30 percent increase compared to 2021. Heightened humanitarian needs are largely driven by protracted insecurity since 2012; climatic shocks, including droughts and floods; displacement; and the socioeconomic impacts of the coronavirus disease (COVID-19) pandemic.
- Continued armed conflict and intercommunal violence, drought, and flooding in Mali had prompted the internal displacement of more than 370,000 people—primarily concentrated in Gao, Mopti, and Timbuktu regions—as of April, according to the Office of the UN High Commissioner for Refugees (UNHCR). Additionally, as of June, Mali hosted nearly 53,000 refugees, the majority of whom are from neighboring Burkina Faso, Mauritania, and Niger, UNHCR reports.
- More than 1.8 million people across Mali are likely experiencing Crisis—IPC 3—or worse levels of acute food insecurity and require emergency food assistance to meet basic needs through August, according to the latest Cadre Harmonisé analysis.¹ The figure represents a more than 40 percent increase compared to the same period one year prior due primarily to worsening security conditions and subsequent internal displacement, drought- and conflict-related disruptions to agricultural livelihoods and production, reduced household purchasing power, and rising food prices, the UN Food and Agriculture Organization reports.
- Despite relief actors’ efforts to reach populations in greatest need, ongoing armed conflict and related violence continue to hamper humanitarian access in Mali. As of July, humanitarian actors had limited or no access to nearly 80 percent of the country, according to the International Federation of Red Cross and Red Crescent Societies.



ASSISTANCE

- USAID’s Bureau for Humanitarian Assistance (USAID/BHA) supports shared services, such as humanitarian coordination, information management, and assessments, to build humanitarian capacity and improve the effectiveness of relief operations in Mali. This includes support for the UN Humanitarian Air Service, which plays a key role in ensuring humanitarian access and programming in hard-to-reach areas of the country. In partnership with the International Organization for Migration, the UN Office for the Coordination of Humanitarian Affairs (OCHA), the UN World Food Program (WFP), and multiple non-governmental organization (NGO) implementing

¹ The Integrated Food Security Phase Classification (IPC) is a standardized tool that aims to classify the severity and magnitude of food insecurity. The IPC scale, comparable across countries, ranges from Minimal—IPC 1—to Famine—IPC 5. The Cadre Harmonisé, a separate tool used only in West Africa, has a similar scale ranging from Minimal—Phase 1—to Famine—Phase 5.

partners, USAID/BHA helps to support displacement monitoring, strengthen national early warning systems for food security, and enhance host government data collection and analysis to inform humanitarian interventions.

- USAID/BHA supports the provision of emergency food assistance to reach at-risk populations—including internally displaced persons (IDPs) and host community members—in food-insecure regions of Mali. In Fiscal Year (FY) 2022, USAID/BHA provided approximately \$29 million to WFP and several NGO partners to reach an estimated one million food-insecure individuals with emergency food assistance, including U.S.-sourced beans, vegetable oil, and wheat, as well as cash transfers and vouchers redeemable for food in local markets.
- With more than \$9 million in nutrition assistance during FY 2022 alone, USAID/BHA is supporting the UN Children’s Fund (UNICEF), WFP, and NGO implementing partners to address malnutrition among conflict-affected people, IDPs, and vulnerable host communities in Mali. Through enhanced screening and early detection, USAID/BHA partner UNICEF is working to improve the health system’s capacity to provide treatment for severe wasting—a life-threatening form of malnutrition—among vulnerable populations in Mali’s Gao, Menaka, Mopti, Segou, and Timbuktu regions. Additionally, UNICEF is working to supply all health facilities and community-based nutrition units in these regions with ready-to-use therapeutic foods.
- To date FY 2022, USAID/BHA has provided more than \$6 million to support the implementation of water, sanitation, and hygiene (WASH) programs, including activities that respond to the outbreak of COVID-19 and other communicable diseases, such as cholera and measles, and WASH-related malnutrition affecting children and pregnant and lactating women. USAID/BHA supports activities that aim to increase access safe drinking water through establishing and rehabilitating water points, as well as those that promote and enable optimal WASH practices, such as installing and repairing handwashing stations and latrines. With USAID/BHA support, one NGO partner is promoting access to safe drinking water and limiting the spread of waterborne disease for populations in the Mopti, Segou, and Timbuktu regions by distributing kits for safe water storage and transport.
- Since October 2020, USAID/BHA has provided sustained, multi-year funding to an NGO partner to implement Albarka, a five-year food security and resilience program that aims to improve food security and resilience among conflict-affected households in Gao, Mopti, and Timbuktu by strengthening the capacity of local partners to implement food security activities and enhancing mechanisms for community participation throughout programming. In FY 2022, the NGO conducted community consultations in the regions and selected 12 priority natural resource management projects to support approximately 1,500 participants through cash-for-work activities through FY 2023, including constructing pastoral wells, filling and stocking fishponds, and rehabilitating degraded agricultural land and gardening areas.

USAID/BHA Funding in Mali ²			
	Emergency ³	ER4	TOTAL
FY 2021	\$59,279,887	\$14,000,000	\$73,297,887
FY 2022	\$58,533,660	\$16,086,403	\$74,620,063

² Year of funding indicates the date of commitment or obligation, not appropriation, of funds. Funding figures reflect publicly announced funding as of August 10, 2022. Totals include estimated value of food assistance and transportation costs at time of procurement; subject to change.

³ Includes funding for programs that integrate Early Recovery, Risk Reduction, and Resilience (ER4) activities with emergency response.