

Highlights

- August was marked by a persistent security crisis, with an intensification of armed violence that directly and severely affected sexual and reproductive health (SRH) and gender-based violence (GBV) services.
- 6.4 million people in Mali need assistance, with increased access constraints in the north and centre regions.¹ In August, humanitarian access incidents jumped by 62 per cent, with 81 incidents reported, including attacks on humanitarian workers and facilities, and the denial of entry to areas to deliver humanitarian aid and services to people in need.
- A reported influx of Burkinabe refugees into the Koro commune of Mopti has increased demand for SRH and GBV services, which were already under-resourced and struggling to meet the needs of the community.
- UNFPA continues efforts to mobilize funds to close the significant 80 per cent funding gap.
 This gap seriously hampers the availability of SRH services, the fight against violence against
 women and girls, and the supply of reproductive health kits for the women and girls who need
 them most.



6,431,500Total people affected¹



1,408,000Women of reproductive age²



196,970 Estimated pregnant women²



894,130
People targeted w/
SRH services



934,335People targeted w/ GBV programmes

¹ Mali Humanitarian Needs and Response Plan 2025

² Estimated figures are based on the Minimum Initial Services Package (MISP) for Sexual and Reproductive Health in Humanitarian Settings calculator.



Situation Overview

Humanitarian needs in UNFPA's intervention areas (Ménaka, Ségou, Gao and Timbuktu) remain immense and multidimensional, with women, children, and young people most affected. Vulnerability is deepening in a context of chronic poverty, limited access to essential services and the continued deterioration of infrastructure, including health facilities. Recent attacks and floods have exacerbated the crisis, displacing thousands of people, including more than 6,400 women and girls.

The availability of Inter-Agency Reproductive Health (IARH) kits remains a pressing concern, and several referral health centres and hospitals face critical shortages of medicines and supplies, underscoring the urgent need for replenishment in September.

In coordination with the Regional Directorate for Social Development and Solidarity Economy (DRDSES), UNFPA and its partners are preparing to assess the needs of internally displaced persons and plan targeted responses. However, with only limited stocks of dignity, menstrual hygiene and IARH kits available, a lack of funding is severely constraining both assessments and assistance. Without additional resources, the survival and wellbeing of vulnerable women and girls caught in the crisis are at grave risk.

UNFPA Response

UNFPA continues to assist vulnerable people, specifically women and girls, providing them with SRH, GBV, and family planning services. Through its implementing partners, UNFPA has reached 9,363 people, 88 per cent of whom are women and girls.

The deployment of skilled midwives in health centres enabled the provision of 2,451 antenatal consultations, 662 assisted deliveries, 733 postnatal consultations and 296 curative consultations. In addition, 1,467 people accessed family planning services for the first time, 72 per cent of whom were women and girls.

GBV survivors accessed integrated SRH and GBV services through one-stop centres. In addition, 333 women and girls received psychosocial support in women and girls' safe spaces, and 140 dignity kits were distributed to women and girls of reproductive age. A total of 2,535 women and girls were also reached by awareness raising activities on integrated SRH, GBV and family planning.

Results Snapshot



6,439

People reached with SRH services 88% female, 12% male



80

Health facilities supported



2,924

People reached with **GBV prevention, mitigation and response** activities 84% female, 16% male



6 Safe spaces for women and girls supported





140 Non-food items (such as dignity kits) distributed to individuals



Reproductive health kits provided to service delivery points to meet the needs of 1,000 people

Coordination Mechanisms

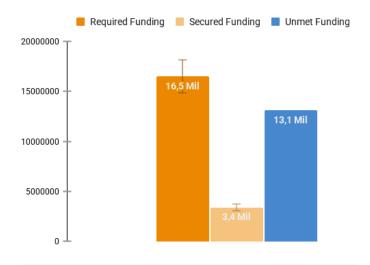
To address and prevent GBV in the Timbuktu region, the GBV Area of Responsibility (AoR) coordination conducted community surveys to identify the root causes of under-reporting of GBV cases in three municipalities of Timbuktu: Diré, Soboundou and Hamzakoma. The results revealed that 1,034 women (50%), were survivors of GBV. An assessment of GBV expert needs is ongoing to establish an interagency GBV roster to ensure a rapid and effective response to humanitarian crises.

Funding Status

In 2025, UNFPA Mali requires US\$16.5 million to sustain its humanitarian response. By August only US\$3.4 million had been mobilized.

UNFPA acknowledges the vital support received from ECHO, CERF, Global Affairs Canada, and the Government of the Republic of Korea through the Korea International Cooperation Agency.

However, a critical funding gap of US\$13.1 million remains — 80 per cent of the total required. Without urgent additional funding, the scale and continuity of SRH and GBV programmes in Mali remain at severe risk, threatening to deprive thousands of women and girls of access to lifesaving care.



Disclaimer: Funding available is based on cash received during the current year as well as funding rolled over from previous years, and transfers from/to other UNFPA departments. It does not include funds from agreements that have been signed but not yet received.

Current Donors

Government of the Republic of Korea European Union (ECHO) Global Affairs Canada Central Emergency Response Fund (CERF)



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