

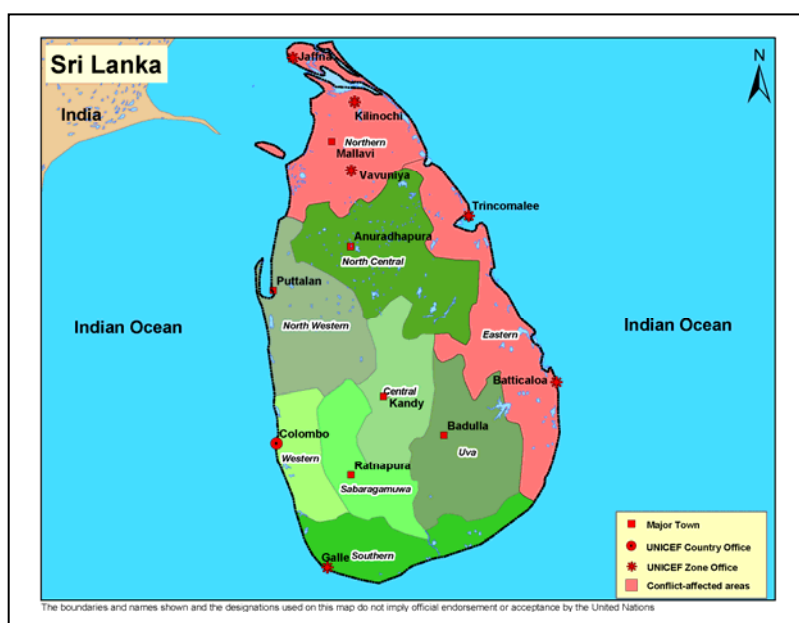
For every child  
Health, Education, Equality, Protection  
ADVANCE HUMANITY



# UNICEF HUMANITARIAN ACTION

# SRI LANKA

## IN 2008



### CORE COUNTRY DATA

Population under 18 (thousands)	5576
U5 mortality rate (2006)	13
Infant mortality rate 2006)	11
Maternal mortality ratio (2000-2006, reported)	43
Primary school enrolment ratio (2000-2006, net, male/female)	99/96
% U1 fully immunized (DPT3)	99
% population using improved drinking water sources (total)	79
Estimated no. of people (all ages) living with HIV, 2005 (thousands)	5.0
% U5 suffering moderate and severe underweight and stunting	29/14

Source: *The State of the World's Children 2008*

In collaboration with partners, UNICEF's humanitarian action focuses currently on internally displaced persons (IDPs), resettled populations and host communities in northern and eastern Sri Lanka, numbering up to half a million people, made vulnerable by the resurgence of conflict between the Government of Sri Lanka and the Liberation Tigers of Tamil Eelam. Main constraints of the emergency response relate to the deteriorating security situation, lack of humanitarian access to numerous areas of the country and escalation of fighting in the North, East and Vanni<sup>1</sup> regions. Acute shortage of trained staff and volunteers in peripheral areas in all key sectors remains a challenge to the timely delivery of response.

### Summary of UNICEF financial needs for 2008

Sector	US\$
Health and nutrition	2,500,000
Water, sanitation and hygiene (WASH)	2,000,000
Education	2,800,000
Child protection	2,000,000
<b>Total*</b>	<b>9,300,000</b>

\* The total includes a maximum recovery rate of 7 per cent. The actual recovery rate on contributions will be calculated in accordance with UNICEF Executive Board Decision 2006/7 dated 9 June 2006.

<sup>1</sup> The Vanni is the region below the Jaffna peninsula and includes parts of Kilinochchi, Mannar, Mullaitivu and Vavuniya districts.

### 1. CRITICAL ISSUES FOR CHILDREN

The resurgence of conflict in Sri Lanka since April 2006 has severely impacted the well-being and livelihood of children and women, particularly in the North and East of the country. As of September 2007, some 190,000 persons remain displaced due to the conflict (excluding another 200,000 tsunami-displaced) and some 100,000 have been resettled. Severe acute malnutrition (SAM) among under-five children in parts of conflict-affected Batticaloa and Jaffna districts is 6 per cent and 6.7 per cent respectively (Ministry of Health 2007), while the country prevalence is 2.5 per cent (Demographic and Health Survey 2000). Access to potable water stands at 79 per cent for the entire population; and access to safe sanitation is 76 per cent. However, in some conflict-affected districts, sanitation coverage is as low as 30 per cent (2007). More than a quarter of a million primary school-aged children are partially and/or completely out of the education system. The resumption of open fighting has increased the risk of underage recruitment by armed groups and other child rights' violations related to conflict. Displacement and pervasive indiscriminate violence, including claymore attacks, landmines/unexploded ordnance (UXO) and aerial bombings, have resulted in a climate of fear and significant disparity in vulnerable areas. Despite a strengthened mechanism in place to monitor and report on grave child rights' violations through implementation of UN Security Council Resolution 1612, the recruitment of children by armed groups continues. Since the establishment of the monitoring system in 2002, UNICEF has verified more than 6,600 cases of child recruitment. As of September 2007, more than 1,600 of those reported are still with armed groups.

### 2. KEY ACTIONS AND ACHIEVEMENTS IN 2007

In collaboration with partners, the UNICEF-assisted humanitarian response in 2007 focused on the priority areas of health & nutrition, water & sanitation, education and child protection. During the peak displacement period, February to May, about 300,000 conflict-affected internally displaced persons (IDPs) were sheltered in more than 260 locations.

In the health & nutrition sector, deployment of mobile clinics and staff benefited 37,000 IDPs. Routine immunization and antenatal care services were strengthened with technical and supply assistance to the Ministry of Healthcare and Nutrition to cover all pregnant women and children. The majority of displaced under-five children received routine vaccination, vitamin A supplementation and deworming treatment. Around 30,000 under-five children were screened and 589 children suffering severe acute malnutrition were treated through community- and facility-based therapeutic feeding supported by trained health staff. Prevention of growth failure and impaired cognitive development was achieved in 65 per cent of the children rehabilitated. Approximately 10,000 children with moderate wasting benefited from 10 MT of high-energy biscuits provided through child health clinics, including regular follow-up for growth monitoring.

In the education sector, a 'Back to School' campaign and the development of a consolidated syllabus enabled 45,000 children to return to school following extended periods of inaccessibility. Targeted training ensured basic awareness of psychosocial issues for more than 1,150 teachers working directly with 45,000 displaced children. An estimated 11,000 students continued their education in 74 temporary learning spaces, of which 36 have been constructed by the School Development Societies of affected schools. More than 180,000 students received essential learning materials. Capacity development of emergency education focal points within the Ministry of Education was supported as a first step to ensuring a sustainable and comprehensive system to plan and respond to educational needs. More than 15,000 displaced children received educational, recreational and counselling services in some 198 child-friendly spaces. Mine-risk education (MRE) was provided to 240,000 community members through 5,600 trained field staff and volunteers (from a range of Government and NGO providers). Reintegration support was provided to 1,327 children formerly recruited by armed groups and released, including those participating in vocational training. A total of 3,600 children in conflict-affected communities received vocational training.

In the water, sanitation and hygiene sector, 265,000 IDPs gained access to sanitation facilities and safe drinking water and maintained minimum Sphere standards in hygiene. Over 20,000 family hygiene kits were provided and specific hygiene-related information was disseminated in IDP camps. A new concept of reusable and easy-to-construct prefabricated emergency toilets was designed by UNICEF and 240 units, separated by gender, prepositioned in emergency-prone districts. These toilets can be easily dismantled and transported to other emergency sites. UNICEF and its implementing partners were able to respond to the needs within 72 hours, as building takes no more than half a day.

### 3. PLANNED HUMANITARIAN ACTION FOR 2008

#### **Coordination and partnership**

UNICEF supports the Government of Sri Lanka to coordinate the water & sanitation and education sectors, working together with UN agencies, the International Committee of the Red Cross (ICRC), NGOs and community-based stakeholders. UNICEF is sub-cluster leader for child protection and collaborates actively with the other sector leaders: with the Office of the UN High Commissioner for Refugees (UNHCR) for shelter and protection, with the World Health Organization (WHO) for health issues and with the World Food Programme (WFP) for food security and nutrition.

#### **Regular programme**

The emergency appeal and the Country Programme are complementary and mutually reinforcing. National capacity development, policy analysis and reforms, and related technical assistance to fulfil the Government of Sri Lanka's human rights obligations are supported mainly under the Country Programme, while UNICEF's humanitarian response, which focuses on the North and East of the country, further promotes standards and international norms in reaching UNICEF's *Core Commitments for Children in Emergencies*.

#### **Health and nutrition (US\$ 2,500,000)**

About 165,000 under-five children and 60,000 pregnant women and lactating mothers displaced or living with host communities or in vulnerable areas will benefit from the following key activities:

- Procure and distribute essential drugs, emergency health kits, cold chain and other essential equipments to 90 health centres;
- Facilitate outreach mobile clinic services for displaced population; rehabilitate health facilities;
- Provide iron/folic acid and vitamin C in six districts for 387,000 adolescents and 62,000 mothers;
- Procure and distribute vitamin A capsules to under-five children and schoolchildren of grades 1, 4, and 7 and deworming tablets to all children aged 2-5 years and to all pregnant women;
- Support promotion of insecticide-treated mosquito nets through the training of 350 community-based health workers and provide 387,000 nets to 387,000 households;
- Continue supporting the nutrition rehabilitation programme through community- and facility-based therapeutic feeding in six districts for the management of up to 5,000 severely wasted children and the training of 380 health staff to implement the programme;
- Provide ready-to-use therapeutic food (BP-100) and combined multivitamin (CMV) or therapeutic milk for severely wasted children and high-energy biscuits as contingency for moderately wasted children;
- Support the implementation of two rounds of nutrition surveillance in six districts and disseminate the findings;
- Undertake behaviour change communication including promotion of lactation management and complementary feeding practices through the training of public health staff in six districts.

#### **Water, sanitation and hygiene (WASH) (US\$ 2,000,000)**

Up to 100,000 displaced and war-affected persons, particularly children and women, will have access to water, sanitation and hygiene, according to the Sphere standards, through the following key activities:

- Develop new partnerships, standby agreements and long-term agreements for emergency response;
- Develop and conduct emergency response training for partners with special emphasis on participatory hygiene and sanitation transformation (PHAST), gender and protection issues;
- Replenish and further develop emergency prepositioned supply stocks;
- Promote solid waste management and septage safe disposal through coordinated advocacy and construction where feasible;
- Support water supply and sanitation to IDP camps, including the upgrading of facilities. Improvements to facilities will incorporate gender-, disability- and child-oriented interventions;
- Provide hygiene kits, soap, jerrycans and other items to IDP camps. Rehabilitate wells and provide adequate child-friendly sanitary facilities in schools. Rehabilitate/construct communal wells and boreholes equipped with handpumps.

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About 50,000 (or about 50 per cent of total)<sup>2</sup> resettled people will have access safe drinking water and sanitation facilities according to Sphere standards through the following activities:

- Implement 'Quick Implementation of Recovery Projects' to repair, rehabilitate and improve existing water and sanitation infrastructure; conduct hygiene awareness programmes in resettled areas, with a participatory community water supply planning component and technical feasibility assessments for a permanent water supply solution in drought-prone communities;
- Construct community-managed water supply facilities in resettled areas;
- Implement the community-led total sanitation (CLTS) approach for the construction of sanitary facilities for all families. A menu of low-cost sanitation technologies, demand-based and community-driven will be supported to improve sanitation practices that do not require major funding.

### Education (US\$ 2,800,000)

An estimated 200,000 displaced and conflict-affected children, 2,500 teachers and 150 key partners will benefit from the following key activities:

- Provide 50 temporary learning spaces, including water and sanitation facilities, to ensure continued access to safe learning environment for 7,500 children;
- Supply essential learning materials to 75,000 children and teaching materials to 2,500 teachers;
- Provide recreational materials, blackboards and non-food relief items (including water buckets, hygiene kits, mats and tarpaulin) to 150 schools ;
- Finalize emergency training packages and train 75 resource trainers in emergency education management, emergency teacher training and psychosocial support;
- Train 2,500 teachers in emergency education methods and issues, with particular attention to psychosocial support;
- Support the training of youth and community workers in psychosocial and alternative learning activities in collaboration with the protection team;
- Provide temporary transport for teachers in acute phase and remote areas;
- Reintegrate students into formal education by supporting back-to-school programmes and school-based support for children who have been out of school for extended periods;
- Ensure appropriate learning opportunities to conflict-affected children through additional or alternative learning activities and supplementary materials for 50,000 students;
- Repair schools sustaining minor damages due to conflict or occupation of IDPs;
- Continue strengthening key government, community and partner capacity to plan and respond to education needs in emergencies enabling a more comprehensive response at all levels (includes data management, skills building, material development, etc.);
- Provide support and coordinate activities under the Inter-Agency Standing Committee (IASC) cluster together with Save the Children in Sri Lanka.

### Child protection (US\$ 2,000,000)

Some 252,000 conflict-affected children, including children used by armed groups and those at risk, will be reached through the following activities:

- Support 1,500 children used by armed groups with care and reintegration activities;
- Provide psychosocial support through child-friendly spaces and children's clubs, and train teachers in displacement-affected areas;
- Strengthen community-based protection networks for prevention of child rights' violations and refer to appropriate services and authorities;
- Strengthen the response to grave violations of child rights, including through an enhanced monitoring mechanism in line with UN Security Council Resolution 1612; strengthen advocacy strategies at both national and local levels and support advocacy at the international level;
- Provide emergency response for separated and unaccompanied children;
- Minimize the risks of mine accidents for children and communities through mine-risk education in all affected communities.

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<sup>2</sup> Coordinated action with other WASH partners will cover the remaining 50 per cent of the resettled population.