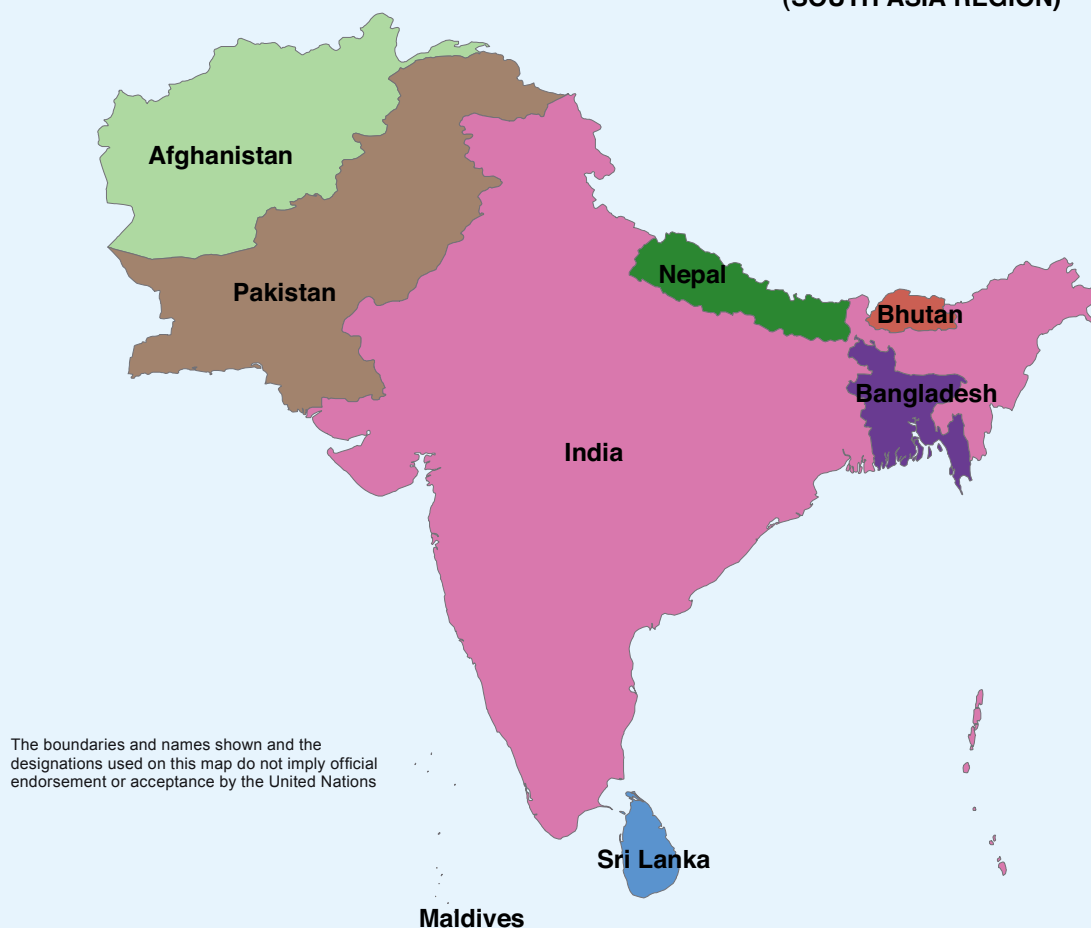


# SOUTH ASIA

ROSA REGION  
(SOUTH ASIA REGION)



## CRITICAL ISSUES FOR CHILDREN AND WOMEN

South Asia is home to some 1.4 billion people or roughly one-fifth of the global population and is one of the most densely populated regions in the world. Overall, tremendous progress has been achieved towards human development over the decades. However, many areas/pockets of the region remain engulfed by political strife, civil unrest, insurgency and frequent natural disasters, and experience weak and sporadic coverage of basic social services, particularly in the critical sectors of health, water and education. These factors continue to threaten the survival and development of the most vulnerable segments of the populations, particularly children and women.

The consequences of three decades of conflict, drought, displacement and international isolation have destroyed social service infrastructure in **Afghanistan**, seriously impacting the general well-being of children and women. Maternal mortality remains one of the highest in the world, diarrhoea is prevalent among 30 per cent of the under-five population and some 60 per cent of Afghan households do not have access to clean water and safe sanitation.

The 19-year civil in **Sri Lanka** displaced some 800,000 people, one-third of whom were children and, to date, some 360,000 people are still displaced in the country. The accessibility of health care has severely been disrupted by the conflict, resulting in increased mortality and morbidity among infants and mothers. Less than 20 per cent of the households have access to safe water supply. Involvement of children with armed factions remains a serious concern.

The conflict between the Maoists and the Government has gripped **Nepal** since 1996, claiming more than 10,000 lives. While the general situation cannot be characterized as a full-scale emergency, the steady deterioration is very alarming. Social services in the rural areas have steadily deteriorated over the past 12 months, particularly in the mid-western and far-western regions. The numerous strikes, school closures and destruction of administrative property have further weakened the social infrastructure. An increasing number of children are serving as informants, cooks, helpers and are even involved in fighting.

The region is highly prone to monsoon floods. Due to the sheer size of the population, even a small incident has a devastating impact on the lives and livelihood of the poor families, often causing massive deaths and injuries, infrastructure loss, displacements and wiping out the already stretched local coping mechanisms. In 2004, **Bangladesh** was hit by the worst floods in a decade which affected more than 35 million people, of whom 20 million were children. The floods in Assam, **India** in July affected almost 10 million people. In such situations, children are often exposed to family separation, drowning, psychosocial trauma, disease and sexual exploitation. Emergency preparedness is essential to reduce the damage and harm caused by these recurrent floods. These measures will also help in responding to other natural phenomena such as earthquakes and landslides which frequently hit Afghanistan and Nepal.

The remainder of this section contains country appeals for Afghanistan, Nepal and Sri Lanka, then summarizes regional support activities planned for 2005 and humanitarian actions undertaken in 2004.

# UNICEF HUMANITARIAN ACTION

# AFGHANISTAN

## IN 2005



### Summary of UNICEF financial needs for 2005

Sector	US\$
Health and nutrition	29,800,000
Education	25,200,000
Water and environmental sanitation	16,380,000
Child protection	8,970,000
Emergency preparedness, capacity-building and response	1,100,000
<b>Total</b>	<b>81,450,000</b>

\* The total includes a maximum recovery rate of 12 per cent. The actual recovery rate on individual contributions will be calculated in accordance with the Executive Board Decision 2003/9 of 5 June 2003.

## 1. CRITICAL ISSUES FOR CHILDREN AND WOMEN

While considerable progress has been made for women and children in Afghanistan since the fall of the Taliban regime in late 2001, the country still has some of the worst development indicators in the world – the legacy of nearly three decades of conflict, drought, displacement and international isolation. According to the 2003 Multiple Indicator Cluster Survey – the first full survey to be undertaken in Afghanistan since 1996 – 1 in 9 children will not survive their first year, while 1 in 6 will not reach their fifth birthday. Maternal mortality remains one of the highest in the world, with one woman dying every 20 minutes due to complications in pregnancy and childbirth, the result of lack of access to health facilities or trained medical staff. Diarrhoeal disease affects 30 per cent of the under-five population, exacerbated by a lack of clean water and sanitation. Sixty per cent of Afghan households do not have access

to safe drinking water, while nearly one third of households do not have adequate sanitation. Poor hygiene practices further increase the risk to child health. While the last three years have witnessed a substantive decrease in incidences of polio (from 27 cases in 2002 to just 3 cases in 2004) and measles (from over 8,000 cases in 2001 to just 903 in 2003), routine immunization coverage remains low, with nearly 70 per cent of children aged 12-23 months not being vaccinated against DPT and almost half of all children in the same age group having not received three or more doses of polio vaccine.

The impact of Afghanistan's long conflict has destroyed traditional social structures for children. Poverty affects many families; nearly 7 per cent of primary school aged children work to generate income. Many families have placed children in institutions, as they are no longer able to provide care themselves (80 per cent of children in Kabul's orphanages have at least one living parent). There is a growing threat from child trafficking, with impoverished families being especially vulnerable to those who want to exploit their children. Up to 8,000 children have been associated with fighting forces and are in urgent need of reintegration support as they return to civilian life. While landmine injuries have decreased in the last two years, thanks to a combination of mass clearance programmes and mine risk education, the threat to children from mines and unexploded ordnance remains high.

Against this background, the demand for education provides a source of hope for Afghan children. Enrolment rates continue to increase with primary school enrolment now touching 55 per cent. There are more children in school in Afghanistan than ever before in the nation's history. However an estimated 1.3 million primary school-age girls are still not accessing education, mainly due to prohibitive distances from home to classroom, poor facilities and a chronic shortage of female teachers.

### CORE COUNTRY DATA

Child population (millions)	13.4
U5 mortality rate	172
Infant mortality rate	115
Maternal mortality ratio (2002)	1,600
Primary school enrolment ratio	54.4
Primary school enrolment ratio for girls	40.5
%1-2 years fully immunized (DPT3)	30.1
% population using improved drinking water sources	40.2
HIV/AIDS prevalence	n/a
% U5 suffering moderate and severe malnutrition	6-10

Source: Multiple Indicator Cluster Survey 2003



Photo: UNICEF Afghanistan /Mitani

*“When I was in the third grade at school, my father told me that I should bring money to my family. I had no other choice but join the armed group. I’m the eldest among my two brothers and four sisters. I worked in the kitchen. I washed the vegetables, pots and dishes, carried food to the soldiers and cleaned the floor all day. I didn’t have fun at all. I didn’t like the armed group. I wanted to go back to school*

*“I want to go back to school. I want to become a teacher. But if it’s not possible, I want to learn how to weave a carpet so that I can make a lot of money.”*

**Abdul, former child soldier now enrolled in UNICEF-supported demobilization and reintegration programme, south-eastern Afghanistan.**

## 2. KEY ACTIONS AND ACHIEVEMENTS IN 2004

UNICEF has continued to support the Transitional Islamic State of Afghanistan and other partners to develop programmes that address the pressing needs of Afghanistan's women and children, and to build the capacity of state and civil society actors. While progress has been made in all areas, the worsening security situation across the country has hindered implementation of some projects, as physical access to some provinces has become impossible.

The threat to humanitarian workers has been underlined by the murder of more than 20 aid workers – mostly Afghan nationals – in 2004. Against this backdrop of violence and increased risk, some UNICEF programmes planned for the second half of 2004 were postponed. National capacity within both Government and civil society sectors remains very limited, although efforts have been made to increase technical and systems competencies.

In the area of health and nutrition, more than 6 million children were immunized against polio in each of four rounds of National Immunization Days (NIDs), while 3.6 million women were vaccinated against maternal and neo-natal tetanus. A further three salt iodization plants have been established; a total of eight plants are now producing up to 80 per cent of the nation's requirements of iodized salt. More than 800 safe water points have been provided in vulnerable communities, while chlorination of wells has protected water sources for 300,000 households. Community and school-based programmes have brought the messages of improved household and personal hygiene to more than 1.7 million people. Long-term capacity has been increased with the construction of seven cold-rooms for vaccines and rehabilitation of 20 emergency obstetric care centres.

In the education sector, school supplies have been provided to 4.8 million children and 80,000 teachers, nearly 75,000 girls have benefited from additional accelerated learning programmes to help them catch up on missed years of education, 1.5 million people have benefited from school and community-based mine risk education, while nearly 50,000 teachers have taken part in rapid training programmes. Revised textbooks, syllabus and related teacher education programmes have been developed throughout the year. In the area of physical infrastructure, UNICEF has supported the construction and rehabilitation of 210 primary schools and provided safe water sources to nearly 600 facilities.

To improve child rights, UNICEF and the Afghan Ministry of Justice have completed a major comparative review of Afghan legislation and the UN Convention on the Rights of the Child, while research on Afghan traditional law has been completed. A new juvenile code has been drafted, as has a national action plan against child trafficking. A range of training programmes has been undertaken on issues including child rights, prevention of child trafficking and social work practice; and a key study of children deprived of parental care was completed.

More than 3,800 former child soldiers have been demobilized and reintegration programmes have been established throughout the country, assisting more than 4,500 out-of-school youth and street/working children. Reintegration and family support has been provided to children deported from neighbouring countries. Some 27,000 teachers have been trained on mine risk education (MRE), as well as on prevention of abuse and violence against children. More than 1.9 million children under the age of five have had their births registered, with data collection still ongoing as at end of 2004.

## 3. PLANNED HUMANITARIAN ACTION FOR 2005

### Coordination and partnership

UNICEF works with a number of line Ministries within the Transitional Islamic State of Afghanistan, UN agencies, and several international and NGO partners. With decreasing security, the role of the local community and NGOs as implementers and monitors of UNICEF-funded programmes has become of key importance. UNICEF also co-chairs the Consultative Groups on Education and Health, and is a member of the Educational Grants Management Unit, acts as Secretariat of the National Working

Group on Child Trafficking, is a member of the UN Emergency Task Force, as well as the UN Task Force on Gender and Women's Development. The United Nations Assistance Mission in Afghanistan (UNAMA) plays a central role in coordination of UN operations, including the promotion of integrated programming, joint UN public information activities and the coordination of emergency appeals.

#### **Regular programme**

The current UNICEF Country Programme runs from 2003-2005 and takes as its basis the principle of household contacts, the use of community structures (such as mosques, schools and health centres) to promote social change, and the development of institutional capacity and policy development to promote and uphold children's and women's rights in every province in the country.

UNICEF will continue to play a leading role in supporting key programmes in the areas of health, nutrition, water, sanitation, hygiene education, basic primary education and child protection to assist Afghanistan in reaching the Millennium Development Goals. UNICEF-supported programmes are expected to reach at least 6 million children and 4 million women in 2005. All programme areas include capacity-building support to Government and civil society partners, material and infrastructure support, training, and specialist advice and policy guidance.

#### **Health and nutrition (US\$ 29,800,000)**

Up to 6 million children across Afghanistan, in all provinces, will benefit from the following key activities:

##### ***Child survival and the Expanded Programme on Immunization (EPI) (US\$ 20.3 million)***

- Conducting polio eradication activities for more than 6 million children in each of four main rounds, and additional regional-level mop-up campaigns.
- Establishing 20 provincial cold rooms, 100 fixed immunization centres, and conducting multi-antigen intensive outreach immunization services for 3 million people to strengthen routine immunization, including procurement of vaccines and consumable materials.
- Conducting maternal and neonatal tetanus elimination campaigns for around 4 million women of childbearing age (15 to 45 years old) throughout the country.
- Provision of essential drugs, medical supplies and oralrehydration salts to cope with diarrhoeal diseases to all provinces.
- Distribution of 15,000 bednets to pregnant women and children, linked with awareness-raising activities and health worker training to tackle malaria.
- Support for implementation of community-based caring surveys, assessments and evaluations.

##### ***Maternal health (US\$ 6.43 million)***

- Support for 39 comprehensive emergency obstetric care centres (CEmOCs), including financial support for nine hospitals with NGO partners, to provide quality referral obstetric health services.
- Training of provincial/district hospital staff in emergency obstetric care.
- Procurement and distribution of essential emergency drugs and equipment for 16 CEmOC centres located in under-served provinces.
- Conducting a safe motherhood communication campaign throughout the country.

##### ***Nutrition (US\$ 2.87 million)***

- Vitamin A supplementation for 5 million children under five years of age.
- Establishment of two additional salt iodization plants and conducting a nationwide universal salt iodization communication campaign.
- Support for pilot flour fortification and multi-vitamin supplementation project.
- Support for therapeutic feeding centres to provide technical assistance and therapeutic feeding milk.

##### ***HIV/AIDS/Sexually transmitted disease control (US\$ 212,000)***

- Support for implementation of a HIV/AIDS prevalence survey among drug users and other vulnerable groups.
- Procurement of essential supplies for ensuring safe blood supplies for 32 provincial hospitals.

### Education (US\$ 25,200,000)

With a focus on increasing access for girls, and improving the quality of teaching in Afghanistan, over 5 million children and more than 100,000 teachers will be assisted through the following activities:

- Development of 10,000 community-based schools for 500,000 girls in areas with no formal school, including provision of school tents, learning materials and training of teaching staff.
- Provision of learning and teaching supplies for 5.3 million students and 105,000 teachers in formal schools.
- Special support for education for 200,000 internally displaced and returnee children, including stationery, materials, school tents and incentive payments for teaching staff.
- Development of curriculum, textbooks and testing of new teaching materials with focus on grades 4-6 (late primary level).
- In-service training support for at least 20,000 primary school teachers.
- Strengthening of literacy programmes for women and over-aged schoolchildren.
- Support to peace education through formal and non-formal education systems.
- Awareness-raising campaigns to promote importance and value of girls' education.

### Water and environmental sanitation (US\$ 16,380,000)

Some 1.1 million children and 4.5 million internally displaced persons (IDPs), returnees and other vulnerable populations will gain access to safe drinking water, sanitation and better hygiene practices through the following key activities:

- Construction/rehabilitation of wells in 1,000 schools, serving 700,000 students.
- Construction/rehabilitation of 1,000 wells, bore holes, and handpumps to provide safe drinking water to 500,000 people in permanent and new areas of return and those affected by disasters.
- Construction of sanitary facilities in 1,500 schools, serving 1.1 million students.
- Construction and rehabilitation of 5,000 household latrines.
- Training of 4,500 teachers to provide hygiene education and awareness sessions for 800,000 students.
- Training of 4,500 imams and hygiene promoters to provide hygiene education and awareness sessions for 2.5 million people.
- Training of management teams in assessments, strategic and rehabilitation planning, supervision, water testing, repair and maintenance of handpumps and spring-fed piped water systems.
- Training of masons and village pump mechanics for construction of family latrines and repair and maintenance of handpumps.
- Provision of 1.5 million packs of chlorine to enable 1 million households to safeguard drinking water.

### Child protection (US\$ 8,970,000)

Up to 1 million children and adults, including former child soldiers, out-of-school youth, street/working children, child victims of trafficking, children in conflict with the law and children deprived of parental care will be supported by the following activities. In addition, UNICEF will continue to work with partners to improve systematic, institutional and legislative protection of children's rights.

- Demobilization and reintegration support, including education and training, for up to 3,000 former child soldiers.
- Education and training support for 10,000 street/working children, internally displaced people and returnees.
- Coordination of mine risk education programmes for at least 500,000 people, development and testing of educational materials and monitoring tools, and community-based mine risk education (MRE) activities.
- Training and other capacity development for youth workers, police and other actors on prevention of child trafficking, and support for victims of trafficking.
- Training and other capacity development for up to 1,000 social workers in improved social work practice.
- Support for reintegration of at least 500 children in institutions back into family-based care.
- Training and other capacity development for legal professionals, police and social workers on the new Juvenile Code and international instruments governing juvenile justice.

- Support for an open rehabilitation centre for children in conflict with the law.
- Support for implementation of the National Plan of Action to combat child trafficking and finalisation of the National Plan of Action for children at risk in Afghanistan.
- Support for 40,000 village elders to promote systematic birth registration programme.
- Training and sensitization on children's and women's rights for 50,000 religious leaders.

**Emergency preparedness and capacity support (US\$ 1,100,000)**

Given the highly volatile security situation in Afghanistan – and risks from earthquakes, flooding, drought and disease outbreaks – UNICEF will assist partners in a number of emergency preparedness and response programmes including:

- Provision of emergency water trucking for at least 150,000 households in areas experiencing prolonged dryness.
- Pre-positioning of educational supplies, water and sanitation equipment and materials, emergency health kits and family materials kits for up to 20,000 people.
- Emergency response training for staff and partners.

## UNICEF HUMANITARIAN ACTION

# NEPAL

## IN 2005



The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations

### Summary of UNICEF financial needs for 2005

Sector	US\$
Health	1,279,000
Nutrition	317,500
Education	2,652,000
Water and environmental sanitation	485,000
Child protection	515,000
HIV/AIDS	95,000
Mines and IEDs	170,000
Earthquake and other natural disaster preparedness	233,000
Project support	205,000
<b>Total*</b>	<b>5,951,500</b>

\* The total includes a maximum recovery rate of 12 per cent. The actual recovery rate on individual contributions will be calculated in accordance with the Executive Board Decision 2003/9 of 5 June 2003.

## 1. CRITICAL ISSUES FOR CHILDREN AND WOMEN

Many Nepalese children and women are affected by recent decreases in the quality and availability of health services and education. A large number of civil servants have abandoned their posts in villages and moved to district capitals which are perceived as safer. While social services in rural Nepal were never even close to adequate, especially in the mid- and far-western regions of Nepal, their condition has steadily deteriorated over the past 12 months.

The Maoist insurgency that has affected Nepal since 1996 is the main cause of these worrying trends. The Maoists have thousands of fighters under arms, are active in most of Nepal's 75 districts and are thought to have strong influence in up to seventy per cent of the country. Schoolchildren and women are frequently abducted for indoctrination purposes, but most, if not recruited into Maoist ranks, return safely to their villages. A growing number of under-age children are serving as child soldiers, mostly as informants, cooks and helpers – but increasingly, it is believed, also in armed roles. Furthermore, the conflict manifests itself in numerous strikes, school closures, deliberate destruction of administrative buildings at district level, economic boycotts of certain companies and increasingly frequent human rights violations by both Government security forces and Maoists against a background of impunity and growing lawlessness, as was highlighted by a recent report by Human Rights Watch. Unlawful killings, disappearances and forced abductions have become common practice by both parties to the conflict.

So far, the conflict does not seem to have resulted in large numbers of internally displaced persons (IDPs). Some internal displacement is certainly taking place, but these populations quickly integrate into the existing communities and do not concentrate themselves in separate 'camps'.<sup>1</sup>

The root causes of the conflict are extreme poverty, feudalism and social discrimination caused by the caste system, endemic economic and political corruption, centralism, and the virtual absence of social services and infrastructure outside the urban centres. The situation in Nepal is generally not yet considered to be a full-fledged humanitarian crisis, but the steady deterioration is very alarming. Reversing the deterioration is essential for the well-being of children and women, but will also greatly contribute to a reduction in tensions and mitigate many aspects of the conflict. UNICEF's strategy in the conflict has been to:

- 1) maintain access and presence in rural areas;
- 2) strengthen community capacities, health services and education as an objective in itself, but also as way to create a more protective environment;
- 3) undertake actions that reduce caste and class disparities in communities;
- 4) monitor, advocate for and discuss child rights at all levels; and
- 5) train staff on humanitarian principles. One of the few bright spots is Nepal's vibrant civil society and human rights community with which UNICEF is in close partnership for safe access and advocacy purposes.

Nepal is highly prone to earthquakes and other natural disasters, such as floods and landslides. Pre-positioning of drugs and supplies for safe drinking water has shown to be effective.

### CORE COUNTRY DATA

Child population under 18 (thousands)	<b>11,504</b>
Child population under 5 (thousands)	<b>3,645</b>
U5 mortality rate	<b>91</b>
Infant mortality rate	<b>66</b>
Maternal mortality ratio (adjusted)	<b>740</b>
Primary school enrolment ratio	<b>73</b>
Primary school enrolment ratio for girls	<b>67</b>
% U1 fully immunized (DPT3)	<b>72</b>
% population using improved drinking water sources	<b>88</b>
HIV/AIDS prevalence	<b>0.5</b>
% U5 suffering moderate and severe malnutrition	<b>51</b>

Source: *The State of the World's Children 2004*

<sup>1</sup> If in the future the conflict causes IDPs to congregate in camps, UNICEF's initial response can be met from the 'Earthquake and other natural disasters' component.



*"My home is in Banketar village, which is on the other side of Nepal. Because the conflict has made it more difficult to find work in the countryside, my father and other elders of the family have left for India. After that, I accompanied my mother to Biratnagar. Biratnagar is very far from Banketar. My mother does not want us to go back to Banketar because she is afraid of the violence that has come with conflict. Here in Biratnagar, I joined the urban out-of-school classes level II three months ago. My mother works as a domestic help in town and I help my mother with household chores when I get back home from my classes."*

**Sita Pokharel, 14 years old, mentally challenged, Biratnagar, Eastern Nepal.**

## 2. KEY ACTIONS AND ACHIEVEMENTS IN 2004

UNICEF has continued to respond to the needs of the Nepalese children and women but, due to the intensification of the conflict, has made important adjustments in its operating modalities. Notably, national and local human rights organizations have become close partners and are playing an indispensable role in facilitating access to populations in conflict-affected areas. A two-week measles control campaign was conducted in October in 35 of Nepal's 75 districts. Preliminary estimates show that more than 95 per cent of children aged 9 months to 14 years were reached, irrespective of the degree of conflict prevailing locally. Similar success was reported for the nationwide campaigns for vitamin A distribution in April and October.

The role of local NGOs in the implementation of UNICEF's area-based interventions in health, education, water, sanitation, protection and HIV/AIDS substantially increased in 2004. As a result, communities affected by the conflict continued to benefit from UNICEF programmes. In close collaboration with WFP, eight new districts, which are traditionally disadvantaged and particularly hard hit by the conflict, were added to the UNICEF area-based programme, making a total of 23 districts. In the education sector, UNICEF has focused on lower-caste children who are out of school. At least 30,000 such disadvantaged children were enrolled in special courses and many moved on to the regular school system after completing these courses. Teachers in these classes were also trained on psychosocial support techniques. Communities around more than 1,400 primary schools in 15 districts organized special 'Welcome to School' campaigns and successfully enrolled high numbers of out-of-school children in year one, especially girls and children from disadvantaged groups. Sanitation and hygiene education was promoted in 1,000 primary schools, reaching about 125,000 children. At the household level 10,000 latrines were constructed.

In 203 villages in 15 districts paralegal committees were set up and trained on defending children's and women's rights. These committees receive technical support from 165 district-based lawyers and human rights activists. Due to the pressure of the conflict on communities, domestic violence is thought to be on the rise. The paralegal committees are of particular importance to disadvantaged groups and, as such, also help to mitigate the root causes of the conflict. For HIV/AIDS, 3,600 community communicators in 15 districts were trained in the use of communication materials about transmission and methods of prevention. Production and broadcasting of highly popular weekly radio and TV programmes – produced by young people for young people – continued in 2004. Conflict-induced migration and lawlessness is increasing the risk of HIV/AIDS.

In February 2004, the UN country Team adopted and disseminated Basic Operating Guidelines, which set out the UN's neutrality in its mandate and operations vis-à-vis the parties to the conflict.

### 3. PLANNED HUMANITARIAN ACTION FOR 2005

#### Coordination and partnership

UNICEF collaborates closely with the UN Country Team, particularly WFP and the OCHA Humanitarian Affairs Officer. The decentralized character of UNICEF's implementation modalities requires continued close coordination with district authorities. Coordination with the National Human Rights Commission and other national and local human rights organizations will be essential to minimize disruption in programme implementation.

#### Regular programme

The Country Programme (2002-2006) focuses on community initiatives in 23 districts to improve the lives of children and women. In addition, nationwide interventions include support to the national immunization and vitamin A programmes. The Country Programme has been adapting its implementation modalities in order to allow it to operate effectively in the context of conflict. The programmatic interventions have changed only little and the humanitarian activities are woven into the regular programme. However, the conflict has led UNICEF to target additional areas that are particularly affected by the conflict. This has resulted in an increase in the funding gap, which the requested budget is meant to address.

In 2005 UNICEF will focus on mitigation of the conflict through an intensification of its Country Programme strategies, with an emphasis on strengthening community capacities and improving the availability and quality of services. The primary recipients of UNICEF's programme assistance in 2005 will be some 4.13 million children and women, including 826,000 children aged under five years and 599,000 pregnant women and mothers of under-five children. In addition, nationwide programmes such as immunization and vitamin A aim to reach all these target groups. The funding for humanitarian assistance requested below complements other funding already available for the country programme.

#### Health (US\$ 1,279,000)

Because of the conflict, government health workers are less free to move around and, as a result, outreach is limited. Strengthening capacities of communities, including those of volunteers with specific skills and proven impact, becomes essential for basic medical advice, including referral.

Activities planned for strengthening community capacities include:

- Training 100 auxiliary maternal health workers in conflict-affected areas covering 30 per cent of the population in six districts, including provision of home delivery kits (US\$ 40,000);
- Training all 2,000 Female Community Health Volunteers (FCHVs) in Humla, Kapilvastu, Panchtar and Udaypur districts on preventive and curative actions for child health, including acute respiratory infections and immunization (US\$ 225,000);
- Providing health kits to all 11,000 FCHVs in 15 districts (US\$ 135,000);
- Providing medical equipment and basic furniture for 528 sub-health posts in 12 conflict-affected districts (US\$ 360,000);
- Providing solar-electricity hybrid power back-up systems for cold-chain maintenance in 20 districts (US\$ 225,000);
- Providing 20 solar refrigerators, including transportation and installation (US\$ 125,000);
- Supplying spare parts for existing equipment such as burners, wicks, etc. (US\$ 12,000);
- Training 40 cold-chain assistants and supervisors from conflict-affected areas on maintenance of cold-chain equipment (US\$ 12,000);
- Providing comprehensive sets of IEC materials to all health facilities in 15 districts (US\$ 60,000);
- Supporting and providing orientation to human rights groups for the promotion of routine immunization and other health activities in conflict areas (US\$ 25,000);
- Technical assistance and project support (US\$ 60,000).

**Nutrition (US\$ 317,500)**

Community mobilization for improving children's health has resulted in a spectacular and lasting reduction in malnutrition levels of well over 50 per cent among children 0-3 years old in communities benefitting from UNICEF programme assistance. This has been achieved entirely without supplementary feeding or food distribution. Activities for 2005 include:

- Mobilization and training of 1,000 communities in community-based assessment and action to improve children's health (US\$ 45,000);
- Providing weighing scales and related supplies for community-based growth monitoring in 45 communities (US\$ 27,500);
- Training community volunteers and health staff on intensified micronutrient control measures (including de-worming) in five districts (Accham, Kaski, Kavre, Panchtar, Tanahun) to benefit 60,000 pregnant women and 233,000 under-five children (US\$ 225,000);
- Supporting nutritional surveys in areas with vulnerable populations (US\$ 20,000).

**Education (US\$ 2,652,000)**

In collaboration with the National Human Rights Commission, UNICEF intends to use education as a major entry point for defending and realizing children's rights in the context of the conflict. For this purpose, large-scale media and community mobilization campaigns are being planned under the banner 'Welcome to School'. These initiatives will be underpinned by improvements in teaching methods and learning experience, upgrading school infrastructures and improving availability of learning and teaching materials. Specific activities include:

- Promoting 'Welcome to School' packages in 5,000 schools (US\$ 1.7 million);
- Mobilization, monitoring and operating costs of the 'Schools as Zones of Peace' coalition (US\$ 112,000);
- Out-of-school courses in urban settings for 5,000 children affected by the conflict (US\$ 200,000);
- Out-of-school courses in rural areas for 15,000 children from lower castes and disadvantaged groups (US\$ 600,000);
- Orientation of 10,000 teachers on how to detect psychosocial stress in schoolchildren (US\$ 40,000).

**Water and environmental sanitation (US\$ 485,000)**

Activities to support safe drinking water and sanitation (which are among the services that have been neglected in rural areas) include:

- Providing safe drinking water to 850 disadvantaged families in areas seriously affected by the conflict (US\$ 180,000);
- Providing child- and girl-friendly sanitation environments in 30 schools in areas seriously affected by the conflict (US\$ 95,000);
- Promoting hygiene and sanitation in 1,700 households in disadvantaged communities in five districts (US\$ 35,000);
- Testing and treatment of drinking water contaminated by arsenic for 300,000 households in three districts (US\$ 175,000).

**Child protection (US\$ 515,000)**

Protection of children and women is obviously a growing concern. Community-based initiatives have proven to be very effective. In addition, the national civil society initiative 'Children as Zones of Peace' is stepping up its advocacy and moral pressure on the parties to the conflict. Protection activities include:

- Establishing and training 9 district paralegal committees and 45 village paralegal committees (US\$ 250,000);
- Training community front line workers and volunteers on family assessment, case management, outreach for children and families at risk, including children deprived of primary caregivers and victims of abuse and violence (US\$ 50,000);

- Training teachers/facilitators of out-of-school courses on psychosocial support to children and on teaching and earning with dignity in nine districts (US\$ 50,000);
- Monitoring and advocacy for recruitment prevention and demobilization of child soldiers (US\$ 80,000);
- Support to 'Children as Zones of Peace' coalition (US\$ 20,000);
- Developing public service announcements for broadcasting (US\$ 35,000);
- Training both government and non-governmental partners on children's rights (US\$ 30,000).

### **HIV/AIDS (US\$ 95,000)**

The conflict has resulted in increasing economic pressure, forcing people to look farther afield for income. In a number of districts, where young able men already had a habit of seasonal migration to India, this trend is accelerating and a higher risk of exposure to HIV/AIDS in their communities is to be expected. Growing lawlessness has also led to an increasing number of rape cases in rural areas, particularly where police stations have closed. There is a concomitant increase in risk of HIV/AIDS infection among rape victims. Activities include:

- Training community volunteers in seven districts with increasing seasonal migration to India (US\$ 35,000);
- Raising awareness about HIV/AIDS among 10,000 young people in seven districts with increasing seasonal migration to India (US\$ 55,000);
- Post-exposure prophylaxis kits (US\$ 5,000).

### **Mines and improvised explosive devices (IEDs) (US\$ 170,000)**

Although, so far, children have been little affected by the use of landmines (by the army) and IEDs (by insurgents), their rapidly increasing use is cause for alarm. UNICEF is taking a lead in raising awareness among children and in communities by:

- Developing a mine risk education programme in 20 districts;
- Producing 500 mine risk education training kits for use by schools, out-of-school programmes and community organizations;
- Developing 300 emergency mine risk information kits for use in villages where conflict has just occurred;
- Undertaking a national mine action needs' and capacities' assessment;
- Supporting national landmine and IED injury surveillance;
- Supporting the MRE working group.

### **Earthquake and other natural disaster preparedness (US\$ 233,000)**

According to seismologists, Kathmandu valley is overdue for a major (at least 8.0 on the Richter scale) earthquake. Preparedness in the country is low which the following activities intend to help overcome:

- Printing and distributing *Facts for Life* on earthquakes (US\$ 60,000);
- Media training on earthquakes (US\$ 18,000);
- Pre-positioning chemicals for water purification for 50,000 households for four weeks (US\$ 60,000);
- Pre-positioning essential drugs for natural disasters – 25,000 households for four weeks (US\$ 95,000).

### **NGO and inter-agency coordination, management and logistics (US\$ 205,000)**

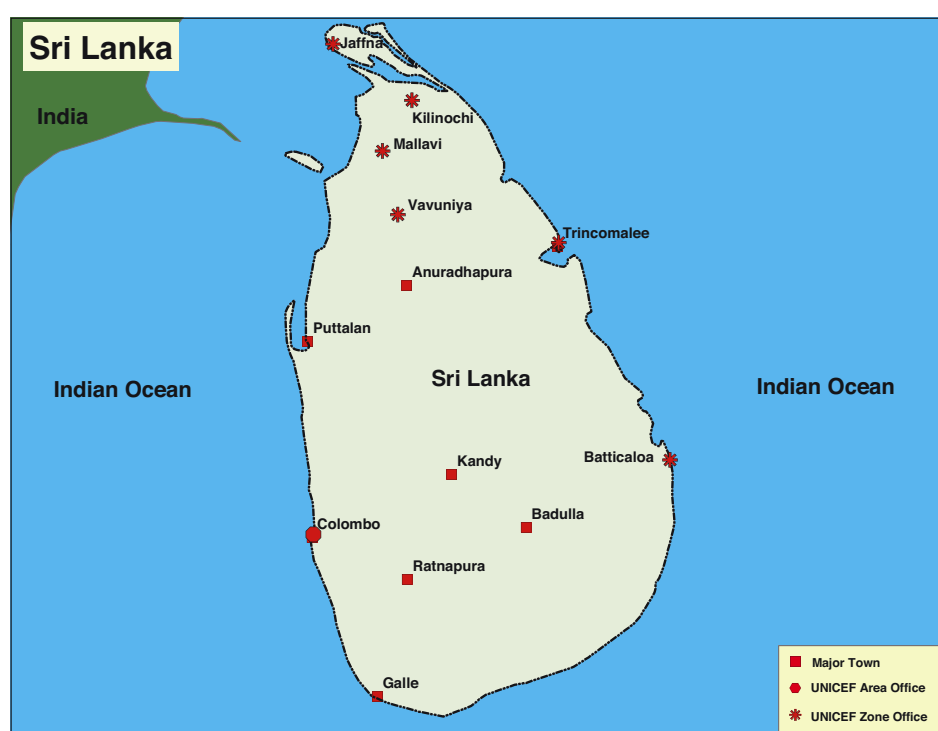
The changes in programme implementation modalities, notably coordination with human rights organizations and other non-state actors, require frequent internal and external consultations. The growing insurgency also leads to frequent logistical bottlenecks. Support is needed for:

- One Emergency Officer (L-4) for 12 months (US\$ 170,000);
- Short-term consultancies and miscellaneous costs (US\$ 35,000).

# UNICEF HUMANITARIAN ACTION

## SRI LANKA

### IN 2005



The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations

### Summary of UNICEF financial needs for 2005

Sector	US\$
Health and nutrition	3,980,000
Water and environmental sanitation	2,000,000
Education	4,000,000
Child protection	3,600,000
<b>Total</b>	<b>13,580,000</b>

\* The total includes a maximum recovery rate of 12 per cent. The actual recovery rate on individual contributions will be calculated in accordance with the Executive Board Decision 2003/9 of 5 June 2003

## 1. CRITICAL ISSUES FOR CHILDREN AND WOMEN

Despite cessation of peace talks between the Government of Sri Lanka and the Liberation Tigers of Tamil Eelam in 2003, the ceasefire between the two parties continues to largely hold since it was agreed in 2002. This provides a particular opportunity to pursue rehabilitation and reconstruction efforts in Sri Lanka's North and East which have been most severely affected by the past 19-year long conflict – namely the districts of Ampara, Anuradhapura, Batticaloa, Jaffna, Killinochchi, Mannar, Mullaitivu, Putalam, Trincomalee and Vavuniya. More than 800,000 people were internally displaced during the war and there remain 360,000 internally displaced persons (IDPs) who have not been resettled to date. In the coming year it is expected that 70,000 refugees, currently residing in India's Tamil Nadu state, will return. Resettlement of remaining IDPs and refugees remains a challenge and, with ethnic conflicts yet unresolved, much attention needs to be paid to the host communities.

Availability, accessibility and quality of health care have all been severely affected by the conflict leading to increased mortality and morbidity and rising infant and maternal mortality. The problem is further compounded by a large proportion of neonatal deaths. Around 75 per cent of infant deaths take place in the first month of life while 66 per cent take place within the first week. One of the factors modulating high neonatal mortality rates is the shortage of essential medical equipment to improve the quality of care for neonates. Maternal mortality rates also show significant variation by regions. A needs assessment of emergency obstetric care in 2003 revealed that reported maternal deaths were high in the conflict-affected districts of Batticaloa, Jaffna, and Mullaitivu. In fact the mortality ratio in Batticaloa (a district in the East) is 116 per 100,000 live births – compared to the national figure of 47 per 100,000 live births. Malnutrition among children in the North and East still needs to be addressed substantially. In 2001, 46.2 per cent of children under the age of five years were malnourished, as opposed to 29.4 per cent (2000) in the rest of the country, and indications from the health facilities in the North and East suggest that this figure has not changed since. In education, major problems – such as non-enrolment, drop-outs, absenteeism, as well as low teaching and learning quality – are the direct result of displacement, psychosocial problems, lack of teachers, nutritional deficiencies and damaged infrastructure. While the average national school drop-out rate for classes 1-5 is 0.7 per cent, drop-out rates in some of the more troubled districts of the North reach 26 per cent (2003). Children who have missed out on schooling opportunities because of the war still need to be provided with education and integrated into the formal system. In 2002, an estimated 50,000 children were not attending school.

A recent study on the effects of the war on children and their psychosocial needs in the North and East showed that 20 per cent need continued psychosocial support. Infrastructure to address these issues is very limited. The Liberation Tigers of Tamil Eelam (LTTE) continue to recruit child soldiers. UNICEF's database of reported cases of child recruitment includes more than 1,350 unresolved cases, as of September 2004. The overall number of children that have been recruited is likely to be considerably higher. While the number of mine victims has been reduced - in parallel to consolidated mine action interventions of the UN (which included mine risk education carried out by UNICEF) – dangers remain as IDPs continue to return to areas still not fully cleared of mines. Mine risk education in areas at risk for children and communities through public dramas, media campaigns and school-based awareness activities have significantly helped to decrease the incidence of mine and unexploded ordnance incidences. The Government of Sri Lanka's target is to clear high- and mid-priority minefields by end-2006: this will require greater public familiarity with warning signs; a more realistic assessment of mine risk; and better mine-safe behaviour patterns. This is particularly important in uncleared areas where IDPs have resettled. Survivor assistance is provided through local institutions that provide prosthesis.

### CORE COUNTRY DATA

Child population (thousands)	<b>5,797</b>
U5 mortality rate	<b>19</b>
Infant mortality rate	<b>17</b>
Maternal mortality ratio (1998-99)	<b>92</b>
Primary school enrolment ratio	<b>97</b>
Primary school enrolment ratio for girls	<b>97</b>
% U1 fully immunized (DPT3)	<b>98</b>
% population using improved drinking water sources	<b>78</b>
HIV/AIDS prevalence (thousands)	<b>2.6</b>
% U5 suffering moderate and severe malnutrition	<b>29</b>

Source: *The State of the World's Children 2004*

Ground water contamination has been identified as a major health hazard, especially in Jaffna and in densely populated coastal areas. The proportion of households with access to safe water supply is only 20 per cent in Jaffna. An assessment among resettled IDP communities (2004) has shown that many villages in several districts do not have any toilet facilities at all. In 2004, with monsoon rains arriving late and being feeble, many poorly maintained wells dried up and communities had to be supplied through water tanks.



**Vijayakumari** (Vijay) is an orphan living with her elderly grandparents. There was not enough money in the family to manage three square meals a day, nor to send Vijay to school.

Vijay was found in this situation a year ago by Gowri Tervi, a volunteer teacher providing catch-up education to school drop-outs. She works with the community to identify children like Vijay. After eight months of catch-up education Vijay was admitted to the local school's sixth grade. After a few months in school she is now leaping ahead in her studies and making new friends. No one is happier than Gowri at Vijay's progress. *"I think education is the only way they can go beyond the endless cycle of poverty and backwardness,"* says Gowri.

Vijay is one of the 43,881 children who were provided with catch-up education classes through a programme supported by UNICEF.

**Vijayakumari, 13 years old, Kalkuda - Eastern Sri Lanka.**

## 2. KEY ACTIONS AND ACHIEVEMENTS IN 2004

In 2004, with the ceasefire generally continuing, UNICEF was able to scale up its activities addressing the rights of children and women affected by armed conflict and to meet the immediate needs of the most vulnerable children, including returning IDPs. Interventions in the North and East were greatly facilitated by its field presence with five zonal offices catering for eight districts in the North East Province and two adjacent districts that have been equally affected by the war.

Key activities of the protection programme included the strengthening of a social support framework for vulnerable children and released child soldiers to provide them with catch-up education or vocational training and micro-credit opportunities for their families. As a result of mine risk education initiatives, there has been a reduction from 15-20 incidents per month in 2002 to an average of 4 to 7 incidents per month in 2004. The target is to eliminate all injuries by 2006. Survivor assistance is provided through local institutions that provide prosthesis. A total of 1,300 children out of 1,800 released in 2004 have been referred to these reintegration services.

A solid reporting system has been established on child recruitment that is used for advocacy purposes in seeking release of child soldiers. Psychosocial referral systems have been activated through 44 counsellors and a total of 1,454 service providers have been trained on psychosocial support. Key activities of the 'learning years' programme have been the provision of catch-up education for 43,881 children that have missed out on education due to war and displacement. An intensive back-to-school drive was organized in response to the release of a significant number of child recruits – a total of 6,495 children were registered as returning to formal education. School kits were given to 4,127 of these children. A total of 11,599 school kits have been distributed to children in grade 1 as an incentive to school enrolment. Teachers and principals of 200 schools have been trained on child-friendly teaching and learning techniques.

Key activities of the early childhood development programme have been the upgrading and equipping of 23 hospitals with emergency obstetric care supplies, the construction of 42 primary health-care centres and the restoration of water and sanitation schemes for 197 health facilities and 731 primary schools.

### 3. PLANNED HUMANITARIAN ACTION FOR 2005

#### Coordination and Partnership

UNICEF is the coordinating agency for implementing the 'Action Plan for Children Affected by War in Sri Lanka'. UNICEF's main partners are UNDP and ILO which each sub-coordinate specific activities of the Action Plan (income generation and vocational training) which is complemented by UNICEF's protection services for under-age recruits as well as provision of education and health services. UNICEF also closely collaborates with UNHCR, UNDP and ILO within the frame of a '4R' programme that aims at rehabilitating villages particularly affected by the war. UNICEF, together with WFP, FAO and the Ministry of Health, has initiated a task force to define a common strategy for addressing the country's very high malnutrition rates, to start in 2005. Interventions in support of IDPs are coordinated with UNHCR. Further, UNICEF is the Deputy Chair of the Access to Services working group of the Donor Assistance Coordination Committee constituted by the Government of Sri Lanka.

#### Country Programme of Cooperation

UNICEF's humanitarian interventions in Sri Lanka build on and are designed to complement activities for children undertaken under the Government of Sri Lanka-UNICEF Country Programme of Cooperation 2002-2006, which addresses issues of early childhood development, learning years, adolescents/HIV/AIDS and protection. The programme covers 15 focus districts through an area-based approach out of which 10 are districts affected by armed conflict. This Humanitarian Action Report will also cover responses to natural disasters throughout the country if and when they occur.

As part of its humanitarian programme in the country, UNICEF will focus its efforts on continuing to meet the immediate humanitarian needs of the most vulnerable segment of the population. Primary recipients of UNICEF humanitarian assistance will be 500,000 children and women, including 250,000 children aged under five years, and 51,240 pregnant women and mothers in 10 districts affected by war.

#### Health and nutrition (US\$ 3,980,000)

Some 250,000 children under five years and 51,240 pregnant women and lactating mothers will be targeted with the following activities to improve their health and nutrition status:

- Rehabilitation of 22 primary health-care centres;
- Rehabilitation of maternity wards of six large hospitals and providing basic emergency obstetric care supplies;
- Improving neonatal and paediatric care in eight hospitals through provision of essential medical equipment such as incubators, resuscitators, suction apparatus, ambu bags, etc. and advocacy for deployment of necessary skilled personnel;
- Upgrading the knowledge and skills of 1,070 nurses and midwives on quality maternal and child health care and nutrition (micronutrients, household food security, newborn and infant care and feeding, low-cost management, hospital waste disposal, emergency obstetric care);
- Promoting micronutrient-rich food through promotion of home gardening;
- Providing entire micronutrient requirements for all 51,240 pregnant women and lactating mothers; (iron/folate, calcium lactate, vitamin C) and growth monitoring equipment;
- Strengthening storage of vaccines and providing six vehicles for distribution of vaccines;
- Providing nine ambulances for timely transfer of critically ill patients across conflict-affected areas as part of emergency obstetric care support;
- Printing and distribution of health and nutrition materials;
- Providing 110 motorbikes and 8 vehicles to district health staff for service delivery, monitoring and coordination purposes.

### Water and environmental sanitation (US\$ 2,000,000)

Some 50,000 displaced persons, focusing particularly on children and women, and 75,000 schoolchildren will be reached through the following key activities:

- Construction and renovation of safe water supply and sanitation facilities and promotion of hygiene practices in 300 primary schools for 75,000 children;
- Construction and renovation of safe water supply and sanitation facilities in 100 primary health-care facilities;
- Construction and renovation of safe water supply and sanitation facilities and promotion of hygiene practices in for approximately 50,000 IDPs in 100 communities;
- Establishment of solid waste management systems for approximately 50,000 IDPs in 100 communities;
- Institutional development for sustainable water and environmental sanitation, focusing on operations and maintenance.

### Education (US\$ 4,000,000)

A total of 200,000 displaced and war-affected children and 5,500 teachers and principals will benefit through the following key activities:

- Providing catch-up education for 50,000 children who have missed education due to conflict and displacement;
- Providing 40,000 children with school kits;
- Supporting the establishment of child-friendly schools to cover 400 out of 2,000 schools in the North and East through training of some 5,500 teachers and principals on the child-friendly school concept;
- Providing basic education supplies and furniture to 100 schools to ensure a safe and child-friendly learning and teaching environment;
- Carrying out a needs assessment on institutional gaps in the education sector in the North and East;
- Providing life skills based education, sports and recreation opportunities for some 25,000 adolescents;
- Reconstructing and rehabilitating 300 schools for approximately 75,000 children.

### Protection (US\$ 3,600,000)

Some 65,000 children associated with armed groups as well as those at risk of recruitment are targeted through the following key activities:

- Continued monitoring of the situation of child recruitment, undertaking advocacy for direct and transit centre releases, and supporting reintegration and rehabilitation of more than 2,500 children released and returned home from the LTTE through case-based follow-up by social workers;
- Establishing a school-based psychosocial support programme with a focus on adolescents in 300 schools and 700 children's clubs as an entry point to strengthen coping mechanisms for some 50,000 children and young people;
- Implementing child rights and protection training (including awareness raising on protection issues for communities) with LTTE senior officials, the army, police, teachers and government officials, and 4,000 community-level service providers;
- Providing community-based mine risk education to communities and IDPs through local organizations; collect data on mines/UXO incidents and dangerous areas for the Information Management System for Mine Action; assist the National Institute of Education and Ministry of Education in mine risk education lessons within school curricula; visit/provide basic rehabilitation (physiotherapy and counselling) in hospitals/at home; provide artificial limbs and mobility devices; promote access to education for children with disabilities;
- Supporting alternative care institutions by improving quality of living and care services with the ultimate long-term goal of reintegrating children into their families wherever possible.

## REGIONAL OFFICE FOR SOUTH ASIA (ROSA)

Regional Office financial needs for 2005	
Sector	US\$
Pre-positioning of emergency supplies	500,000
Technical support for emergency preparedness	140,000
Training	60,000
HQ indirect support costs (12 per cent)	84,000
<b>Total *</b>	<b>784,000</b>

\* The total includes a □  
the Executive Board Decision 2003/9 of 5 June 2003.

### Role

In 2005, the UNICEF Regional Office for South Asia (ROSA) will increase its emergency preparedness and response assistance to the country offices in the region, especially those anticipating or involved with complex emergencies and natural disasters, through technical support, staff training and supply inputs. Specific emphasis will be placed in helping offices to fulfill their obligations in accordance with UNICEF's Core Commitments for Children in Emergencies (CCCs), which outline a set of actions in health, nutrition, water and sanitation, education and protection in the event of a humanitarian disaster. Close collaboration with the new Emergency Response Team (ERT), which will become operational at UNICEF HQ in 2005, will be instrumental in furthering the regional office's overall assistance to the countries.

### Coordination/partnership

UNICEF ROSA aims to strengthen existing cooperation with the UK Department for International Development (DfID) and the Australian Agency for International Development (AusAID) as well as develop new partnerships with new donors in order to be able to provide stronger, more reliable and effective assistance to country offices. In 2005, ECHO's assistance, which is being made available as part of its global programme of cooperation with UNICEF, will help further enhance emergency preparedness and rapid response in the region. This will also help improve inter-agency coordination mechanisms at the regional and country levels. In particular, finalization of an inter-agency contingency plan in Nepal and preparedness planning in the Maldives (within the framework of establishing a common UN Office in the country by 2006) will be supported. Support will also be provided for advocacy on issues such as children affected by armed conflict. ROSA will also initiate efforts to establish links with regional actors for improved inter-agency coordination on humanitarian issues. ROSA will use the mechanism and tools of the Action for the Rights of Children in its work on child protection.

In addition to the funds available from DfID and ECHO, some US\$ 784,000 will be needed to adequately undertake the planned activities during 2005.

### Activities

In 2005, UNICEF ROSA will focus on these three key areas and activities:

#### **Technical support**

- Develop an internal mechanism for monitoring and information-sharing of humanitarian developments in the region. Information will be used to alert and help country offices prepare for foreseen emergencies. During major crises, ROSA will support country offices with inter-agency coordination processes, linking with the relevant parts of UNICEF (particularly at HQ), procuring relief supplies and mobilizing resources, including rapid personnel support.

- Assist country offices in preparing or updating their Emergency Preparedness and Response Plan. Priority will be given to the offices in Afghanistan, Bhutan and Pakistan.
- Strengthen ROSA's oversight role through 'spot-check' missions and maintain flexibility (with the new ERT) to provide technical support at very short notice as required by country offices.

#### **Training**

- Expand the Regional Emergency On-the-Job Training (OJT) initiative to at least one other region so that selected UNICEF staff can be trained outside South Asia. The OJT will be offered to both operations and programme staff. A cooperation agreement has already been reached with the UNICEF Regional Office for Western and Central Africa in this regard.
- Conduct country-level emergency preparedness training in selected countries, and regional training of trainers.

#### **Supply pre-positioning**

- Continue the AusAID-funded initiative launched in 2004, by providing two or three country offices with up to US\$ 250,000 per office for the pre-positioning of key emergency supplies at country level. Training will also be provided, with UNICEF Supply Division, for the installation and management of new supply tracking systems in these countries.

## **KEY ACTIONS AND ACHIEVEMENTS IN 2004**

### **Coordination and partnership**

In 2004, ROSA worked with and/or assisted the country offices in the region to work closely with their respective national governments, sister UN agencies, local and international NGOs and other humanitarian and development organizations in undertaking emergency preparedness and humanitarian response for children affected by complex and natural disasters. In particular, technical support was provided to Bangladesh, India, the Maldives and Sri Lanka in updating their Emergency Preparedness and Response Plans (EPRPs).

Specific attempts were also made to enhance trans-regional cooperation within UNICEF. While ROSA participated in emergency trainings organized by other regional offices, including a child soldier's workshop in Bangkok and a Training of Trainers on Humanitarian Principles in Kenya, it also invited staff from other regions to a Training of Trainers on Humanitarian Principles in Nepal in November 2004.

A new partnership was forged with the Australian Agency for International Development (AusAID) in 2004 to further strengthen the emergency preparedness and response capacity of the Regional Office. The AUD 500,000 (US\$ 340,000) funding has helped the Regional Office to undertake emergency preparedness measures, including the pre-positioning of emergency supplies in selected countries, staff training, and research and advocacy on children affected by armed conflict. This grant has supplemented the existing support received from the UK Department for International Development (DfID) for UNICEF's global emergency preparedness enhancement.

### **Actions and achievements**

As part of UNICEF's global efforts to strengthen its emergency preparedness and response capacity, ROSA provided technical, financial and material support to UNICEF country offices in the region to enhance their emergency preparedness and response capacity. Actions focused on three core areas.

First, a strong emphasis was put on training staff on the principles and international legal standards applicable to humanitarian actions.

Second, technical support was provided to country offices involved in humanitarian situations and in reviewing, updating and improving their emergency preparedness plans.

Third, a new initiative was launched to support the pre-positioning of emergency supplies in selected countries to allow rapid humanitarian response.

Key activities during the year included:

### **Training**

- More than 100 staff from UNICEF, UN and NGOs in Nepal were trained on 'humanitarian principles and rules of engagement with Non State Entities (NSEs)'. This training was held in five sessions and in three locations across Nepal: Kathmandu, Nepalgunj and Pokhara. The training aimed at providing UNICEF and other staff with the conceptual framework for engaging with NSEs – and, in this particular case, with Maoist rebels.
- With UNICEF HQ, a Regional Training of Trainers on a 'Principled Approach to Humanitarian Action' (PATH) – covering topics such as international humanitarian law; international refugee law; international criminal law; and guiding principles on internally displaced persons (IDPs) – was held in late November in Pokhara, Nepal, for staff working in Afghanistan, Bangladesh, Bhutan, India, Nepal and Sri Lanka. UNICEF staff working in West and Central Africa, Eastern and Southern Africa, and Middle East and North Africa regions were also invited to attend. The staff will provide training to other staff and partners on humanitarian principles.
- With support from UNICEF HQ Stress Counsellor, a Regional Stress Counselling and Peer Support Volunteers workshop was held in May in Kathmandu, Nepal. During the five-day workshop 18 UNICEF staff coming from six country offices in South Asia (Afghanistan, Bangladesh, India, Nepal, Pakistan and Sri Lanka) were trained to become Peer Support Volunteers (PSVs). The PSVs were provided with basic skills and knowledge to deal with stress and to support staff that experience distress in or out of the office. Following the training a regional support mechanism for PSVs was put in place.

### **Technical support**

- In collaboration with UNICEF's Office of Emergency Programmes (EMOPS), ROSA provided assistance to the Nepal Country Office for the development of a conflict strategy. In compliance with UN humanitarian standards, UNICEF also spearheaded efforts to establish dialogue on humanitarian issues with the Maoist rebels at local level.
- Emergency programme coordination support was provided to the Bangladesh Country Office for its response to the July catastrophic monsoon floods, which included preparation of a UNICEF donor alert and inputs to the UN flash appeal in August. Assistance was also extended to help the country office respond to the floods in Assam in the same month – and for the September immunization campaign in Nepal.
- Country Emergency Preparedness and Response Plans (EPRPs) were updated in Bangladesh (January), India (August) and the Maldives (October), with particular emphasis on making stronger linkages between the EPRP and the annual country programming mechanisms.

### **Supply pre-positioning**

- Through a new initiative funded by the Australian Government, ROSA managed the procurement and pre-positioning of emergency supplies (including health supplies, water purification tablets, blankets and tarpaulins) worth US\$ 185,000 in Nepal and Sri Lanka. These two offices were selected on the basis of a review of the countries' most urgent needs and their response capacities, with the aim of further building their overall response systems. UNICEF Supply Division was also involved in the selection of the beneficiary countries and identification and procurement of supplies.