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Annual report on UNICEF humanitarian action

Summary

Globally, humanitarian needs continued to grow in 2018. The number of people targeted to receive United Nations-led humanitarian assistance increased from 77 million in 2014 to 101 million in 2018;^a and the average humanitarian crisis now lasts for more than nine years.^b Conflict remained a primary driver of humanitarian need, with more countries embroiled in violent internal or international conflict than at any other time in the past 30 years^c and one in five children living in an area affected by conflict.^d

In 2018, UNICEF and partners responded to 285 humanitarian situations in 90 countries, reaching millions of children with life-saving, intersectoral interventions. This included five Level 3 emergencies and six Level 2 emergencies that absorbed a significant proportion of the organization's human and financial resources.

This report provides an overview of the UNICEF humanitarian response in 2018, including key challenges and how the organization is acting on the lessons identified.

^a Office for the Coordination of Humanitarian Affairs, 'Global Humanitarian Overview 2019', 2018.

^b Ibid.

^c Organisation for Economic Co-operation and Development, *States of Fragility 2018*, Paris, 2018.

^d Save the Children, *Stop the War on Children: Protecting children in 21st century conflict*, Germany, 2019.

* E/ICEF/2019/9.

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I. The humanitarian situation in 2018¹

1. Approximately 420 million children – almost one fifth of children worldwide – are living in areas affected by conflict² – in countries such as Afghanistan, the Central African Republic, the Democratic Republic of the Congo, Iraq, Libya, Mali, Nigeria, Myanmar, Somalia, South Sudan, the Syrian Arab Republic, Ukraine and Yemen. Many crises have resulted in mass population displacement, with nearly 69 million people on the move around the world in 2018.³

2. In the most devastating conflicts, children have become front-line targets of war. The number of verified grave violations against children in conflict has nearly tripled since 2010, though the actual numbers are likely higher.⁴ This includes the killing and maiming of children, the use of children by armed forces and groups, sexual violence against children, abduction of children, denial of humanitarian access, and attacks against schools and hospitals. In Somalia in 2018, for example, over 5,200 children were reportedly victims of violence committed by parties to conflict – primarily abduction and recruitment and use by armed forces and groups, a 5 per cent increase since 2017.⁵ In Yemen, the United Nations verified the killing and maiming of over 1,680 children in ground attacks and aerial bombardments – a 28 per cent increase over 2017.⁶

3. Where conflict has given rise to population movements, children have been separated from their families, detained without reason and denied access to basic services. In Ethiopia, Somalia, South Sudan and Uganda, millions of people – including over 3 million children – have been displaced from their homes due to violence and insecurity. Countries in Latin America and the Caribbean are hosting at least 2.4 million Venezuelan refugees and migrants, and the high and unpredictable migration flows have stretched the capacities of already limited services and structures in host communities. Forced displacement – such as the 730,000 Rohingya forced to flee Myanmar into Bangladesh – is putting children at greater risk of violence, abuse and exploitation.

4. In conflict-affected countries, food insecurity and extreme weather events have compounded the effects of crisis and heightened the risk of malnutrition and disease outbreaks. In the Democratic Republic of the Congo, where violence has escalated significantly, in 2018, some 12.8 million people were at risk of food insecurity and acute malnutrition, representing a 30 per cent increase since 2017. Deadly outbreaks of cholera and Ebola have further impacted conflict-affected people in the country, creating crises within crises.

5. Natural disasters have also continued to generate significant human costs and damage to infrastructure. In East Asia and the Pacific, a rising number of extreme

¹ Unless otherwise noted, all country-level statistics, including on the humanitarian situation and the UNICEF response, are derived from UNICEF humanitarian situation reports for 2018 and the respective country chapters in *Humanitarian Action for Children 2019*.

² Save the Children, *Stop the War on Children*.

³ Sixty-nine million people have been forcibly displaced, including 40 million who are internally displaced, 25.4 million who are refugees and 3.1 million who are asylum seekers. Office of the United Nations High Commissioner for Refugees (UNHCR), *Figures at a Glance*, 2019.

⁴ Save the Children, *Stop the War on Children*.

⁵ Information verified by the United Nations in Somalia (2018).

⁶ Information verified by the United Nations in Yemen (2018).

weather events, such as typhoons, cyclones and floods, have struck countries across the region in 2018.

6. As humanitarian needs continued to rise in 2018, reaching children in crisis became even more challenging. Humanitarian access remained constrained in the most volatile contexts, and humanitarian needs continued to outstrip the resources available to reach the most vulnerable. For example, in Mali, due to insecurity in the northern and central regions and constrained resources for humanitarian action, only 35 per cent of targeted children accessed education services.

II. UNICEF humanitarian response in 2018

A. Global response

7. In 2018, UNICEF and partners responded to 285 humanitarian situations in 90 countries, compared to 337 situations in 102 countries in 2017. Forty-three per cent of these countries responded to situations affecting more than 1 million people. Even as the number of situations declined from 2017, protracted crises have become increasingly complex, with some conflict-affected countries facing emergencies within emergencies and heightened risks to already vulnerable children. In response, UNICEF has continued to leverage its long-standing comparative advantages, including having a field presence before, during and after emergencies; delivering multisectoral support; harnessing its vast network of Government, civil society, community and private sector partners; and leading/co-leading the global water, sanitation and hygiene (WASH), nutrition and education clusters and the child protection area of responsibility.

8. In 2018, UNICEF focused on delivering its humanitarian response in line with the UNICEF Strategic Plan, 2018–2021 and the Core Commitments for Children in Humanitarian Action. This included a renewed emphasis on increasing the reach and quality of humanitarian assistance; recognizing the profoundly different and gendered impacts that crises have on women and men, girls and boys; and advocating for the centrality of protection.

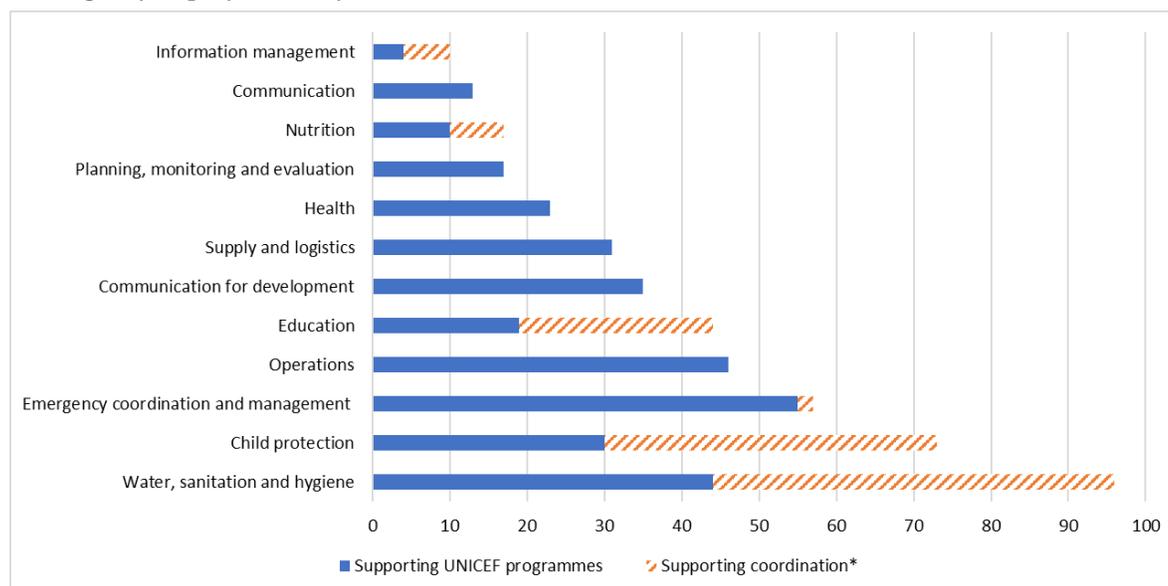
9. UNICEF continued to improve efficiency and effectiveness for humanitarian results in 2018, in line with the Strategic Plan and ongoing humanitarian and development system reforms. This meant strengthening the coherence and complementarity between humanitarian action and development programming; enhancing risk-informed programming; expanding support for local and national partners; increasing the use and inter-agency coordination of cash-based programming with the Office of the United Nations High Commissioner for Refugees (UNHCR) and the World Food Programme (WFP);⁷ improving joint needs assessment, monitoring and reporting; focusing more systematically on community engagement and accountability to affected populations; strengthening the normative frameworks around humanitarian access and adherence to international humanitarian principles; strengthening humanitarian leadership through learning and capacity-building; and enhancing the humanitarian response for children with disabilities.

⁷ UNICEF has implemented humanitarian cash transfer programmes in collaboration with the World Food Programme (WFP) in Bangladesh, Dominica, Malawi, Sierra Leone, Somalia and Turkey; and has also worked with UNHCR and WFP to jointly implement cash transfers in Jordan and Lebanon.

10. Globally, UNICEF and partners delivered results for millions of children affected by emergencies in 2018,⁸ reaching 3.6 million children with psychosocial support; more than 43 million people with access to safe water; 3.4 million children with treatment for severe acute malnutrition (SAM); and 19.6 million children aged 6 months to 15 years with measles vaccination. UNICEF and partners also reached 6.9 million school-age children with formal and non-formal education, including early learning, and 2.4 million households with cash assistance.⁹

11. In 2018, 359 staff completed 461 emergency (surge) deployments, meeting 74 per cent of total requests.¹⁰ The year's deployments totalled 40,389 days with an average mission length of 87 days. The largest share of deployments (63 deployments, 14 per cent of the total) supported the humanitarian response to the Rohingya crisis in Bangladesh; followed by the Indonesia tsunami response (45 deployments); and the response to the earthquake in Papua New Guinea (32 deployments). The bulk of deployments provided personnel for WASH, child protection and emergency coordination and management.

Figure I
Emergency deployments by functional area, 2018



* Includes rapid response teams, standby partners and UNICEF deployments in support of cluster coordination.

⁸ Country-level data may not reflect more up-to-date sources that will be ready later in 2019, such as the consolidated emergency reports or the *UNICEF Annual Results Report 2018 – Humanitarian Action*.

⁹ Of these 2.4 million households supported globally with cash assistance, 1.4 million households in Yemen were reached in partnership with the World Bank.

¹⁰ Forty-seven per cent of the total number of people deployed were UNICEF staff members. The remainder were from external surge mechanisms, including United Nations volunteers, standby partners and individual contractors.

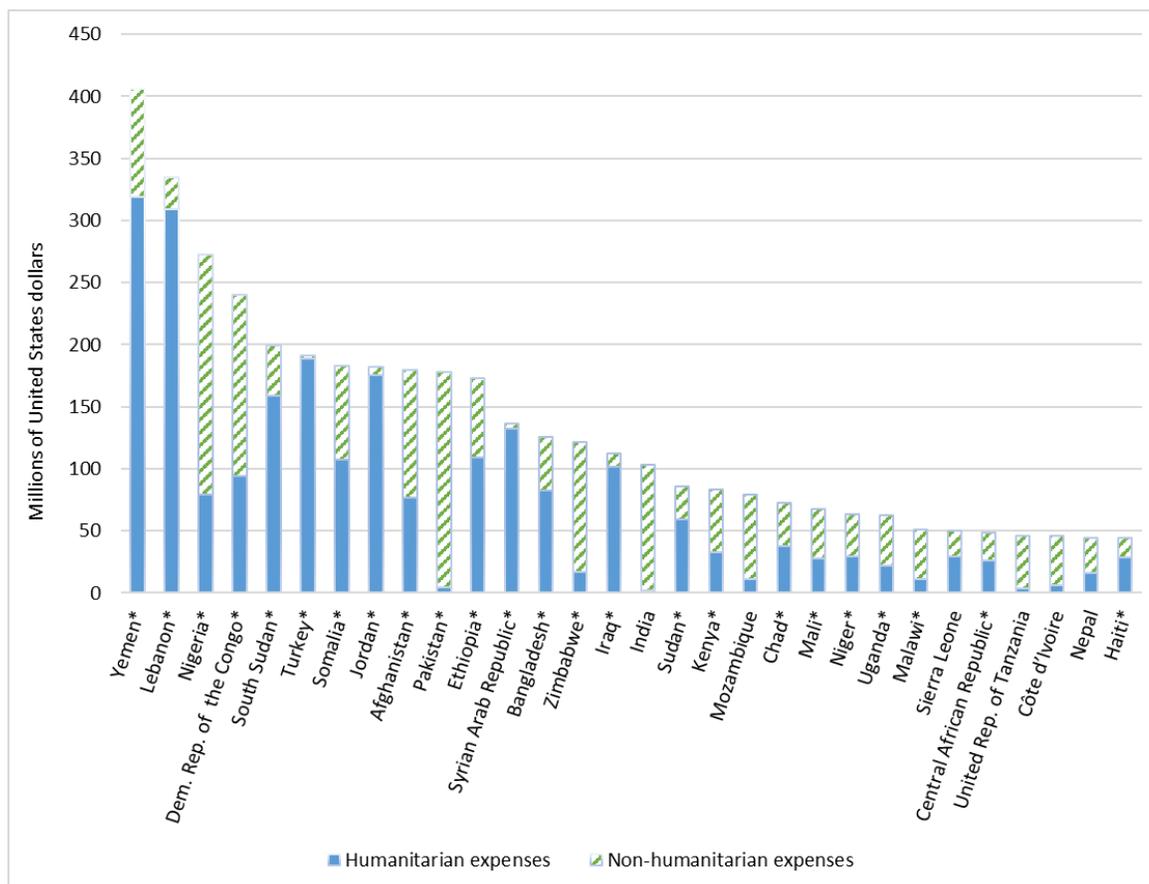
12. In 2018, UNICEF procurement for emergencies reached \$412.6 million globally,¹¹ with 96 per cent (\$397.5 million) going to Level 2 and Level 3 emergencies. Supplies were provided to 53 countries and territories preparing for and/or responding to emergencies. Nearly 85 per cent of all international emergency orders were delivered on time. The UNICEF Supply Division provided direct support through 30 staff deployments to emergency locations,¹² including the crises in the Syrian Arab Republic, Yemen and the Horn of Africa. The largest component of total UNICEF emergency supplies by value in 2018 was for vaccine and biological products worth \$76.4 million.

13. In 2018, humanitarian action remained central to the work of UNICEF in the field. Fifty per cent (\$2.7 billion) of all UNICEF expenses supported humanitarian action during the year. In Iraq, Jordan, Lebanon, the Syrian Arab Republic and Turkey, more than 90 per cent of country-level expenses were classified as humanitarian. Out of the 30 UNICEF country offices with the largest overall expenses, 24 were included in the 2018 Humanitarian Action for Children appeal. These 30 offices comprised 74 per cent of the organization's total expenses, both humanitarian and non-humanitarian.

¹¹ This total includes all programme supplies going to ongoing Level 2 and Level 3 emergencies; all programme supplies for any new Level 2 or Level 3 emergencies, from the date that they were declared; specific relevant orders for the countries in which only a region or part of the country is in an emergency; and specific supplies flagged as "emergency" in countries facing Level 1 crises. Of the \$412.6 million, \$247.3 million is other resources-emergency.

¹² These 30 staff deployments are included in the overall 462 emergency deployments mentioned in paragraph 11.

Figure II
Top 30 country offices – 2018 expenses (including all funding types)



* UNICEF country offices with Humanitarian Action for Children appeals in 2018.

B. Results from key humanitarian responses

14. In 2018, the UNICEF humanitarian response included five Level 3 emergencies in Bangladesh, the Democratic Republic of the Congo (Équateur province and the North Kivu and Ituri regions); Nigeria, the Syrian Arab Republic and Yemen; as well as six Level 2 emergencies in the Bolivarian Republic of Venezuela, Cameroon, the Central African Republic, Iraq, South Sudan, and the Syrian refugee-hosting countries (Egypt, Iraq, Jordan, Lebanon and Turkey).¹³ For example, in response to the crisis in the Bolivarian Republic of Venezuela and the displaced and mobile populations in Latin America and the Caribbean, UNICEF and partners established 14 child-friendly spaces in two cities in Brazil that reached more than 3,000 children; and worked through mobile birth registration teams to provide nearly 8,500 previously unregistered people with documentation for their children. UNICEF also responded to several outbreaks of cholera/acute watery diarrhoea and measles and to forgotten humanitarian situations, such as the climate and health-related emergencies in Angola and Madagascar.

¹³ Two Level 3 crises were downgraded to Level 2 emergencies in 2018: South Sudan and Syrian refugee-hosting countries. Two Level 2 crises ended in 2018: the Horn of Africa drought response and the Lake Chad Basin response.

Rohingya crisis in Bangladesh and Myanmar

15. Since August 2017, more than 730,000 Rohingya, including 400,000 children, have fled violence in Myanmar and settled in the Cox's Bazar district of Bangladesh. While the Government and humanitarian partners have increased access to basic services over the past year and a half, the refugees remain highly dependent on short-term aid and are living in precarious conditions, such as congested camps where the risk of disease outbreak is high.

16. In 2018, UNICEF extended life-saving services to more than 1.2 million people affected by the crisis in Bangladesh, including more than 145,000 school-age children who accessed non-formal education with UNICEF support. UNICEF coordinated with the Government and partners to take preparedness and risk-mitigation measures, including chlorination of water points, hygiene communication, strengthening or relocating facilities at risk of flooding or landslides, and establishing mechanisms to reunite children separated during extreme rainfall. These and other preparedness investments helped to mitigate the impact of the monsoon in camps, with no major disruption of life-saving services, to control disease outbreaks and to limit deaths and injuries.¹⁴

17. To address the ongoing congestion in Cox's Bazar, UNICEF, in coordination with the Government, communities and camp management, is advocating for better utilization of land for basic services. Limited partner capacity is being addressed through training on protection, the harmonized approach to cash transfers, prevention of sexual exploitation and abuse and gender-based violence.

18. Across the border in Myanmar, 600,000 Rohingya continue to face significant challenges, including lack of freedom of movement, discrimination and limited access to basic services.¹⁵ In 2018 with UNICEF support, 75,000 women and children gained access to health care, primarily through mobile health services; more than 55,000 people gained access to safe drinking water; nearly 125,000 people accessed psychosocial support; and nearly 70,000 school-age children received education and recreational materials. However, access constraints continued to limit the coverage and quality of humanitarian efforts – as evidenced by the low achievement rate for treating children with SAM (30 per cent). In 2019, UNICEF will expand its partnerships in high-burden areas to more effectively reach those in need.

Democratic Republic of the Congo

19. In 2018, the volatile political and humanitarian situation in the Democratic Republic of the Congo further amplified the intensity of the crisis. Some 12.8 million people, including 7.5 million children, were in need of humanitarian assistance and protection, representing a 30 per cent increase from 2017.¹⁶ This was due in part to the increased needs of 670,000 returnees from Angola into the Kasai regions, as well as two Ebola outbreaks: the first, in the Équateur province, which ended 11 weeks after its declaration in May 2018, thanks to the strong mobilization of the Government and humanitarian partners; and the second outbreak, which at the time of drafting this

¹⁴ United Nations Development Programme, *Extreme weather and disaster preparedness in the Rohingya refugee response: Monsoon season 2018 lessons learnt*, Dhaka, January 2019.

¹⁵ United Nations Children's Fund (UNICEF), 'Overview', *Humanitarian Action for Children 2019*, New York, January 2019.

¹⁶ Office for the Coordination of Humanitarian Affairs (OCHA), Democratic Republic of the Congo: Humanitarian response plan 2017–2019: 2019 update, December 2018.

report was ongoing and the country's largest ever, with 537 confirmed cases as of the end of 2018.

20. Working with the World Health Organization and partners, the UNICEF response to the Ebola outbreak focused on five areas: risk communication and community engagement; infection prevention and control; case management and psychosocial care; education; and nutrition. Despite the complexity of the country situation, UNICEF reached 9.6 million people with Ebola prevention messages; and more than 700 health facilities and 700 schools received WASH services. Over 1,000 children admitted to Ebola treatment centres received psychosocial and nutritional support; and all 908 orphans and separated children identified received psychosocial support and appropriate care, including non-food items kits and food assistance.

21. UNICEF responded in the Kasai regions with a multisectoral package of interventions, reaching almost 600 children with psychosocial support and recreational activities through mobile child-friendly spaces, and 347 unaccompanied and separated children with temporary care assistance and foster care. In 2018, almost 5,000 households received unconditional cash grants, and 50,000 people, including 28,000 children, received safe drinking water daily.

22. Challenges to the humanitarian response include access and security constraints, as well as decreasing funding. The active participation of community members, along with UNICEF advocacy with the Government, local authorities and other United Nations agencies, for humanitarian access facilitated assistance to affected populations in remote and insecure areas. A lesson learned for UNICEF is the need to maintain the provision of basic services – in addition to controlling disease outbreaks – to build community acceptance and to reinforce this strategy so that outbreak control is better accepted within communities in the future.

Nigeria

23. Protracted violence and conflict-related displacement have had a devastating impact in northeast Nigeria. Some 1.8 million people are displaced due to conflict, and an average of 4,000 people – mostly women and children – are newly displaced every week, up from 1,400 in 2017. The cumulative impacts of violence and population movements have weakened the coping capacities of communities, putting over 1 million children at risk of acute malnutrition.

24. With the generous support of donors, UNICEF and partners treated nearly 234,000 children suffering from SAM in 2018. In December alone, more than 9,300 children with SAM received treatment in 509 UNICEF-supported treatment facilities in the three conflict-affected north-eastern states. These results were enabled by community-based nutritional screening of children aged 6 to 59 months, which both improved the early detection of children with SAM and the reach of infant and young child feeding messages.

25. UNICEF was unable to achieve its targets in other aspects of the response, however, due to limited humanitarian access, the deterioration of the humanitarian situation in some areas and a lack of funding.¹⁷ In the health sector, lack of funds prevented UNICEF from rehabilitating damaged health infrastructure and purchasing equipment to improve the quality of care. For water and sanitation, service coverage was insufficient to meet the needs in displacement camps. In 2019, UNICEF will

¹⁷ As of 31 December 2018, only 36 per cent of the 2018 Humanitarian Action for Children appeal for Nigeria was funded.

strengthen its partnerships to improve service delivery in the north-east, utilizing strategies such as systems strengthening in areas where security has improved and the population has returned.

South Sudan

26. The humanitarian situation in South Sudan remains dire, with continued violence, severe food and nutrition insecurity, economic upheaval and disease outbreaks. Grave violations against children continue to be of critical concern, and more than 2.2 million children are out of school. However, accessing these populations remains challenging: an estimated 1.5 million people are in areas that are hard to reach due to insecurity and operational interference.

27. UNICEF worked closely with civil society organizations and other United Nations agencies in 2018 to maximize service provision in hard-to-reach areas and deliver results. Through the work of UNICEF and partners, nearly 560,000 learners were enrolled in over 900 schools, including 460 newly established temporary learning spaces and 38 rehabilitated classrooms, where students were provided with education services in safe and protective environments. In hard-to-reach locations, the integrated rapid response mechanism was used to reach children and women with a multisectoral package of services, including 38,000 children (43 per cent girls) with education services.¹⁸ UNICEF also worked closely with the United Nations Mission in South Sudan and the National Disarmament, Demobilization and Reintegration Commission to facilitate the release of nearly 1,000 children associated with armed groups, including 265 girls, and their enrolment in reintegration programmes.

28. The limited infrastructure and capacity of state systems and geographical isolation of many communities due to conflict, as well as lack of access due to insecurity, resulted in constrained programme implementation, monitoring, evaluation and reporting. UNICEF and partners operated in a context in which there were at least 92 reported access incidents in 2018, which limited sustained access to an estimated 400,000 people, mostly women and children, while the humanitarian community at large faced over 800 access incidents.

29. In 2019, UNICEF will continue to deliver a timely and effective integrated package of services and will expand its focus to include recovery and resilience programming, including basic social service delivery, community-based system strengthening, accountability to affected populations, and support for durable solutions for displaced populations.

Syrian Arab Republic

30. The year 2018 was the deadliest twelve-month-period for children in the Syrian Arab Republic, with more than 1,100 children killed due to violence.¹⁹ By year end, there were 13.1 million people in need of assistance, including 5.6 million children. Humanitarian access remained extremely constrained, particularly in hard-to-reach and besieged areas.

31. Cross-border operations remained vital to delivering aid to those most in need, particularly in areas controlled by armed opposition groups. Working through cross-

¹⁸ This includes the distribution of education supplies, training of teachers on teaching methodology, life skills and psychosocial support.

¹⁹ UNICEF, '2018 Deadliest Year Yet for Children in Syria as War Enters 9th Year', New York, 11 March 2019.

border efforts, humanitarian convoys and programmes from within the country, UNICEF reached over 4.6 million people with improved and sustained access to safe water and equipped over 300 schools with WASH facilities, benefiting over 200,000 children. UNICEF and partners also reached 2.1 million people in besieged and hard-to-reach areas with a multisectoral package of assistance, including health, nutrition, water and sanitation supplies.

32. To reach vulnerable Syrians, UNICEF issued regular public advocacy messages on child protection, health, nutrition and education through a range of media. This was implemented through 15 inter-agency cross-line convoys that reached nearly 334,000 people, including an estimated 141,300 children. In November, UNICEF contributed to the first inter-agency mission to reach the Rukban makeshift settlement from within the Syrian Arab Republic, which reached more than 13,000 displaced people with essential health and nutrition supplies.

33. UNICEF will continue to employ these strategies in 2019 to address humanitarian access constraints where appropriate. To support the restoration of services in newly accessible areas and in camps, UNICEF has optimized the use of third-party monitoring and facilitators to conduct timely multisectoral assessments to identify the main needs and inform programming responses accordingly. These facilitators are critical to supporting on-the-ground monitoring and data collection for effective and evidence-based programme delivery.

Syrian refugees

34. Now in its eighth year, the Syrian refugee crisis remains the largest displacement crisis in the world, with over 5.6 million registered refugees, including more than 2.5 million children living in Egypt, Iraq, Jordan, Lebanon and Turkey. Despite the efforts of host Governments to provide the refugees with access to public services, demand continues to exceed the capacity of institutions and infrastructure to respond.

35. UNICEF continued to meet the immediate humanitarian needs of Syrian refugees while continuing to make development gains. This includes supporting Governments and partners to deliver essential services to the most vulnerable children in refugee camps and host communities; using cost-efficient and sustainable approaches wherever possible; and building the capacities of national institutions and community organizations.

36. For example, in Jordan and Lebanon, UNICEF, together with UNHCR and WFP, strengthened the use and coordination of cash-based programming to get children back to learning. In Lebanon, the linkages between cash-based social protection and adolescent programming were strengthened to support an integrated, education-based inclusive response addressing multiple deprivations affecting children's well-being and learning outcomes. An impact evaluation found that children receiving these cash grants benefited from an additional month of school attendance annually.

37. In Jordan, UNICEF sought to improve its engagement with affected people by strengthening its feedback and complaint mechanisms for a household water and wastewater network in the Za'atari refugee camp. Between May and December 2018, camp residents sent more than 22,000 related complaints to the hotline. To better track and respond to feedback, in December 2018, UNICEF launched the Water Network Data Initiative, an application that enables real-time recording of complaints, faster data analysis and sharing and monitoring of the response by relevant parties.

38. The protracted presence of Syrian refugees has exacerbated pre-existing socioeconomic disparities in host countries and fuelled local tensions. UNICEF and

partners will continue to meet the humanitarian needs of both refugees and vulnerable host communities, while strengthening the capacities of national and subnational service delivery systems. This will include promoting the transition to more sustainable and cost-effective WASH solutions; strengthening national systems, including for education; and providing young people and families (including children with disabilities) with social protection services.

Yemen

39. The humanitarian crisis in Yemen remains one of the largest in the world – 80 per cent of the population, or 24 million people, require life-saving assistance and protection.²⁰ With over half of the country's health facilities not functioning and 17.3 million people in urgent need of safe water,²¹ the population is at heightened risk of disease outbreaks, including cholera and diphtheria.

40. In 2018, UNICEF and partners provided an integrated cholera response in Yemen, incorporating health, WASH and community engagement prevention and response activities targeting 117 high-risk areas. To overcome the health system challenges, UNICEF deployed rapid response teams to reach communities with suspected cholera cases with hygiene kits, household water treatment tablets and hygiene-awareness sessions in 20 governorates; and some 8,000 health workers – including those operating through mobile teams – received financial incentives to provide health services in hard-to-reach areas. With UNICEF support, nearly 5 million Yemenis gained access to safe drinking water and over 700,000 people in high-risk/high-priority areas received cholera vaccination. These activities contributed to curbing one of the largest cholera/acute watery diarrhoea outbreaks ever by helping to reduce the number of suspected new cases from more than 1 million in 2017 to 370,000 in 2018.²² This is particularly significant, as the cholera vaccination campaign was conducted against the backdrop of an extremely volatile situation and the escalation of hostilities in the Al Hudaydah governorate. Additionally, UNICEF provided cash assistance to 1.4 million of the most vulnerable households in Yemen, in partnership with the World Bank.

41. Still, physical and procedural access (e.g., visa restrictions for international staff and delays in approval of partner agreements) remained a key constraint to the implementation of the humanitarian response in 2018. Economic instability and weakened national institutions also challenged the delivery of much-needed services. In 2019, UNICEF will continue to focus on improving access to primary health care for conflict-affected Yemenis.

Gender in humanitarian response

42. Gender plays a significant role in the different protection risks that girls and boys face in emergencies. Adolescent girls are at heightened risk of human rights violations, such as gender-based violence, and emergencies may intensify the existing barriers they face – to education, health care and other essential services. Gender considerations are therefore an integral aspect of the UNICEF response in emergencies.

43. For example, in South Sudan, UNICEF took steps to improve the quality and gender sensitivity of its efforts to identify and release children associated with armed

²⁰ OCHA, *Yemen: 2019 Humanitarian Needs Overview*, 2018.

²¹ Ibid.

²² UNICEF, *Yemen Country Office Annual Report 2018*, 2019.

groups. UNICEF adapted its assessment procedures for identifying girls associated with such groups, which resulted in a larger proportion (28 per cent) of the children officially released in 2018 being girls. These girls were referred for specialized case management services to address their health, psychosocial and development needs.

44. In Somalia, UNICEF is working with conflict-affected communities to help to prevent gender-based violence and respond to victim's needs through the Communities Cares project. A 2018 evaluation of the project found that, since its pilot in 2016, there had been a 22 per cent reduction in the belief that women and girls should not report rape; and a 14 per cent decrease in the belief that it is appropriate for a husband to discipline his wife using violence.

45. In Cameroon, the new Emergency Response Team member focusing on gender worked to establish a gender-focused field presence in crisis-affected areas by integrating gender considerations into Rapid Response Mechanism activities (e.g., menstrual hygiene management, and gender-sensitive infant and young child feeding) and mobile maternal care services. In addition, menstrual hygiene management has been integrated into the WASH programme and nearly 3,000 women and girls have received kits and benefited from related sensitization.

46. UNICEF is also advancing a robust agenda across the organization to prevent and respond to sexual exploitation and abuse in all humanitarian settings. In 2018, the UNICEF Executive Director was appointed Inter-Agency Standing Committee Champion for Protection from Sexual Exploitation and Abuse and Sexual Harassment, and the organization committed \$11 million to strengthen and scale up these services and systems in 16 emergency-affected countries.²³ UNICEF has also revised its programme cooperation agreements so that partners working with crisis-affected women and children uphold the highest standards in prevention of sexual exploitation and abuse. For example, in Somalia, UNICEF implemented a prevention of sexual exploitation and abuse programme to strengthen staff capacity, complaints mechanisms and survivors' access to assistance. Fifty-two inter-agency focal points and 30 sectoral focal points²⁴ in Somalia were trained and supported to conduct safety audits at 47 sites, to identify risks of sexual exploitation and abuse and ensure the accessibility of complaints mechanisms.

Reaching children with disabilities in emergencies

47. During conflicts and disasters, children with disabilities face disproportionate risks and are more likely to be left behind, abandoned or neglected.²⁵ Disability-inclusive humanitarian action has therefore become a priority for UNICEF under the Strategic Plan. In 2018, 59 UNICEF country offices reported conducting specific work on children with disabilities in humanitarian action, a significant increase from 21 offices in 2017.

48. In the Syrian Arab Republic, a targeted cash transfer programme for the families of children with disabilities reached 9,680 children in 2018. UNICEF is also working to include children with disabilities in all child protection services in the Syrian Arab

²³ Bangladesh, the Central African Republic, the Democratic Republic of the Congo, Ethiopia, Haiti, Iraq, Jordan, Libya, Mali, Myanmar, Nigeria, Somalia, South Sudan, the Sudan, the Syrian Arab Republic and Yemen.

²⁴ Focal points came from the health, nutrition, shelter, camp coordination and camp management clusters.

²⁵ UNICEF, *The State of the World's Children 2013: Children with disabilities*, UNICEF, New York, May 2013.

Republic, including mental health and psychosocial support, child protection awareness and mine risk education. As part of this effort, UNICEF has included requirements for the design of inclusive and accessible programmes and services for children with disabilities in its agreements with implementing partners.

49. Similarly, in Kenya, inclusive, child-friendly spaces in refugee camps were accessed by more than 6,000 children with disabilities in 2018. In Afghanistan, 66 schools built in the Central Highlands in 2018 include accessible features such as ramps and specially designed toilets.

C. Resource mobilization²⁶

50. At the beginning of 2018, UNICEF requested \$3.6 billion for its Humanitarian Action for Children appeal. By December, the appeal had increased to \$3.8 billion – the organization’s largest-ever funding request for humanitarian action. The increase was triggered by new natural disasters, the regional migration crisis in Latin America and the Caribbean, and the deteriorating situations in several conflict-affected and fragile countries. Level 3 emergencies continued to represent over half of UNICEF funding requirements for the year, at 59 per cent.

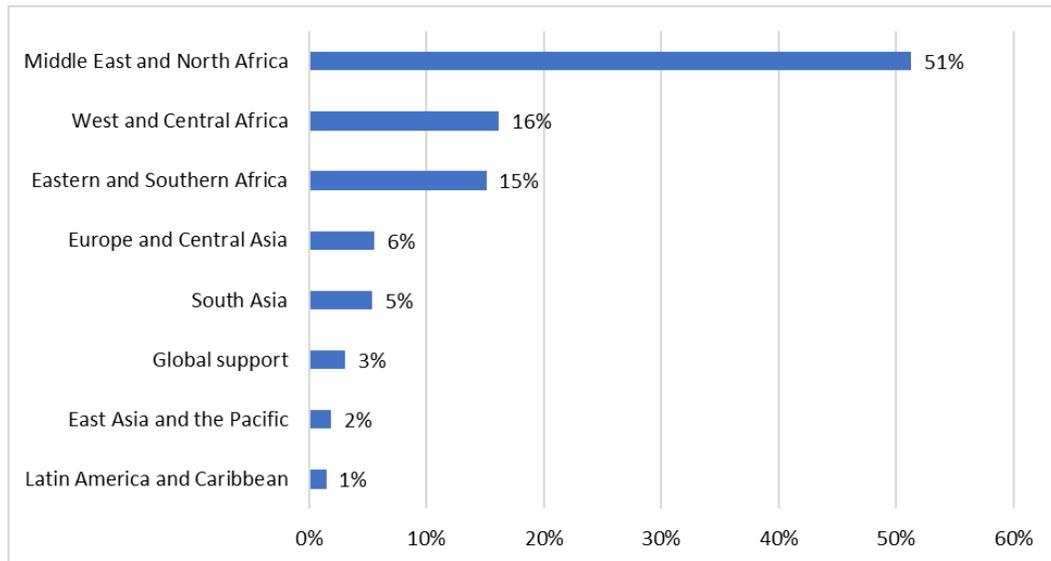
51. Donors responded generously to the high level of need. Reported contributions against the 2018 humanitarian appeal reached \$2 billion, including \$1.9 billion from the public sector (92 per cent of total funding received) and \$162 million from the private sector (8 per cent of total funding received). Despite this generosity, the Humanitarian Action for Children funding gap hovered at 46 per cent in 2018, leaving many crisis-affected children without needed assistance and protection. The majority of the funds received – 92 per cent – were earmarked, similar to the 2017 trend.

52. Humanitarian funding levels remained insufficient compared to needs and focused on a few large and protracted crises, such as those in the Democratic Republic of the Congo, South Sudan, the Syrian Arab Republic and Syrian refugee-hosting countries and Yemen. These four emergencies accounted for 60 per cent of all UNICEF humanitarian funding received in 2018. Seventy-seven per cent of funding went to 10 emergency appeals, while the remaining 33 appeals received a combined portion of only 23 per cent. The five most underfunded emergencies (proportional to needs) were Angola, Madagascar, the Congo, Burkina Faso and Uganda, which accounted for only 1 per cent of all funding received in 2018.

53. Similar to 2017, the Middle East and North Africa region received the largest proportion of funding while East Asia and the Pacific, followed by the Latin America and Caribbean region received the least.

²⁶ All figures represented in the resource mobilization section are based on contributions received in 2018.

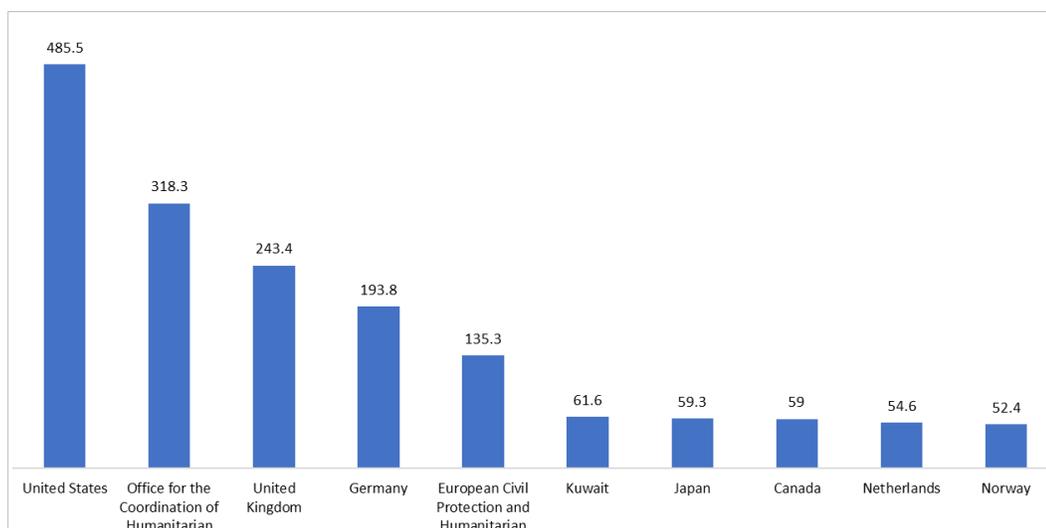
Figure III
**Humanitarian contributions (other resources, emergency) received in 2018,
 by region**



Note: due to rounding, the percentages in the chart do not add up to 100 per cent.

54. The majority of the humanitarian funding received – 67 per cent of the total – came from five resource partners whose contributions ranged between \$135 million and \$486 million. The top 10 donors to UNICEF humanitarian action contributed a total of \$1.7 billion, or 81 per cent of all emergency funding received.

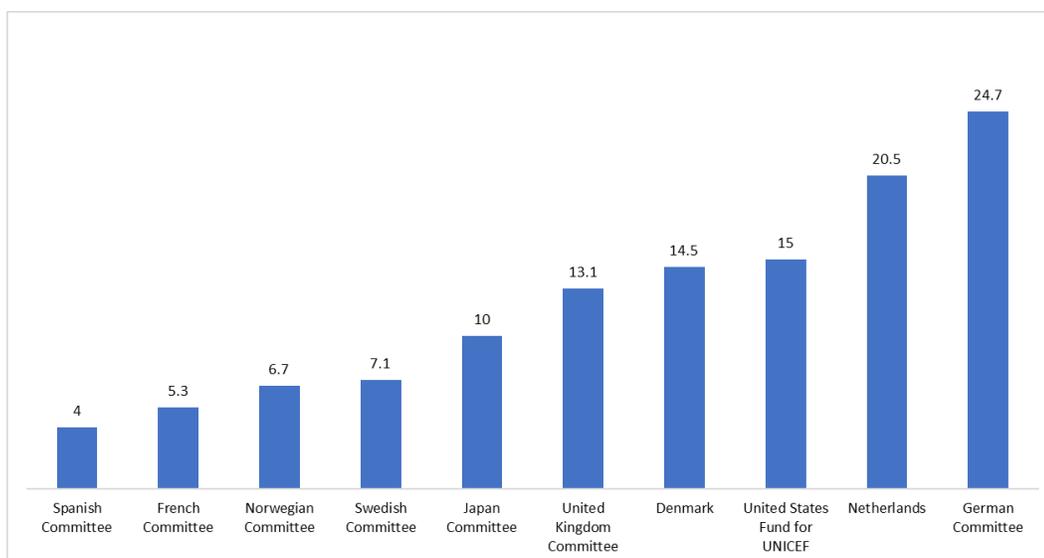
Figure IV
Top 10 sources of humanitarian funding in 2018
(in millions of United States dollars)



* The Office for the Coordination of Humanitarian Affairs total includes contributions received from the Central Emergency Response Fund, country-based pooled funds, and the pass-through contribution for Yemen from Saudi Arabia and the United Arab Emirates.

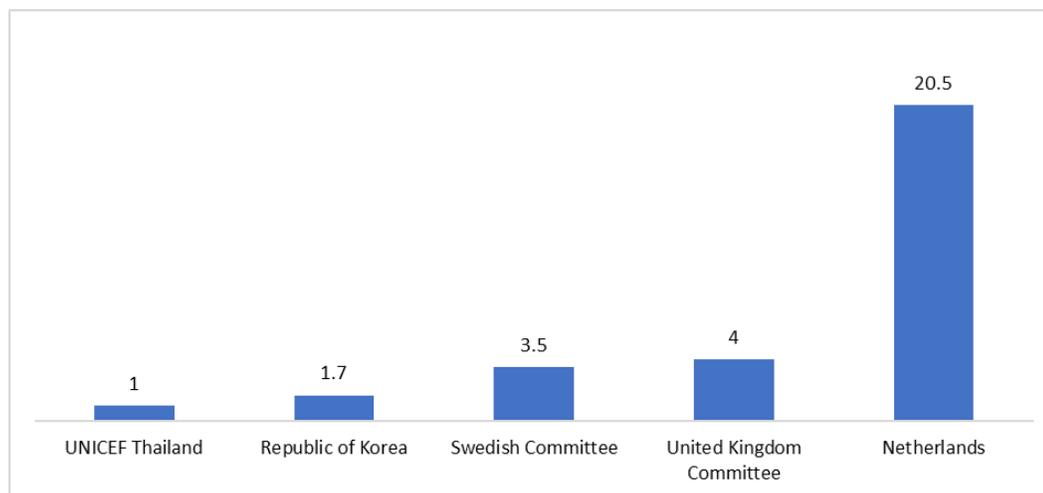
55. Thematic humanitarian funding made up 8 per cent all emergency contributions in 2018, for a total of \$154 million. Only 23 per cent of this amount was global humanitarian thematic funding (GHTF), the most flexible form of funding available after regular resources. Compared to the overall emergency funds received, GHTF stood at only 2 per cent.

Figure V
Top 10 sources of thematic humanitarian funding in 2018
(in millions of United States dollars)



56. The Government of the Netherlands remained the GHTF champion for UNICEF in 2018 (see figure VI below) and 24 other resource partners joined them in providing the most flexible resources for emergency response.

Figure VI
Top 5 sources of global humanitarian thematic funding in 2018
 (in millions of United States dollars)



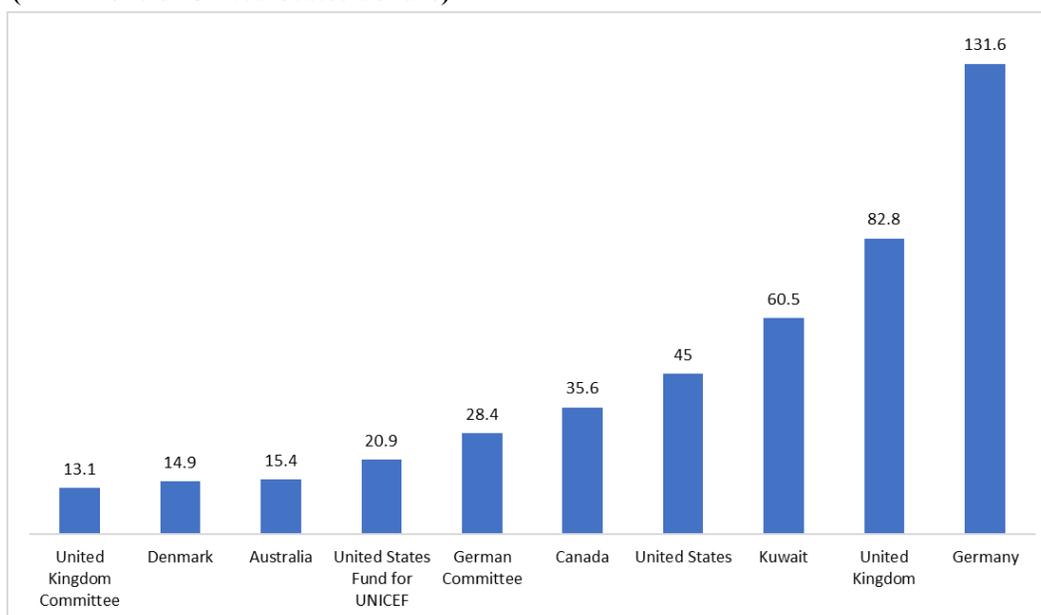
57. While GHTF represented a relatively low percentage of humanitarian funding, it allowed UNICEF to make strategic and timely allocations to country offices most in need, particularly those lacking donor support and visibility. For example, in Papua New Guinea, GHTF was used to provide immediate life-saving assistance to earthquake-affected populations, while in Afghanistan, the Sudan and countries affected by the Venezuelan migrant crisis, GHTF was used to scale up crucial programmes.

58. UNICEF humanitarian programmes continued to benefit from the Central Emergency Response Fund (CERF) and country-based pooled funds in 2018, which comprised 9 per cent of all humanitarian funds received. With the largest annual CERF allocation ever of \$132.1 million, UNICEF was able to provide timely and life-saving support in 34 countries through the rapid response window, and in 16 countries through the underfunded window. Following the trends of the past several years, UNICEF received 26 per cent of CERF allocations globally and remained the second-largest recipient agency. UNICEF country offices received funding allocations from all 17 country-based pooled funds that were active in 2018. At the end of the year, the total combined funding amounted to \$48 million.

59. In 2018, UNICEF welcomed \$553 million from multi-year contributions from 70 resource partners. Longer-term funding allowed UNICEF to be more strategic and predictable, respond effectively where needs were greatest and bridge humanitarian action and development programming. For example, the Makani centres²⁷ in refugee camps in Jordan, which utilized multi-year funding, were able to make a strategic shift to a community-based approach to empower community members and transfer leadership, ownership and engagement to the Syrian refugees. This new strategy is helping UNICEF to make the management of the Makani centres more cost efficient, contributing to its sustainability in the camps and ensuring vulnerable children and communities can continue to access a high-quality, comprehensive selection of services that promote their well-being, development and resilience.

²⁷ Makani, or 'My Space' centres are a comprehensive approach by UNICEF Jordan that allows children and young people to access, under one roof, multiple services that promote and contribute to their development and well-being.

Figure VII
Top 10 donors for multi-year contributions in 2018
(in millions of United States dollars)



60. The UNICEF Emergency Programme Fund released \$66.7 million to 28 country offices and 2 regional offices in 2018 to rapidly respond to crises. For example, \$6.2 million disbursed to the Syrian Arab Republic enabled UNICEF to provide safe water, non-food items and sanitation services to nearly 185,000 internally displaced persons in collective shelters in Dar’a and East Ghouta.

61. In 2019, resource mobilization efforts by UNICEF will continue to focus on the implementation of its Strategic Plan to strengthen the two critical quality funding elements of increasing multi-year and thematic/flexible funding while working with partners to reduce the level of earmarked funds. These critical elements can help to strengthen humanitarian action and support better linkages between humanitarian and development programming. For example, to mobilize flexible resources, in 2018 UNICEF made an effort to promote Islamic financing instruments to support its humanitarian action. Discussions resulted in the signing of a global memorandum of understanding with the World Zakat Forum,²⁸ which paves the way for future discussions on how zakat funds can be used to meet the needs of children affected by crisis.

²⁸ The World Zakat Forum is a triennial conference that gathers all those who are interested in zakat initiatives. “Zakat”, or mandatory charitable giving, is the third pillar of Islam. It is payable annually by Muslims whose wealth exceeds a minimum threshold.

III. Lessons learned from major evaluations of UNICEF humanitarian response

62. This section considers key findings and recommendations from three major evaluations conducted in 2017 and 2018,²⁹ focusing on (a) balancing the coverage, quality and equity of the UNICEF humanitarian response; and (b) improving the timeliness of the UNICEF humanitarian response.

A. Balancing the coverage, quality and equity of the UNICEF humanitarian response

63. While evaluations attest that UNICEF provides responses at a significant scale, UNICEF country offices struggle to balance the scale of response – that is, reaching the greatest number of people and children – with achieving quality programming and reaching those vulnerable populations most in need of assistance and protection. Those most in need are almost always the least accessible and most costly to reach. This is the case in many situations – as was seen in the response to Rohingya children in Myanmar and Bangladesh – but is particularly true in complex emergencies.

64. Internal constraints include the need to strengthen the ability of management and front-line staff to apply humanitarian principles in day-to-day programme delivery, navigate humanitarian negotiations and systematically strengthen community engagement for increased humanitarian access. UNICEF has also faced challenges in making better use of its networks to advocate for principled access, including for implementing partners. While more skilled advocacy and negotiation are important, they are insufficient to reach all populations.

65. External pressures – such as funding gaps, donor priorities and conditionalities and emphasis on efficiency measures – may also influence prioritization of coverage over quality and equity, particularly where access is an issue. Where access is limited due to security risks, quality concerns include not only the quality of services (i.e., addressing sector technical standards and inclusion) but also the breadth of programming (i.e., shifting from one-off interventions such as delivery of critical WASH supplies, to more sustained and integrated interventions, such as re-establishing primary education with integrated WASH services).

66. Underlying these challenges of balancing coverage, quality and equity are issues related to situation monitoring, needs assessment and programme monitoring that are shared across much of the humanitarian system. These include contextual and methodological challenges in collecting data on populations in need and specific vulnerable subgroups, especially where the situation is fluid. This challenges the ability of UNICEF to continuously and reliably track its coverage in relation to shifting needs and accurately determine whether it is reaching those in greatest need. For example, in Somalia, UNICEF reporting shows high coverage of people reached with humanitarian services against the number of people targeted, but a lack of consistency in how UNICEF and others report humanitarian data means that it is not possible to accurately assess coverage against humanitarian needs with transparency

²⁹ The three evaluations are: Evaluation of the coverage and quality of the UNICEF humanitarian response in complex humanitarian emergencies; Evaluation of the UNICEF Level 3 response to the cholera epidemic in Yemen: crisis within a crisis; and Evaluation of UNICEF response to the Rohingya refugee crisis in Bangladesh.

on whether challenges were related to performance, underfunding or immovable obstacles to access.

67. UNICEF recognizes that funding and access challenges cannot be eliminated; and that at the outset or peak of the response to a humanitarian crisis, reaching the greatest number with even an initially limited response will be a priority. UNICEF also recognizes the possibility to shift monitoring and operational access strategy approaches for greater transparency and balance in results achieved.

68. While UNICEF has used its role as cluster lead/co-lead agency for WASH, nutrition, education and the child protection area of responsibility to strengthen the coverage and quality of the collective responses, the challenges described above also extend to cluster coordination. Recent inter-agency humanitarian evaluations have highlighted several weaknesses of the clusters (collectively, rather than specific to UNICEF) in key areas linked to coverage and quality, including the veracity of assessment data and coverage figures (e.g., the humanitarian situation in South Sudan and the response to Typhoon Haiyan in the Philippines); the consistency and effectiveness of monitoring (e.g., the Central African Republic, South Sudan and the Philippines (Typhoon Haiyan)); and information management and gathering and sharing data on needs, locations and agencies (e.g., the Central African Republic and South Sudan).

69. In addition to monitoring and coordination challenges, the evaluations also found that the UNICEF response does not consistently provide an overall, intersectoral strategy, and/or is sometimes slow to adjust when the situation dictates. This is exacerbated by the fact that there is no systematic or mandatory moment or product to support the clarification of country office strategy as opposed to sector strategy formulation; and while some individual sectors may have clear strategies, they are not always integrated into the overall country office response strategy. The result is that responses are weak in areas where a cross-sectoral lens is required, particularly vis-à-vis gender, disabilities, protection, resilience and systems strengthening. For example, in Bangladesh, with some exceptions, gender mainstreaming and gender-based violence were insufficiently considered and not implemented until six months into the response to the Rohingya refugee crisis.

70. UNICEF recognizes the need to articulate a strategic vision for accessing those who are in greatest need in a timely and principled manner – particularly in relation to the coverage, quality and equity of its response – and especially in contexts where there is limited funding or there are humanitarian access constraints. UNICEF is already working to clarify its commitments in relation to coverage, quality and equity in the ongoing revision of the Core Commitments for Children in Humanitarian Action, and in 2019 will carry out an assessment on the implications of bolder commitments for its organizational capacity development.

71. UNICEF is also working to reinforce ongoing efforts to improve evidence generation and evidence-based decision-making to determine coverage and quality, including equity in emergencies. This includes investing in strengthening outcome-level data-collection approaches with partners, including capitalizing on technological advances to push for more granular and fluid analysis of vulnerabilities. This is a learning area for the humanitarian sector and requires longer-term investments. In addition, UNICEF is investing in strengthening systematic technical approaches to humanitarian response planning and monitoring. This aims to support a more transparent and principled needs-based approach to balancing coverage, quality and equity in strategy development, benchmarking and monitoring. This includes systems development, as well as technical support and training in the field,

all designed to increase the organization's agility in shifting contexts. UNICEF is coordinating this work within UNICEF-led clusters and with the Office for the Coordination of Humanitarian Affairs and will advocate for more consistently principled approaches to needs assessment, planning and monitoring at global and country levels.

72. The focus on coverage, quality and equity also ties into ongoing work under the Strategic Plan, 2018–2021. This includes establishing a more systematic and principled approach to humanitarian access, including clear accountabilities and improved capacities and support mechanisms across relevant functions to support country offices to develop and implement humanitarian access strategies. UNICEF is also creating a more systematic approach to resolving practical dilemmas in complex emergencies, including managing donor conditions, addressing the impact of sanctions, facilitating civil-military coordination, working with integrated missions, and engaging with non-State entities and host Governments for humanitarian action. Ongoing work to strengthen systematic engagement with and accountability to affected populations and communities is also being reinforced under a global plan of action developed and endorsed by the UNICEF steering committee for accountability to affected populations in 2018. This ties in strongly with the organization's efforts to improve and increase the transparency of planning and monitoring and reinforce community-feedback mechanisms.

73. To strengthen quality and equity in humanitarian response strategies and implementation, UNICEF will also continue to emphasize and strengthen the centrality of protection through advocacy and across its programmes, including in its response to gender-based violence; strengthen gender equality programming in the sectors; and improve inter-sectoral integration across programmes, including interventions that address the needs of children with disabilities. For example, in the Rohingya response in Bangladesh, UNICEF is already working to facilitate a robust gender-based violence response, integrate gender equality across all programming and establish information centres to collect feedback and complaints from the affected populations so as to respond and adjust interventions accordingly.

74. UNICEF will also focus on developing a more coherent, modular humanitarian learning and knowledge management strategy to ensure that all staff working in emergencies, particularly leadership, have adequate knowledge, skills and capacities to address these challenges. This focus on learning will span complex emergencies, operationalizing the UNICEF approach to equity; increasing understanding of and operationalizing humanitarian principles and international humanitarian law; and translating the UNICEF accountability framework into practice.

B. Improving the timeliness of the UNICEF humanitarian response

75. Evaluations highlight that the timeliness of UNICEF humanitarian response varies from situation to situation and within a given country, where some sectors might be slower to scale up. This is a challenge even within protracted crises, as seen in the Democratic Republic of the Congo and Yemen. UNICEF and the wider global humanitarian system were not prepared for the speed and scale of the 2017 cholera epidemic in Yemen, despite the contingency planning exercises conducted in 2016.

76. There is also evidence that the speed of scale up is acceptable once an alarm has been sounded; and, when Level 2 and 3 responses are triggered, the use of the

Simplified Standard Operating Procedures for Emergencies³⁰ have supported rapid scale up. In the response to the Rohingya refugee crisis in Bangladesh, once triggered, the evaluation assessed that UNICEF had effectively scaled up its programme responses, took on sector leadership responsibilities and provided assistance and protection services to the Rohingya and host communities.

77. However, even with the use of the Simplified Standard Operating Procedures for Level 2 and 3 responses, UNICEF faces persistent challenges to scale up, including operational constraints. For example, there continues to be a time lag for scale up of partnerships with civil society organizations and in the recruitment of human resources after surge teams have come in. The lack of unearmarked funding also continues to hamper rapid, flexible scale-up and integrated programme implementation, particularly where there are large funding gaps. Evidence from countries that have received flexible, unearmarked funds, such as Lebanon, has shown that such funds have made a difference to the ability of UNICEF to respond quickly with crucial interventions, such as the provision of life-saving water services in informal settlements.

78. Based on these findings and recommendations, UNICEF will continue to advance efforts to improve its capacity for a more timely humanitarian response through enhanced risk analysis and routine risk-informed programming, and better use of political, social and economic intelligence, including cross-border and cross-regional analysis. These will lead to better and more informed actions for country office preparedness and earlier responses.

79. UNICEF has learned from its experiences with disease outbreaks – such as the 2017 cholera outbreak in Yemen – that it needs to establish specialized capacities that allow the organization to respond quickly when an outbreak strikes. UNICEF has already acted on recommendations to strengthen specialist in-house epidemiological capacity at the regional level in the Middle East and North Africa. This capacity is supporting country offices to act quickly on specific cholera risk assessments and contingency plans and analyse emerging data on cholera and other epidemics to facilitate better preparedness and a faster and more effective response. In Yemen, UNICEF also intends to build on the rapid response team and rapid response mechanism models and, with partners, take stock of lessons learned from the cholera response to strengthen these mechanisms for future responses.

80. To move towards more consistent timeliness in its humanitarian response, UNICEF is assessing approaches to support agile and timely multidimensional analysis and strategy development, and to better link these processes with analyses on vulnerability and access. The organization is also revising its standard operating procedures for emergencies to address persistent and high-cost problem areas, particularly related to civil society partnerships and recruitment of human resources. Recognizing the importance of its surge capacity to quickly mobilize the specific capacities, knowledge and skills that enable a quality and timely response, UNICEF expanded its global Emergency Response Team in 2018 from 14 to 22 members and added members specializing in additional sectors, such as gender and humanitarian cash transfers. UNICEF is considering further expansions of this mechanism in the coming years.

³⁰ UNICEF Simplified Standard Operating Procedures are designed to simplify, streamline and clarify UNICEF procedures related to emergencies to enable a more effective response. The procedures apply to all situations where the UNICEF Executive Director has declared a Level 3 emergency and activated the Corporate Emergency Activation Procedure.

IV. Conclusion

81. UNICEF is committed to continuing to improve its humanitarian action to better meet the challenges described above, in line with the recommendations made in recent evaluations of its emergency responses. The organization will focus on initiatives that improve the quality of its humanitarian response generally, and particularly in high-threat contexts. This includes investing in country office preparedness through better risk analysis and identification of high-return actions; strengthening the normative frameworks around humanitarian access and the Simplified Standard Operating Procedures for Level 2 and Level 3 emergencies; updating the Core Commitments for Children in Humanitarian Action to reflect new realities; better coordinating field support for countries preparing for, planning and responding to crises; scaling up humanitarian cash transfer programmes by establishing systems, building capacities and generating evidence; expanding engagement with affected populations; ensuring that preparedness and response are relevant through improved benchmarking, better evidence and inter-agency collaboration; and strengthening humanitarian leadership at the country level through learning and capacity-building initiatives.
