Executive summary

Just one year after ‘Super Typhoon’ Haiyan hit the Philippines, tremendous progress has been made. The speed and scale of the humanitarian and early recovery response were made possible by the generosity of donors, strong partnerships with the Government and the amazing resilience of the people of the Philippines. While UNICEF and our partners have made a strong start, there is a lot of work ahead to achieve the shared goal of restoring economic and social conditions to at least pre-typhoon levels, with a higher level of disaster resilience.

On 8 November 2013, Haiyan affected more than 14 million people, including 5.9 million children, as high winds and a massive tsunami-like storm surge tore through the Visayas region of the Philippines. A total of 4.1 million people, including 1.7 million children, were displaced from their homes. UNICEF’s humanitarian response was equally massive, as the entire organization mobilised for this Level 3 emergency, the highest level of response possible. The UNICEF appeal for US$119 million was fully funded due to the extraordinary generosity of national, institutional and individual donors.

UNICEF’s response provided more than 1.35 million people with access to safe water, vaccinated 1.78 million children against measles, provided almost 625,000 children learning materials and...
gave over 58,000 children psychosocial support. UNICEF put the needs of children at the centre of the response, working with communities, government counterparts, civil society and a wide range of local and international partners. By July, the humanitarian phase of the response was declared over by the Government of the Philippines and the focus shifted to early recovery.

One year on, UNICEF’s focus is moving more firmly into recovery, building back better and incorporating disaster risk reduction (DRR) to improve the resilience of individuals, families and communities to future hazards. As part of the recovery 1,706 classrooms have now been repaired, systematically replacing so 2,132 Temporary Learning Space (TLS) tents used during the first months. Sanitation solutions have moved on to resilience building activities with 74 villages (barangay) mobilized to build their own toilets and change their behaviours to achieve zero open defecation (ZOD) status. Life-saving assistance provided to 1,622 children suffering from severe acute malnutrition (SAM) has been outstripped by counselling for more than 75,000 caregivers on infant and young child feeding (IYCF) to prevent malnutrition from occurring in the future.

UNICEF has also innovated in its response. For the first time, UNICEF Philippines used cash transfers for most vulnerable families to assist them to better provide for their children. Local Government Units (LGUs) have been used as a cornerstone of our response in the decentralized public service delivery context of the Philippines. Forty of the most affected LGUs were empowered through direct grants with planning assistance and financial oversight from UNICEF. As part of monitoring the response, household surveys were conducted using electronic tablets allowing results to be collated, analysed and acted upon much more quickly than using paper-based data collection. Theatre for Development performances and an exhibition of children’s photos engaged and empowered children and youth. Innovations are continuing with the recent launch of a programme for replacing birth certificates lost in the Typhoon and the creation of ‘cloud based’ records that will be resilient to future disasters.

Thanks to the tremendous generosity of donors, UNICEF’s humanitarian response and early recovery needs for children affected by Typhoon Haiyan are fully funded in 2014. US$5.4 million in additional funding is required for victims of conflict in Mindanao, including Zamboanga. In early 2015, the Humanitarian Action for Children will announce UNICEF’s funding requirements for ongoing humanitarian assistance to children in the Philippines.
Overview

This report outlines UNICEF’s response in the year since Typhoon Haiyan struck the Philippines on 8 November 2013, focusing on results for children, continuing needs and challenges. It also highlights ongoing plans for recovery in 2015 and the broader country context.

Super typhoon, the most powerful ever known

Around 2 a.m. on 8 November 2013, Super Typhoon Haiyan made landfall in the Philippines. It was one of the most powerful and destructive typhoons ever recorded with winds travelling at hundreds of kilometres per hour and a massive tsunami-like storm surge that swept through low-lying coastal communities. The Philippines is used to typhoons with an average 20 typhoons making landfall every year, but Haiyan, known locally as Yolanda, was different. Despite storm warnings and preparedness, more than 6,000 people were killed and houses, schools and health centres were flattened. Some 14.1 million people were affected. Over 4.1 million were displaced, including 1.7 million children.

Those hardest hit were on coastal and inland areas of Leyte, Samar, Eastern Samar, northern Cebu and Panay Island. Already before the typhoon hit, these communities were among the most vulnerable in the Philippines with 40 per cent of children living in poverty. The loss of lives and livelihoods and displacement compound the vulnerability of households and of children. Haiyan also struck the Philippines just a month after a magnitude 7.2 earthquake in Bohol affecting 3.2 million people and two months after conflict in Zamboanga had displaced at least 60,000 people. All actors faced tremendous challenges to respond to all three disasters.

Response by the Government and humanitarian agencies

The Government of the Philippines has strong capacity to prepare, quickly respond to and lead rehabilitation in the face of disasters. This has been demonstrated in 2014 by its response to several typhoons and the eruption of Mount Mayon. However, the scale of the devastation from Haiyan led to an offer and acceptance of assistance by the United Nations on 10 November 2013. The cluster system, co-led by the Government and United Nations agencies, was immediately activated. UNICEF co-led clusters with government counterparts for WASH, nutrition and education (co-lead with Save the Children) as well as the child protection area of responsibility within the wider protection cluster led by UNHCR. UNICEF was also a member in the WHO-led Health cluster and the UNFPA-led gender-based violence cluster. UNICEF set up dedicated cluster coordination capacity at the national level, and at the subnational level...
where clusters are present. An interagency Strategic Response Plan1 (SRP) was agreed, with a total appeal of US$791 million, including a US$119 million UNICEF component. The interagency SRP response complements Government-led efforts under the Reconstruction Assistance for Yolanda (RAY) plan for 2014–2015 and beyond, with requirements estimated at more than US$8 billion.2

In July, the Government transitioned from humanitarian cluster structure to the recovery and rehabilitation phase through the Government’s new cluster framework. This reflected the Government’s assessment that humanitarian demands have largely been responded to and the work remaining requires a longer-term approach. The Office of the Presidential Assistant for Rehabilitation and Recovery (OPARR) also monitors development activities in Region VIII.

Coordination work moved from UNICEF co-led clusters (Education, Nutrition and WASH) moved to the Government’s Social Services Cluster led by the Department of Social Welfare and Development (DSWD). The parameters of UNICEF’s Strategic Response Plan remain aligned with government plans to restore the economic and social conditions of affected areas to their pre-typhoon levels (as a minimum) and to a higher level of disaster resilience. UNICEF continues its support for sector coordination providing technical assistance to the Government as required at national and sub-national levels and is the Government nominated co-lead for the WASH and Education clusters.

Humanitarian needs and UNICEF priorities for children

Despite major damage to transport and communications infrastructure, UNICEF was on the ground working alongside government and other partners within 48 hours. On 11 November 2013, Executive Director Anthony Lake activated UNICEF’s corporate emergency procedures, mobilizing the organization’s global resources to meet needs. Within a week, 29 staff were on site, including 12 staff dedicated to cluster coordination roles. UNICEF Philippines redeployed emergency personnel in-country, and additional human, supply and financial resources were mobilized regionally and globally, together with UNICEF’s stand-by partners. To accelerate the response, UNICEF set-up field offices in Tacloban and Roxas, with an outpost in Guiuan and an emergency logistics hub in Cebu to fast track delivery of supplies. One year on, UNICEF maintains its

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1 This report outlines UNICEF’s response in the year since Typhoon Haiyan struck the Philippines on 8 November 2013, focusing on results for children, continuing needs and challenges. It also highlights ongoing plans for recovery in 2015 and the broader country context.

UNICEF’s first priority was providing lifesaving and life-sustaining assistance in WASH, health, nutrition, education and child protection, in line with its Core Commitments to Children in Humanitarian Action. As a development partner present in the Philippines since 1948, UNICEF remained committed to reducing risk, strengthen resilience and building capacity to recover and maintain progress towards the Millennium Development Goals (MDGs) and beyond. In line with government and inter-agency plans, UNICEF’s focus is on three key objectives:

1. Meet immediate lifesaving needs within the most affected Local Government Units (LGUs) targeting the worst affected children.
2. Meet medium term education, WASH, health, nutrition and protection needs with special attention to gender and disability responsive interventions.
3. Support long-term government-led recovery with a specific focus on strengthening resilience of communities and local institutions through disaster risk reduction.

To achieve this, UNICEF is targeting 40 Local Government Units (LGU) with a population of 1.34 million, of which 558,000 are children. UNICEF prioritised these municipalities through analysis of those most severely affected. UNICEF is expanding its support to LGUs to include direct cash transfers of around US$160,000 to each of the 40 LGUs. UNICEF has worked closely with the LGUs to plan and budget the use of these funds which represent an important capacity building and local ownership component in the recovery effort.
Resilience and Disaster Risk Reduction

The impact of natural disasters on communities depends not only on the scale of the disaster, but also on the resilience of the community, its ability to withstand, adapt to, and recover from disasters. Building resilience and reducing the risk faced by communities from disasters is a key priority for UNICEF as the Philippines is the third most disaster prone country in the world. UNICEF has built resilience into the Haiyan response in both physical assistance and human capacities. UNICEF deployed new technologies such as solar-powered fridges to make the vaccine cold chain resistant to power outages; worked with local governments to map flooding hazard areas and rebuilt water systems with improved piping. Recognizing the role of communities as the first line of defence, UNICEF built up the skills that make a difference during and after a crisis. First responders (health workers, teachers and social workers) have been trained to assist children and communities in case of emergencies. UNICEF also helps to organize and reactivate Barangay Councils for the Protection of Children (BCPC) and ensure that service providers have the skills and knowledge to promote child protection.
Core Commitments for Children in Humanitarian Action

Water, sanitation and hygiene (WASH)

STRATEGIC RESULT

Affected families in priority evacuation centres, relocation sites and communities including affected children in priority schools, day care centres, and temporary learning sites have access to safe and secure basic sanitation and safe water facilities with improved hygiene behaviour; and contributes to reducing risk and strengthening resilience.

In the immediate aftermath of Super Typhoon Haiyan, providing access to safe drinking water was critical. Water networks were badly damaged and water sources contaminated and there was a high risk of water-borne diseases made worse by congested living conditions in many evacuation centres. Children are particularly vulnerable to water borne diseases which cause diarrhoea, respiratory and other infections. UNICEF and partners worked to restore access to safe water and basic sanitation including toilets. In addition, good hygiene practices were promoted such as hand-washing with soap. Soap and other hygiene supplies were provided as a priority. Schools were given particular attention to ensure students were safe from water borne disease and learning good hygiene practices. With the transition to recovery, UNICEF is working to building back better meanwhile with more resilient water systems, and investing in community solutions for better sanitation by changing practices around the use of toilets and solid waste management.

Water supply

A total of 1,351,926 people affected by Typhoon Haiyan have access to safe water and improved water sources thanks to the distribution of water kits, water treatment products, bladders and home storage containers provided by UNICEF as well as rehabilitated water schemes. This includes the restoration of a desalination plant and waste water treatment plant in Eastern Visayas Regional Medical Center (EVRMC), restoration of water supply schemes for 78 barangays in Region 8 and emergency support for rehabilitation of water supply schemes of Leyte Metro Water District (LMWWD) for five municipalities including Tacloban City.

Sanitation

With the support of UNICEF 310,017 people have access to sustainable sanitation, including the provision of toilet slabs and portable toilets. High-risk, densely populated, urban areas and evacuation centres were the primary target in order to prevent water-borne disease outbreaks. To date, no major outbreaks of water-borne diseases such as cholera have occurred. The number of people reached by this intervention is below the initial target as lower numbers than expected remained in evacuation centres and transition sites. UNICEF responded by shifting its focus to household level latrines including the PhATS approach.

Philippines Approach to Total Sanitation (PhATS)

As part of early recovery, UNICEF is working with the Government and other partners implementing the Philippines Approach to Total Sanitation (PhATS), which includes an initial achievement of achieving ‘zero open defecation’ (ZOD) status for all barangays. 74 barangays, with a population of 40,875 people, have been certified as ‘zero open defecation’ (ZOD). These communities have successfully changed their practices by using toilets, and...
appropriately disposing of children’s and families’ faeces. UNICEF trained various NGO partners in the PhATS approach, which has had a multiplier effect as it approach is now being implemented beyond UNICEF-funded programmes by other WASH Cluster members to achieve change of social norms on a larger scale.

### WASH in schools and child-friendly spaces

A total of 504,209 children have been provided with school hygiene kits and advocacy on good hygiene practices. The hygiene kits include water bottles, soap, toothbrushes and toothpaste. Around 1,200 schools and day care centres are being assisted water, toilets and hand washing facilities in cooperation with NGOs, Parent-Teacher Associations (PTAs), LGUs and the Department of Education. UNICEF is also supporting the Department of Education through capacity building activities to implement and sustain WASH in Schools programme using school Based Management.

### WASH cluster coordination

In the wake of Typhoon Haiyan, as co-lead with the Government, UNICEF supported implementation of a robust WASH cluster system at national and municipal levels, with 40 local and international humanitarian organizations. UNICEF also deployed five WASH specialists in technical support and strategic advisory roles, while also deploying sub-cluster coordinators and linking with other Clusters. UNICEF is working with the Government to fully hand over cluster leadership. UNICEF works in an advisory capacity to the Government in the areas of information management, analysis of sector information, responding to existing humanitarian needs, planning and coordination. A WASH sector coordination support officer was deployed to help facilitate this process and develop a strategy for transitions.

### Challenges and looking forward

UNICEF, together with the Government of Philippines and several NGO partners, continues to work promoting universal access to improved WASH services, especially for women and children, at the household level as well as schools and day care centres. All WASH Cluster partners, under the leadership of the Department of Health (DoH), have jointly developed a Strategy for Early Recovery in Yolanda (Haiyan) affected areas using the PhATS approach. This is designed to help the government to achieve the goals set forth in the Philippine Sustainable Sanitation Roadmap and the National Sustainable Sanitation Plan. PhATS provides a common framework to achieve zero open defecation (ZOD) status while providing guidance on how to implement the programmes to reach out to around 1 million people living in Yolanda affected Barangays by end of 2015.
Core Commitments for Children in Humanitarian Action

Education

STRATEGIC RESULT

Affected pre-school and school-aged children in target areas have access to safe and secure quality education and psychosocial support that contributes to reducing risk and strengthening resilience.

Access to quality education

Since Haiyan, 624,783 pre-school and school-aged children (3 to 17 years) have benefited from the distribution of learning materials and supplies to schools. Schools have received 7,894 teachers’ kits and 24,227 chairs and tables, 165,850 learning materials, 1,225 bookcases with library sets, and 1,602 blackboards. 213,200 children access education at the 2,132 Temporary Learning Spaces (TLS) that have been supported by UNICEF in the form of tents and tarps in the initial response. These are being replaced with over 1,706 repairs for classrooms and day care centres now completed. A recent UNICEF humanitarian performance survey conducted in September in 28 selected municipalities found that 89 per cent of children had returned to school and over 94 per cent of beneficiaries were satisfied with the learning and recreational materials that they received.

Back to learning

UNICEF and partners continue to promote children’s ‘back to learning’ in schools and day care centres by working to improve the facilities available and communicating the benefits and importance of education. UNICEF and its partners directly reached over 129,000 children with education promotion activities and over 28,000 community members have been mobilized to support children returning to school and orientated on DRR. Radio spots and programming in local languages early in the response, allowed UNICEF and partners to reach a wider audience. Back to learning activities posted on Facebook and Twitter pages reached an online audience of 281,047 people.
Capacity development of education providers

Many students and their teachers needed psychosocial support in the aftermath of Haiyan. UNICEF worked with partners to reach teachers, day care workers and education authorities with training on how to support traumatized children. At total of 3,470 education personnel were trained on education in emergencies (EiE) and DRR – including on providing psychosocial support, improving school safety, and child centred risk-assessments. Fewer training were delivered in 2014 than initially planned due to conflicting timetables, existing teacher training activities and a lack of trainers, but will be made up next year. UNICEF is also supporting parent groups and communities to adopt disaster risk reduction practices including life-skills programmes.

Education cluster coordination

UNICEF and Save the Children co-led the education cluster with the Department of Education in support of a four-phase plan: restoration of field administration; personnel care; back to school and; longer-term rehabilitation. The cluster’s focus was the return of children and teachers to schools and learning, and support to restore the education system’s capacity. In the aftermath of the typhoon UNICEF quickly deployed education specialists for cluster coordination and information management. The education, camp coordination and camp management and protection clusters also worked together to facilitate the voluntary evacuation and relocation of families from schools still used as evacuation centres. Additionally, the Cluster provided training for DepEd and DSWD administrative officials on cluster co-ordination, Education in Emergencies, and Disaster Risk Reduction (DRR) as the cluster transitioned into 7 division-based working groups in Region VI and Region VIII to build back a better, more resilient education system.

Challenges and looking forward

Training of education personnel and capacity building of the DepEd will continue, particularly in EiE and DRR. UNICEF will seek to address constraints in the overall information management system of the Divisions and Regions to better track the repair and rehabilitation of classrooms between NGOs/United Nations and the Department of Education. For those children that are still out of school, UNICEF is working with the DepEd to strengthen existing government interventions and catch-up learning programmes to successfully reintegrate vulnerable children and youth. UNICEF continues to promote inter-sectorial approaches, including in preschool/early learning and in non-formal and formal education to marginalized groups in a safe environment, thereby building resilience and reducing the risk of future emergencies to the education system. UNICEF will also continue to document scalable models and good practices during and after emergencies. UNICEF is prioritizing the integration of DRR into school planning.

<table>
<thead>
<tr>
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<th>Cluster result</th>
<th>UNICEF target</th>
<th>UNICEF cumulative results</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-school and school age children (3–17 years) provided with learning materials and supplies</td>
<td>500,000</td>
<td>608,274</td>
<td>500,000</td>
<td>624,783</td>
</tr>
<tr>
<td>Children accessing temporary learning spaces</td>
<td>500,000</td>
<td>467,500</td>
<td>300,000</td>
<td>213,200</td>
</tr>
<tr>
<td>Temporary learning spaces established</td>
<td>5000</td>
<td>4,675</td>
<td>3,000</td>
<td>3,838</td>
</tr>
<tr>
<td>Education service providers trained on at least one emergency-related topic</td>
<td>8,000</td>
<td>4,023</td>
<td>8,000*</td>
<td>3,470</td>
</tr>
</tbody>
</table>

* Revised down from 10,000 to 8,000.
The destruction of many health centres disrupted basic health services, including routine immunization as cold chain equipment and vaccines were destroyed. Relatively low vaccination coverage rates pre-Haiyan, population movement and the crowded conditions in evacuation centres and bunkhouses made immunization a high priority. Measles cases were reported as early as December in affected areas. Access to maternal and newborn health was a further concern, with 230,000 women affected estimated to be pregnant, and 150,000 lactating. After a year and a successful mass immunization campaign in September, outbreaks of measles have been contained and resilient cold chain equipment is being rolled out, strengthening the health system for future emergencies.

**Measles campaigns and expanded routine immunization**

A month after Haiyan, UNICEF actively supported a mass immunization campaign against measles and polio along with vitamin A supplementation and malnutrition screening. A total of 82,100 children under 5 years benefited during this time. In September 2014, the annual national mass immunization campaign was carried out by the Department of Health, and UNICEF heavily supported the preparations and conduct of this campaign in the Haiyan-affected areas. A total of 1,784,401 children under 5 years of age have been vaccinated against measles (measles and rubella) and a further 2,033,040 children against polio across the Haiyan affected regions. Meanwhile, efforts to strengthen routine immunization continue through the provision of cold chain materials, vaccines, records and capacity-building. To date, 17,792 children less than one year old have been fully-immunized through the routine vaccination programmes in the targeted municipalities.

**Rebuilding a resilient cold chain**

Restoring capacity to keep vaccines at correct temperature to guarantee their effectiveness has been a shared priority for the Government, UNICEF and WHO. UNICEF has supported the effort with resilience in mind, providing equipment that will be able to withstand future disasters. The vaccination cold chain has been restored or improved in 190 affected LGUs through the provision of: resilient cold chain equipment (cold rooms, refrigerators, generators, cold boxes, vaccine carriers and fridge thermometers); vaccine management training; monitoring and supervision; and information, education and communication (IEC) materials.

**Readiness for diarrhoea and dengue outbreaks**

Soon after Haiyan hit, UNICEF prepositioned diarrhoeal disease kits as a preparedness measure, with supplies to treat up to 7,000 moderate to severe diarrhoea cases (cholera) and up to
1,400 cases of Shigella dysentery. UNICEF worked with the government, WHO, CDC, and other partners on field guidelines for response and treatment in case of acute watery diarrhea (AWD) outbreak, combining this effort with training on AWD, dengue, and measles preparedness for health workers.

### Maternal, neonatal and adolescent health care

Interagency emergency health kits (IEHK) for up to 600,000 people have been provided, including supplies specific to mothers and newborns. This was supported by the rehabilitation of three birthing facilities and capacity building on essential health care for birthing mothers and their babies. Some 1,600 health personnel have been trained in target municipalities. UNICEF is also partnering with government agencies and other NGOs to address health concerns for adolescents with a focus on sexual and reproductive health.

### Challenges and looking forward

Pockets of deprivation still remain for the most vulnerable children and mothers especially those with disabilities. UNICEF will work to improve access to needed health services and to build their capacity to respond to future disasters. There is also increased demand for maternal, neonatal, child health and nutrition services due to high fertility rates, especially among teenagers. Interventions for young people at higher risk of HIV and other sexually transmitted infections, and awareness raising, counselling and access to health services remain a priority.

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**Indicator** | **UNICEF target** | **UNICEF cumulative results**
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Children aged 6–59 months vaccinated for measles | 1,100,000 | 1,784,401*
Children aged under 1 year receiving routine Expanded Programme on Immunization | 29,000 | 17,792
Local Government Units with restored/improved cold chains | 179 | 190

* Coverage extends beyond the 40 priority municipalities.

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1,400 cases of Shigella dysentery. UNICEF worked with the government, WHO, CDC, and other partners on field guidelines for response and treatment in case of acute watery diarrhea (AWD) outbreak, combining this effort with training on AWD, dengue, and measles preparedness for health workers.

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**Restoring the Cold Chain**

One of UNICEF’s earliest efforts following the typhoon was to restore the cold chain, and keep vaccines cool so they don’t spoil.

“The idea behind the cold chain is to maintain an optimal storage for the vaccine from the manufacturer to the end user,” says UNICEF Health Specialist Dr Maria Bella Ponferrada.

At the health clinic in Tanauan, UNICEF and its partners provided a solar-powered refrigerator that can withstand power outages. It’s part of an US$8 million effort to restore the cold chain and enable routine immunization in affected areas. Along with providing solar-powered refrigerators in 50 health centres and a backup generator for the region, UNICEF has deployed supplies to field locations and has trained health workers to improve management of the cold chain.

“The cold chain was not really optimal before the typhoon, and so during the typhoon most of the equipment and the vaccines were destroyed,” says Dr Ponferrada. “There are two problems, actually. The first one is the sub-optimal cold chain even before the typhoon. Then after, the typhoon made it worse.”

UNICEF’s work in restoring the cold chain and making it more resilient in the future will translate into increased coverage of routine vaccinations, which in turn will help protect the children of Dylin Cortez and, over the coming years, millions of other children in the Philippines.
Children affected by Typhoon Haiyan are often facing multiple layers of vulnerability. Over 40 per cent of children in affected areas were living in poverty prior to the Typhoon. Many were displaced, lost loved ones, had their schooling disrupted and faced deteriorated access to basic social services. Trafficking and other forms of gender-based violence were among the most acute risks for women and children. UNICEF worked to bring structured psychosocial support for children, make sure environments were protective and child friendly and work on building community based mechanisms for child protection to help in recovery and for future emergencies.

**Child-friendly spaces and psychosocial support**

Over the past year, 43,907 children benefitted from 171 child friendly spaces (CFSs) provided by UNICEF and partners in typhoon-affected regions. Children in these spaces engaged in structured play and learning activities promoting psychosocial recovery. Staff in the safe spaces were coached and trained on conducting activities for different age groups, on how to reach out to adolescents, and on how to meet special needs of children with disabilities. Community use of CFSs appears strong with monitoring of CFSs in 10 districts in Eastern Samar finding that around 80 per cent of children were registered at a CFS. National guidelines on the implementation of CFSs, which are supported by UNICEF, have been released by the Government. With UNICEF support, a review of psychosocial interventions used in the aftermath of Typhoon Haiyan is currently underway. This assessment will inform national standard guidelines on the provision of quality, evidence informed, culturally appropriate mental health and psychosocial interventions in the event of a future emergency.

**Building child protection systems**

UNICEF is working with the Government, communities and partners to strengthen child protection systems to identify unaccompanied and separated children and assist vulnerable children. UNICEF has provided training to 6,079 social work professionals, officers of the Philippines Police Women and Children Protection Desks, day care workers, health and nutrition workers, teachers, community members and NGO partners on psychosocial support for children and prevention and response to violence, exploitation and abuse. Additionally, 6,410 caregivers have accessed psychosocial support activities. All trainings are designed to empower government staff at local level to enhance child protection systems, and helped improve reporting of child protection cases and commitment to improve responses now and for future emergencies. UNICEF has funded positions for 29 social workers and 20 social work assistants in targeted Haiyan affected municipalities. Working through a local NGO, UNICEF has committed to replace 80,000 birth certificates using mobile outreach services to reach poor women and children from the most affected Haiyan areas.
Rapid Family Tracing and Reunification

In the first months after the Typhoon, 132 children were identified as unaccompanied or separated using an innovative Rapid Family Tracing and Reunification (Rapid FTR) technology. Real-time reporting reduced time and cost compared to paper-based FTR, increased security of managing sensitive information and will protect data from destruction in future emergencies through digital storage. Government officials in 31 municipalities were trained on Rapid FTR and UNICEF supports the government for system maintenance. Social work professionals have placed children either into kinship care or appropriate alternative care arrangements.

Child protection sub-cluster coordination

From July 2014, UNICEF has been supporting the Government of the Philippines in its transition from humanitarian work to recovery and rehabilitation efforts. At the national and regional levels UNICEF has provided technical support to the Government to strengthen the Regional Sub-Committees for the Welfare of Children (RSCWC). This includes the government body in charge of coordinating child protection response during an emergency and during non-emergency times. UNICEF has been supporting the development of three-year strategic plans.

Challenges and looking forward

One year on, the focus is on coaching and mentoring support for social work professionals and community members trained in child protection in emergencies activities. UNICEF continues to work with youth associations and adolescents to build their life skills and resilience. Training to prevent human trafficking for frontline service providers in seaports and airports was conducted and target municipalities have developed their plans for Help Desks. UNICEF remains committed to supporting the most affected municipal social welfare and development departments. Social work professionals are engaging with community child protection councils, children, adolescents and families to increase their understanding of the risks to, and vulnerabilities of, children after a disaster as well as in normal times; how to reduce the risks and vulnerabilities and keep children safe and how to report cases of abuse, violence, exploitation.

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Cluster target</th>
<th>Cluster result</th>
<th>UNICEF target</th>
<th>UNICEF cumulative results</th>
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<td>Children with safe access to child-friendly spaces</td>
<td>115,500</td>
<td>88,195</td>
<td>60,000*</td>
<td>43,907</td>
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<td>Children accessing psychosocial support activities</td>
<td>115,500</td>
<td>90,995</td>
<td>60,000*</td>
<td>58,579</td>
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<td>Caregivers accessing psychosocial support activities</td>
<td>45,000</td>
<td>6,410***</td>
<td>6,000**</td>
<td>6,410***</td>
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* Revised down from 75,000 after mid-year review of UNICEF’s Strategic Response Plan
** Revised down from 45,000 after mid-year review of UNICEF’s Strategic Response Plan
*** Revised down from 8,779 in September due to data cleaning

Child Protection

“A name and nationality is every child’s right, as enshrined in the Convention on the Rights of the Child. Every Filipino child, including those impacted by disasters, have the right to be registered at birth and to be provided with birth registration documents that have been lost or destroyed. This is why UNICEF is in partnership with the Government to ensure that Haiyan-affected children claim their right to a name and a nationality as part of larger resilience efforts,” Lotta Sylvander, UNICEF Philippines representative said.

It is estimated that at least 50 per cent of households in Western Samar and Leyte experienced loss or destruction of birth certificates and other basic documentation as a result of the typhoon. Around 100,000 people have already requested replacement documentation, but many more cannot afford the transportation and other costs associated.

Children who do not have birth certificates may be denied health care or education. The lack of official identification documents makes it more difficult to uphold laws to prevent early marriage, child labour or child recruitment in the armed forces. In adulthood, birth certificates may be required to obtain social assistance or a job in the formal sector, to buy or prove the right to inherit property, to vote and to obtain a passport. Registering children at birth is the first step in securing their recognition before the law, safeguarding their rights, and ensuring that any violation of these rights does not go unnoticed.
Core Commitments for Children in Humanitarian Action

Nutrition

STRATEGIC RESULT

All pregnant and lactating women and children under 5 have access to nutrition interventions that prevent under nutrition and micronutrient deficiencies, treat acute malnutrition and sustain positive nutrition behaviour; and contribute to reducing risk and strengthening resilience.

Typhoon Haiyan highlighted underlying challenges in regions where malnutrition rates were higher than the national average. Limited access to clean water and food in such areas also threatened the infant and young child feeding (IYCF) practices that existed before Haiyan. Against this background, UNICEF and partners established outpatient and inpatient treatment programmes for children identified with severe acute malnutrition (SAM). To support IYCF practices, UNICEF and partners established mother-child friendly spaces and conducted counselling at the community level and in health facilities. A standardized nutrition survey conducted by UNICEF and partners in affected municipalities four months after Haiyan found malnutrition rates of 4.1 per cent, much lower than expected. This informed modifications in the nutrition response and early handover of full cluster leadership to the Government. A follow-up survey in November 2014 will allow both UNICEF and partners to continue focused support for both preventative and curative activities for malnutrition.

Malnutrition screening and treatment

A total of 516,960 children aged 6 to 59 months have been screened for malnutrition and 1,622 children with severe acute malnutrition (SAM) have been admitted to therapeutic care, of which 749 have been discharged recovered. During the immediate response to Haiyan, children were screened for acute malnutrition using the Mid-Upper Arm Circumference (MUAC) as most anthropometric tools present in the health facilities were destroyed by the typhoon and storm surge. Since Haiyan, UNICEF has provided around 800 sets of height boards and weighing scales to the affected health facilities in order to increase the reliability of the anthropometric measurements of children. Children identified with severe acute malnutrition are admitted to one of 153 treatment posts established by UNICEF and partners. UNICEF has worked closely with the Government and communities to increase local capacity in Community-Based Management of Acute Malnutrition (CMAM). A total of 368 health and nutrition staff have been trained on CMAM. As a preparedness measure, UNICEF has also prepositioned ready-to-use therapeutic food for treating 6,000 children with severe acute malnutrition.

Infant and young child feeding (IYCF)

A total of 75,197 caregivers of children aged 0-23 months have been given appropriate infant and young child feeding (IYCF) counselling. At the height of the response, 52 mother-child friendly spaces served 10,799 pregnant and lactating women. These spaces offered counselling on breastfeeding and complementary feeding for women. Additionally, UNICEF and partners has supported and continue to strengthen IYCF counselling in 851 hospitals and community based health stations. 2,700 health and nutrition service providers have been trained on infant and young child feeding (IYCF) counselling. UNICEF has distributed more than 50,000 information, education and communication
(IEC) materials, which include breastfeeding advocacy tarps/banners, IYCF counselling cards, flipcharts, training manuals and monitoring guidelines. Nutrition promotion activities including radio messaging, cooking classes, breastfeeding events have reached 386,042 mothers.

**Pregnant and lactating women**

Some 20,104 pregnant women have completed a course of iron and folic acid supplementation to prevent iron deficiency and anemia during pregnancy. With support from UNICEF, the National Nutrition Council (NNC) launched a community response strategy mobilizing more than 2,400 community nutrition scholars to activate support groups and provide counselling for pregnant and lactating women. In the immediate response, UNICEF and partners set-up 52 mother-child friendly spaces which served 10,799 pregnant and lactating women. These spaces offer counselling on breastfeeding and complementary feeding for women.

**Nutrition cluster coordination**

Until June, UNICEF co-led the Nutrition Cluster with the Government at the national and regional levels. For immediate sub-national roll out of the cluster in the aftermath of Typhoon, UNICEF deployed three nutrition cluster coordinators and three information management officers while seven nutrition responses officers were deployed in the different stages of the response. UNICEF successfully handed over the leadership of the Nutrition Cluster to the regional NNC in June 2014. In this context and as a preparedness measure, regional nutrition programme coordinators from all the regions of the Philippines were trained on Cluster Coordination conducted by the Global Nutrition Cluster. UNICEF continues to support and work closely with the Nutrition Cluster and partners. A Standardized Monitoring and Assessment of Relief and Transitions (SMART) survey supported by Action Contre la Faim and UNICEF was completed in March and was instrumental in updating the targets and tailored the responses to meet needs. A follow up SMART survey is being conducted to support planning for nutrition programming for the coming year.

**Challenges and looking forward**

UNICEF is advocating for, and working closely with the Government on, the adoption of the CMAM guidelines. Knowledge on appropriate infant and young child feeding (IYCF) is high, but the practices do not always mirror the knowledge. UNICEF and partners continue to train and support community based nutrition volunteers in IYCF counselling. UNICEF is working closely with the Nutrition Cluster to identify treatment possibilities for children identified with moderate acute malnutrition. UNICEF and the Cluster continues to advocate for compliance with the national Milk Code on safe and adequate nutrition for infants and protection and promotion of breastfeeding.

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Cluster target</th>
<th>Cluster result</th>
<th>UNICEF target</th>
<th>UNICEF cumulative results</th>
</tr>
</thead>
<tbody>
<tr>
<td>Caregivers of children aged 0–23 months with access to IYCF counselling for appropriate feeding</td>
<td>168,300*</td>
<td>87,985</td>
<td>168,300*</td>
<td>75,197</td>
</tr>
<tr>
<td>Pregnant women provided with iron tablets and folic acid supplementation</td>
<td>30,000</td>
<td>20,104</td>
<td>30,000</td>
<td>20,104</td>
</tr>
</tbody>
</table>

* Cluster target revised down from 250,000 and UNICEF target revised down from 210,000 following review of the Strategic Response Plan and SMART survey results indicating a reduction in the rate of Global Acute Malnutrition Rate from 7 per cent to 4 per cent.

**Hope and a Second Chance**

Children with severe acute malnutrition who get sick need special care. After surviving Typhoon Haiyan, 33-month-old Oliver from Libongao, Kananga, was admitted to the In-Patient Facility at the Ornoc District Hospital because of pneumonia.

The facility was opened in February 2014 by International Medical Corps for the treatment of children with severe acute malnutrition who have medical conditions. International Medical Corps provides nutritional support and ensures that patients’ medications and laboratory exams are taken care of, while hospital staff provide medical and nursing management. UNICEF provides nutrient-rich ready-to-use therapeutic food and resources for the management of patients with acute malnutrition.

Oliver showed delays in growth and development. For a child who is nearly three years old, he could not walk or stand without support. Since his admission into the programme, Oliver has shown significant weight gain and catch-up growth. Monitoring of his nutritional status continued after he was discharged from the hospital.
Core Commitments for Children in Humanitarian Action

Innovation and Working across Sectors

Cash transfers
Disaster risk reduction (DRR)
Communication for Development (C4D) and Theatre for Development (T4D)
Accountability to affected population
Communication and advocacy

Cash transfers

Some 10,000 households have received a set of six unconditional cash transfers of US$100 per month to ensure access to food and other essentials. A further 5,801 households in Eastern Samar have received the third of their six cash transfers which are linked to an existing government conditional cash transfer system. These cash grants have covered families’ basic needs in the most affected areas and those generally underserved by the humanitarian response. Reflecting the very low incomes of recipient households around 50 per cent each cash transfer is typically spent on food, improving the nutrition of children. Households are also investing some funds in shelter, children’s education and health costs and a small number have managed to invest in small scale livelihoods and asset creation initiatives. These programmes are conducted in close cooperation with the DSWD.

UNICEF’s Unconditional Cash Transfer Benefits Pantawid Pamilya Families

“The unconditional transfer of cash to carefully selected families allows them to take a step back from the decisions they have to make after Haiyan, given their loss of property, savings and livelihoods,” said Lotta Sylwander, UNICEF Philippines Representative.

The UCT programme in Leyte shows that with very low household incomes, half of the transfers are being spent on food, while the rest are spent on shelter, health care, education and savings.

“These efforts complement the recovery efforts of the 4Ps (Pantawid Pamilyang Pilipino Program) toward improving the country’s human capital by keeping poor children in school, and giving them medical assistance, while extending immediate financial support to their families,” Sylwander said.

“Eight months after Haiyan, we continue to receive support from our partners whose mandate involves empowering children and families. We are grateful to UNICEF for extending assistance to 4Ps beneficiaries in selected areas in Eastern Samar. With our strong partnership with UNICEF, we can significantly contribute to positive changes in the lives of our beneficiaries,” said DSWD Secretary Corazon Juliano-Soliman.
Disaster risk reduction

Disaster risk reduction is an integral component of UNICEF’s early recovery interventions and is also a core pillar of the Philippines country programme. UNICEF is working with the Disaster Risk Reduction and Management Offices (DRRMOs) of LGUs across the affected areas to build their capacity on risk-informed programming and child-centred disaster risk reduction. 157 staff from 46 LGUs have successfully completed trainings on geographic information system (GIS) from the national mapping authority. These LGUs have also received GIS computer equipment support to enable them to develop hazard maps of their localities and be better prepared from future emergencies. LGUs have also received support to establish early warning systems and conduct life skills trainings and preparedness awareness raising with children and youth.

Communication for Development (C4D) and Theatre for Development (T4D)

With communication channels offline in the immediate wake of Haiyan, UNICEF focused on local networks and basic communication tools to reach out to those most affected including megaphones, flyers and banners to spread the word on immunization and highlighted the Back to Learning campaigns. When communications networks were restored, SMS messages and radio were also used.

Since September, UNICEF has been working with local theatre organizations using the ‘forum theatre’ approach to build the knowledge and skills of adolescents and young people on adolescent sexuality, reducing risks in emergency situations and protection issues. The T4D approach also provided psychosocial support for those affected by Typhoon Haiyan. The forum theatre was toured in selected municipalities in the provinces of Leyte and Eastern Samar and has so far reached more than 500 young people and community members. Performances will be held in selected municipalities in Cebu, Capiz, and Iloilo with other theatre groups as local partners.

Accountability to affected population

From the onset of Haiyan, UNICEF built in principles of participation, accountability and feedback as key pillars for both response plans and monitoring systems. Participative analysis was organized with government and civil society partners and UNICEF consulted representatives from the forty targeted municipalities to make sure resources could go to the most affected areas. Children had a chance to have their voices heard through consultations organized together with other child-focused organizations (Save the Children, Plan and World Vision). As efforts were rolled out UNICEF set-up mechanisms to share response results information with affected populations – as part of a commitment to transparency and accountability. An online platform provides a space for dialogue with affected populations and provides a summary analysis of feedback including satisfaction information on services provided to continually improve responses.

Communication and advocacy

Communication content on Haiyan response reached over 8 million viewers on UNICEF Philippines website and social media platforms. Throughout the year, advocacy and communication continued to keep a focus on the progress made by children and families as well as their critical needs – as response shifted to longer term recovery efforts. Media, donors and beneficiaries were kept informed through 35 press releases, over 60 feature stories and photo stories, 34 web video stories and full range of communication materials and messages disseminated through UNICEF National Committees marking progress in response and recovery at different points in time. 25 visits from media, national committees and donors were hosted by UNICEF, its partners and communities in the affected areas.

Eye See – Through the Eyes of Children: Stories of Hope and Resilience in Tacloban

As part of a creative visual arts project engaging child survivors of Haiyan, UNICEF supported 20 young photographers from different bunkhouses in Tacloban to take part in a photography workshop. Photography offered these children a chance to visually display their emotions through the lens, paving the way to self-discovery and social participation. At the one year mark after Typhoon Haiyan, it was important for UNICEF to offer children the creative opportunity to show others the world through their eyes. Participating children were able to widen their experience, learn new skills and open their eyes to possibilities beyond their challenging bunk house circumstances. It encouraged them to actively participate in their environment and potentially become drivers of change in their own lives and the lives of their communities. The EYE SEE project and exhibition were conducted in partnership with Sony and Robinsons.
Mindanao conflict

UNICEF continues to work to assist children, who are the innocent victims of violence and instability caused by recurrent conflict in Mindanao. In 2014, there have been 10 reported incidents of attacks on schools, affecting over 3,500 school children, and three additional reported incidents of classes suspended due to fighting. The Autonomous Region of Muslim Mindanao (ARMM) also has the highest level of stunting, caused by chronic malnutrition, and the lowest indicators for WASH in the Philippines. 13,011 students have benefitted from learning kits and supplies distributed to schools affected by conflict and weather damage. Assistance for minor repairs reached 25 schools and day care centres. Training on EiE and DRR increased the capacity of 309 teachers and day care workers. UNICEF has provided sensitization on hygienic practices to 21,461 people, assisted 751 families to construct latrines and provided 616 families with improved water facilities. A total of 37,009 children under 5 years and 4,082 pregnant and lactating women have been screened for malnutrition; 165 children suffering SAM have been admitted for treatment and 69 have been cured. A total of 5,971 mothers and caregivers have been counselled on infant and young child feeding practices, and 3,859 pregnant and lactating women have been provided with complete doses of Iron-Folate supplements. Some 592 government health workers have been trained on Community-based Management of Acute Malnutrition.

Zamboanga conflict

On 9 September 2013, heavy fighting in the southern Zamboanga peninsula killed at least 140 people and caused the displacement of over 118,000 people. Around 10,000 homes were completely destroyed, four schools with 9,269 students were displaced while at 25 schools were used as evacuation centres. Two schools in Zamboanga City continue to serve as evacuation centres. UNICEF has provided materials for safe water collection, treatment and storage for 25,995 people and latrines for 14,500 people. Some 1,800 children have been provided with access to psycho-social support at 12 CFSs, 24,904 children 3 to 17 years of age have been provided with learning materials and supplies. Twenty-seven TLSs have been set up for the conduct of psychosocial support and emergency education services provided for at least 10,000 school children. A total of 579 children suffering SAM have been admitted to therapeutic feeding programmes; 60,280 children have received Vitamin A supplementation and 62,223 have been dewormed. Some 343 pregnant and lactating women have been provided with iron and folic acid supplementation. A total of 5,587 people have been counselled in IYCF, including 4,322 pregnant and lactating women. The focus of interventions is shifting to the eight transitory sites as evacuation sites are expected to close by the end of the year.

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Bohol earthquake

On 15 October 2013, an earthquake measuring 7.2 on the Richter scale hit Bohol killing 223 people and displacing 350,000. All evacuation centres have now been closed and families are housed in 885 transition shelters. UNICEF work with the Government and partners to implement the revised Bohol Earthquake Action Plan. UNICEF’s WASH response restored water supply for 124,829 people and 55,743 have access to latrines. A total of 48,670 school children have received hygiene kits; 5,106 children in day care centres and 37,243 school children have received learning materials and school supplies. An estimated 4,408 children have access to TLSs. A total of 3,793 children have benefitted from 49 psychosocial sessions in eight CFSs and local child protection systems were strengthened in 13 communities. Seventy youth were trained as advocates of child rights and 7,511 community members have attended awareness raising activities on child protection and gender-based violence. Out of the 33,046 children under 5 years screened, 193 children with SAM and 1,388 children with MAM were identified; 93 per cent of SAM cases and 96 per cent of MAM cases have been enrolled into the therapeutic and supplementary feeding programs. Around 18,963 pregnant and lactating women were provided with IYCF counselling and support. Some 24,149 children received Vitamin A, while 1,869 pregnant women received iron-folate supplements.
Humanitarian performance monitoring

Humanitarian Performance Monitoring or HPM monitors humanitarian action and how it reaches and benefits the affected populations and communities. It generates quantitative and qualitative information from the perspective of the affected population about the receipt of goods and services and provides feedback on the level and quality of assistance across all sectors. In response to Typhoon Haiyan, UNICEF strengthened its humanitarian performance monitoring and developed an integrated Humanitarian Performance Monitoring Information System (HPMIS). This system provides real-time monitoring of humanitarian supply inputs, tracks distribution to partners, monitors UNICEF partner results, and assesses appropriateness, quality, and beneficiary satisfaction through ePartners, eHPM and AAP.

**ePartners** – Allows UNICEF partner results to be reported, collated, and triangulated by tracking partners’ key actions and achievements against response plan indicators.

**eHPM** – An electronic survey administered in the field at the household level to monitor how women and children benefit from humanitarian action.

**Accountability to affected population (AAP)** – Views from affected populations on how services can be improved are collected and can feed back into planning processes and real-time management of the response.

**eHPM in 40-Haiyan priority areas**

On 9 December 2013, just one month after the start of the response, the first round of eHPM was conducted in Tacloban City reaching 1,432 households. Senior female household members were asked about humanitarian services including WASH, education, health and nutrition, and child protection. From 3 February to 15 March 2014, data gathering was completed for the remaining Haiyan-priority areas from 22,319 households in 39 municipalities.

From 11 September to 17 October, six months after the first survey, UNICEF conducted the second round of eHPM, this time integrating additional questions on social protection, disaster risk reduction, and disability. Preliminary data from 28 municipalities and one city has been analysed covering 17,031 households. Box 2 shows the preliminary results of round 2 as compared to round 1 of the survey.

The development of an electronic HPM system allowed close to real-time sharing of results, improving the efficiency of programme implementation while reducing turnaround time and reporting burden at the height of a humanitarian response. Both surveys were carried out in partnership with the University of the Philippines Population Institute and the results of the surveys can be viewed in UNICEF’s online HPMIS dashboard: http://prod1.sdrc.co.in:8086/HPMIS/.
**ePartners report**

UNICEF has been implementing programmes through 22 NGOs, as well as government partners. The results delivered by NGO partners are reported monthly to UNICEF through ePartners, validated through field monitoring, and triangulated with the eHPM results. UNICEF programme officers together with monitoring and evaluation staff conduct field visits to project sites and do spot-checks to validate the ePartner reporting. The results of partners’ performance and achievements assist in the planning of upcoming programmes, projects, and activities.

**Box 2. Satisfaction Meters**

**Evaluation**

UNICEF conducted real-time evaluation (RTE) to assess the first three months of the response. The purpose was to review UNICEF’s interventions and results to date to determine the organization’s performance, and to draw conclusions and make recommendations to improve the effectiveness and quality of the ongoing response to Typhoon Haiyan, and better plan for future emergencies. The results of the evaluation were shared with UNICEF Philippines and workshops were conducted to discuss the lessons learned. Key recommendations that UNICEF has actively responded to include diversifying implementing partners and increasing capacity-building for local government units.
Core Commitments for Children in Humanitarian Action

Operational commitments

Human resources

Supply and logistics

The devastation of Typhoon Haiyan required a significant and immediate increase in staff, supplies and logistics as well as financial controls. Within 72 hours of the Typhoon hitting the Philippines, UNICEF activated its corporate emergency procedures and all levels of the organization helped identify and deploy emergency response staff, fast track shipment and delivery of supplies, raise the necessary resources to support the response and deliver on UNICEF’s Cluster coordination roles. Pre-positioned supplies were mobilized, emergency clauses in contracts were activated and field offices were established in Tacloban and Roxas with an outreach post in Guiuan. With the response well into recovery, operations are being wound down. Only the Tacloban field office will continue into 2015.

Human resources

UNICEF Philippines immediately redeployed existing personnel from other locations in the country, and additional human resources were mobilized regionally and globally. An Immediate Response Team with extensive emergency experience reached Tacloban within a week after the typhoon. From a base of 84 staff prior to the Typhoon, an additional 163 surge personal assisted the response, most of them during the first 4 months, with a peak in December 2013. This included personnel for programmes, communications and operations, and cluster coordinators and information managers in WASH, Nutrition, Education and Child Protection. Personnel were drawn from UNICEF county offices, regional offices, and headquarters, with UNICEF also drawing on the rapid response mechanism under the Global WASH cluster, and bringing in consultants, retirees and UNICEF standby-partners from NGOs and governments. In addition, the Country Office had more than 70 Individual Consultants and Contractors working on projects related to the Haiyan response.

The initial surge personnel have been replaced by staff which joined the office between December and May. One year on, there are now 184 staff including 101 new staff recruited for the emergency and recovery phase.

One year on:

184 Staff

including:

101 New Staff
UNICEF immediately drew on its remaining prepositioned emergency supplies for the first response from warehouses in Manila and Cotabato. The level of locally available supplies was insufficient to meet the scale of needs and much of the pre-positioned stock had been distributed in response to earlier emergencies in Bohol and Zamboanga. Critical supplies for life-saving activities were mobilized globally, mainly from UNICEF Supply Division in Copenhagen and regional supply hubs in China and Indonesia.

Delivery to affected populations was challenging in the initial weeks and months as roads, airports and other key infrastructure was badly damaged. Commercial and military flights were used, in-line with international guidelines on the use of military assets in disaster response, alongside a fleet of trucks and ships. A Logistics Hub was established in Cebu for the first two months to deliver at scale across all locations until Manila re-established road transport to Tacloban.

One year on, UNICEF has provided emergency relief and recovery supplies valued at around US$33 million including local procurement valued at US$20 million. UNICEF has shifted to using local sources wherever possible and restocked its prepositioned supplies for up to 12,000 families. Logistics conditions have improved significantly with most major infrastructure restored. Tacloban airstrip is undergoing prolonged repair limiting it to light planes only and Manila sea port congestion continues to pose a challenge for quick customs clearance of incoming offshore shipments.

Value of Programme Supplies since Haiyan to present by Programme Sector (data as of 27 October 2014):

**Fig. 3. Supplies by Sector in US$ million**
Thanks to the generosity of donors, UNICEF’s response to the humanitarian and early recovery needs for children affected by Typhoon Haiyan is now fully funded in line with UNICEF’s Typhoon Haiyan Strategic Response Plan November 2014. A total of US$157 million has been received for the UNICEF Haiyan response, exceeding our appeal of US$119 million (out of the total inter-agency appeal for US$791 million) for the Typhoon Haiyan response. Around US$130 million is planned for implementation by the end of 2014 with the remaining US$27 million to be spent in 2015.

We acknowledge and sincerely appreciate the rapid and very generous financial and in-kind support from individuals, governments and UNICEF’s many corporate and private partners, without which the immediate phase of the response would not have been as effective and recovery initiatives could not have been initiated.

Building upon the past 66 years of experience in the Philippines, UNICEF will continue working in collaboration with the Government and other partners beyond this Haiyan response plan and for longer-term to further strengthen the country’s resilience and advance sustainable development. This includes the ongoing UNICEF efforts on other acute as well as chronic emergencies such as the Mindanao conflict, Zamboanga conflict and Bohol earthquake. Given the high level of funding for Haiyan and significant shortfalls for other responses in the Philippines, US$3 million of Haiyan funds were re-programmed for the Zamboanga (US$1 million) and Mindanao (US$2 million) responses. This reduced to US$5.4 million the additional funding required for these UNICEF responses. No further funding is being sought for the response in Bohol.

Core Commitments for Children in Humanitarian Action

Funding against requirements

Top 10 National Committee donors
Top 10 government/public sector donors
Funding received per sector in response to Haiyan
Funds utilized per sector in response to Haiyan
In response to Typhoon Haiyan, 97% of funds received were utilized. The sectoral utilization percentages were as follows:

- WASH: 95%
- Education: 94%
- Health: 93%
- Child protection: 93%
- Cash transfers: 98%
- Nutrition: 93%

Expenditure figures at the sectoral level, including cross-sectoral expenditures, as of 5 November 2014. Funds received are reported at the programmable level excluding recovery cost, reflecting resources available for in-country programming in response to Typhoon Haiyan.
Looking forward

The Philippines is a middle income country with considerable experience in disaster preparedness, response and recovery. However, the scale of devastation caused by Haiyan mean that it will be many years before affected communities fully recover. UNICEF’s work will continue toward the twin goals set out in the Government’s reconstruction plan5: to restore economic and social conditions to pre-typhoon levels; and a higher level of disaster resilience. So while continuing to respond to the impact of this disaster, preparations are being made for the future.

UNICEF is harmonizing its ongoing recovery efforts with its country program 2012–2016, which targets: risk mitigation and resilience against disasters, conflict and rapid urbanization; and acceleration of progress towards the Millennium Development Goals (MDGs), with particular attention on regional disparities. The scope of the existing country programme is being expanded to include the 40 LGUs most affected by Haiyan with better targeting of DRR work, diversifying partnerships, strengthening capacity development and empowering LGUs and communities.

Major areas of work in 2015 include the PhATS programme for community-led improvements in sanitation, repaired schools replacing tent schools, full restoration of routine health and nutrition services with stronger emergency protocols and procedures, replacement of lost and destroyed birth certificates and life skills education for adolescents. UNICEF will continue to work closely with LGUs and government service providers to improve their capacity and preparedness. Communities will be empowered to better protect themselves. And the voices of children - their needs, concerns and hopes – will be heard.

**UNICEF partners and counterparts**

**Government**

Council for the Welfare of Children, Department of Education (DepEd), Department of Health (DoH), Department of Justice, Department of Public Works and Highways, Department of Social Welfare and Development (DSWD), Department of the Interior and Local Government, Food and Drug Administration (FDA), National Disaster Risk Reduction and Management Council (NDRRMC), National Economic and Development Authority, National Nutrition Council, Office of Civil Defence, Philippine Information Agency, Office of the Presidential Assistant for Rehabilitation and Recovery (OPARR), Women and Children Protection Desk-Philippine National Police and Local Government Units in Haiyan affected areas

**United Nations system**


**NGOs and civil society organizations**


**Surge capacity stand-by partners**

British Red Cross, CANADEM, Centers for Disease Control and Prevention (CDC), Danish Refugee Council, Irish Aid, iMMAP, NORCAP, Norwegian Church Aid (NCA), Protection Standby Capacity roster (ProCap), RedR Australia, Save the Children Sweden, Save the Children UK, Swedish Civil Contingencies Agency (MSB), Veolia Foundation
National Committees

Governments and public funds
Australia, Brazil, Canada, Central Emergency Response Fund (CERF), Denmark, Humanitarian Aid and Civil Protection department of the European Commission (ECHO), Estonia, Germany, Hungary, Japan, Republic of Korea, Kuwait, Norway, Russian Federation, Slovenia, Spain, Sweden, United Kingdom Department for International Development (DFID), United States Agency for International Development (USAID)

UNICEF offices
Argentina, Brazil, Canada, Chile, China, Colombia, Costa Rica, Croatia, Hungary, India, Indonesia, Ireland, Liberia, Malaysia, Mexico, Oman, Norway, Panama, Philippines, Romania, Saudi Arabia, Serbia, South Africa, Sweden, Thailand, United Arab Emirates, Uruguay, Venezuela

Private sector

UNICEF values of all of its partnerships and works with a wide range of community-based organizations, faith-based organizations, non-public actors and other groups and individuals, and recognizes that many of those could not be mentioned here.
### List of acronyms

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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<tbody>
<tr>
<td>AWD</td>
<td>Acute watery diarrhoea</td>
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<td>C4D</td>
<td>Communication for development</td>
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<tr>
<td>CDAC</td>
<td>Communicating with disaster affected communities</td>
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<td>CMAM</td>
<td>Community-based management of acute malnutrition</td>
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<td>CPWG</td>
<td>Child Protection working group</td>
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<td>CWC</td>
<td>Council for the Welfare of Children</td>
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<td>DepEd</td>
<td>Department of Education</td>
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<tr>
<td>DoH</td>
<td>Department of Health</td>
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<tr>
<td>DRR</td>
<td>Disaster risk reduction</td>
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<tr>
<td>DRRMOs</td>
<td>Disaster risk reduction and management offices</td>
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<tr>
<td>DSWD</td>
<td>Department of Social Welfare and Development</td>
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<td>EiE</td>
<td>Education in emergencies</td>
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<td>EPI</td>
<td>Expanded programme on immunization</td>
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<td>EVRMC</td>
<td>Eastern Visayas Regional Medical Center</td>
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<td>FTR</td>
<td>Family tracing and reunification</td>
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<td>HIV</td>
<td>Human immunodeficiency virus</td>
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<td>HPMIS</td>
<td>Humanitarian performance monitoring information system</td>
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<td>IEC</td>
<td>Information, education and communication</td>
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<td>IEHK</td>
<td>Interagency emergency health kits</td>
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<td>IYCF</td>
<td>Infant and young child feeding</td>
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<td>LMWD</td>
<td>Leyte Metro Water District</td>
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<td>LGUs</td>
<td>Local government units</td>
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<td>MDGs</td>
<td>Millennium Development Goals</td>
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<td>MIRA</td>
<td>Multiple indicator rapid assessment</td>
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<tr>
<td>MUAC</td>
<td>Mid-upper arm circumference</td>
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<td>NNC</td>
<td>National Nutrition Council</td>
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<tr>
<td>NGO</td>
<td>Non-governmental organization</td>
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<tr>
<td>OPARR</td>
<td>Office of the Presidential Assistant for Rehabilitation and Recovery</td>
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<tr>
<td>PhATS</td>
<td>Philippines approach to total sanitation</td>
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<tr>
<td>RAY</td>
<td>Reconstruction assistance for Yolanda</td>
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<tr>
<td>RSCWC</td>
<td>Regional sub-committees for the welfare of children</td>
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<tr>
<td>SAM</td>
<td>Severe acute malnutrition</td>
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<tr>
<td>SMART</td>
<td>Standardized monitoring and assessment of relief and transitions</td>
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<td>SMS</td>
<td>Short message service</td>
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<tr>
<td>SRP</td>
<td>Strategic response plan</td>
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<tr>
<td>TLS</td>
<td>Temporary learning space</td>
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<tr>
<td>UNFPA</td>
<td>United Nations Populations Fund</td>
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<tr>
<td>UNHCHR</td>
<td>United Nations High Commissioner for Refugees</td>
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<tr>
<td>UNICEF</td>
<td>United Nations Children’s Fund</td>
</tr>
<tr>
<td>WASH</td>
<td>Water, sanitation and hygiene</td>
</tr>
<tr>
<td>WCPD</td>
<td>Women and child protection desks</td>
</tr>
<tr>
<td>WFP</td>
<td>World Food Programme</td>
</tr>
<tr>
<td>WHO</td>
<td>World Health Organization</td>
</tr>
<tr>
<td>ZOD</td>
<td>Zero open defecation</td>
</tr>
</tbody>
</table>
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