Over 10,000 children have been vaccinated against polio and measles, and over 9,000 have received Vitamin A supplements through a mass vaccination campaign by the Government of the Philippines with support from UNICEF, the WHO and other partners. UNICEF has a team of cold chain engineers who are currently on mission in Regions VI, VII and VIII, conducting cold chain assessments, which UNICEF and WHO are working to re-establish throughout the typhoon affected regions.

UNICEF has established 13 temporary learning spaces in Roxas City, Iloilo, Capiz, Leyte and Samar, each equipped with a school in a box and recreation kit, which can accommodate 1,300 children.

UNICEF partners have provided water kits, water treatment products, bladders and home storage containers serving 168,000 people in the affected regions. In addition, UNICEF has provided 29,000 people with materials needed for practicing basic hygiene, and has provided toilet slabs and portable toilets serving 25,000 people.
Situation Overview & Humanitarian Needs

According to the Department of Social Welfare and Development (DSWD), about 14.4 million people have been affected by Typhoon Haiyan. The number of people displaced stands at 3.62 million, including 1.5 million children.

The most affected population, estimated at 4 million, are located along the coastal and inland areas of Leyte, Samar, Eastern Samar, the northern tip of Cebu and Panay Island. Many of the affected areas are amongst the poorest in the Philippines.

The MIRA assessment found that food is a main priority for the affected population, as is shelter and the restoration of livelihoods. Community services, in particular WASH, education and health negatively impacted and require substantial support for their recovery. Protection risks, in particular those linked to displacement, require immediate mitigation, with a particular emphasis on child protection.

Initial data reported from the rapid social protection assessment show wide spread recognition of children experiencing distress from the typhoon, storm surges, and their aftermath. Parents noted children have been ‘shaking, crying, and scared on a windy night’; increased risk of exploitation with several families living in one shelter (overcrowding); children begging, risks of child labour and trafficking. There are concerns that children arriving in transit/evacuation locations without parents or care givers are at risk of abuse and exploitation. Initial findings also show that youth remain at risk of GBV and exploitation.

In the most affected areas, the acute malnutrition rates were higher than the national average, and with the limited access to clean water and food, a further deterioration in malnutrition among children is a concern. There have been reports of uncontrolled distribution of milk formula powder. One case has been addressed by the Department of Health, and two additional reports in Leyte are currently under investigation.

Reproductive health is also a major on-going concern in the wake of the Typhoon. In the Central Visayas Region, there are around 3 million women of reproductive age, of whom around 230,000 were estimated to be pregnant while 150,000 were estimated to be lactating women. Many health facilities and birthing clinics were destroyed in Eastern Samar and Leyte, leaving women and babies at high risk of maternal and neonatal mortality.

Some 90% of school buildings were damaged in affected areas, compromising over 3,232 schools with over 1 million pupils and staffed with 34,000 teachers before the crisis. Education concerns are particularly high in the eastern areas of Samar and Leyte, and in the coastal areas of northern Cebu and Panay. Initial phases of the education response focus on the resumption of learning activities through the setting up of school tents (Temporary Learning Spaces), as well as the provision of psychosocial support for children, teachers and other education staff. The Department of Education, with UNICEF and Save the Children, has planned for a ‘soft’ opening of schools in the affected regions to take place on 2 December 2013.

One of the most crucial tasks on the ground is providing safe drinking water and sanitation as damage to water pipes and infrastructure has severely compromised water supplies in the affected areas. Damaged toilet facilities are widespread and open defecation is now a major concern. Protection risks in open defecation, especially for women and girls, need specific attention.

<table>
<thead>
<tr>
<th>Estimated Affected Population (Note: This information does not include areas that are still for validation.)</th>
<th>Total</th>
<th>Female</th>
<th>Male</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Affected Population</td>
<td>14,400,000</td>
<td>7,344,000</td>
<td>7,056,000</td>
</tr>
<tr>
<td>Children Affected (Under 18)</td>
<td>6,000,000</td>
<td>3,060,000</td>
<td>2,940,000</td>
</tr>
<tr>
<td>Children Under Five Affected</td>
<td>810,000</td>
<td>413,100</td>
<td>396,900</td>
</tr>
</tbody>
</table>

1 OCHA Philippines Typhoon Haiyan Situation Report 29 November 2013
| Children under 1 year of age Affected | 162,000 | 82,620 | 79,380 |
| Total Displaced Population | 3,620,000 | 1,846,200 | 1,773,800 |
| Children Displaced (Under 18) | 1,500,000 | 765,000 | 735,000 |

**Humanitarian leadership and coordination**

The Government of Philippines is currently responding to two earlier crises, the Zamboanga conflict and the Bohol Earthquake, and their support is further required to respond to the impact of the Typhoon. On 10 November, the Government accepted international support to respond to the emergency. The response is being led by the Government of Philippines National Disaster Risk Reduction and Management Council (NDRRMC) with local authorities. UNICEF is supporting the Government-led response in coordination with other UN agencies and international and national NGOs. The Cluster system co-led by the Government has been activated since 2009 and coordination is in place following two responses in 2013, the Zamboanga conflict and the Bohol Earthquake. UNICEF, in addition to its programmatic responsibilities, leads the WASH, Child Protection sub-cluster, Education and Nutrition clusters. UNICEF is also an active partner in the health cluster, which is led by WHO. Clusters aim to present a 12-month strategic plan for the Typhoon Haiyan response by 10 December.

**Humanitarian Strategy**

UNICEF, with government and other partners, has identified strategic priorities and goals which include the provision of necessary materials, services and environments for safe and healthy living until reconstruction takes place. UNICEF’s roles within these priorities, working closely with all partners, is to prevent deterioration in the pre-existing levels of mortality, morbidity and malnutrition, and provide shelter and support to displaced populations, especially children. UNICEF has established main office hubs in Tacloban with an outreach post in Guiuan, and Roxas City and a logistics hub in Cebu. The newly established offices include cluster coordination and information management capacity at decentralized levels in all four clusters (WASH, Education, Child protection and Nutrition).

**UNICEF Actions to date**

**Health**

Children in the affected areas are being vaccinated against measles and polio through a mass vaccination campaign by the Government of the Philippines with support from UNICEF, the WHO and other partners. Through this campaign, children are also receiving Vitamin A supplementation to help improve their immunity against infections and are being screened for malnutrition. To date, the campaign has vaccinated 11,928 children against Polio, and 10,216 against Measles. A total of 9,656 children have received Vitamin A supplementation. The vaccination campaign is targeting children aged less than five years of age and is currently being expanded to cover all Typhoon affected areas.

In addition, UNICEF has a team of cold chain engineers who are currently on mission in Regions VI, VII and VIII, conducting cold chain assessments using the new assessment form jointly developed by WHO and UNICEF for post disaster assessments. UNICEF, along with the WHO, will assist the Department of Health to develop a comprehensive plan to re-establish cold chain in the affected areas, and will provide some of the necessary equipment needed to help with this restoration in priority areas.

There are two main communicable disease control surveillance systems in operation in the affected areas (SPEED and PIDS) to assist in the detection of disease outbreaks. The Health Emergency Management unit of Department of Health, with support from UNICEF, has provided an orientation on SPEED for medical teams leaving from Manila to the affected areas in order to sensitize them with the aim to in-crease the use of the system.

**Nutrition**
The Nutrition cluster estimates 1.35 million children under-five, 650,000 pregnant and lactating women across nine regions to be at risk of malnutrition. Cluster partners are primarily focusing on Regions VI (Western Visayas), VII (Central Visayas) and VIII (eastern Visayas). The Nutrition cluster plans to target about 15,000 children 6-59 months with community-based management of acute malnutrition (severe and moderate), up to 40,000 children 6-23 months with blanket supplementary feeding programmes and about 100,500 children 0-23 months and pregnant women with infant/young child feeding in emergencies programmes, over a period of 6 months.

To date, Nutrition cluster partners have completed malnutrition screening for 17,046 children. Of the children screened, 654 have been found to be acute malnourished or at risk of acute malnutrition and have been enrolled into treatment programmes. Almost 1,000 pregnant and lactating women have been provided with support and counselling. UNICEF and partners delivered 25 early childhood development kits for use at parent and baby-friendly tents, and IYCF messages have been provided to mothers and caretakers during the screening sessions.

**WASH**

UNICEF partners have provided water kits, water treatment products, bladders and home storage containers serving 168,000 people in the affected regions. In addition, UNICEF has provided 29,000 people with materials needed for practicing basic hygiene. UNICEF has also provided toilet slabs and portable toilets serving 25,000 people.

To date, at least 428,000 people have restored access to safe water in Tacloban, Cebu, Capiz, Roxas City and three cities in Western Samar since the Typhoon struck. This includes the restoration of the water supply in Basey, Marabut and in Catbalogan City, in Western Samar, for 160,000 people.

The First Response Radio in Tacloban has been broadcasting on a daily basis hygiene promotion messages in the local language and has been broadcasting messages related to water, sanitation and specific needs for intervention.

**Child Protection**

UNICEF is supporting 4 Child Friendly Spaces (CFS) through the government and has provided kits for 3 additional planned sites. In addition, UNICEF is supporting 15 Child Friendly Spaces operated by 3 NGOs (SOS Children’s Village, Child Fund and CFSI) with CFS kits in Guiuan,Ormoc City, and Tacloban. In total, these activities are currently reaching approximately 3,000 with plans for scaling up.

UNICEF’s child protection team has documented 7 cases of children separated from their primary caregivers in the Tacloban area using the RapidFTR technology; these cases are with the municipal/city social welfare and development office for care and follow-up. UNICEF established a provincial hub in Tacloban for rapid identification, documentation and reunification of unaccompanied and separated children using the ‘RapidFTR technology’, and is providing related coaching for government child protection focal points of the Philippine National Police Women and Child Protection Desk and the Municipal Social Welfare and Development in 13 priority municipalities. This is being extended to government focal points in 9 municipalities of Samar Province this week.

**Education**

The ‘soft’ opening of schools in the affected regions began on 2 December. UNICEF has established 13 temporary learning spaces in Roxas City, Iloilo, Capiz, Leyte and Samar, each equipped with a school in a box and recreation kit, which can accommodate 1,300 children. UNICEF’s WASH team is aligning plans with the education sector to ensure that all schools will benefit from appropriate WASH facilities including: clean water supply, clean toilets, hand-washing stands and hygiene education.

A two day teacher orientation linked to the soft opening of schools has been completed, where teachers were briefed on the methodology for the opening of schools, the pedagogy to be used and the identification of support needed for schools to resume classes.

**Human Resources**

As of 2 December, UNICEF has deployed 95 surge staff to the Philippines, including cluster coordinators in WASH, Child Protection and Gender Based Violence Area of Responsibility, Nutrition and Education, along with Information
Management support. Of the 95 surge staff deployed, 68 staff are on the ground in the typhoon affected areas including in Tacloban, Cebu and Roxas City.

Funding
Funding requirements are expected to increase significantly for Typhoon Haiyan, as the results of detailed needs assessments come in, and following UNICEF’s revision of its response plan to address immediate, early recovery and rehabilitation needs. UNICEF’s revised 12-month response plan, which will reflect a significant scale-up of activities, will be presented as part of the revised interagency appeal, in early December.

UNICEF’s total appeal to support children and women affected across the Philippines by Typhoon Haiyan, Bohol Earthquake and the Mindanao conflict is now US$96.5 million. UNICEF is grateful to donor partners for their generous contributions to date and encourages donors to provide flexible funding to respond to the three simultaneous emergencies, namely the earthquake in Bohol which affected 3.2 million people, the outbreak in fighting in Zamboanga, and the response to Typhoon Haiyan.

UNICEF Funding Requirements

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<tbody>
<tr>
<td>Water, Sanitation &amp; Hygiene</td>
<td>5,626,260</td>
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<td>7,800,000</td>
<td>21,000,000</td>
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<td>Child Protection</td>
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<td>700,000</td>
<td>500,000</td>
<td>10,000,000</td>
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<td>Nutrition</td>
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<td>7,000,000</td>
<td>11,727,068</td>
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<td>Health</td>
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<tr>
<td>Education</td>
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<td>1,500,000</td>
<td>1,879,822</td>
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<td>19,235,332</td>
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<tr>
<td>HIV and AIDS</td>
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<td></td>
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<td></td>
<td>24,000</td>
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<tr>
<td>Cluster/Sector Coordination</td>
<td>250,000</td>
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<td></td>
<td></td>
<td>250,000</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>17,107,575</strong></td>
<td><strong>$5,700,000</strong></td>
<td><strong>$12,179,822</strong></td>
<td><strong>$61,500,000</strong></td>
<td><strong>$96,487,397</strong></td>
</tr>
</tbody>
</table>

All amounts in US$; *Funding requirements until December 2013; **Funding requirements until May 2014.


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Next SitRep: 4 December 2013

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