Best practices and lessons learnt
UNICEF Myanmar’s response following cyclone Nargis

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Foreword

The relief efforts following cyclone *Nargis* brought about an extraordinary spirit of partnership between the Government of Myanmar, the United Nations, various donor agencies, local private sectors and many international and local non-governmental organisations. In spite of difficult political situations all humanitarian agencies were able to unite their efforts to support the immediate humanitarian needs of the population affected by the disaster, considered worse in the living memory of Myanmar.

UNICEF was among the first to respond by dispatching its staff within the first 24 hours to conduct initial assessment and distribute pre-positioned relief supplies. UNICEF in Myanmar mobilised cash, supplies and personnel according to Emergency Preparedness and Response Plan which was finalised only two month prior to the cyclone. UNICEF Myanmar was ably assisted by UNICEF New York, Geneva and the East Asia and Pacific Regional Office in deploying additional technical assistance. Meanwhile many donor agencies came forward with cash contribution and in some cases in-kind support. Various UNICEF National Committees also offered generous assistance to the relief and recovery efforts.

There were many difficulties, especially during the initial phase, in bringing staff into the country, limitation in getting internal travel permits for non-Myanmar citizens, damaged road networks, lack of appropriate transportation, lack of banking systems in the periphery, fuel supply, inadequate office space and accommodation for field staff. UNICEF managed to surmount many limitations and shortcomings in order to launch and continue intense relief efforts in collaboration with many local and international humanitarian agencies.

This document is the product of an independent review of UNICEF’s overall efforts in mounting relief work followed by early recovery efforts. This review covers UNICEF activities with regard to emergency response between May 2008 and January 2009. UNICEF gratefully acknowledges the work done by freelance consultant Ms. Sumithra Bala with total dedication and professionalism. Ms. Bala visited Myanmar twice and conducted several focus group discussions in the field and interviewed more than 90 humanitarian workers employed in 26 different agencies that collaborated with UNICEF during various stages of relief and recovery work.

This document is an independent endeavour to summarise the achievements, best practices, lessons learnt and constraints encountered while implementing the massive relief work within the context and environment of Myanmar. The facts were verified using multiple sources to give credibility to the reported findings. The documentation of the lessons learnt captures the knowledge and experience of a critical phase in UNICEF Myanmar’s work and hopefully will serve as a reference in future.

UNICEF extends thanks to Ms. Bala for her involvement in documenting UNICEF’s efforts. UNICEF would also like to acknowledge the respondents for providing required information to Ms. Bala. It is hoped that the lessons learnt and good practices recorded in the document will contribute to further refine and augment relief and recovery efforts and improve preparedness and response capacity of UNICEF Myanmar.

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Executive Summary

Cyclone *Nargis* lashed south-west Myanmar (Map) non-stop for 20 hours with unprecedented ferocity resulting a loss of more than 140,000 lives and damages to the property and infrastructure worth billions of dollars\(^1\). Hundreds of thousands of families whose livelihoods were based on farming, fishing and small trade were pushed to the brink of economic disaster. Myanmar is used to annual floods and cyclones but the government and the humanitarian community were not prepared for such scale of disaster. The government launched limited relief efforts immediately but it took some three weeks and a visit by the UN Secretary General to ease the entry visa and internal travel restrictions on the international humanitarian community to mount the required relief efforts.

UNICEF was able to conduct initial assessment in some of the affected townships by mobilising its local staff within 24 hours after the cyclone. UNICEF was able to distribute limited amounts of pre-positioned supplies to the affected communities immediately but nowhere near what was required. With the easing of travel restrictions UNICEF was able to scale up its relief efforts immediately. As per Inter Agency Standing Committee commitment UNICEF took lead in education, nutrition, WASH\(^2\) and child protection clusters. UNICEF implemented a large scale relief & recovery operation and learned many lessons for future use should such disaster strike again.

UNICEF Headquarter mobilised technical support through standby agreement with various partners to assist UNICEF Myanmar in logistic operation, WASH and child protection. Additional technical staff were recruited locally and internationally to assist the relief operation. Immediate priorities for UNICEF were to prevent disease outbreaks, ensure availability of safe drinking water, establishing temporary learning spaces for hundreds of thousands of children, creating child friendly spaces for traumatised children and family tracing and reintegation of separated children.

Strong winds and heavy rainfall left more than 4,000, schools destroyed or badly damaged, as were more than 600 health facilities. One of the priorities for UNICEF is to reinstate education infrastructure and health care networks. UNICEF joined the OCHA flash appeal and appealed for US$ 90 million. Many donors and UNICEF national committees contributed generously to UNICEF’s relief and recovery efforts which enabled UNICEF to establish more than two thousand temporary learning spaces, distribute family kits, establish child friendly spaces, operate water treatment plants, provide sanitation facilities, establish therapeutic feeding centres and many more interventions. The relief operation has been replaced by recovery process but the programme is facing severe financial constraints. In order to reinstate the damaged education, health and water infrastructures a substantial amount of resources would be required. Other major recovery needs include reviving of agricultural and non-agricultural livelihood to regenerate local economy. Without this support many children and their families will continue to remain vulnerable.

\(^1\) Ministry of Planning and International Cooperation  
\(^2\) Water, environmental sanitation and hygiene

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1. Background

On the night of 2nd May 2008, Cyclone Nargis made landfall in the Ayeyarwady Delta region of Myanmar. The accompanying tidal surge caused widespread devastation and loss of more than 140,000 lives and displaced more than 800,000 populations in the low-lying townships of the lower Delta. An initial assessment indicated 2.4 million people being affected requiring immediate humanitarian assistance. Strong winds and heavy rainfall severely damaged public infrastructures such as roads, bridges, school buildings, health centres, hospitals, government offices, monasteries, industrial complexes, etc. The cyclone also had a devastating impact on the main drinking water sources with tidal waves salinating ponds and dug-wells, as well as destroying rainwater harvesting systems. Hundreds of thousands of homes were collapsed including their possessions and shattered the livelihoods of entire communities by destroying agriculture farm land, fishing, salt-farms, shrimp-farms, and local small trade & businesses. The Post-Nargis Joint Assessment carried out in mid-June 2008 showed that the impact of Cyclone Nargis on Myanmar was similar in scale to that suffered by Indonesia following the 2004 Indian Ocean tsunami.

The national response to Cyclone Nargis was swift, but fell far short of what was required given the scale of damage. The cyclone Nargis, the worst natural disaster in living memory of Myanmar, overwhelmed the capacity of the national response. Indeed, few countries would have been able to respond on their own to a situation of this unimaginable scale.

The UNICEF emergency response to affected children and women was immediate. UNICEF in Myanmar was able to send its staff to the affected areas on 4th May 2008 for initial assessment and undertook relief initiatives. Despite the fact that UNICEF staff and their families in Yangon were also affected by the cyclone, all the staff took part in the emergency operation. UNICEF in coordination with Myanmar Red Cross Society (MRCS) and International Federation of Red Cross (IFRC) and UN agencies took the lead role in conducting rapid assessments in 34 field locations. This enabled UNICEF to devise a 180-day relief and response plan. Emergency supplies pre-positioned in key locations were very useful at the beginning of the emergency, although inadequate to cover the huge needs of the affected population. After consultations with donors, supplies available for Health, Education and Water, environmental sanitation and hygiene (WASH) from the regular program for 2008 annual work-plan were utilised for relief and the recovery operation.

As per inter-agency standing committee (IASC) guidelines UNICEF provided leadership to four clusters: Education, Nutrition, Child protection and WASH. Support was provided to the government in establishing temporary safe learning spaces, so that the new school year could begin in early June, enabling nearly 415,000 primary school children to resume schooling as scheduled. UNICEF’s partnerships with the government and other humanitarian agencies helped to provide necessary water and sanitation facilities, which helped to mitigate potential outbreaks of epidemics. UNICEF also collaborated with the Ministry of Health and other humanitarian agencies in conducting nutrition surveys as part of surveillance of malnutrition in children and assisted the township health authorities in resuming health services by providing basic health kits.

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and deployment of more than one hundred additional clinical staff in collaboration with various health professional associations.

In the months following the cyclone considerable progress has been achieved, with UNICEF and its implementing partners assisting all of the severely affected townships. In 2009, UNICEF is continuing to focus on assisting the worst-affected townships with key interventions in health, water and sanitation, nutrition, child protection and education reaching out to some 1.5 million people, including 450,000 children.

2. Purpose and Objectives

The overall objective is to assess the effectiveness and appropriateness of UNICEF’s response to cyclone *Nargis* in terms of program management and operations, including logistics, as well as achievements against the Core Commitment for Children (CCC). The review specifically will look at:

- the relevance, efficiency, effectiveness, and sustainability of UNICEF’s emergency response to cyclone *Nargis* as part of a broader assessment on humanitarian response
- documentation of lessons learned, identify trends, gaps and innovative
- informing a strategic blueprint with recommendations for a comprehensive system-building approach to UNICEF’s programming on emergency response for future

The target audience for this exercise is UNICEF Myanmar Country Office. The review will offers the opportunity to assess UNICEF’s emergency response and incorporate early recovery phase within the country program at least for the remaining two years of the current country program. In addition the review is expected to assist in emergency preparedness and response at the national level involving other partners such as MRCS, NGOs and volunteer groups.

3. Methodology

The review took into consideration commonly agreed OECD/DAC and Evaluation Association norms and standards to ensure ownership by stakeholders. The methodology also considered required political sensitivities, impartiality, accuracy, adequacy of information, cultural sensitivity and respect the rights of stakeholders.

This review took place in the context of a wide range of evaluative and reporting activities focusing on the first six months of the *Nargis* response. The key reports, relating to this review were the UNICEF’s 180 day progress and monitoring report, OCHA Real Time Evaluation of relief efforts, TCG periodic review and TCG Post *Nargis* recovery and preparedness plan (PONREPP) all of which were completed late last year.

The review was a participatory process which includes self-assessment by UNICEF staff involved in emergency response. It should be noted that the actual process of the review has been
a very positive lesson learnt initiative further validating the critical contribution of all UNICEF staff and partners to the emergency response in Myanmar. All information was to the largest possible extent triangulated (use of three or more sources of information to verify and substantiate an assessment) and validated.

The review employed the standard range of research methods to undertake data-collection, analysis and validation of findings, conclusions and recommendations. It included a desk review of existing documents and interviews with all state and non state stakeholders and Country Office program and operations staff including:

- A comprehensive literature review of external and internal documents relevant to the cyclone *Nargis* response. This include emergency flash appeals, sector/cluster strategy papers, guidelines, minutes of meetings, and situation reports (*sitreps*)

- Extensive interviews and focus group discussions with selected UN agencies, government leadership, NGOs and members of the IASC

- Field visits to the selected sites to gain first-hand information of the implementation of the cyclone *Nargis* response

- Interviews with community members and service providers involved in the relief operation in townships, village tract and villages where UNICEF provided emergency relief assistance where implementation is still ongoing

### 4. Overview of UNICEF Myanmar’s response

The overall goal of UNICEF’s emergency response was to reach children and their families with targeted interventions for improving health and nutritional status of the affected population, support provision of safe water and sanitation and restore education which is instrumental in bringing children back to school as early as possible. Another crucial intervention was a focused response for separated children by establishing a system for identification and reunification with their parents, close relatives and communities. Meanwhile more than one hundred *child friendly spaces* were established to provide psycho-social support. The emergency response also sought to engage with its partners to strengthen existing and new community support networks and services supportive of children and their needs, enhance community based disaster preparedness as well as build wider networks at township and national levels.

UNICEF Myanmar put on hold its regular country program on 7th May and engaged all 134 staff to address...
the humanitarian needs in the affected areas with additional staff hired to support field level response and recovery efforts. This critical decision allowed for a fast start-up of assessment missions and relief operations. The regular country program was re-activated in September 2008 programme by programme but continued to provide emergency response in the most affected townships in an ongoing basis.

UNICEF brought on assignment seven Myanmar professionals staff from six UNICEF country offices on short missions which was crucial in establishing five field offices in affected areas. Since they do not require entry visa and internal travel permits UNICEF was able to function immediately and fully in delivery of emergency response. Additional local professional staff were recruited to support these teams. They were eventually joined by other international staff on short missions while striving to get longer and more flexible visas and access to the field. By the end of the first month, the office started shifting to longer term appointments for international staff in key positions, including cluster coordination, initially for six months periods.

In close coordination with WFP, UNICEF strengthened its logistics and supply capacities at Yangon and field level. Sector-specific strategies for a 180-day work-plan were used with result matrices including programmatic objectives, targets, indicators, means of versification and needs for the main areas of intervention: Water and Sanitation, Education, Child Protection, Nutrition, Health/HIV-AIDS and the provision of Shelter and Non-Food Items.

From the very beginning the focus of the UNICEF emergency program was on the most affected areas of Irrawaddy and Yangon Divisions. UNICEF was able to deploy staff from the second day of the crisis. There was a lack of information and a complete picture of the situation on the ground due to breakdown in telecommunication networks and UHF/VHF radios were not permitted. The frequent displacements of people, voluntary or involuntary, inside and outside the most affected areas, required a high degree of flexibility in adapting the response to continuous and often unpredictable changes.

The government was providing some relief support and within weeks the displaced people were being encouraged to return to their place of origin. UNICEF was concerned with this decision by the authorities. In absence of proper livelihood support and shelter people will not be able to reinstate normalcy. UNICEF’s priority was to focus in distribution of non-food items, provision of basic essential medical supplies to make rural health centres fully functional, and prevent outbreaks of water born diseases.

There were tremendous logistic challenges due to information gaps. It was not clear as to where and how many displaced population need what levels of assistance. It took some time before a clear assessment of the humanitarian needs in these areas were carried out. It was only then that a comprehensive out-reach system on the ground could be put in place. UNICEF focused on immediately developing a strategy to identify, monitor and assist vulnerable groups, which would otherwise be forgotten in the overall emergency response. Female and adolescent headed households, separated and unaccompanied children, young mothers widowed by the cyclone received particular attention in the framework of the sector-specific responses.

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5. Meeting Core Commitments for Children

This review covers the programmatic as well as operational aspects of UNICEF Myanmar’s engagement in the relief efforts and fulfilment of its Core Commitment for Children (CCC).

Six program areas, outlined in 180 day work plan (mid-June to mid-December 2008) guided the cyclone Nargis emergency and recovery response. The programmatic sector includes interventions in Water and Environmental Sanitation and Hygiene (WASH); Health and HIV, Nutrition, Education, Child Protection and the distribution of Shelter and Non-Food items to the displaced families. They reflect UNICEF’s human rights based approach to programming and operate within the framework of the Convention on the Rights of the Child and CEDAW and as noted the fulfilment of its CCC.

As agreed with the local Inter-Agency Standing Committee (IASC), the number of beneficiaries for planning purposes was 2.4 million, of which the 1.4 million in the most affected townships of the Irrawaddy Division were in especially urgent need of assistance. Any revision of these initial estimates were amended in coordination and agreement with the Myanmar IASC.

5.1 Water and Environmental Sanitation and Hygiene

Objective:
To ensure the provision of safe water and proper sanitation for children and woman

Expected Results:
- 250,000 affected people have access to safe drinking water at 3 litres/capita/day (lpcd) and clean water for bathing, cooking and cleaning at 10 lpcd in 8 townships
- 550,000 affected people in 7 townships have access to hygiene promotion messages and activities which address key behaviours and support the prevention of water/excreta related diseases
- 20,000 displaced families in temporary settlements have access to sanitary latrines and a clean environment

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• 40,000 families have access to sanitary latrines and a clean environment

• Approximately 100,000 affected households receive shelter kits and 88,000 households receive family kits with basic non-food items for survival

• Approximately 150,000 primary school children in 1,000 supported schools have access to water and sanitation facilities

**Results Achieved:**

• UNICEF supported the construction and maintenance of 300 emergency latrines in the temporary settlements in Laputta and Bogalay townships immediately.

• Water purification chemicals such as **Aquatabs** and **Water Guard** were distributed to approximately 250,000 people. UNICEF and its implementing partners cleaned and rehabilitated 507 ponds and 213 dug-wells during the first few weeks.

• A total of 558 large rainwater containers were installed in schools and rural health centres, which increased water storage capacity and provided an opportunity to demonstrate simple rain water harvesting techniques to community and local authorities.

• Eight water treatment plants installed in the cyclone affected areas are presently providing safe drinking water to more than 15,000 people.

• 1,120 pre-fabricated mobile latrines were installed in primary schools in 17 townships in Ayeyarwady Division and 2 townships in Yangon Division. 35,000 household latrines were constructed using UNICEF provided latrine pans and pipes.

**Best Practice:**

• During and after the cyclone relief and early recovery phase there were no major outbreaks of water and sanitation related diseases (cholera in particular). In spite of the poor living conditions in camps, and contamination of water sources in the villages, there has been no alarming increase in incidence of diarrhoea according to WHO disease surveillance reports. This is an indirect indication of proper treatment of drinking water and proper use of disinfectants to clean sewer and open drainage. WASH cluster provided aqua-tablets and drums of chlorine (HTH) to disinfect sewer and ponds. The WASH cluster members deserve special thanks for these efforts.

• Initially, in the first few weeks UNICEF was not only responsible for giving leadership on measures to control vector-borne diseases as well as water-borne diseases by daily surveillance of disease outbreaks in the camps and hospitals, but also for the provision of health education personnel and environmental sanitation engineers who were sent to relief camps to provide necessary services. UNICEF provided health education focused on good personal hygiene, sanitary habits, consumption of safe drinking water, fly proof latrines, and the use of insecticide treated bet-nets. It must be acknowledged that the joint response efforts and combined synergies of the WASH, led by UNICEF and Health Clusters successfully prevented outbreaks of water and sanitation related diseases in the cyclone affected areas.

• Considerable progress was achieved in providing a minimum amount of safe drinking water in the 8 most affected Delta townships. However, domestic water needs still remain unmet. UNICEF’s strategy to focus on appropriate and sustainable solutions was critical. Increasing...
household rainwater storage capacity by quickly distributing water storage containers and installing rain collection tanks in schools and rural health centres was important given it was the rainy season and other alternatives were limited.

- Making *Water Guard* (sodium hypochlorite solution) and the ceramic water filters available as a low cost option to improve water safety at the household level has the potential to benefit millions of people in the delta region, where bacteriologically contaminated surface water from ponds and rivers represent the only available non-saline water resource. *Water Guard* distribution and use successfully scaled up during the emergency as it was already part of UNICEF’s regular WASH program in the Delta and was familiar to many communities. The partnership with PSI on promoting household water treatment and the collaboration with an NGO consortium in establishing the local production of ceramic water filters was very successful and beneficial.

- WASH emergency team established new partnerships with NGO’s and the private sector to pool resources to speed up emergency response. A total of 7 project collaboration agreements and 5 small scale projects were implemented in 2008. However, the internal documentation requirements of UNICEF remain a major obstacle to increasing number of community partners who are not registered NGOs.

- UNICEF also introduced *cash for work* scheme for pond cleaning; new pond building and rehabilitation which not only provided clean water but also generate some cash income to some individuals in the worst affected.

- The WASH emergency preparedness, coordination and response capacity was considerably strengthened in the past two years following Tsunami related relief works. UNICEF took the lead in revitalizing the WATSAN theme group as a sector focus and coordination body in 2007. The experience gained in emergency response coordination from the *Tsunami* disaster relief was highly beneficial in enabling the Myanmar WASH team to lead the inter-agency cluster working group on water supply and sanitation during the current relief works. There were initial difficulties in locating and retaining cluster coordinators for WASH with the right expertise both at national and township levels although this problem was later resoled.

**Constraints:**
- Inadequate human resource capacity, combined with competing priorities for a limited pool of skilled workers in the affected township have been a major constraint to quickly rebuilding water supply and sanitation infrastructure. All agencies are competing for the same human resources including local labour forces.

- Many donors responded generously to the needs of the affected populations, nevertheless appropriateness, timeliness and volume of supplies were a major challenge in the WASH sector. There were many examples of inferior, inappropriate and small quantities of supplies made available during the *Nargis* response. Examples of culturally inappropriate supplies received include: potties and female sanitary products, jerry cans that bursts as soon as they were filled, and water filtration tanks not suitable for river water as it lacked additional parts.
• Coverage, targeting and duplication, particularly early in the response, were also significant due to the constant movement and changing needs of the affected population especially those in IDP camps.

• The lack of registered local suppliers, restricted national banking network and the limited capacity of government counterpart departments to initiate procurement makes made the local procurement process very restrictive. The established UNICEF supply procedures in Myanmar are also sometimes an impediment to decentralization procurement. A good example of this is the procurement of water storage jars from the Ceramic Association in the Delta rather than sourcing them nationally from traders as has been the case. This will provide much needed livelihoods in the affected townships, revive a traditional industry (rebuilding the destroyed kilns and training new potters to meet the huge demand) building the capacity of the communities and ensure a local supply of low cost ceramic jars.

• Resource allocation is not keeping pace with the institutional capacity in the Delta. Putting more school sanitation facilities in place is important, but often the limited experience of community partners such as village leaders, members of the Parent Teacher Association and local contractors for construction works pose a significant challenge in ensuring the sustainability of the provided services.

• Equity issues within communities, especially with regard to power and distribution of resources, have been in conflict with the outcomes of the newly introduced community planning processes. The more powerful and affluent members of the community tend to have the most influence in the planning process. To counter this trend, initiatives that encourage the active participation of all community members need to be incorporated into all community dialogue activities and there should be greater adoption of BCC initiatives.

5.2 Health and HIV/AIDS

Objective:
To promote access to essential and quality health services

Expected Results:
• Comprehensive data and information are available for planning and monitoring in affected areas

• 90 per cent coverage of measles vaccination for children aged 9 months to 15 years

• 80 per cent coverage of routine immunization in all the affected
townships are attained

- 80 per cent of affected children and pregnant/lactating women have access to emergency, preventive and curative services for maternal, neonatal and child health

- At least 50 per cent of children and pregnant/lactating mothers have access to proper health and hygiene communication

- 80 per cent of basic health facilities restart/revitalize maternal, neonatal and child health services

**Results Achieved:**

- The immediate response began by providing assistance to the basic health staff, local and international NGOs through the provision of pre-positioned emergency drugs and medical supplies for emergency relief and medical care.

- UNICEF advocated for and supported an emergency measles campaign in all temporary settlements and high risk villages for children between 9 months and 15 years although the target age was initially instructed between 9 month and 5 years or between 9 month and 10 years in many townships due to the fear of adverse events following immunization and miscommunication

- In total, more than 110,000 children received measles vaccination in cyclone affected areas. UNICEF also supported the rehabilitation of the cold chain system, including the provision of solar refrigerators.

- Routine immunization was resumed within 2 months after the cyclone, and finally over 85 per cent of the targeted population have been covered with routine immunization. The essential maternal and child health services were provided through EPI Plus in 9 severely affected townships.

- UNICEF deployed over 130 midwives, nurses and health assistants to severely affected townships in partnership with the Myanmar Nurse and Midwife Association and Myanmar Health Assistant Association.

- UNICEF played a vital role in revitalization of health services in cyclone affected areas through support with essential drugs, kits and provision of roofing sheets for damaged health facilities as well as for repair of houses of basic health staff.

- To mitigate the potential threats of infectious diseases outbreaks, such as severe diarrhoea, malaria and dengue hemorrhagic fever, UNICEF supported preventive and preparedness activities including vector-control by fumigation and larvicide application, provision of insecticide treated bed nets, provision of ORS and other essential drugs and diagnostics equipment and health communication materials. Post-Exposure Prophylaxis (PEP) kits were supplied to the most affected townships, with reproductive health and HIV prevention education as a part of the broader health education activities.

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Best Practices:

- Five of the eight Myanmar staff brought in from other UNICEF offices and four regular field officers in UNICEF Myanmar were medical doctors. This helped to establish immediate links with the local authorities to resume health services in the affected areas. UNICEF response included the provision of emergency and essential drugs and commodities; strengthened human resources preventive and preparedness measures against potential infectious diseases outbreaks; an emergency measles campaign; and the revitalization of routine immunization. A significant step was made in promoting the integrated package of maternal, neonatal and child health services: EPI Plus. All basic maternal, child health and nutrition services were quickly established, which helped prevent outbreaks of communicable diseases or severe malnutrition.

- Twenty training workshops were jointly conducted with programme communication unit on communication skills and effective use of information, education and communication materials in seven severely affected townships for 831 basic health staff and 288 INGOs staff, 288 and 562 local NGOs staff working in the area.

- From the outset of the disaster UNICEF as a key member of the Health Cluster provided adequate public health measures and closely monitored the public health situation in accessible villages and relief camps.

- UNICEF Health emergency teams were very successful in building new partnerships with NGO’s and community groups. UNICEF health partnerships include Project Cooperation Agreements (PCA), Small Scale Funding Agreements (SSFA) and provision of medicines and commodities upon request to all partners. Currently, UNICEF’s Health program works under PCAs with 8 NGOs (Myanmar Health Assistant Association; Myanmar Nurse and Midwife Association; Myanmar Medical Association; Save the Children; Action Contre Faim; MSF-Switzerland; Merlin and PSI) and has SSFAs with 2 NGOs (Noble Compassionate Volunteer Group and Chetana Environmental Sanitation Group). More than 30 NGOs have been provided with health commodities, which expedited and facilitated their emergency relief activities.

- The Supply System Management Scheme continued and reduced the wastage of supplies and improved the capacity during the emergency response. However, there has been suggestion of UNICEF being overly supply driven and not responding to community demands which was concentrated on livelihood.

- UNICEF field staff developed good relationships based on trust and professionalism with Township Medical Officers in the affected townships. This is in part due to the seniority of many of the UNICEF Health staff deployed and their previous experience in the Ministry of Health.

Constraints:

- Although the trends in disease outbreaks were encouraging, considerable challenges continue to face the maternal-neonatal and child health services. With human resource and
transportation constraints impeding the mobility of the basic health workers the accessibility of the basic health services to children and women remains of critical concern.

- The skills and knowledge of the basic health staff need to be significantly strengthened to ensure that children and women receive appropriate care and treatment.

- Even though immunization services have resumed in all of the affected areas, it is crucial that support continues to be provided so that increases in coverage can be maintained. It should be noted that the recent National Immunisation Days in January 2009 was very effective and was well received because of the good ground work in immunization during the emergency.

- Inadequate capital and human resource capacity at the different administrative levels, combined with competing priorities for a limited pool of skilled workers in the affected township level have been a major constraint to quickly rebuilding health infrastructure. The reconstruction of very badly damaged and destroyed health facilities is progressing very slowly and continued funding support is essential. Reconstruction was not a priority in the emergency phase as UNICEF did not have the required funds. Now, in the recovery phase UNICEF will be reconstructing some health facilities (2 RHC and 22 sub RHCs) with support of Japanese government assistance.

- Targeting and adequate coverage was exceedingly difficult during the initial phase of relief in the Delta and was dependent on several factors including: influence of local government officials, familiarity with local communities, and proximity of the community to road and river transportation.

- Some overlapping of services and supply distribution could not be avoided due to lack of information when needed. NGOs delivering assistance also reported finding it difficult to select beneficiaries for relief. It was particularly challenging where NGOs had previously carried out development work in the affected communities.

- There is a critical need for continued provision of essential drugs, supplies and furniture to basic health facilities in the worst-affected townships and training of the basic health staff and community health workers. This is becoming an issue with depleting funds.

- Support is required for preparedness and preventive measures for outbreaks of cholera, measles, malaria and dengue fever through the provision and prepositioning of essential drugs, diagnostics and equipment, and support for contingency planning.

- UNICEF M & E checklist still requires some further development and indicators refined. Although, some improvements have been made in recent months analysis and data collection methodology remains variable and open to interpretation.

- UNICEF’s leadership role in working with partners in nutrition and immunisation needs to be further strengthened at township level. In leading EPI, UNICEF should place more emphasis on planning and coordination among partners, training health care workers, and mobilization of the population.
UNICEF’s support to HIV initiatives was limited mainly to the supply of Post-Exposure Prophylaxis (PEP) kits and no additional new initiatives were implemented as part of the emergency response.

5.3 Nutrition

Objective:
To promote access to essential and quality nutrition services

Expected Results:

- Comprehensive information on the nutrition situation of children and the availability of and access to food by families to guide response planning.

- Children and lactating mothers in 37 affected townships are protected from micronutrient deficiencies. At least, 90 per cent receive Vitamin-A and at least 60 per cent receive multi-micronutrient and B1 supplementation.

- Appropriate infant and young child feeding practices promoted

- Up to 60 per cent of children 6-59 months, and pregnant and lactating women have been provided with supplementary food to prevent deterioration in nutrition status and protect infant feeding.

- Up to 60 per cent of children 6-59 months requiring treatment as per standard criteria treated for acute severe malnutrition.

Results Achieved:

- UNICEF led nutrition cluster contributed substantially by conducting a rapid nutrition assessment followed by more comprehensive food and nutrition survey in collaboration with the National Nutrition Centre and World Food Programme (WFP). The cluster established four technical working groups. The Nutrition Surveillance working group set up assessment guidelines and a reporting format, as well as continuously conducting data compilation and
analysis. The Therapeutic and Supplementary Feeding working group set up guidelines, held trainings and conducted monitoring to ensure adequate supplies and efficient procedures. The Infant Feeding in Emergency working group produced guidelines on infant feeding in emergency, and supported the monitoring and information, education and communication activities.

- The management of acute malnutrition was supported both through hospital and community based therapeutic and selective feeding. Six new hospital nutrition units were established in cyclone affected areas. Relevant nutrition supplies (F75, F-100, Resomal, Plumpynut and BP-5) were pre-positioned. Thus far as per the nutrition surveys no significant increase of acute malnutrition was observed in affected areas.

- UNICEF took the lead in supporting Community Based Feeding Programs in the 12 most affected townships through the development of protocols, the provision of training and supplies, and monitoring. There are currently around 600 sites in these townships, which are capable of community based therapeutic and targeted supplementary feeding. By the end of September, more than 1,300 children had been treated with therapeutic feeding for severe acute malnutrition using Plumpy Nut. Over 12,500 children had also been treated for moderate acute malnutrition with supplementary feeding using BP-5. UNICEF conducted training on the management of acute malnutrition for 120 staff from implementing partners, while also supporting Ministry of Health conducted training for 800 basic health staff in the 12 townships.

- Nutrition surveys conducted by UNICEF and partners found no serious changes in the prevalence of malnutrition compared to the rest of the country not affected by cyclone, indicating the steady availability of food at household level despite the disaster. However, any break in the food chain would have serious consequences.

- UNICEF has supported these programs by conducting training on the management of acute malnutrition for 120 staff from implementing partners such as Merlin, Myanmar Health Assistant Association and PSI, while supporting Ministry of Health conducted training for 800 basic health staff in the 12 townships.

- Since July 2008 UNICEF maintained a database on Mid Upper Arm Circumference (MUAC) of children aged from 6 to 59 months in 12 high risk townships. Inputs are received from the Ministry of Health, along with UNICEF’s six implementing partners (ACF, SC, Merlin, MSF, AZG, and PSI). Very high coverage screening levels have been achieved, with more than 260,000 screenings recorded by the end of September, with an estimated 196,000 children in the targeted age. This activity is still ongoing.

- To achieve a fuller and more accurate picture of the nutritional status of women and children, UNICEF undertook a Food and Nutrition Survey in partnership with WFP and the National Nutrition Centre. The survey was carried out in 26 affected townships and employed a multistage cluster sampling methodology, with the 1,522 households surveyed divided into three strata: severely; moderately and mildly affected areas. The survey employed weight-for-height criterion for the measurement of acute malnutrition rather than MUAC and found that,
as expected, acute malnutrition rates were higher than those recorded by the nutrition surveillance system using MUAC.

- UNICEF supported supplementation of Vitamin-A, Vitamin B₁, and multiple micronutrient tablets and also provided de-worming tablets.

- Food and nutrition survey demonstrated that 90 per cent of children aged 6-59 months had received Vitamin-A; 63 per cent of pregnant women received multiple micronutrient tablets; 58 per cent of pregnant and lactating women received Vitamin B₁ supplementation; 85 per cent of households were using iodized salt although only 55 per cent of households using iodized salt had adequate level of iodine in salt; 80 per cent of pregnant women received de-worming.

Best Practices:

- The results from the Food and nutrition survey are broadly encouraging as they strongly suggest that UNICEF and its partners efforts to prevent any spiral of acute malnutrition as a result of the cyclone has been successful. This is a considerable achievement given the enormity of the impact of the cyclone on people’s livelihoods; their possessions and their food security, and the consequences this could be expected to have for the incidence of acute malnutrition.

- An important breakthrough was made during the course of the emergency response, with the introduction of community-based therapeutic feeding for severely malnourished children, which has been lacking in regular program. Prior to Nargis, UNICEF had been negotiating with the Government on the issue of community based management of malnutrition but progress had been slow. The onset of the emergency and the rapid adoption of the cluster approach allowed for consensus on introduction of community based management of acute malnutrition. Guidelines drafted by the cluster were adopted by the National Nutrition Centre and training and supplies were launched immediately. The mass and rapid scale of the initiative saved the lives of a large number of children in the affected areas and paves the way for the successful expansion throughout the country.

- Members of Nutrition cluster have indicated that the Nutrition cluster is a useful platform for information sharing, consultation, consensus seeking, and endorsing programmatic and operational procedures for overall coordination.

Constraints:

- Lack of prepositioning of supplies of Plumpynut and BP-5 led to initial delays in the response. The rapid expansion of the community based targeted supplementary feeding program also led to compromised quality of training, implementation and reporting.

- Management of acute malnutrition continues to be a significant challenge in the affected areas due to the overriding difficulties most people are experiencing in rebuilding their livelihoods; with their incomes lower; the costs of, at least, some essential commodities higher and an increasing percentage of the household budget spent on food. In addition, The
quality of training, along with the follow up, recording and reporting of cases of malnutrition remains poor and requires long term support.

- In the initial few weeks after the cyclone, the donation of unsolicited breast milk substitutes to the affected population was observed by a number of organizations further threatening the low rates of exclusive breastfeeding. In response, UNICEF produced and widely distributed IEC materials, along with a number of relevant statements and documents on optimum infant feeding practices and advocated with the government and other relevant agencies. This was effective as reported in the PONJA survey results which indicated that only 2 per cent of households received milk powder or bottles. UNICEF field staff continued to monitor the situation, with the basic health staff, and witnessed few donations of milk powder or bottles in the period since the PONJA report was conducted.

- Potassium Iodate was available to salt factories at a price under the UNICEF supported ‘Potassium Iodate revolving fund’, which is gradually becoming self sufficient. However, due to the cyclone damage to the salt industry and the subsequent hike in salt prices it was reasonable to expect that salt factories would compromise on iodization in order to lower the production price. In view of this, UNICEF procured 350 drums (each 50kg) of Potassium Iodate as a one-time emergency assistance in support of Universal Salt Iodisation. The attainment of USI is an important part of UNICEF’s regular country program, with UNICEF working closely with all key stakeholders.

5.4 Education

Objective:
To promote access to quality early learning and education for all children in affected communities

Expected Results:
- Approximately 300,000 primary school children can attend school as a result of UNICEF support to 2,000 affected primary schools
- Approximately 150,000 primary school children in 1,000 supported schools have access to water and sanitation facilities
- Approximately 2,000 under five children can access to ECD centres and 3,000 adolescents receive non-formal education
- 3,000 primary school teachers are trained to provide psychosocial support through Child Friendly School trainings benefiting an approximately 90,000 children

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Best practices and lessons learnt: UNICEF Myanmar’s response following cyclone Nargis
Results Achieved:

- UNICEF supported more than 60 per cent of the affected schools as part of the emergency response with re-establishment of 2,740 affected primary schools and 343 ECD centres, along with facilitating access for 400,000 children to primary schooling with minimum disruption.

- School kits were provided to 2,322 schools to facilitate resuming of the school year with minimum interruption.

- Even though ECD services were expanded to 343 communities increasing access to 10,290 under five children, sustainability continues to be threatened due to a lack of resources to pay the teachers and maintain the enthusiasm of the ECD management committees.

- 965 schools and 702 staff houses were renovated and 800 schools received sanitation facilities in disadvantaged communities.

- In October 2008, UNICEF began the process of merging 5 severely affected townships into its regular program and provided training in both psychosocial support and Child Friendly School methodologies to more than 2,400 primary school teachers.

- At the request of Ministry of Education, UNICEF agreed to build 9 model schools according to the principles of *build back better*, safer and more child friendly school concept.

- Three cyclone and earthquake resistant school designs finalised and approved by the Government. Construction began in early 2009 to be completed by May.

- Gender sensitive teaching and psychosocial support were incorporated into the Child Friendly School in-service teacher training manual and in the training undertaken in 2008.

- System building continued through support to the Township Management Information System and improvement of teacher education system through the development of teacher competencies.

Best Practices:

- The emergency relief operation provided unique opportunities for UNICEF to leverage its long term partnership with the Ministry of Education. At the onset of the Cyclone, UNICEF established regular contact with the Ministry of Education and met with the deputy minister of education where an immediate response strategy was proposed and later approved by the Minister of Education. The strategy aimed to support initially 2000 affected schools which later expanded beyond its target to facilitate return of more than 400,000 primary school children to primary schools. It included the provision of roofing sheets and school kits to schools that could be repaired immediately within 2-6 weeks; the establishment of temporary *safe learning spaces* in collapsed schools and provision of school supplies such as essential learning package; re-establishment of ECD and EXCEL programs through provision of support to rehabilitation and school materials.
UNICEF achieved exceptional coverage supporting more than 60 per cent of the affected schools and providing more than 400,000 children with back packs and school supplies reaching even the remotest communities. It had a direct impact on children returning to school while also alleviating the cost of schooling borne by parents for school supplies.

Contact was established with the Education team in UNICEF New York and the Regional Advisor in Bangkok which assisted the office in identifying experts who were able to support the Myanmar education team.

UNESCO Bangkok responded to the request by UNICEF Myanmar and released the Programme Specialist, a Burmese national to provide support to the Education Section. The UNESCO and UNICEF team worked on developing a comprehensive data base where data on pre-cyclone education indicators and post cyclone data were compiled on affected schools and the degree of damage to schools, children, teachers and supplies. The team also worked on creating a needs analysis on each individual school.

The Education cluster was co-chaired by Save the Children and UNICEF and met regularly. Since UNICEF is the only recognized partner of the Ministry of Education, number of partners in the formal sector is very limited with a total of twelve NGOs and volunteer groups. It was agreed that UNICEF would coordinate the efforts directed at state schools and SC would be responsible for ECD and non-formal efforts.

The education section also targeted affected schools by mainstreaming the child friendly school concept through provision of teacher training on child-centred methodologies and psychosocial support.

Constraints:

- Weak coordination at the township level on school renovation and rehabilitation that hampered the distribution of roofing sheets resulted in delay of repairing at least 600 primary schools.

- It was difficult to attract resource for education as all efforts were targeted at life-saving initiatives and education was not considered as life saving. Therefore, to fund the initial disaster response and make up the short fall, UNICEF requested the multi-donor education fund partners and other donors to allow the funds from the regular program to be used to respond to the education in emergency.

- During the first few weeks of emergency response, there were visible communication gaps between the international and national humanitarian partners in education and the government essential for constructive engagement, data sharing and close coordination.

- The monitoring of activities carried out by government counterparts and NGO partners was efficient and they managed to report effectively on results achieved for children. However, a major weakness and a cross-cutting gap in all monitoring reports, was a lack of analysis.
This weakness is being addressed in 2009 as part of capacity building for both UNICEF and partners in analytical reporting.

- Again, insufficient capital and human resource capacity at the different administrative levels and limited pool of skilled workers in the affected township level have been a major constraint to quickly rebuilding school infrastructure. The reconstruction of damaged and destroyed schools is progressing extremely slowly due to lack of funding.

- UNICEF has established a construction unit to construct additional schools. UNICEF needs to reinforce technical capacity for oversight of construction works by engaging additional engineers and/or private engineering company to act as UNICEF’s agent in the school construction program. UNICEF may consider developing a ‘semi-permanent school’ kit that can be deployed from Copenhagen instead of tents or temporary shelters that will not withstand the forthcoming rainy season.

- The challenge of relying almost entirely on the Ministry of Education for program implementation continued to overstretch the already limited capacity of counterparts, posing a major constraint on implementation and expansion. Likewise, the economic burden associated with access to the formal school system and retention continues to deny schooling and quality education opportunities to the children of poor families.

### 5.5 Child Protection

![Image of children in front of a school]

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**Objective:**
*Protection of children and woman from violence, exploitation, abuse and neglect*

**Expected Results:**
- Comprehensive information, guidelines, tools and a national action plan on child protection in emergencies available to guide an appropriate response, in coordination with partners, and strengthen capacity on child protection in emergency among local partners and the government

Best practices and lessons learnt: UNICEF Myanmar’s response following cyclone Nargis
• Mechanisms in place to care for and protect separated and unaccompanied children, and children at risk of separation.

• Over 15,000 affected children and women receive psychosocial care, support and protection through child-friendly spaces.

• Strengthened mechanisms and systems in place for child protection in emergencies to prevent, report, monitor, and respond to cases of violence, abuse, exploitation and neglect of children and women

Results Achieved:
• UNICEF co-led the Protection of Children and Women Cluster with Save the Children, which met regularly with good attendance. Sub-cluster groups were established in Laputta, Bogalay, Ngapudaw, Mawlamyinegyun and Pyapon. The cluster also established three technical working groups: Child Protection in Emergencies; Women’s Protection; Mental Health and Psychosocial Support.

• The first ever National Plan of Action for child protection in emergencies was drafted which guided a national child protection system, with improved policies, regulations and services.

• UNICEF emergency strategies included strengthening mechanisms for the protection of separated and unaccompanied children; family tracing and reintegration; support for vulnerable children; provision of psychosocial support through child friendly spaces and the strengthening of community support mechanisms to protect children.

• UNICEF supported 27,000 children through a range of care and protection activities in 272 locations in 13 townships in the affected townships. In the first quarter of 2009, UNICEF accelerated its recovery and response activities with a view to integrating the most affected areas/populations for longer term support within the regular program, while phasing out of other areas.

Best Practices:
• Emergency interventions led to the expansion of a range of child protection activities and geographic coverage leading to greater collaboration and coordination amongst key government and NGO partners at the national and sub-national levels. UNICEF also entered into a new partnership with Department of Relief and Resettlement, and the General Administration Department during the emergency response. UNICEF has been closely working with the Department of Social Welfare; Save the Children; World Vision; Enfants du Monde (EMDH); Association Francois Xavier Bagnoud (AFXB); Myanmar Red Cross Society; Rattana Metta (a Buddhist organisation); National Young Women Christian Association; Yangon Kayin Women Baptist Association; Myanmar Nurses Association;

3 Separated children refers to children who may have lost their parents while unaccompanied children refers to children who may have lost their parents but are accompanied by their relatives.

Best practices and lessons learnt: UNICEF Myanmar’s response following cyclone Nargis
Catholic Bishop Conference of Myanmar and the Myanmar Council of Churches. This pre-cyclone partnership further improved technical collaboration with all partners.

- Cluster partners agree that the cluster has played a key role in contributing towards a more a coordinated, effective and holistic emergency response to issues affecting the protection of children and women. One of the key achievements include establishment of a database on separated and unaccompanied children which was essential for family tracing and reunification.

- One other key success despite the limitations include the finalization of a Plan of Action for Child Protection in Emergencies.

- The Department of Social Welfare was engaged from the beginning and played a full and active role in the cluster which facilitated in resolving many sensitive protection issues.

**Constraints:**

- Access to the affected areas was a key constraint at the onset of the emergency and child protection initiatives was proved to be considerably more problematic than other issues. A considerable amount of time was required for negotiation with higher government authorities despite full support of DSW.

- Although, UNICEF and its implementing partners have been able to reach large numbers of children in need of protection services, many have either not been reached or still continue to need support. Affected children, especially young and adolescent girls, also remain vulnerable to separation from their families, violence, abuse and exploitation.

- Children are at risk of secondary separations due to displacement, family breakdown, and lack of access to basic services and challenges in the rebuilding of livelihoods. A larger number of children work to support their families, with adolescent boys and girls moving to urban centres in search of jobs. This group of working children is becoming increasingly invisible and hard to monitor.

- Monitoring and support for children in alternative care placement (e.g. group homes, foster care) and continued support for family tracing and reunification is still required.

- Need to further strengthen mechanisms/systems to prevent and respond to child protection issues and continued support for 126 community based child protection support groups which have been critical to the success of the program.

- Continued identification of and support to vulnerable children and families, especially orphans to prevent secondary family separations and other child protection risks.

- Although, intensive training has been undertaken for implementing agencies, training and monitoring needs to be an on-going process and will require long term human resource support.

Best practices and lessons learnt: UNICEF Myanmar’s response following cyclone *Nargis*
• Limited number of implementing partners, the limited availability of social workers and mobilization of township CRC Committees or key stakeholders to provide, referral services and respond to child protection needs is an issue.

5.6 Shelter and Non-Food Items

**Objective:**
*To provide adequate shelter and access to essential supplies*

**Expected Results:**
- Approximately 100,000 affected households receive UNICEF shelter kits and 88,000 households receive UNICEF family kits with basic non-food items for survival

**Results Achieved:**
- Shelter kits distributed to 178,530 households (tarpaulin and rope)
- Family kits distributed to 111,305 households

**Best Practices:**
- Emergency interventions and provision of immediate shelter and non food items was the entry point for a range of UNICEF activities and geographic coverage. It led to greater collaboration and coordination amongst key government and NGO stakeholders both at the national and sub-national levels. It led to a common platform for information sharing, consultation, consensus seeking, endorsing programmatic and operational procedures and for overall coordination.
- Emergency supplies pre-positioned in MRCS warehouses which includes shelter materials were very useful at the beginning of the emergency, although inadequate to cover the huge needs of the affected population.

*Best practices and lessons learnt: UNICEF Myanmar’s response following cyclone Nargis*
Constraints:

- At the onset of the relief operation it was not clear as to each agency’s actual capacity to respond to the needs thus making it extremely difficult to allocate responsibilities. At the same time there was a lack of clarity on the overall combined coverage that would be achieved by all agencies efforts.

- UNICEF targeted to cover 20 per cent of the affected population, however, the supplies were initially available only in small batches, and UNICEF made a decision to prioritise first Laputta and Bogale townships. The need was great in these townships due to higher population concentration and there was a clear demand. Mawgyune, Pyanpon, Ngaputaw, although equally affected, came next in priority partly due to UNICEF’s own capacity (staffing, identification of partners and coordination) to adequately target these townships.

- In some cases, such as Npapudaw, UNICEF ended up reaching only 7 per cent of the affected population with family kits. However, it was noted that key INGOs were also covering the township with NFI supplies. By September/October NFI were not as urgently required as communities were slowly establishing means of revitalizing some sort of limited livelihood activities.

- At the onset of the emergency local suppliers were quickly mobilized to deliver tarpaulins, family kits, bleaching powder, etc. The available quantities were small and timeliness and quality was a problem due to lack of standardisation and logistic difficulties. Refinements had to be made as the emergency response progressed as some items were deemed inferior, not appropriate or there was duplication. Examples included tents which were not water proof and cumbersome voluminous family kits distribution.

- In addition to the fact that there was little data available from other partner organizations another complicating factor was that organisations all had their own way of calculating coverage as well as having different shelter/family kit specifications. No one was willing to compromise.

- UNICEF’s mandate and role in the distribution of NFI was uncertain. UNICEF got involved on it as thousands of families were living in houses that were destroyed and needs protection from constant rain and wind. A statement of intent in each sector is needed that defines the agency’s role and responsibility to support the distribution of NFI. Should UNICEF be involved in procuring and supplying huge quantities of shelter material in future emergencies, the organization should invest in raising capacities to ensure a better quality standard.

6. Planning, Monitoring and Evaluation

Objective:
To provide technical support for continuous monitoring and assessment of the situation of children and women and monitor the situation of relief efforts

Best practices and lessons learnt: UNICEF Myanmar’s response following cyclone Nargis
UNICEF ensured that there were ongoing assessments, monitoring and planning during the emergency response and that there was a strong commitment to the CCC based performance management in guiding the development of tools and a system to support office wide monitoring and reporting. UNICEF Myanmar received support from the Regional Office and Monitoring & Evaluation Officers on mission. In addition to overall M&E works a designated Information Management Officer was recruited for each of the Education, Child Protection, Nutrition and WASH clusters to support the Cluster Coordinators. Coordination with OCHA was established and within the areas of Information Management, PME enhanced its cooperation with the Myanmar Information Management Unit (MIMU) of the UN Resident Coordinator’s office. Activities on the enhancement of partnerships in emergencies, knowledge management initiative, and impact study relating to Nargis were included in the specific section work plans.

Results Achieved:
• The UNCT employed the knowledge management approach in the emergency, particularly in undertaking the Post-Nargis Joint Assessment (PONJA) coordinated by the Tri-partite Core Group (TCG) to determine the full scale of the impact of the cyclone and the relief and recovery requirements for both immediate humanitarian assistance needs and medium to longer term recovery. UNICEF supported the PONJA operation with 35 technical consultants, which included surveyors and data processing specialists. This operation was able to establish baseline information in the affected areas.

• A comprehensive methodology was used to estimate the humanitarian needs, damage and loss of assets, changes in economic flows and the impact on social and economic conditions. These estimates were based on data collected by joint Government and the UN teams in the aftermath of the disaster. The assessment consisted of two components – the Village Track Assessment (VTA) focusing on humanitarian needs, and the Damage and Loss Assessment (DALA) focused on the extent of the damage and losses.

• The TCG also mounted a periodic review to assess the coverage with relief efforts. A joint post Nargis Recovery and Preparedness Plan has finalised and launched in Bangkok on 9th February 2009.

• Monitoring plans were developed in each sector taking into account cluster monitoring needs based on the CCC performance monitoring framework.

• An integrated database of key implementation, output and outcome indicators, operational indicators and supply distribution data was also developed.

• PME section worked in close collaboration with supply section to support the development of supply distribution monitoring and collation of data for reporting purposes.

Best Practices:
• The situation assessment of affected children and women was swift. UNICEF was able to send its staff to the affected areas on 4 May for initial assessment. This helped to initiate an early process for preparing the relief efforts. UNICEF in coordination with MRCS, IFRC and others UN agencies took the lead role in conducting rapid assessments in 34 field locations,
which provided information for the preparation of the 180-day plan for immediate relief and response based on UNICEF standardized tools and methods.

- The outsourcing of rapid assessment tasks to a private research company was very successful. This was a crucial decision given that UNICEF human resources were limited and the resource institution had the required skills and experience in field work research.

- The 180 days plan was accompanied by an IMEP, outlining not only UNICEF’s monitoring commitments, but also mapping the data collection activities in the different clusters and sections. The tool enabled the management to have an overview of ongoing activities and a benchmark, including a calendar of main events that require data input (flash appeal, donor report etc).

- Sharing of cluster information with MIMU provided various types of information which was essential in the humanitarian performance during relief operations. The best example of this was the strong information management achieved by the Nutrition cluster.

**Constraints:**

- The overall political context on the country made it difficult to collect information, data, plan and monitor the situation. Data and information gaps existed even before the Nargis, particularly in terms of accurate baseline population data at the township level, and progress toward filling these gaps took time.

- The PONJA and Periodic Review employed spatial sampling using grids, which was good for mapping and presentation of the situation in the delta, but fell short of meeting UNICEF requirements for planning and programming, since planning and operations of assistance (supplies, training, etc.) was based on townships. Similarly monitoring of the situation was also conducted based on townships hence was difficult to cross-check the information.

- Monitoring, reporting responsibilities and flow of information was somewhat unclear in terms of delta based field staff and Yangon based programme teams. The decision not to create separate emergency programme by separating staff and budget was a good decision but it had some misgivings on reporting and supervisions.

- Limited understanding of the monitoring formats and indicators by the field officers at the township level caused varying understandings of what needs to be collected, which can leave room for interpretation and errors in data reporting.

- The monitoring data was collected, however, limited analysis was done, most likely because the data use processes needed to be specific, underpinning the type of analysis required.
7. Programme Communications

The Program Communication team of the country programme with additional surge capacity support, worked closely with the program sections to develop emergency response strategies, plans and tools; and to draw all of these elements together as part of a unified campaign to support and aid affected communities throughout the period of their recovery. The team, with support from Regional Office utilized the existing library of health, hygiene, sanitation, nutrition and child protection communication tools and materials available in Burmese language, as well as adapting both local materials and those from other countries. The team mobilized trusted networks of volunteers, outreach workers and faith based organizations that specialized in household-to-household participatory communication at the grassroots level. UNICEF procured cassette players, speakers, TV sets, DVD players and portable loudspeakers to serve as effective dissemination tools for communicating information, education and entertainment. The communication team also hired local short-term consultants in the areas of graphic design, translation and training as required. Overall the team was able to produce adequate and effective materials for dissemination to the affected population on aspects of epidemic prevention, child care practices, etc.

8. Operations

The Nargis response was immediately given global priority within UNICEF as the scale of the disaster became clear. The classic model of disaster management within UNICEF puts the Country Office at the centre of the operational response, with support from the Regional office and Headquarter. The effectiveness and appropriateness of the support from the Regional office and Headquarter varied and needs a review. Key components of operations sector are summarised below.

8.1 Human Resources

UNICEF’s capacity to respond to humanitarian needs was based largely on its ability to deploy those already in Yangon and in other UNICEF field offices. The success or failure of operations was largely dependent on the quality of the regular country program staff who played a pivotal role under extremely difficult circumstances. This called for operational adaptations, including strengthening capacities of existing staff members, domestic recruitment drive, remote management from Yangon in the first three weeks, and working through the Government and local partners. The temporary deployment of eight Myanmar nationals working in UNICEF Indonesia, Bangladesh, Eritrea, Tanzania, Timor Leste and Papua New Guinea in the second and third week of the emergency was timely and effective. This helped UNICEF fill the gap of international professionals in the front line due initial access restrictions and played a powerful role in the humanitarian negotiations – access and internally displaced population.

UNICEF Myanmar made a conscious decision not to establish a separate emergency program at the start of the relief operation, with a view to absorbing the relief operation as part of regular country program at the end of 2008. As per this plan, two of the five temporary offices has been absorbed by the Field Unit bringing the total number of Field Offices to eleven. The Heads of
Sections were given responsibilities for financial management in their sector with overall financial management centralised at the level of Deputy Representative instead of Emergency coordinator, which was filled only after almost two months from the onset of emergency.

National staff of UNICEF reached the Delta region within 24 hours of the cyclone to conduct initial assessments. UNICEF got permission for one international staff to visit the affected areas for one week only two weeks after the cyclone. From then on, UNICEF has had a permanent presence in the field, with five temporary field offices established. This enabled UNICEF to work closely and intensively with midwives, teachers, the local authorities, community groups and other partners to properly identify and respond to the needs of women and children in the worst-affected areas. At the height of the emergency, UNICEF Myanmar had a total of 262 staff of whom 130 were based in the field contributing to the day-to-day relief effort.

International staff members were able to obtain visas but only for a very limited time, usually two weeks, this meant staff turnover was significant in the first 8 weeks of the emergency. The frequent turnover of UNICEF surge capacity undermined the essential continuity and trust required for effective leadership and coordination. Once the visa issue was resolved by the TCG, UNICEF received a total of 42 missions from staff members from Headquarters, Regional Office and a number of Country Offices. In addition, UNICEF recruited international consultants and staff members to assist in the emergency response. The stand by partner agreements could have been activated much earlier.

A gradual phase out plan from the cyclone affected area has been implemented. The Country Management team has recommended reducing the field offices to only two as of end March 2009. All target townships are covered from these two locations.

The logistic experts provided by Norwegian Rescue Committee (NRC) and Danish Rescue Committee (DRC) as part of standby agreement with UNICEF were of tremendous assistance in handling supply & logistic operation. Similarly technical assistance received on child protection from Canadiem and Red-R under standby agreement helped provide emergency technical support in the field.

The regular country program was suspended for almost five months in order to mobilise the entire office to focus on the emergency response, which delayed a number of planned activities under the regular country programme, including the conduct of the mid-term review, initially planned for September and MICS.

**Best Practice:**
- UNICEF Myanmar’s decision to suspend its Regular Country Program immediately after the disaster was critical to the success of the immediate response. It was extremely difficult to recruit suitably qualified new field staff due to the limited human resources market available locally and it was even more difficult to bring in external experts due to visa restrictions. In addition, most UN agencies and INGOs had already completed their massive recruitment drives (e.g. Save the Children had recruited 800 additional staff).
• The support from standby partners (CANADEM, NRC, DRC and Red-R) through Office of Emergency Programs (EMOPS) Geneva was excellent, with UNICEF receiving five seconded staff from these partners. This standby support had the potential to be utilised much earlier not withstanding visa issues.

• The limited access either in to the country and to the Delta of international staff resulted with increased responsibility to national staff. This included a change in normal work practice, working much more closely on a day-to-day basis with local partner organisations, local authorities, private contractors, community-based organisations and government agencies. National staff members were perceived much more favourably than international staff and had greater ‘acceptance’ among the government authorities, and potentially among beneficiary communities, given the low ‘aid awareness’ among much of the population in the Delta.

• Coordination through the field hubs proved more effective at a local rather than national level and community response and participation worked better through decentralised structures.

• Remote management from Yangon helped to alleviate pressure on staff members in-the Delta, by taking over tasks which do not require a field presence such as coordination with government authorities.

• Secondment of experienced Myanmar international staff working in UNICEF offices abroad, provided international experience in managing emergencies while they were seen as one of them. Their absence was critically felt when they left to resume their responsibilities in their country of assignment. This vacuum was filled in Bogalay and Labutta offices by recruiting international field coordinators, however, the other hubs lacked the requisite leadership, management and understanding of UNICEF’s emergency monitoring requirements and accountabilities.

Constraints:

• UNICEF Myanmar could only partially utilise its surge capacity in the first three weeks of the crisis due to the restrictions on visa and internal travel permit. As noted, only a trickle of international staff was allowed in, with 2-3 week stay permit at most. Strain on UNICEF Myanmar staff, without adequate support from international emergency experts, was significant in simultaneously mounting a large-scale relief operation, fulfilling the cluster coordination responsibilities and opening of field hubs

• Restricted access to both the country and to the affected areas provided severe restrictions on the implementation of UNICEF surge capacity. International staff only managed to visit the field after the fourth week of the onset of the emergency, except on one occasion.

• Newly recruited staff often lacked experience and were unable to hit the ground running with the degree of professionalism required. In the case of logistics staff the basic language and computer requirements were not applied leading to critical delays in getting reliable data, in strengthening coordination and response capacity and in establishing the logistical systems necessary to move large quantities of relief supplies efficiently to the affected areas.
• It took longer to bring in international staff due to visa delays and contractual administration. In addition the quality and appropriateness of technical support recruited was at best variable resulting in additional stress at times on the office management.

• An international Human Resource Officer was budgeted for in the 180-day plan but this post was not filled due to visa delay.

• The role of UNICEF RO, Geneva, DHR and EMOPS in identifying surge capacity staff was effective. However, DHR could have done more in ensuring that external candidates are appropriately screened. Some of the experts recruited by DHR lacked skills and expertise adding complexities in an already difficult environment in the field. The speed at which the external candidates came on board was an issue.

• DHR also was effective in identifying staff as they have surge capacity on the recruitment side but the administration of contracting remained slow as standard UN procedures had to be adhered to despite an emergency need in the field. There is no equivalent surge capacity in the global service centre.

• There was mandated time off for all staff but this was not always taken up by senior staff at Yangon level or in the field hubs (this had a serious consequence of burn out and added tension). Counselling was available, but rarely used and there was no referral system to report to management on staff that needed additional support. A UN regional emergency counsellor on PSTD was identified but not deployed due to visa constraints.

• The quality of staff living quarters and conditions in the Delta remains an issue and has contributed to the reported low morale, tension and lack of cohesiveness. After nine months staff members are still living in dormitories with minimum facilities.

• The new wave of recruited local staff in the field reported feeling on the whole very positive about UNICEF’s response to the emergency and what was achieved but there is some resentment regarding lack of communication, management style and top down approach. Exit interviews will allow for greater insight and a deeper understanding of this issue

8.2 Supply and Logistics

The supply component of the relief operation was an estimated at US$ 32.67 million or 60 per cent of UNICEF Myanmar’s total supply requirements, one of the largest in the region.

One of the key challenges facing UNICEF and its partners has been logistics: how to get essential medical supplies, water purification materials, bed nets, school textbooks and more to the communities which need them most. Since the cyclone, UNICEF has received an estimated 1,000 metric tons of supplies through 78 chartered flights, along with 121 commercial flights carrying an estimated 1,500 metric tons. To facilitate quick distribution, when possible the supplies are taken directly to the affected areas, with UNICEF establishing warehouse facilities
in Labutta, Bogale, Pyapon, Mawlamyinegyun and Pathein. UNICEF also opened two new warehouses in Yangon. More than 1,671 trucks carrying 6642 metric tons have reached the affected areas from Yangon since the relief operation began in May 2008. However, the poor quality of the roads and bridges has made transportation difficult, with large trucks often unable to pass. The 350 km journey from Yangon to Labutta at the height of the rainy season took eight hours or more. In response to these difficulties, UNICEF has increasingly used boats to transport goods, with 33 boats carrying 9300 metric tons of supplies, taking the journey from Yangon to Ayeyarwady Division, along with, at times, using helicopters.

The long rainy season, limited local suppliers, tight government regulations and limited in-country distribution network continue to pose serious challenges to the work of supply and logistics section. This will require further improvements to supply planning, interaction and strategies in the coming year.

Best Practices

- Sheer volume of the supply component during the emergency response as noted above was a tremendous challenge to reach the destination. UNICEF received 1,000 metric tons of supplies through 78 chartered flights and 121 commercial flights carrying an estimated 1,500 metric tons.

- Two warehouses of 5,000 sq m and 900 sq m were identified by supply section shortly after the cyclone. It was sufficient for storage requirements. At the hub level the storage facilities were provided by the cluster free of charge from June till August and after that the user group contributed to the operational cost. UNICEF was able to source a number of warehousing facilities in the emergency hubs where the rents were nominal.

- Supply section was able to engage transporters immediately following the cyclone for transportation of relief supplies. This corresponded with a general surge in demand for trucks in the market place which in turn dramatically increased the cost of renting trucks.

- Regional Office provided useful support in enabling supplies to be sent to Yangon from various parts of the world through the Logistics Cluster air-bridge in Bangkok. However, importation restrictions sometimes hindered the process particularly with regards to IT equipment.
• The helicopter service was made available in the fourth week of the emergency and is still available. This complemented the bulk transportation of food and a few other relief items to remote villages. However, a majority of the relief supply distribution continued to depend on fishing boats.

• Logistics cluster in Yangon was one of the most useful clusters providing valuable assistance to thirteen organizations. Resource sharing was possible with good planning during cluster meetings. UNICEF was able to share storage space, all modes of transportation and above all facilitation in custom clearance of supplies airlifted through the air bridge in Bangkok.

• At the field hub level the cluster provided storage facilities as well as operational support. By the time the cluster closed in August a user group was formed for the continuation of the hub. This arrangement was cost effective and helped in team building.

• UNITRACK was installed on a priority basis after the cyclone, which enabled the management, the programmes and the logistic staff to accurately monitor the movement and warehousing of supplies. This is a crucial requirement immediately after an emergency and for auditing purposes at a later date. It was possible to set procedures for accountability and transparency. The distribution of a weekly UNITRACK generated stock report was useful for sharing information to staff based in the field and in Yangon.

Constraints:
Supplies
• There were real constraints to get appropriate supplies either in to the country or sourced within Yangon and then deliver them to remote areas. There were also logistical bottlenecks due to lack of reliable and affordable transport links, climatic conditions and local capacity.

• In addition, UNICEF’s very rigid internal supply procurement procedures, processes and systems also impacted the speed of its emergency response.

• Given the lack of infrastructure in the country, the weak logistics capacity – both national and in-house – continued to be major challenge in starting up and maintaining a large-scale emergency operation in the field. Roads to the Delta could not accommodate trucks of more than 6 tons capacity (with full load). The majority of the villages are reachable only by small fishing boats.

• Program Section chiefs needed to closely monitor their stocks and so as to make realistic plans well in advance. Prior information about arrival of supplies was possible both at Yangon and hub level once logistics surge capacity on board and system implemented by section. It captured all PGMs and delivery dates. This improvement allowed the warehouse staff to create space, plan for direct transportation if possible and reduce cost by direct deliveries.

Best practices and lessons learnt: UNICEF Myanmar’s response following cyclone Nargis
• Restrictions on movement of trucks in the Delta was a serious concern. These restrictions led to air drops of supplies. However, a reliance on air-drops was sometimes problematic – expensive. This was further complicated by inaccurate coordinates and climatic conditions.

• During the first three months following the cyclone there were three different international Logistic Officers. This situation was far from ideal as it hindered the smooth running of the logistics operation, specifically with each new officer introducing their own modus operandi.

• Numerous problems were faced due to staff having no computer skills. In some instances national logistic staff had limited English skills making it difficult to communicate anything other than basic tasks. This has impediment in terms of planning, distribution, and documentation including stock report, stock cards and delivery reports which delayed the implementing process for Unitrack.

• UNICEF did not deploy logistics assistants to the field hubs at the onset of the emergency which would have provided badly needed support to the program staff. As such, field hubs developed their own procedures and formats resulting in some confusion at the reporting level. Standard formats and procedure should be shared with staff immediately to ensure homogeneity.

• Insurance policies were not requested till Jan 2009 and given the volume of the supplies should have been mandatory.

• Initially, prior to proper systems being established, the distribution plans were not regularly shared before the arrival of supplies. This sometimes resulted in supplies stored for too long creating space issues for fast moving items and the danger of expiry or damage in storage. Ideally plans should be submitted with the program team however as in most emergency situation it was not always possible and supplies ordered were not reviewed regularly. This resulted in some cases of supplies being distributed without prior consultation with field hub or communities.

8.3 Emergency Telecommunications

UNICEF was responsible for data management communications and as a member co-lead of the Emergency Telecommunication Cluster, CERF funds were utilized to provide internet connectivity to all humanitarian agencies operating in the affected townships. It was an impressive, flexible and cost effective arrangement utilizing in-country high quality technicians. Even prior to the crisis, UNICEF was well positioned to immediately respond to an emergency due to some pre-positioned telecoms equipments and very skilled staff in the office. Two IT assistants were hired to further support the unit for the six month period. Additionally, UNICEF also received some financial support for ICT through the Flash Appeal and the CERF which allowed UNICEF to undertake the tasks it is responsible for at the field and Yangon level.
Best Practice:
- UNICEF set up emergency telecommunications network quickly and provided technical support to all humanitarian agencies operating in the delta which was highly appreciated by all UN partners, INGOs, NGOs and volunteer groups.

Constraints:
- In country communications were very problematic and had serious implications for needs assessments, monitoring, and accountability of international agencies.

- Appropriateness, timeliness and quality of supplies were a major challenge for the IT related works requiring ingenuity and creativity. There were numerous examples of inferior key IT supplies including satellite communication dishes and flat batteries. Importation of IT supplies was also a considerable challenge and required IT Section Specialist travelling to neighbouring countries to bring equipment in to Yangon in person as checked luggage. These are risks for the staff but given the emergency there were no choices available.

- Lack of prepositioning of IT equipment by UNICEF Copenhagen, Regional Office or NY considerably hampered the response and increased the work load of staff on the ground exponentially. Accessible stocks were in Tanzania and were out of date.

8.4 Administration

The demands on the different components of office administration increased considerably. The limited fleet of vehicles and numbers of UNICEF drivers was immediately overstretched with the increasing demand for field visits. Additional vehicles and drivers were hired for staff use. UNICEF hired fourteen additional support staff for administration to support the operation of the hubs in the Delta and Yangon; eight drivers and additional office space to accommodate new staff, as well as external missions in Yangon. Lease agreements for offices in Laputta, Bogalay, Pyapon and Mawlamyeingyun were arranged. Additional allocation for operating expenses and equipment was also activated.

Best Practice:
- A dedicated national staff member with substantial experience was in charge and received additional local support to cope with increased workload.

- UNICEF immediately deployed administrative assistants to the field hubs to support the program staff.

Constraints:
- Government restrictions applied to almost any operational aspect including the addition or replacement of vehicles, which took around 5 to 8 months to be approved. UNICEF applied for importation of field vehicles and is still waiting for import permit.

- The normal process for getting fuel permits through the government took time and required careful planning.
Despite all what we talk in CCC and other commitments UNICEF’s internal administration requirements are overly bureaucratic for emergency setting especially given the remoteness and the prevailing situation in the Delta and in the country.

8.5 Finance, Contribution Management and Monitoring

UNICEF Myanmar immediately activated Cash on Hand Account in US$ and local currency on the first working day after the cyclone. This allowed the office the flexibility to respond quickly to the needs for cash in the assessment and response missions. The replenishment of the account was carefully planned to ensure the timely availability of funds. Special cash accounts were established in Bogalay, Laputta, Yangon and in Pathein. UNICEF recruited six additional local staff both for Yangon and the Delta to address the workload, as well as to ensure accountability at the field level.

Best Practice:

- UNICEF has a good financial system in place as well as for PBA/budget management and monitoring. UNICEF worked closely with DFAM in activating the Cash on Hand Account as well as in establishing the Special Cash Account. DFAM’s swift response is noteworthy.

- UNICEF immediately deployed financial assistants to the field hubs to support the program staff and ensure accountability.

- A dedicated national professional staff with substantial experience was made in-charge in finance and contribution management and received additional local support to cope with the increased workload.

- UNICEF recruited one international consultant at L2 level for report writing to address the increasing needs for donor contributions reporting.

Constraints:

- UNICEF’s internal financial and budget requirements are often hindrances in an emergency setting particularly given the remoteness and prevailing situation in Myanmar. UNICEF had to show immense flexibility and provide the cash requirements for the emergency in different ways.

- UNICEF only allows cash transfers to NGOs bank accounts. In Myanmar, opening of bank account is very restricted and registration with the Government is one of the requirements. Also, most volunteer groups are not registered or have applied for registration without any response from the government.
9. Partnerships

*Nargis* opened up space for debate on previously sensitive subjects such as humanitarian access and child protection issues and UNICEF was well placed to take this work forward with the Government by advising on new policies including an Action Plan for Children. On these broader policy issues, UNICEF partnered with the Department of Social Welfare, the Ministry of Education, Ministry of Health, Department of Development Affairs (within the Ministry of Border Affairs) and Water Resources Utilization Department (Ministry of Irrigation). Cyclone *Nargis* has provided an opportunity to engage these key partners at a strategic policy level to ensure better preparedness against future disasters. It also promoted a stronger understanding of the shared mission to the success and effectiveness of UNICEF regular program.

The number of non-government organizations, volunteer groups and community partners involved in the emergency response, previously a Government domain, has increased significantly. It has provided a vital in-road for UNICEF to channel technical know-how, expertise and best practices into Ministries and institutions. Project cooperation agreements were signed with 15 international non-governmental organisations (INGOs), 16 local non-governmental organisations (NGOs), 4 faith based organisations (FBO) and Small Scale Funding Agreements (SSFAs) with 465 Community Based Organizations (CBOs), Parent Teacher Associations (PTA) and emerging volunteers groups, many of them from the beginning of the emergency.

UNICEF collaborated effectively with ASEAN through the TCG mechanism. ASEAN’s role in the Cyclone *Nargis* response holds important implications, lessons and opportunities for the UNICEF and the broader humanitarian community. ASEAN’s actions have been acknowledged as key in providing leadership, structure and legitimacy to the *Nargis* response. ASEAN’s hosting of the PONJA review ensures continuity, and the organisation’s mandate means that all stakeholders can engage in the review process with commitment and accountability. In the global context, there is an urgent need for effective regional mechanisms to identify priorities in the early stages of an emergency response. Such regional capacity will allow the quick deployment of disaster experts, the establishment of appropriate institutional arrangements and a smooth linking into existing emergency appeal mechanisms, to ensure that the needs of victims are addressed in a timely and adequately manner, and that the transition from relief to recovery is well-supported and effectively managed.
Best Practice:

- UNICEF’s close partnership with MRCS was an asset during the entire operation. The MRCS, a central player in the current relief efforts has the experience of working with local communities through its volunteer networks. UNICEF successfully built on and added to these networks. New volunteer networks such as NCV have been very enterprising and effective, however require support if they are to continue to be viable and become accredited NGOs.

- UNICEF’s engagement with large number of local volunteer groups and community based organisations helped mobilise local support for relief works.

Constraints:

- It was important to ensure that after the initial crisis was over, communities are included in the design and implementation of assistance programs, to ensure greater ownership over the recovery process. Some of the iNGOs were not open to this idea causing avoidable conflicts.

- Partnership agreement process was sometimes slow and payment system of small progress payments not viable for volunteer groups and private sector with limited cash reserves.

10. Cluster Coordination

The United Nations Country Team (UNCT) in Myanmar took a proactive lead in coordinating the UN and non-government organisations’ (NGO) response to the emergency by activating the IASC mechanism. The UNCT also introduced the cluster approach in the first week of the emergency, as a mechanism to ensure proper coordination amongst all humanitarian partners. Under the overall coordination of the Office for the Coordination of Humanitarian Affairs (OCHA), eleven clusters were established. Having provided necessary coordination and leadership, some of the clusters have been phased out, while the activities of some others have been scaled down. UNICEF took the lead for Cluster Coordination in Education, Nutrition, Child Protection and WASH as per IASC commitments.

Best Practice:

- UNICEF’s leadership role in Nutrition, WASH, Education and the Protection of Children and Women clusters generated required collaboration efforts both in Yangon and in Delta reinforcing the broader vision of UN reform and “One UN”. For the Education and the Protection of Children and Women clusters, UNICEF shared coordination responsibilities with Save the Children (SCF).

- UNICEF hired both a cluster coordinator and an information manager for each of the four clusters to relieve this demanding burden from existing UNICEF staff responsibilities. As a result, cluster coordination and UNICEF programs were separated, with any conflicts of interest avoided.

- There is evidence that the cluster approach applied in the Myanmar context enhanced coordination amongst partners, as well as facilitating information sharing, surveillance and the mapping of gaps of underserved areas during the emergency relief operations.

Best practices and lessons learnt: UNICEF Myanmar’s response following cyclone Nargis
Constraints:

- The pool of prospective candidates for cluster coordination appears limited which resulted in serious delays in locating the cluster coordinators for WASH, Nutrition and Education with the right expertise, although, this problem was later resolved.

- The retention of Cluster coordinators also was a serious issue. In WASH for example the office had to deal with 6 cluster coordinators in eight months and three each in education and nutrition cluster. Similar observations were made in other clusters too with nearly 100 Cluster Coordinators in 11 clusters being reported. This not only impacted on leadership but also on continuity, policy consistency and credibility with partners.

- Some of the Cluster Coordinators had no previous experience which was a major issue in the field. This must be avoided at all times.

- Coordination was concentrated at the national level, with less focus and interlinkages with the hubs at the township level. At field level there was little distinction between UNICEF program and cluster leads impeding implementation and increased work load of field staff.

- UNICEF has gradually made the shift from employing an international cluster coordinator to a qualified national cluster coordinator, while maintaining the initial information manager.

- When rolling out cluster system there was very little focus on the mechanism of the cluster lead role at field hub level by UNICEF or other agencies.

11. External Communications

Given the highly politically sensitive environment in Myanmar due to international political and economic sanctions, the enormous global media interest was expected. At the onset of the cyclone, media interest was managed by UNICEF Headquarter in NY, Geneva, and the Regional Office in Bangkok in close collaboration with the Communication section in Yangon. The Regional Office stepped up response to the huge demand for high-profile interviews to respond to large number of journalists stranded in Bangkok. Similar flow of information was linked with various National Committee network.

Best Practice:

- Despite the constraints, the national communication staff in Myanmar, with some support from Regional Office, produced high quality human interest stories, video footage and images for global distribution. Mechanisms and systems were put in place with Geneva Regional Office and Division of Communication to arrange interviews with spokespersons in UNICEF Myanmar, heightening the credibility as a fast response organization.

- After three weeks the communication team in Yangon, received additional surge capacity support from staff from US National Committee. This was complemented later by communication staff from Thailand, Indonesia and Bangladesh at different points in time.
• UNICEF communications team including a consultant video-grapher and photographer spent the first three weeks of the response exclusively in the Delta, under very difficult circumstances, collecting the needed human interest stories and visual material required.

• The call for consistent and coherent messaging among all UN agencies for public information use was paramount and was successfully executed.

Constraints:
• The establishment of thrice weekly press briefings in Bangkok and UNICEF’s role to provide communication support and guidance to four cluster sections, required significant time and resources which was stretched to a maximum.

• Due to the tight restrictions on allowing foreign media into the country, it was critical to work in close collaboration with the UNCT to strengthen in country media relations and provide coverage of the UN response and humanitarian situation through national and international media.

• Due to complex circumstances, and notwithstanding the assistance provided by UNICEF staff on short missions, the communications unit lacked the in country management support required as the post of Chief of Communication remained vacant.

12. Lessons Learned from Programme Strategy

UNICEF played a meaningful role in the immediate aftermath of Cyclone Nargis and the continuing recovery efforts, responding immediately, showing leadership and drawing on its strong and pre-existing relationships with Government and other local partners. As happens in any response, particularly one of such an unprecedented and exceptional scale, there have been shortcomings and important lessons learnt. This section covers UNICEF’s Nargis response against the OECD/DAC Humanitarian evaluation criteria4.

12.1 Relevancy and Appropriateness

The Review finds that UNICEF’s response to cyclone Nargis was generally both appropriate and relevant. Funds were quickly mobilised, and health and water and sanitation relief items were dispatched within the first week. Education, protection and psychosocial responses were also rapidly organised. The CCC required that UNICEF undertake an assessment within 72 hours of an emergency. UNICEF was able to undertake rapid assessments within 48 hours at least in part of the affected townships. UNICEF deployed rapid needs assessment teams led by Country program staff from Yangon using standardised tools and methods and coordinated with Department of Social Welfare, UNCT and MRCS. In assessing the needs of communities, UNICEF collaborated with township offices (focal point Township Medical Officer) and made maximum use of information that was already available from national systems as well as partners such as MRCS. However, this information was not always available, accessible, reliable and changed rapidly. Formal joint assessment process followed in early June. The quality of assessments was generally good, especially technical surveys such as on nutrition. Early surveys

focused more on numbers affected than issues, such as vulnerability or appropriateness of aid. All organisations, including UNICEF, were operating without accurate numbers of affected people and their locations. UNICEF developed a satisfactory assessment basis for program implementation, using its own and secondary data.

UNICEF disaster preparedness plans was updated in April 2008 which include emergency relief materials valued approximately US$ 800,000, prepositioned in a number of locations. These became available for distribution immediately. However, UNICEF in Myanmar as with every other agency was not prepared for the scale and magnitude of response required. The adoption for planning purposes of a ‘Plan of Action’ as per the CCCs, 180-day plan proved to be an effective management tool. The office developed planning tool as a collective exercise, despite time constraints and refined standard format for Plan of Action to reflect result based indicators.

Targets were appropriate and achievable and plans were adjusted as the scale of the disaster unfolded. As noted, targeting especially during the initial phase of relief in Myanmar was dependent on several factors including: influence of local government officials, familiarity with local communities, and proximity of the community to road and river transportation. Population movements were a major constraint and were changing constantly and was difficult to plan.

The achievements have been sensitive to the community need however the provision of inappropriate or inferior supplies not sensitive to local requirements has been reported (such as donated potties, sanitary napkins and non water proof tents). Other documented examples of inferior donations received include water filtration systems and “exploding” jerry cans. In addition, goods and services procured for the emergency response were not always at reasonable cost. Some of internationally procured goods were very expensive and not necessary usable (satellite equipment).

12.2 Effectiveness

The response was effective and helped to ensure that there were no serious communicable disease outbreaks; children returned to school on time and received protection, including the prompt registration of separated and unaccompanied children and provision of psychosocial support and there was adequate provision of clean water and sanitation (although this program area had some notable weaknesses due to the sheer scale of the response required).

UNICEF’s responses in the first two to six weeks of the response were generally timely. Actual distributions of initial relief supplies from existing stocks, some from local procurement and the first plane loads of imported goods took place from 48 hours onwards, if not earlier in some locations. UNICEF was prompt in recognising the huge need and immediately assessed the scale of disaster and reacted speedily. UNICEF Regional Office provided technical support and Human Resources Section was particularly effective in linking with EMOPS for deployment of additional staff. All supplies came through Bangkok and the setting up of the air bridge by WFP expedited the process of supply delivery.
In key program areas UNICEF was perceived as effective. UNICEF’s response matched the UNICEF CCCs commitment as did its 180 day planning document. Indicators were revised to reflect result based approach and the distinct needs of women, men and children were specifically identified in response. Lessons from the Tsunami in 2004 were incorporated in emergency response planning. Some targeted development programs were already in place (i.e. WASH – chlorine /water guard) and contributed to the effectiveness of the response.

UNICEF at country level, with assistance from Regional Office and HQ, managed donor relations very effectively and communicated regularly with UNICEF Geneva, in-country donor embassies and other donors by providing informative situation reports and other communication material including video footage as appropriate.

12.3 Beneficiary needs and coverage

Generally, UNICEF was able to meet the needs of the majority of affected population groups, particularly where it had a pre-existing network. However, coverage was an issue as there were pockets that remained isolated and received only very little assistance due to lack of information and access. Most functioning health centres were temporary so were school and shelters. Almost all drinking water sources were contaminated with surface water from flooding hence availability was limited. As Cluster leader in WASH, Nutrition, Child protection and Education UNICEF encouraged attention to less served areas and also attempted, despite the constraints, to provide assistance to those in temporary arrangements in the displaced camps.

Best practices and lessons learnt: UNICEF Myanmar’s response following cyclone Nargis
Targeting during the initial phase of relief operation was dependent on influence of local government officials, familiarity with local communities, and proximity of the community to road and river transportation. There were some overlapping with other service providers.

There have been good relations with Government on the whole although early humanitarian negotiations particularly in areas of access and IDPs took a skilled diplomatic approach by senior management and with support from the Burmese UNICEF international staff. This remains an ongoing issue for the field staff in some areas particularly in 14 camps in Labutta township. Relationship with the township offices was also enhanced by employing field staff with strong public sector experience and status, previously having held senior positions and as such good networking skills.

The Review team conducted a range of beneficiary consultations in the three townships visited based on a purposive sampling methodology in order to gather views with regards to the speed, relevance and effectiveness of the UNICEF’s response. In such large-scale disaster involving many agencies, attribution is often difficult or nearly impossible. The picture that emerges from this review largely appears to fit with the findings of other investigations and assessments. Affected populations were generally appreciative of non-food items – family kits and sheeting materials, school and educational supplies, psychosocial support for children, water and environmental sanitation support. Affected populations’ concerns included lack of clean water sources, particularly for domestic use, financial impediments for children attending school, widespread psychosocial stress regarding a similar disaster in the near future, lack of information, limited consultation about longer-term future and most importantly livelihoods. There was huge recognition of UNICEF’s role in the Nargis response particularly assisted by its prominent branding on school rucksacks, water tanks and latrines. It was evident that local NGOs capacity was limited and would need long term support if were to remain viable.

12.4 Impact

As is normal in reviews of humanitarian operations, it is difficult to attribute impact to the work of a particular agency, even though the combined efforts of national and international assistance, as noted above, have often been effective despite issues of access, capacity and coordination.

Internally, the Nargis disaster had an impact on UNICEF’s regular programs as the country program was suspended till September to focus on the emergency response which proved to be effective management decision. UNICEF has been diverted away from its support to other needy populations not affected by the cyclone with critical health and nutrition needs to a certain extent. This impact should be seen as a necessary result of a disaster of this magnitude and UNICEF’s organisation-wide commitment. Contingency plans for deployment of key staff from the emergency roster can be improved.

Given challenges and the delay in recruiting the second wave of staff the response could have benefited from securing new staff that had had experience in working in similar constrained environment, such as remote management and humanitarian aid experience would have been
useful. Matching, appropriate screening and timeliness of standby arrangement/surge capacity staff could have been more effective especially in WASH.

Provision was made for support to staff coping with stress and there was mandated time out. This was not always taken up by senior staff at Yangon level or in the field hubs (this had a serious consequence of burn out and added tension). Counselling with the assistance of a local expert was available but rarely used. Staff reported feeling on the whole very positive about the emergency and what was achieved but some discontent remains regarding management style and top down approach.

UNICEF was effective in fulfilling its cluster coordination roles and contributed substantially to the cluster coordination taking lead in four clusters. As noted, there were many constraints both at field hub level and Yangon and a number of detailed evaluations have been undertaken. Overall response benefited from the interagency collaboration with high degree of participation and information sharing although there remained data gap and data analysis to a certain extent. One another aspect of this mechanism is the capacity of cluster partners and its impact on UNICEF. Even when the partners were unable to meet their commitments its negative impact was seen on UNICEF as Cluster coordinator. Overall the cluster system has proved to be useful, though resource intensive on UNICEF. The viability of this system should be reviewed for future application.

Early indications, of the effect of the UNICEF (or UNICEF-coordinated) Nargis response on the political environment are that there is a better interaction with humanitarian community. The response has opened door a jar to discuss some more sensitive issues particularly in protection sector. Good relationships have been developed at township level and with ASEAN through the TCG. The UNICEF Representative’s profile is extremely high and that of his team and his personal contribution and pragmatic approach is appreciated and noted by all partners, UNCT members, Resident Coordinator and the Government counterparts.

12.5 Efficiency

UNICEF’s program approach to emergency response mainly focused on providing large volumes of cash and supplies to partners as required. The partners were then expected to use the resources supplied to achieve agreed outcomes. Whether or not this happened efficiently depended on the capacity of the partners, design of program and often the degree to which UNICEF was able to follow up. This highlights the critical dilemma in the international response between delivery and accountability. This is present in every setting, but the constrained and uncertain humanitarian space makes it all the more so in Myanmar. Flexibility should guide donors’ expectations around monitoring, as well as UNICEF practices particularly when dealing with the volunteer groups and private sector.

One area where UNICEF has been successful in terms of efficiency is in the use of local solutions such as water guard purification solution, rain water harvesting, nutrition surveillance and transportable school supplies. This worked on two fronts: it increased the appropriateness of programs and thus makes them more likely to achieve outcomes, and reduced the cost. UNICEF designed some of these inputs locally thus considerably saving on expensive imports. UNICEF
appropriately achieved a balance between speed and cost – initially importing some high-cost items whilst the low-cost local solutions were designed, refined and built. Local school kits and temporary school structures and widespread use of local partners where possible are other good examples of this approach.

UNICEF built on the existing government and NGO partnerships to mount the emergency response. Good partnership collaboration with existing NGOs and INGOs and new effective partnerships formed with new entities such as Noble Compassionate Volunteers group. The Cluster system allowed for effective communication, information flow and coordination at both local and central level. However, it has been reported by some field staff that communication and coordination between the Delta and Yangon cluster groups was often limited and there was little information flow within clusters. This may be also due to the fact that each cluster members have their obligations to their agencies first and then to the cluster.

A monitoring system was developed with result based indicators and was sufficient to track changing needs, available funds, program implementation and the links between them. However, although qualitative data was collected initially there was no time for real analysis and use appropriately. Sometimes data collection methodology was found to be haphazard and there were many interpretations. This situation has improved during the recovery period as systems continue to be refined.

There were some concerns with regards to the accountabilities and responsibilities for the Nargis response with the arrival of additional staff causing undue tension and alienation. The international surge and stand by capacity were on the whole experienced and technically competent but some lacked the understanding of the approaches adopted by the Yangon office during the emergency operations.

It was decided from the very beginning not to establish a standalone emergency programme. The regular country was expected to absorb the relief and recovery operation after the relief activities was stabilised. With this view in mind the Emergency Coordinator was made to report to the Representative and all emergency staff, including staff in the field hubs, reported to the Emergency Coordinator and not the Program Section Chiefs who still remained financially responsible for program funding through PROMS under the overall coordination of the Deputy Representative. While making this decision it was assumed that the sectoral programme staff who were appointed for the relief operation will coordinate with sectoral programme staff. this will also lessen administrative burden on the emergency staff of managing ProMS and financial accountability. As was found out later it turned out to be a false assumption.

The program sections lacked the authority to make day to day program decisions often only hearing about activities once final sign off was sought. Despite the conscious decision of senior management not to have a separate stand alone Emergency program the reporting structure that developed made this an unintentional consequence. This has led to limited collaboration and communication between some emergency surge capacity experts and regular program staff.

UNICEF program and financial management procedures applied to the Nargis response were at times not flexible enough particularly in supply procurement which led to some extent hindering
efficiency. The issues of quality, speed of delivery and cost always contradicted each other and of course the rules that governed supply procurement always took precedence in making supply procurement decision.

Reporting was of a consistently high standard and on time with 64 reports being submitted on time. Recruitment of a Reports Officer (L2) who remained in the post throughout the emergency was of great help in fulfilling reporting obligation.

UNICEF managed its funds effectively and there were good utilization rates at end-December compared with planned commitments and expenditures. UNICEF Myanmar maintained very sound financial management and records. Due to the risk adverse nature of the office, little adaptations were made given an emergency response and there may have been room for greater flexibility and less time consuming procedures. UNICEF usually anticipated and met cash and supply needs and logistic requirements for hub-offices well but some delays and miscommunication were reported.

UNICEF was able to establish appropriate telecommunications network extremely quickly and extended support to all humanitarian partners operating in the Delta. It was an effective in-country team highly appreciated by all UN partners, INGOs and NGOs. It was an extremely impressive, flexible and cost effective operation utilising in-country recruitment arrangements with high quality technicians. UNICEF in country had to overcome considerable constraints due to inappropriate technical supplies sent and importation restrictions.

12.6 Sustainability and Cohesiveness

The UNICEF Myanmar Country Office’s response to cyclone Nargis will have a sustainable impact on UNICEF’s longer term work, both in the affected areas in the Delta and nationally. Innovative programs initiated during this operation such as child friendly space, large scale introduction of ceramic water filter, etc. could contribute to learning and replication in other parts of Myanmar. Swift response by UNICEF during early days of the disaster such as establishing temporary learning space for school children, distribution of large quantities of water tanks, etc. considerably enhanced credibility of UNICEF. It is hoped the Nargis response will leverage key interventions and lessons learned to influence humanitarian dialogues in which UNICEF engages with the Government of Myanmar and civil society. At an institutional level UNICEF aims to use the Nargis interventions as a strategic platform to influence in a small way the development of national policy and legislation in key areas relating to children. This contributes to the sustainability of community projects in affected areas and guarantees the nationwide application of best practices from the Nargis-related interventions.

The recovery plans including the role of the field hubs in the Delta remain unclear at present and making it harder to clarify if likely to result in sustainable long term solutions, however what is clear is that all recovery responses will be part of the overall country program and as such will be integrated with those of the government and other development partners. The continuation of hubs in the Delta is also subject to the agreement by the government for its continuation.
13. Recommendations for UNICEF Programming

In 2009, UNICEF is continuing to strengthen the development and implementation of its regular program which includes the recovery response in the Delta such as cleaning of ponds and wells, conversion of child friendly space to ECD classes, construction of schools and other activities which will reduce the risks and vulnerability of children and their families from the disaster.

There are a number of potential key roles that UNICEF can play at a policy, technical and program level. As a trusted government partner, UNICEF is perhaps uniquely placed to act in a facilitating role, assisting in a small way the government to establish its priorities regarding children and acting as a link to international good practice and the latest in lessons learned throughout the world following such disasters.

In addition, UNICEF Myanmar has a proven track record of bringing together key stakeholders in the humanitarian community within the country and regionally. Myanmar at this point appears some way short of the type of cooperation between government and non-governmental agencies required for an effective recovery response. UNICEF could continue facilitating such collaboration.

In 2009, priority will be given to fill vacant positions in the UNICEF Myanmar office, which will enhance its human resource capacity. This will further contribute to the already effective and efficient program team. Sufficient additional funding will also be needed to allocate to the ongoing recovery effort if these recommendations are to be successfully implemented. The recommendations below are set firmly in the context of the CRC and Human Rights Based programming and reflect many observations and recommendations of similar reviews and evaluations.

13.1 WASH

Increase technical capacity and resources within UNICEF for emergency operations and coordination

- Advocate for the development of regional WASH emergency response capacity
- Develop coordination strategy matched by resources to plan for emergency response
- During emergency responses, clearly define responsibilities and standard for all cluster partners in policy decisions as part of UNICEF’s cluster leadership in WASH
- Greater use of Behaviour Change Communication in WASH program to ensure sustainability

13.2 Education

Reinforce technical capacity for oversight of construction program and develop capacity to provide semi-permanent school kits
• Immediately engage more engineers and/or private engineering firms to act as UNICEF’s agent in a school construction program and urgently address temporary school rehabilitation measures prior to rainy season (subject to funding)
• Consider developing a ‘semi-permanent school’ kit that can be deployed from Supply Division in Copenhagen instead of tents\(^5\) or temporary learning spaces capable of withstanding rainy season

13.3 Health and Nutrition

Further strengthen UNICEF’s leadership role in collaborating with partners in nutrition and immunisation activities

• Consider designating an in-house technical officers for emergency response in health during emergencies
• Develop and distribute technical guidelines on emergency measles campaigns and cold-chain specifications for partners. UNICEF must find ways to encourage partner agencies to accept and act upon on its health and nutrition survey findings
• Contingency plans should be developed so that when nutritional supplementation and/or therapeutic feeding are indicated, UNICEF can prioritize these activities and ensure appropriate supplies, staffing and support
• Develop approaches to target hard to reach communities

13.4 Child protection

Increase rapidly deployable technical capacity for child protection

• Establish a roster for child protection experts and possible intern scheme to help build the limited CP capacity both in UNICEF and within counterpart organizations
• Consider approaches to ensuring issues of vulnerable adolescent boys and girls are properly considered and they do not become invisible and unable to monitor
• Introduce livelihood support and cash transfers programme to support vulnerable families with children
• Consider approaches to ensuring birth registration and replacement of papers destroyed during the cyclone are prioritized in UNICEF’s programming

13.5 Planning, Monitoring and Evaluation

Ensure that programs are managed to achieve outcomes along with the delivery of inputs and activities

• Assist partners, particularly newly established NGOs, for program monitoring and reporting beyond inputs (training, monitoring formats, budget line for monitoring purpose etc.)

\(^5\) Tents proved to be inappropriate due to local hot and humid climatic condition

Best practices and lessons learnt: UNICEF Myanmar’s response following cyclone Nargis
• Continue to develop simple standardized monitoring formats and report templates for use with partners and field hubs
• In any forthcoming audit, risks and impact associated with delayed humanitarian program implementation should be assessed alongside financial risks. Liaison with Audit Office should begin prior to audit preparation

13.6 Operations

• Review and streamline financial and administrative rules and guidelines in order to improve the speed, efficiency and effectiveness of UNICEF’s humanitarian responses. This is particularly needed for PCA in the Delta and procedures of dealing with the private sector and the informal economy in a remote context. Procedures created at Yangon level as a result of rules, guidelines and audits should not hinder program delivery and should contain fast track clauses for emergencies
• Produce a consolidated easy to use guide, specifically for the local context, to field procedures in emergencies for standard operating procedure
• Develop training programs for operations and supply staff in support of the above work and involve DFAM and Audit Office

13.7 Human resources

Further expand emergency surge capacity and develop ways to overcome the ‘transition gap’ between first wave emergency and longer-term recovery

  o Expand the surge capacity to include both emergency program and operations specialists to work alongside regular program staff
  o Ensure that Program Sections have sufficient and appropriate and well briefed technical and operational staff and matching budgets to support rapid humanitarian responses
  o Ensure that experienced skilled logistics staff are rapidly available at field level alongside program staff immediately and on rosters in order to improve UNICEF’s emergency logistics capacity
  o Refine in-country emergency response team with inclusion of stand by local staff and suppliers (transport, storage and providers of basic emergency stocks and services)
  o Work with DHR in New York and Regional Office to refine a systematic in-country, regional and global human resource rosters to ensure consistent deployment of staff on mission and not reliance on random recommendations
  o Strengthen global trigger mechanisms for longer release periods of staff on mission, strengthening incentives for staff taking part in humanitarian responses. This will include contingency plans in the country for stand-in capacity to backstop when staff are seconded away on emergency assignments

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There must be a flexible mechanism for contracting arrangements for deployment of staff for emergency response similar to the stand-by partner arrangements as first port of call.

Mandated time out and staff wellbeing initiatives must be adhered to and adopted by all staff and is responsibility of senior management to lead by example.

### 13.8 Supply and Logistics

Further improvements should be made in UNICEF’s supply and logistics systems in order to improve humanitarian responses and ensure a robust operations is deployed at the onset of an emergency.

- Develop an in house ‘office in a box’ that can function within 48 hours in areas where there has been significant destruction, including office and living accommodation, IT, telecommunications and other equipment.

- Further develop database of in-country stand-by technical support (including IT, communications and warehousing), stand by private sector suppliers, all service providers for modes of transportation (including the trucking companies, boat providers and freight forwarders) on a case-by-case basis taking into account cost and risk implications.

- Decentralise procurement and overreliance on brokers (when viable) and advocate for local and sustainable sourcing of goods and services.

- Review UNICEF Myanmar Supply Section’s procurement policy on currency requirements and broaden these to include payments in Kyats not just FEC and USD.

- Ensure program section chiefs have a technical oversight role in all procurement decisions regarding relevant supplies including donations.

- Insurance for all warehouse supplies should be obligatory.

- Funds should be allocated for logistics operation at the beginning of the operation instead of being allocated to programs as cross sectoral expense.

Best practices and lessons learnt: UNICEF Myanmar’s response following cyclone Nargis
13.9 Emergency Preparedness

Strengthen emergency preparedness and response planning

- Develop Standard Operating Procedures to ensure staff understand organisational policy and procedure quickly and maximise support from the wider organisation.

- EPRPs must contain an up-to-date staff mobilisation plan including local, regional and global contractors and suppliers.

- All former Field Hub staff involved in emergency response should be placed on roster as stand by local response team and be included for future ERRP training and information sharing.

- EPRPs must focus on practical measures to enable rapid response expediting standby agreement and surge capacity recruitment procedures, procurement, storage and transportation processes.

- The current practice of annual updating of EPRPs must be maintained and backed-up with associated in-depth training and clear accountabilities.

13.10 Coordination and Leadership

Develop strategy on delivery of coordination responsibilities and allocate resources to implement this strategy within the context of IASC deliberations.

- Produce statement of intent in each sector that defines UNICEF’s role and responsibility as cluster leader.

- UNICEF at the global level needs to continue to build its roster in order to have available qualified cluster coordinators to undertake cluster role from the onset of an emergency.

- Develop action plan to resource coordination responsibilities in crisis to include data capture and analysis, GIS and other informational management technologies where possible.

- UNICEF as an important cluster leader should initiate reviews and rationalize the current cluster system, using desired outcomes at community level as the primary focus.

- Reduce reliance on meetings as a primary coordination mechanism both in Yangon and field hubs.

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6 In the field there are Government Officer, OCHA focal point, and Cluster representatives calling for coordination meetings.

Best practices and lessons learnt: UNICEF Myanmar’s response following cyclone *Nargis*
13.11 Recovery and Rehabilitation

Develop a recovery and rehabilitation policy for, including expertise requirements for large scale construction, realistic timeframes and temporary provision

- Recovery of livelihoods should be an immediate priority over the coming months and be mainstreamed in all program areas
- Discussions on livelihoods in the humanitarian community should be consolidated, possibly as a single cluster in support of the recovery process
- Increase partnerships so that large scale construction expertise that can be brought in rapidly and support school and health infrastructure rebuilding schemes
- Further support pool of skilled workers in the affected township level to quickly rebuild water supply and sanitation infrastructure. UNICEF already introduced “cash for work” scheme for new pond building and rehabilitation in addition to providing potable water to the worst affected areas during the dry season. This scheme should be maintained as it generates income for families while also making available safe drinking water
- Strengthen support to the development of a national disaster risk reduction (DRR) strategy for Myanmar, facilitating learning and technical expertise as appropriate. This strategy should have a robust community level component and immediate priority given to community consultations around DRR, not only to improve planning, but to help alleviate widespread psychosocial stress.
- Fully absorb emergency field hubs’ program and operations in to regular program by integrating it to annual work-plan of each sector including staffing. This transition should be clearly communicated to all Field staff
14. Conclusion

In terms of lessons for the wider humanitarian community, it seems clear that the capacity to respond in Myanmar was based on the ability to deploy those already on the ground bringing new staff was problematic due to visa restrictions. In case of UNICEF, this involved redeployment of all staff from all nine field offices immediately. In addition the limited number of Myanmar nationals working in various UNICEF offices were brought in on assignment. This was a crucial decision which also enabled UNICEF to immediately establish ‘field offices’. UNICEF however needed to employ additional national staff at field hub level. This was challenging, both in terms of the quantity and quality of staff available locally. There was no time to train the newly employed staff. Given the internal travel restrictions for international staff, remote management approaches from Yangon were needed, in terms of the coordination and mentoring of new staff and ‘community partnership arrangements’ with local community groups. Fortunately this proved to be effective, utilising the combined inputs of international and national staff.

Given this backdrop, UNICEF Myanmar’s response to cyclone Nargis if measured against DAC/OECD criteria has been generally appropriate and relevant. Funds were quickly mobilized, a rapid assessment was conducted immediately and an emergency response was rapidly organised. Responses have been effective and in the most part timely given the overriding political constraints. In collaboration with Government and NGO partners, UNICEF was able to meet the needs of the affected communities in an efficient manner. UNICEF formed a strong relationship with counterparts, volunteer groups, NGOs and the community. At an institutional level, the Nargis response has resulted in positioning UNICEF as a reliable partner capable of delivering technical advice, relief support and implementing innovative programs.