Heavy fighting in the north and east of Sri Lanka is resulting in grave humanitarian consequences for over 200,000 internally displaced persons.

Humanitarian access is greatly hindered to assist the civilian population in conflict-affected areas due to the deteriorating security situation.

Unmet needs in water, sanitation, nutrition and education in IDP camps, and the protection of children from forced recruitment and other child rights violations, are of major concern.
1. EMERGENCY OVERVIEW AND ISSUES FOR CHILDREN

Heavy fighting between the Sri Lanka’s military and the Liberation Tigers of Tamil Eelam (LTTE) have brought the death toll to over 4,000 since the renewal of open fighting beginning in August 2006. While attacks continue to intensify in the North and East on a daily basis, in recent months these clashes have edged closer to the capital, Colombo. In March, the LTTE carried out its first aerial surprise attack by dropping bombs at the military airbase next to Sri Lanka’s Bandaranaike international airport north of Colombo, killing three. Most flights have now been re-scheduled to daytime with some airlines still suspending or limiting their services to Sri Lanka. In May, a claymore mine placed on a roadside rooftop in the Colombo suburb of Ratmalana killed eight and injured 38 people. Civilian deaths are on the rise, and humanitarian workers have not been spared. In early June, two Sri Lankan Red Cross staff were abducted and murdered. The Inter-Agency Standing Committee (IASC) has condemned the horrific killing of two aid workers and has demanded investigation to bring the perpetrators to justice. Despite the changing nature of the conflict, abductions, disappearances, killings and other allegations of human rights violations by the fighting parties have increased.

With no end in sight to the nearly three decades of conflict, the situation of children and women remains precarious, particularly those driven from their homes in the northern and eastern districts of Jaffna, Kilinochchi, Mannar, Mullaitivu, Vavuniya, Batticaloa, Trincomalee and Ampara. NGOs and UN agencies have significantly slowed down tsunami rehabilitation activities and rebuilding efforts over the last 10 months due to increasing violence and intimidation. For the displaced living in camps and host communities, delivery of humanitarian assistance is hampered by security/safety concerns, lack of reliable transport routes and acute shortage of human resources in peripheral areas. The main road to Jaffna remains closed, cutting off some 600,000 people living on the peninsula. Immediate services required for IDPs, including for vulnerable populations in host communities, are water and sanitation, and the protection of children from rights violations. Accommodating the influx of IDPs into “cleared” (government controlled) areas from “uncleared” (non-government controlled) areas remains a priority.

The health situation of the IDP population and host communities is generally satisfactory with no reported significant increase in incidences of diarrhoea, acute respiratory infection, vector borne and communicable diseases, TB, typhoid or rabies in the affected areas. The availability of essential drugs, including vaccines, is satisfactory for hospital and health clinic needs, but private pharmacies have run out of most items putting a strain on public hospitals in Jaffna and the Vanni. Immunization services have been seriously affected in Mannar district as a result of low vaccine supplies and reduced access by health professionals to the area. The maintenance of the cold chain is increasingly difficult due to lack of fuel. Maternal deaths have been reported to be on the rise due to curfews and untimely referrals. Sri Lanka’s achievements in public health standards could erode given the protracted conflict.

Access restrictions and the deterioration in the quality of education for children living in areas of sustained violence and stress in Jaffna and the Vanni, in particular, have resulted in the violation of children’s rights to education. Partial and/or complete disruption in education for more than a quarter of a million children in these areas due to displacement of teachers and students and the pervasive indiscriminate violence, including claymore attacks, landmines/UXOs and aerial bombings, has resulted in a climate of fear and increased disparity in these extremely vulnerable areas. Potential under-age recruitment by armed groups, aerial bombings, and security checkpoints established in communities greatly impact access to schools even in those schools that are prepared to continue during the prolonged conflict.

In IDP locations and around the country, abduction and recruitment of children continue to be reported by families and humanitarian agencies. As of end May 2007, UNICEF has recorded 6,461 children abducted (6,154 by LTTE and 307 by Karuna). Of the 1,789 children still being held (1,591 by LTTE and 198 by TMVP/Karuna Faction), UNICEF zonal offices continue to provide a space for family and community members to report abduction and recruitment of children from fighting forces.

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1 Sri Lanka government and media reports
2 The Vanni is the region below the Jaffna peninsula and includes parts of Kilinochchi, Mannar, Mullaitivu and Vavuniya districts (mainly non-government controlled areas).
3 While all were recruited as children, many are now over 18 years. Currently, out of 1591 held by LTTE, 506 are under 18 years; out of 198 held by Karuna, 152 are under 18.
4 The Karuna faction split from the LTTE in 2004 and is now aligned with the Government.
5 Between December 2006 and May 2007, UNICEF recorded 220 children abducted (148 by LTTE and 72 by Karuna). Of the 220, 199 were reported abducted between January and May 2007 and 26 were abducted in prior years.
The Sri Lankan Task Force on Monitoring and Reporting established in relation to UN Security Council Resolution 1612 has continued to monitor and report grave child rights violations perpetrated by the parties to the conflict. The UN Security Council Working Group on Children and Armed Conflict considered the Secretary General's report on the situation of children and armed conflict in Sri Lanka and the mission report of the Special Envoy of the Special Representative of the Secretary General for Children and Armed Conflict, Ambassador Allan Rock. On 10 May, the Security Council Working Group on Children and Armed Conflict made recommendations to the parties to the conflict to prevent and address the conflict-related grave violations that are occurring against children in Sri Lanka. The Sri Lankan Task Force on Monitoring and Reporting will provide an updated progress report to the Security Council Working Group for its October session.

2. UNICEF ACTION

UNICEF's humanitarian action is focussed currently on IDPs and host communities in northern and eastern Sri Lanka, where over 200,000 persons remain displaced from their homes. The affected populations comprise four distinct groups: Firstly, the new IDP caseload standing at 276,244 (as of 29 May 2007); Secondly, about 80,000 people in Jaffna who are economically affected; Thirdly, 200,000 to 300,000 residual IDPs from the tsunami and previous fighting, and finally around 30,000 returnees who had made their way back to their homes in the East during the period 14-29 May 2007.7

UNICEF coordinates the water and sanitation and education sectors, working in collaboration with UN agencies, ICRC, international and national NGOs and government partners. UNHCR leads the protection and shelter sectors; WHO, the health sector; and WFP, the food security/nutrition sector. Due to a marked deterioration in the security situation, including screenings, harassment and abductions, humanitarian access, delivery of basic services to the IDP population have been severely reduced particularly in LTTE-controlled areas of Kilinochchi, Mannar, Mullaitivu and Vavuniya.

The main constraints of the conflict emergency response relate to the deteriorating security situation and heavy escalation of fighting in the North and East. Parents fear to report cases of child recruitment, and the ability of UNICEF staff to travel is limited. Many trained staff and volunteers in all the key sectors have been displaced.

Water, Sanitation and Hygiene (WASH)

As of May 2007, the WASH sector is providing basic services to 265,000 IDPs, representing approximately 50,000 IDP families living in 244 camps and communal places or with host families. Since the beginning of the year 2,726 emergency and semi-permanent toilets have been constructed and are being used by 10,904 IDP families. On average, 978 m3 of safe water is supplied everyday to 44,000 families through water bowser or tube wells equipped with hand-pumps.

To respond to the challenge of providing timely water and sanitation services to large numbers of IDPs and unpredictable IDP movements as well as movements into unsuitable sites, new designs of portable and collapsible toilets, bathing places and water stands have been developed and used. It is however estimated that 14,000 IDP families remain without adequate access to toilets and that 68 per cent have not yet been exposed to hygiene awareness activities. More than 100 IDP camps and communal places still require additional sanitation facilities to comply with the SPHERE standards of one toilet for 20 persons. Septage collection and sanitary disposal of faecal undigested sludge constitute a major gap in all affected districts, particularly in Batticaloa district. Sector partners are working together with institutions to identify septage disposal locations and develop appropriate designs for emergency facilities. A Site Feasibility Assessment has been developed and plots of public lands have been allocated by local authorities. Garbage collection from camps sites and sanitary disposal of solid waste is another major service gap.

Over the next six months, the care, maintenance and monitoring of water and sanitation facilities at IDP camps needs to be strengthened. While water and sanitation focal point agencies are responsible for providing on-going technical support, Camp Managers and Camp Volunteer Committees are the first line in implementing the proper operation, routine maintenance, and simple repairs of water and sanitation facilities. Particular attention will be paid to expand their knowledge, skills and accountability. There is a need to strengthen the involvement of IDPs in the decision-making process, including those on installation and maintenance of water and sanitation facilities.

6 Food and nutrition survey conducted by UNICEF, WFP and FAO in Jaffna, November 2006.
7 As reported in the UN CHAP mid-year review, May 2007
Education

Mass movements of communities at the end of 2006 and early 2007 resulted in the displacement of 45,000 students in the east and approximately 20,000 students in the Vanni. Approximately 1,800 teachers have been displaced and more than 225,000 students are living in conflict-affected and increasingly vulnerable communities in the Northern and Eastern provinces. Schools are routinely displaced, closed or occupied by IDPs as communities flee from conflict. This has had a detrimental effect on access to education.

Continued displacement and disruptions in schooling due to insecurity and fear have resulted in an increasing number of children who are no longer able to follow the prescribed curriculum and syllabus. In an effort to prevent mass drop-outs in conflict-affected communities, education partners have initiated local activities. However, given the scope and complexity of the education system a much more systematic and comprehensive approach must be taken at all levels to ensure that those children and teachers impacted are provided with a minimum level of assistance. To date, partners have been unable to take such an approach due to both limited resources and limited access in some of the more volatile areas.

During the first half of 2007, UNICEF and its partners were able to provide essential education materials for 45,000 displaced children in the east as well as supporting the Ministry of Education with 140,000 student kits for all students in Jaffna given the special circumstances in the district; construction of 30 Temporary Learning Spaces (out of 90 required); provision of essential teaching supplies including blackboards for an estimated 300 classrooms (out of 450 needing support); provision of temporary transport of teachers to two particularly remote and vulnerable IDP schools; development of a consolidated syllabus for students needing to catch up with their age peers; consolidated syllabus and psychosocial training for 1,100 teachers (out of 2,000 identified); and capacity building of government partners initiated at all levels. Advocacy with the Ministry of Education in late 2006 and early 2007 resulted in the establishment of a network of emergency education focal points at Central, Provincial and Zonal levels within the existing education system. The increased acceptance of responsibility to children affected by conflict stems form advocacy, workshops and training sessions provided by UNICEF to the emergency education focal points.

The unavailability of school materials is often one of the main obstacles for regular attendance. Some 185,000 children (out of 300,000 requiring materials each term) have been supported with essential school supplies. UNICEF has been instrumental in establishing a National Psychosocial Plan under the Ministry of Education to ensure that each school has a trained focal point to address the psychosocial needs of children. Given the emergency context, the programme was extended to target the majority of teachers working with displaced students in the east. A similar approach is planned for the remaining districts in the Northern and Eastern Provinces to ensure students benefit from increased psychosocial support at the school-level by the end of 2007. Thus far, 1,100 teachers have received training to strengthen their capacity in providing children with quality education and appropriate psychosocial support at the classroom level. To date, an estimated 50,000 students in conflict-affected communities have benefited from teachers trained on psychosocial support.

Initial baseline surveys and continued assessments have been conducted in target districts in response to the changing environment and needs. Plans are being developed by UNICEF and counterparts in each affected zone. The focus for the latter half of 2007 will place more emphasis on teachers’ capacities, management capacity to respond to emergency needs at all levels of the education system, alternative educational approaches taking into account specific needs of affected communities thus ensuring an increase in quality in addition to continued material support. UNICEF anticipates emergency programming for an estimated 300,000 vulnerable and displaced students, their teachers and management structures supporting emergency education.

Health and Nutrition

In the conflict-affected areas, UNICEF has prioritized support for infant and young child feeding, vaccination services, micronutrients supplementation, delivery of critical supply items (medical kits, high energy biscuits, therapeutic foods), promotion of behavioural change communication and capacity building of health providers and implementing partners. Overall, UNICEF has participated in 14 assessments of IDP health status. Findings are reviewed at bi-weekly coordinating consultations, led by the Deputy Provincial Director of Health Services (DPDHS) and facilitated by UNICEF at district level, with local MOH authorities for appropriate follow-up interventions.
In the first quarter of 2007, UNICEF provided 178 metric tonnes of high energy biscuits (HEB) to meet two months requirements for 29,832 vulnerable persons, notably women and children, living in IDP camps of the North East. In Batticaloa, UNICEF, in partnership with WFP and the Ministry of Nation Building, provided 64 MT of HEB to 10,502 under five children, lactating mothers and pregnant women for a period of two months to prevent deterioration from existing nutritional status. UNICEF also pre-positioned an additional 72 MT of HEB which was distributed in the second quarter of 2007 when the availability of corn soya blend was inadequate. This benefited around 31,000 children under five, pregnant and lactating women for a period of one month. UNICEF also has also pre-positioned an additional 61.2 MT of HEB as a buffer stock in Colombo and other sites which will meet the emergency needs of over 27,000 vulnerable groups for one month.

The diagnosis and treatment of severe malnutrition at community and health facility levels is being supported in the IDP camps of conflict areas of Jaffna and Batticaloa districts. District health workers, now use the protocol developed by national experts with the technical support of UNICEF. A nutrition rehabilitation programme (NRP) is being implemented for severely undernourished under five children both in hospitals and in community-based environments in Batticaloa and Jaffna. In Batticaloa, health workers report that all children registered in the NRP (some 361 so far) have gained an average weight of 400g after two weeks of treatment. Training of trainers has facilitated the expansion and outreach of NRP to children with severe acute malnutrition (SAM). UNICEF continues to conduct and support rapid assessments on the nutritional status of children in conflict areas to ensure an appropriate and timely response.

UNICEF is supporting health promotion through community-level health promoters in all IDP locations. Key messages focus on ORS preparation, breastfeeding and complementary feeding, hygiene promotion, immunization, vitamin A supplementation and de-worming. UNICEF is also supplying de-worming tablets for pregnant women and vitamin A supplementation for nursing mothers and under five children in all IDP areas.

Although overall routine immunization services are running smoothly, it continues to be constrained by frequent movement of IDPs and limited access by health workers to some of the IDP camp locations like Maddu (Mannar district), northern parts of Vavuniya and Vaharai in Batticaloa district. Without health records and other possessions, IDP children arriving to government-controlled areas have often no information or recollection of vaccination. In Vaharai, UNICEF is supporting health workers from the district Teaching Hospital to conduct mobile health team visits to IDP and resettlement sites. During this quarter, support has been provided to 20 mobile medical clinics in Batticaloa, which provide immunization services as well as the treatment of various diseases benefiting over 640 persons.

To date, there have been no major disease outbreaks amongst the IDPs although sporadic cases of chicken pox and hepatitis have been reported. As a precautionary measure against vector-borne diseases, UNICEF distributed 44,000 mosquito nets in all IDP camp locations. Challenges include the shortage of medical doctors, midwives and nurses, and supplies, transport of goods as well as the access to the conflict affected population.

**Child Protection**

UNICEF is the lead agency for child protection complementing UNHCR’s overall protection sector lead. Main child protection issues being addressed include prevention of underage recruitment, registration of separated and unaccompanied children, supporting child friendly spaces (CFS) and psychosocial support services, and provision of mine risk education (MRE) and safety awareness, within community-based child protection systems.

A network of partners (including Save the Children in Sri Lanka, Christian Children’s Fund, among many more local NGOs) working under a national child protection coordination forum meets on a bi-weekly basis to review issues on prevention and response to all forms of violence, abuse and exploitation as a result of the emergency. This forum links with UNICEF-led district based coordination structures. Violations of children’s rights by armed groups are monitored and reported through a mechanism established under the UN Security Council Resolution 1612. Since January 2007, 25 cases of violations have been presented to the Security Council Resolution 1612 Task Force (excluding underage recruitment cases). Other violations related to children at risk (e.g. domestic violence, sexual abuse, etc) within IDP camps are referred to child protection agencies working in the camp for immediate response or referral to specialist services.
UNICEF continues to monitor and report on underage recruitment and provides reintegration support to children through its partners. UNICEF’s partners have identified villages where there is particular risk of recruitment and mobilized community-based prevention protection mechanisms. In Batticaloa, child protection networks in 21 communities have been strengthened and are functioning. In Trincomalee, based on vulnerability criteria, villages and communities have been identified in order to strengthen/ re-establish community-based child protection networks.

Between January to May 2007, 108 children are reported to have been recruited by the LTTE and 91 by the TMVP/Karuna Faction. In the same period, 106 children have been verified as released by the LTTE and 27 verified as released by the TMVP. Underage recruitment data has been maintained by UNICEF since 2001, which has proven to be an effective advocacy tool for the release of underage recruits and the cessation of recruitment. UNICEF continues to advocate with all parties to the conflict on issues related to the impact of the situation on children.

Registration of separated and unaccompanied children and children with single parents, in all IDP sites is being supported through a coordinated mechanism established with the Department of Probation and Childcare Services. The aim is to provide family tracing and reunification services for registered children and ensure that those registered are provided with protection services. As a result of the recent fighting, 71st separated children have been registered in Batticaloa, and all have been placed in the care of neighbors and relatives. In Jaffna, 18 children have been registered. In Trincomalee, 16 separated children have been identified/registered, and individual plans have been developed to provide safe temporary care or permanent family arrangements. UNICEF continues to support local and international agencies to assess and monitor the vulnerability of children in institutions during periods of escalated fighting to return to their families for protection, including follow-up social work. Since January 2007, 65 residential homes/institutions in Batticaloa have been assessed and an emergency support plan has been set up in 20 locations.

Child friendly spaces (CFS), including psychosocial services and referrals for specialist support, are ongoing for all IDP camps. UNICEF and its partners are supporting some 45 CFS in Batticaloa and 11 in Jaffna. Approximately 20,000 children in Batticaloa and 800 children in Jaffna participate in guided recreational activities such as music, dance, folk game play, handicraft, psychosocial recreation art and drama. In Trincomalee, a psychosocial network has been set up with full outreach capacity to all IDP locations and returnee communities. A CFS steering committee in each district establishes and monitors standards. Staff facilitating CFS is also able to raise awareness among the children on mine risk, hygiene, and child rights to promote their psychosocial wellbeing.

UNICEF partners with over 20 organizations in mine risk education and safety awareness. Activities are carried out using MRE posters, presentations, radio campaigns and television programmes. Mine risk education campaigns have been carried out in all IDP sites in Batticaloa (105 sites) and in Vaharai resettlement areas. In Jaffna, 20 temporary accommodation centres have been covered, sensitizing nearly 2,000 persons with key MRE messages. In Trincomalee, all IDP sites and returnee communities have received mine risk education through campaigns. Currently, statistics are not available on incident survivors receiving support.

**Non Food Relief Items (NFRI)**

UNICEF is committed to providing IDP families with basic non-food relief items for survival within 72 hours of any emergency and has pre-positioned these items in key locations. UNHCR coordinates the procurement and distribution of NFRLs in collaboration with UNICEF and ICRC to avoid duplication and identify gaps. Since January 2007, some 30,000 IDP families have been assisted with NFRLs such as cooking utensils, clothes, sleeping mats and personal hygiene items.

### 3. APPEAL REQUIREMENTS AND RECEIPTS

The UNICEF component of the UN Common Humanitarian Action Plan (CHAP) updated at mid-year among UN agencies and its partners amount to US$10.7 million for 2007.\(^9\) To date, US$4.7 million or 44% has been received from Australia, USA and the Central Emergency Response Fund (CERF) grant.\(^10\) These funds need to be supplemented to ensure a comprehensive and timely response to the intensifying crisis and to fulfil donors’ commitment to Good Humanitarian Donorship principles.

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\(^8\) Figure as of early June 2007
\(^9\) Original January to June 2007 CHAP requirements totaled US$3.3 million.
\(^10\) CERF grant administered by OCHA of US$1.189 million was received by UNICEF on behalf of WASH partners; UNICEF’s portion totaled US$145K.
Table 1: Total UNICEF needs by sector against CHAP 2007 (in USD)

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<td>Total</td>
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<td>4,668,398</td>
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Table 2: Funds received by Donor against the CHAP 2007 (in USD)

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<td>Central Emergency Response Fund</td>
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<td>USA</td>
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<td>Nutrition, Protection, WASH</td>
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<tr>
<td>Total</td>
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Details of the Sri Lanka emergency programme can be obtained from:

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