



**2011**  
**UNICEF**  
**Humanitarian**  
**Action**  
**for Children**

*building resilience*

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Division of Communication, UNICEF  
3 United Nations Plaza  
New York, NY 10017, USA  
Tel: + 1-212 326-7434  
Email: [nyhqdoc.permit@unicef.org](mailto:nyhqdoc.permit@unicef.org)

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## PROJECT MANAGEMENT, EDITORIAL AND RESEARCH

Dermot Carty, *Deputy Director*, Office of Emergency Programmes; Christine Knudsen, *Chief Project Manager*; Marika Hofmeister, *Project Manager*, Piero Calvi-Parisett, Michele Ferenz, James Rogan, Monique Thormann, *Writers*, Anastasia Warpinski *LLC Writer/Report Editor*; Jennifer Meybaum, *Editor*; Karin Ulin, *Researcher*, Nadia Falch Bandak, *Researcher*; Maritza Ascencios, *Consulting Editor*

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## DESIGN AND PRE-PRESS PRODUCTION

Laurie Douglas Graphic Design

## MAPS

Jihad Abdalla, *Emergency Officer*

## PHOTOGRAPHY

Ellen Tolmie, *Senior Photography Editor*; Susan Markisz, *Lead Photography Researcher/Caption Writer*

## WEBSITE PRODUCTION

Alex Godoy, *Multimedia Project Manager*; Dennis Yuen, *Web Developer*; Andrea Verity, *English Web Producer*; Emmanuel May, Linda Tom, Ling Tsui, *Web Designers*; Patrice Brizard, Pedro Bujalance-Andres, Sobhi Jawabra, Diana Jimenez, *Language Web Production*

## VIDEO PRODUCTION

Priyanka Pruthi, *Producer*; John Mims, *Editor*

## OUTREACH

Patrick McCormick, *Emergencies Communication Officer*; Genine Babakian, *Writer/Editor, Media section*

## PRINTING

Phoenix Design Aid

## TRANSLATION

*French edition*: Marc Chalamet

*Spanish edition*: Carlos Perellón

*Arabic edition*: Sobhi Jawabra

## Further Information on UNICEF's humanitarian action can be obtained from:

### Louis-Georges Arsenault

Director  
Office of Emergency Programmes  
(EMOPS)  
UNICEF New York  
Tel: +1 212 326-7163  
Fax: +1 212 326-7037  
E-mail: lgarsenault@unicef.org

### Afshan Khan

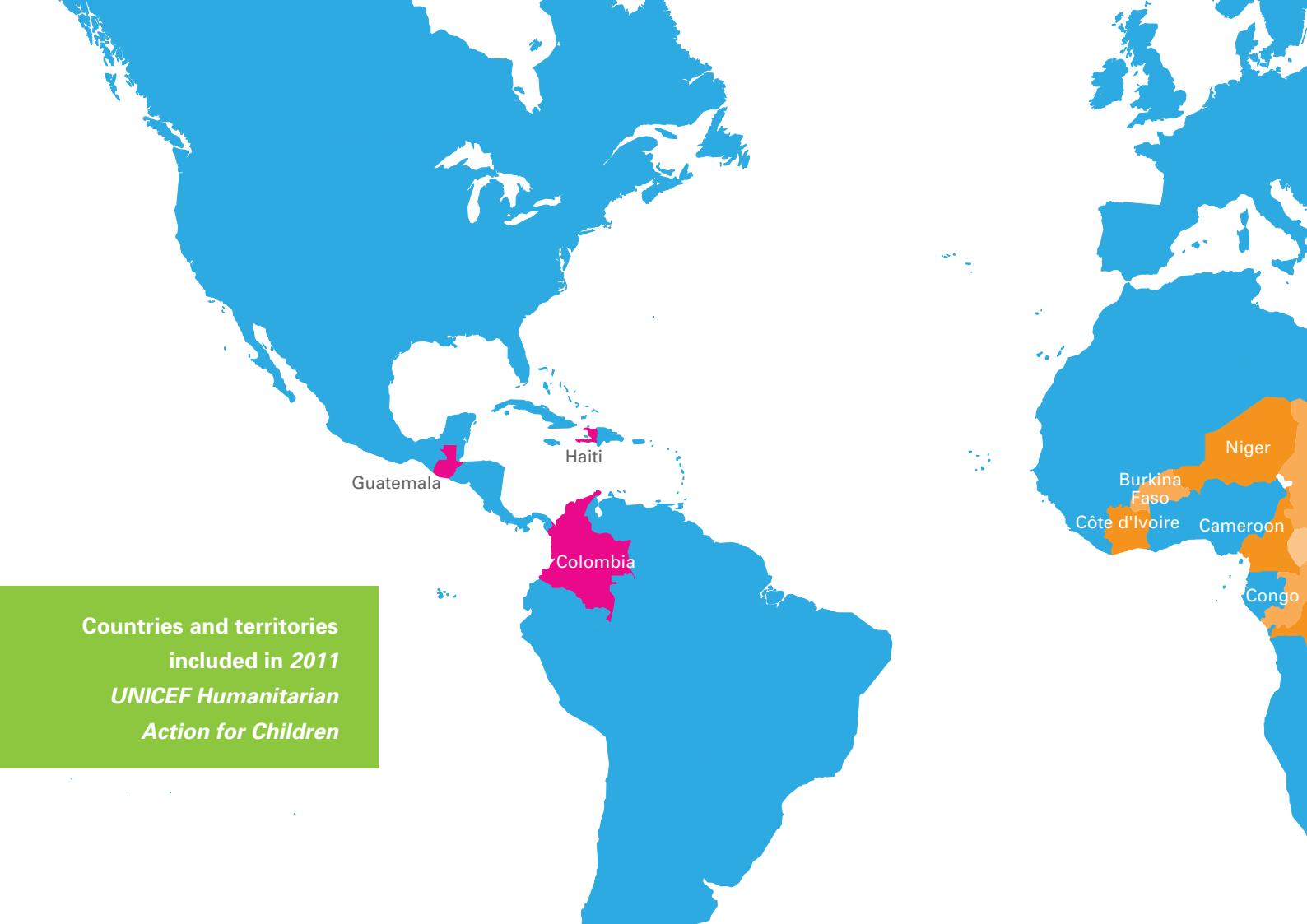
Director  
Public Sector Alliances and  
Resource Mobilization (PARMO)  
UNICEF New York  
Tel: + 1-212 326 7160  
Fax: + 1-212 326 7165  
E-mail: akhan@unicef.org

### Dermot Carty

Deputy Director  
Office of Emergency Programmes  
(EMOPS)  
UNICEF Geneva  
Tel: + 41 22 909 5601  
Fax: + 41 22 909 5902  
E-mail: dcarty@unicef.org

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*UNICEF Humanitarian  
Action for Children*

## Foreword



In 2010, Haiti was hit by the worst earthquake in its history – a humanitarian tragedy that was compounded by a cascading series of subsequent crises. During my visits there, I met children who had lost virtually everything – loved ones, homes, every material possession – and who still faced significant threats. But what struck me most about these children, and so many Haitians, was their resilience in the face of tragedy, and their capacity to hope for – and build – a better future.

During the catastrophic flooding in Pakistan, I saw the same courage and resilience, and the same indomitable capacity to pick up the pieces and carry on. And wherever such humanitarian emergencies occur – whether because of natu-

ral disasters, human conflict or chronic crisis – resilience is a critical key to recovery.

*2011 Humanitarian Action for Children* highlights the ways UNICEF is working to foster such resilience at the individual, community and institutional levels. As the report shows, we are increasingly supporting innovative efforts to help communities prepare for and limit the effects of future emergencies – and to bounce back and ‘build back’ better when tragedy does strike.

In case after case, we see how such innovation has helped people to overcome profound challenges. In the Niger, for instance, women forced from their home villages in search of food for their families have banded together to form small business ventures that have enabled them to send food, seeds and money back to their communities. Just as important,





the success of their joint efforts has given them confidence and increased their capacity to cope in a crisis.

The past year was one of unprecedented challenges. All told, over the course of 2010 UNICEF responded to at least 290 humanitarian situations in 98 countries, affecting millions of people. The disasters in Haiti and Pakistan triggered an extraordinary outpouring of humanitarian aid – but the needs are enormous, in those nations and in every nation facing emergencies and chronic crises.

While we hope that 2011 will not bring a similar onslaught, we must be ready to respond quickly when disaster does strike. So this year's edition of *Humanitarian Action for Children* also highlights projected humanitarian needs for 2011 in 32 countries and territories and 6 regions. Funds to meet these needs are critical to

allowing us to respond in emergency situations, and also to breaking repeated cycles of crisis.

With your support, we can minimize the impact of humanitarian crises, wherever and whenever they occur – and we can help to build greater resilience in the world's most vulnerable communities. For the sake of the children.

Anthony Lake  
UNICEF Executive Director

# UNICEF Humanitarian Action Funding Requirements for 2011

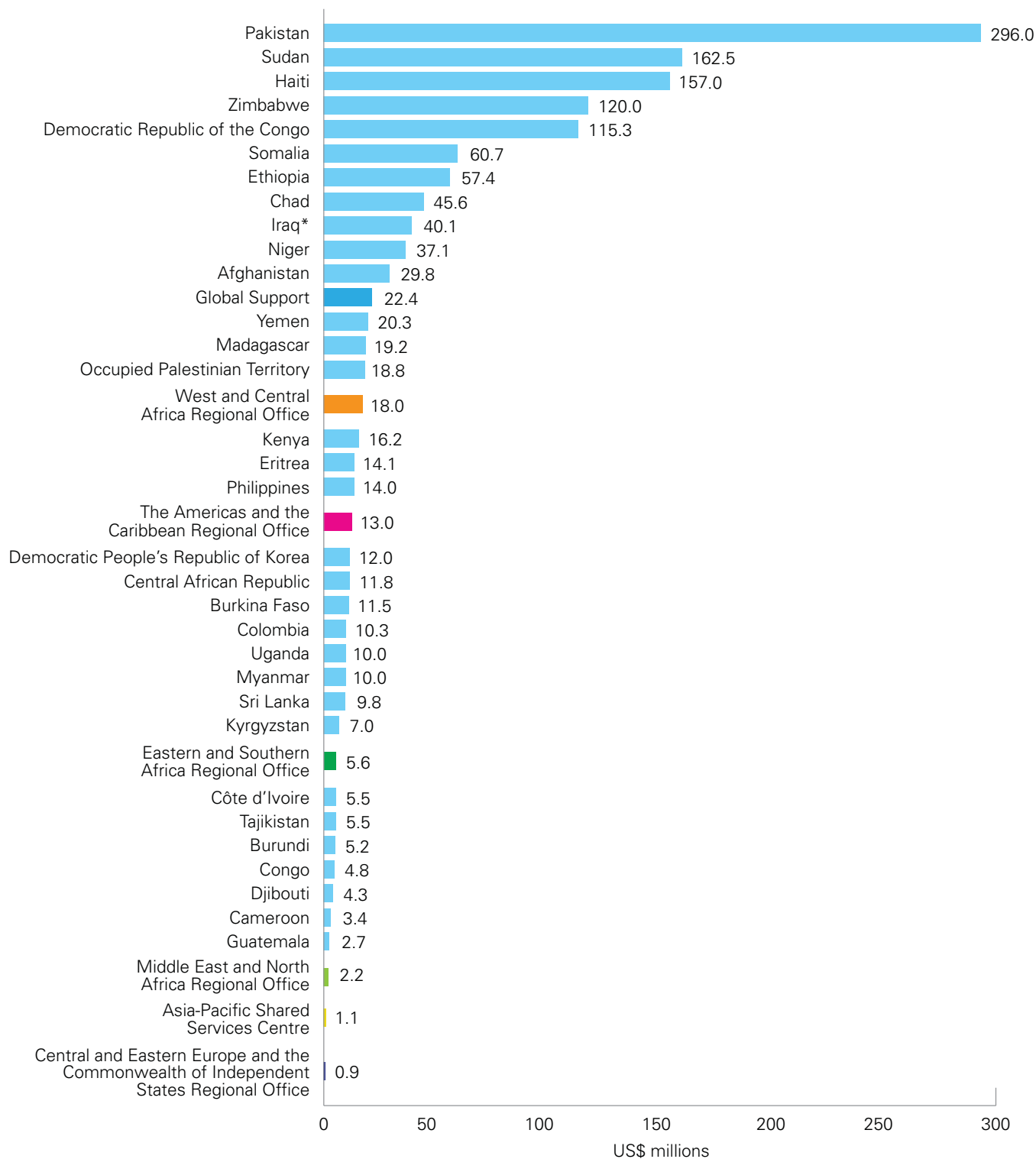
REGION/COUNTRY	FUNDING REQUIREMENTS FOR 2011 (US\$)
<b>ASIA-PACIFIC</b>	
<b>Asia-Pacific Shared Services Centre</b>	<b>1,100,000</b>
Afghanistan	29,750,000
Democratic People's Republic of Korea	12,000,000
Myanmar	9,950,000
Pakistan	295,951,000
Philippines	14,022,000
Sri Lanka	9,825,000
<b>TOTAL</b>	<b>372,598,000</b>
<b>CENTRAL AND EASTERN EUROPE AND THE COMMONWEALTH OF INDEPENDENT STATES</b>	
<b>Central and Eastern Europe and the Commonwealth of Independent States Regional Office</b>	<b>900,000</b>
Kyrgyzstan	6,996,000
Tajikistan	5,540,000
<b>TOTAL</b>	<b>13,436,000</b>
<b>EASTERN AND SOUTHERN AFRICA</b>	
<b>Eastern and Southern Africa Regional Office</b>	<b>5,600,000</b>
Burundi	5,223,000
Eritrea	14,075,000
Ethiopia	57,416,000
Kenya	16,168,000
Madagascar	19,200,000
Somalia	60,698,000
Uganda	10,000,000
Zimbabwe	119,973,000
<b>TOTAL</b>	<b>308,353,000</b>
<b>MIDDLE EAST AND NORTH AFRICA</b>	
<b>Middle East and North Africa Regional Office</b>	<b>2,240,000</b>
Djibouti	4,255,000
Iraq, Egypt, Jordan, Lebanon and the Syrian Arab Republic	40,056,000
Occupied Palestinian Territory	18,759,000
Sudan	162,481,000
Yemen	20,294,000
<b>TOTAL</b>	<b>248,085,000</b>
<b>LATIN AMERICA AND THE CARIBBEAN</b>	
<b>The Americas and the Caribbean Regional Office</b>	<b>13,000,000</b>
Colombia	10,300,000
Guatemala	2,650,000
Haiti	156,967,000
<b>TOTAL</b>	<b>182,917,000</b>
<b>WEST AND CENTRAL AFRICA</b>	
<b>West and Central Africa Regional Office</b>	<b>18,044,000</b>
Burkina Faso	11,480,000
Cameroon	3,350,000
Central African Republic	11,763,000
Chad	45,639,000
Congo	4,830,000
Côte d'Ivoire	5,541,000
Democratic Republic of the Congo	115,290,000
Niger	37,062,000
<b>TOTAL</b>	<b>252,999,000</b>
<b>GLOBAL SUPPORT</b>	<b>22,400,000</b>
<b>GRAND TOTAL</b>	<b>1,400,788,000</b>



# UNICEF Humanitarian Action Funding Requirements for 2011

## UNICEF COUNTRY, REGIONAL AND GLOBAL FUNDING REQUIREMENTS FOR 2011

Source: UNICEF country offices, end 2010



\* Iraq, Egypt, Jordan, Lebanon and the Syrian Arab Republic



# Fostering resilience, protecting children: UNICEF in humanitarian action

## A world of increasing complexity and risk

In 2010, natural disasters of unprecedented magnitude caused untold suffering for millions of children, their families and their communities. Conflict and insecurity exacted a heavy toll on lives and spirits. The examples of these affronts are numerous and include the earthquake in Haiti that destroyed its capital city; flooding in Pakistan that submerged one-fifth

of the country; parched earth and hunger across the Sahel; and displacement and violence in Afghanistan, the Democratic Republic of the Congo and Somalia. These large-scale humanitarian crises, as well as many lesser-reported emergencies, are evidence of the ongoing vulnerability of communities and entire countries to natural and man-made hazards. The country chapters in *2011 UNICEF Humanitarian Action for Children* show the impact of humanitarian emergencies – some short-term, many of them protracted – on the lives and dignity of children and families.

Extensive humanitarian need requires far-reaching humanitarian action, carried out with utmost speed and often simultaneously in different parts of the world. While responding to immediate needs, humanitarian action also necessitates a sharpened focus on the larger duty to address underlying vulnerabilities should disaster strike, or strike again, especially at a time when threats are intensifying, multiplying and interacting in complex and sometimes little-understood ways.

Today it is common for communities already living on the edge to be buffeted by a host of simultaneous or repeated shocks, such as political crises, disease epidemics or the destruction of shelter and productive assets in a storm or flood. Without the time and means to recover, and without social safety nets to fall back on, many communities lurch from emergency to emergency in a downward spiral of impoverishment and social disintegration. The countries in *2011 UNICEF Humanitarian Action for Children* confront escalating risks from pre-existing positions of great vulnerability. It is telling that conflict-affected and fragile states are furthest behind in achieving the Millennium Development Goals, and that recurring civil war is now the dominant form of armed conflict.<sup>1</sup>

A renewed food crisis unfolding in 2011 is but one of several interrelated global trends with far-reaching consequences for the world's poorest. Climate change is becoming a potent driver of increased risk in the form of extreme weather events and through slower-moving phenomena such as resource

degradation and the erosion of territories and livelihoods. Large-scale humanitarian impacts are expected as water and food security deteriorate, floods and storms lay waste to cities and essential infrastructure, and people are displaced. Children, as ever, will be in the eye of the storm.<sup>2</sup>

The result of these trends is an increase in the number of people requiring humanitarian assistance and of populations at risk, and this increase requires a strengthened and more agile response capacity. It also means that the international aid system must be retooled to better manage unpredictability and address underlying vulnerabilities. While this is a vital goal of development work, humanitarian action holds an important place in lessening hardships and preparing the ground for more robust recovery and risk management in the future. In this overall context of growing complexity and need, UNICEF, which responds to more than 200 emergencies each year, is committed to supporting governments and helping people build their own resilience, through the humanitarian action outlined in this report, as well as in its regular programming.

## Understanding resilience

Rooted in materials science and ecology, the concept of resilience has increasingly gained traction in the work of various social disciplines. While nuances vary, resilience generally describes the ability to anticipate, withstand and bounce back from external pressures and

**Resilience generally describes the ability to anticipate, withstand and bounce back from external pressures and shocks in ways that avoid a fundamental loss of identity and maintain core functions.**

shocks – whether physical, emotional, economic, or related to disaster or conflict – in ways that avoid a fundamental loss of identity and maintain core functions.<sup>3</sup> Some interpretations highlight adeptness at changing direction, rather than resisting change, as a defining characteristic of resilience;<sup>4</sup> here adversity can

become a catalyst for transformation. For the humanitarian community, the common understanding of resilience that follows can offer a useful lens to examine and address increasingly complex crisis contexts.

In its simplest form, resilience can be best conceptualized as the ability of critical physical infrastructure to absorb shocks.<sup>5</sup> For instance, the development of appropriate sanitation technologies for flood-prone areas can reduce the risk of infectious disease in the wake of a weather disaster.<sup>6</sup> But the concept is much broader than simply structural fortification and hardware. It provides a lens for understanding how effectively social systems and their various components – individuals, families, schools, cities, states, and the family of states that constitutes the international system – guard against risk and collectively manage threats.

Developmental psychologists, for example, try to use resilience as a way to capture the traits, skills and circumstances that lead some children to do well despite experiencing extreme deprivation or violence. Among developmental thinkers, resilience is applied to communities, which are seen to possess multiple sources of strength and resources<sup>7</sup> – including human, material and social capital.<sup>8</sup> These sources may be rooted in traditions or developed over time and tapped during crises to reduce and manage loss. At yet a higher level of social organization, resilience has also been used as a characteristic of states, as in the analysis of state-building in fragile and conflict-affected situations carried out by the Organisation for Economic Co-operation and Development's Fragile States Group.<sup>9</sup> Here, resilience is contrasted with fragility, which is rooted in social contracts that are weak or exclusionary and implies failures in core functions of the state, including failure to provide security and basic services.

Resilience is therefore a property of different interconnected levels of social and political organization. Highly resilient systems have both risk exposure and response capacities broadly distributed among groups.<sup>10</sup> Inequities and the uneven distribution of skills and resources can undermine resilience.<sup>11</sup> If a disaster or crisis outstrips coping capacities,



support from the ‘outside’ can be called on to preserve essential values (such as life) and crucial functions (such as water provision). In a disaster where the state cannot provide adequate ‘outside’ response to affected communities, the international community may be called upon. In these cases, approaches that foster resilience provide not only a rationale for when or why humanitarian action is necessary but also important guidance for how it should be conducted.

There are some commonly considered dimensions of resilience that can offer crucial insights into how the humanitarian community can identify entry points for better supporting resilience.<sup>12</sup> These dimensions are:

- *flexibility* – the ability to change, including the speed and the degree of adjustment;
- *diversity* – the variety of actors and approaches that contribute to the performance of a system’s essential functions;
- *adaptive learning* – the integration of new knowledge into planning and execution of essential functions;
- *collective action and cohesion* – the mobilization of capacities to jointly decide and work towards common goals;
- *self-reliance* – the capacity to self-organize, using internal resources and assets, with minimal external support.

A key challenge remains: measuring resilience. It is difficult to quantify for a number of reasons, primary among them the difficulty in measuring something that does not occur: the armed violence that never happens; the hurricane that passes without causing large-scale damage. Yet examples abound of the failure to nurture resilience – whether the result of weak governance, poor planning, frayed social bonds, grave inequities or emergency responses that supplant rather than reinforce existing capacities. In a context where the future holds increased risks, the transformative capacity of resilience assumes an ever-larger importance.

Despite the body of literature on resilience, the contributions of humanitarian action to

resilience have been relatively less explored. UNICEF’s own understanding of its humanitarian action within the broader humanitarian system continues to evolve. Attention to resilience can promote humanitarian action that

**Approaches that foster resilience provide not only a rationale for when or why humanitarian action is necessary but also important guidance for how it should be conducted.**

is not only predictable, effective and timely but also strengthens the relationship between humanitarian and development programming and the capacities of national and local actors to manage increasing uncertainty and risk.

**UNICEF humanitarian action and resilience**

Guided by the Convention on the Rights of the Child, UNICEF in 2010 strengthened its core humanitarian policy to uphold the rights of children and women in crises. UNICEF reframed its Core Commitments for Children (CCCs) in Emergencies as the Core Commitments for Children in Humanitarian Action, reflecting wider shifts in UNICEF’s own work in these contexts as well as the organization’s commitment to humanitarian reform.

Key changes include expanding the CCCs to include preparedness before the onset of a crisis and adopting an early recovery approach during response – with disaster risk reduction integrated throughout. The CCCs also moved from a focus on activities to broader strategic results that link humanitarian action to the fulfilment of children’s and women’s rights in each of UNICEF’s programme sectors. They also reflect the recognition that realizing these core commitments requires the contributions of a multitude of actors, including clusters.

Thus reconceived, UNICEF’s humanitarian action offers a potential platform for supporting resilience at the national and community levels. A few recent examples illustrate how this has manifested in emergency-affected countries.

In Madagascar, UNICEF supported a programme to train and raise awareness among village chiefs, school directors, health centre heads, community-based organizations and mayors on water, sanitation and hygiene (WASH) principles and practices in emergency response. Pre-emergency cooperation agreements have been developed with the participating organizations to ensure a timely and rapid response in the event of a cyclone or flooding. Such efforts are an example of how UNICEF's commitment to ensuring the participation of affected populations promotes collective action and cohesion.

### **UNICEF's commitment to the rights of the most vulnerable compels us to work in ways that prioritize the restoration of self-reliance in emergencies.**

The revised CCCs also tighten the link between humanitarian action and development. This stronger integration contributes to UNICEF's institutional flexibility – the nimbleness with which our programmes adjust to evolving situations. In addition, the sharpened focus on disaster risk reduction and local capacity development as explicit strategies contribute to communities' own flexibility in the face of multiple shocks, throughout the broader cycle of prevention, response and recovery. In Ethiopia, UNICEF has supported disaster risk reduction through a government-led, decentralized health extension programme to provide essential health and nutrition services. This programme has had a significant impact in the communities: Results show an increase in national treatment capacity of severe acute malnutrition from 135,000 cases per month in 2009 to 200,000 cases per month in 2010. Through the treatment of children suffering from malnutrition, those with severe acute malnutrition can now be identified earlier and receive life-saving treatment closer to home, thus helping reduce children's vulnerability.

Likewise, understanding on-the-ground realities is essential for achieving the CCCs. Being continuously present before, during, and after an emergency, as UNICEF is, can ensure

that the situation of children and women is monitored and that interventions are appropriately designed, supporting adaptive learning through the sharing and application of new approaches and technologies. In cyclone-affected areas of Myanmar, UNICEF supported local authorities in using disaster-resistant standards to construct health centres and child-friendly schools. UNICEF continues to advocate for wider, gradual adoption of these standards across the country.

Our humanitarian partnerships with governments, local and international non-governmental organizations (NGOs), communities, civil society and the private sector – and at national to community levels – allow UNICEF to leverage diverse approaches as a method for achieving better results for children in humanitarian action, thus promoting diversity. For example, UNICEF worked with numerous stakeholders in the conflict-affected town of Marka, near Mogadishu, in a public-private partnership approach to water management. Building on the capacities of local actors, project implementation continued even when Marka was inaccessible to international United Nations staff.

UNICEF's commitment to the rights of the most vulnerable compels us to work in ways that prioritize the restoration of self-reliance in emergencies. For example, in the Occupied Palestinian Territory, in conjunction with NGOs and other counterparts, UNICEF implemented child protection and psychosocial services to strengthen the coping mechanisms of more than 70,000 children and 36,000 caregivers in Gaza. Since the 2009 crisis, UNICEF continues to couple psychosocial support with a community-based approach that is integrated with child protection networks.

### **The humanitarian system and resilience**

The humanitarian community, to fulfil its role and obligations in the face of escalating risk, also needs to be resilient. The response to massive disasters in 2010, such as those in Haiti and Pakistan, as well as to other smaller-scale emergencies, has demonstrated the dedication and effectiveness of the humanitarian system



– but it has also highlighted gaps and shortcomings in performance that have come under scrutiny.<sup>13</sup> As we have seen, the challenges will only increase.

As a consequence, intense reflection is under way on what realignments in the humanitarian system are necessary without compromising fundamental principles and operational efficiency. The Secretary-General recently called on the humanitarian system to shift from an approach that is ‘shock driven’ to one that is more needs based and vulnerability led.<sup>14</sup> Some agencies have developed explicit approaches to resilience,<sup>15</sup> while others have called for nothing less than a profound paradigm shift in how they respond to these growing pressures.<sup>16</sup>

Since its origins, the humanitarian community has undergone successive phases of evaluation, self-assessment, reform and innovation in efforts to strengthen its effectiveness and reliability. There has been steady progress over the years. The humanitarian reform process, begun in 2005 and urged on by the response to the Indian Ocean tsunami, has led to key improvements that can be viewed as contributing to the system’s resilience, though the debate was not explicitly framed in these terms. These improvements include pooled funding mechanisms to enhance flexibility; coordination mechanisms (clusters) that maximize the collective action of diverse humanitarian actors; and assessment tools to better understand context. The recently introduced real-time evaluations improve rapid learning and adaptation.

While continuing to strengthen response capacity, particularly through the cluster approach, the humanitarian community has also made important broader shifts to better address the environments particular to disasters caused by natural hazards and those associated with conflict – as well as how conflict and natural hazards interact in ways that increase risk.

Working more closely with development counterparts to implement the Hyogo Framework for Action (2005), humanitarian actors have integrated disaster risk reduction into

emergency preparedness and response through the early recovery approach. Such investment in disaster risk reduction not only helps to better address underlying vulnerability but also improves partnerships and community engagement.<sup>17</sup>

The contributions of the humanitarian community to addressing the needs related to post-conflict contexts were validated in the 2009 *Report of the Secretary-General on Peacebuilding in the Immediate Aftermath of Conflict*. The Report underlined that the humanitarian community can provide critical and early peace dividends to war-weary people, particularly returnees, and that the early recovery approach can create foundations for later peacebuilding efforts through capacity assessments, early systems development in key sectors, and capacity development in pockets of peace, where possible.<sup>18</sup>

The humanitarian community is still striving to do better in key areas. These include overarching leadership, preparedness, national and local capacity development and engaging with local communities, needs assessments, early recovery, and accountability to affected populations.<sup>19</sup> These efforts are taking place in a context of wider debate on the enabling

**Broader trends clearly point in the direction of more extreme global weather conditions in the future, which will have a disproportionate adverse impact on the poorest.**

environment for humanitarian action, including financing and human resource policies; an increasingly complex operating environment; the role of political and military actors; decreasing access to people in need; shrinking humanitarian space; and how best to engage in chronic and complex emergencies, where the bulk of humanitarian financing is directed.

An agile humanitarian system with extensive and multi-dimensional response capacities will be essential to reducing vulnerabilities, saving lives and minimizing disaster losses. This

agility is especially urgent in the face of climate change. According to the National Oceanic and Atmospheric Administration (NOAA), 2010 was tied with 2005 as the warmest year on record and saw a spate of extreme climate events in all continents.<sup>20</sup> Climate-related hazards are increasing, accounting for 70 per cent of all disasters today compared to 50 per cent

### **Using resilience as a guiding principle can offer the humanitarian community useful insight into priority areas requiring improvement.**

two decades ago,<sup>21</sup> and such climate-related crises are projected to affect hundreds of millions every year as early as 2015.<sup>22</sup> A confluence of social and economic factors, such as unplanned urbanization and environmental degradation, is at work in determining the impact of climate-related disasters. Broader trends clearly point in the direction of more extreme global weather conditions in the future, which will have a disproportionate adverse impact on the poorest.

The enormity of this challenge must be addressed with investments that manage climate-related risks so that entire populations can benefit. Disaster risk reduction, with community resilience as an objective, is increasingly recognized as a key climate-change adaptation strategy. Efforts to build on local capacities of disaster-prone and disaster-affected communities must be redoubled as the larger humanitarian system also better equips itself for a future of greater risk, uncertainty and demand.

### **The way forward**

Six years after the Indian Ocean tsunami, the scale and scope of which challenged every aspect of humanitarian response, the humanitarian community confronts another important watershed in its evolution. Discussions are under way to take a fresh look at its current business model. Using resilience as a guiding principle can offer the humanitarian community useful insight into priority areas

requiring improvement. These areas include the following:

- *Partnership* – Building resilience is a multi-stakeholder endeavour. Humanitarian organizations must seek creative and context-specific alliances, ranging from the private sector to community development organizations.
- *Innovation* – Humanitarian organizations must deliberately foster experimentation and diffusion of promising institutional and technological solutions.
- *Risk management* – Humanitarian organizations need continually to better understand and analyse high-risk operating environments in order to find programme opportunities and access populations. Risk management should enable and not just control.
- *Fundamentals* – Accountability, participation, capacity development and local and national ownership continue to be essential for effectively supporting a community in crisis to build a path to sustainable recovery.
- *Social transformation* – Resilience is achieved through social processes whose outcomes defy precise measurement. To encourage investments by donor and developing countries that are truly sustainable, donors should review and revise their own performance monitoring and reporting systems.

Achieving progress in these domains will help foster a humanitarian system that is predictable, timely and effective. This progress must be predicated on a stronger recognition of the relationship between humanitarian and development programming, and the importance of supporting national and local actors to manage increasing uncertainty and risk. In so doing, the humanitarian community works towards the resilience of both the humanitarian system and the countries and communities we are committed to serving.

## Funding trends in 2010 and planned humanitarian action in 2011

In response to the pressing needs of vulnerable children and women during 2010, UNICEF's funding requirements for humanitarian action totalled US\$1.7 billion. This request was based on the humanitarian needs outlined in the *Humanitarian Action Report 2010* (HAR) – which featured 36 chapters covering country, regional and global requirements<sup>23</sup> – and in seven Flash Appeals and 13 other appeals.<sup>24</sup> As of 31 October 2010, US\$830.9 million was received for all of UNICEF's humanitarian activities. This reflects a 45 per cent increase over 2009 funding for humanitarian action (US\$572.4 million, as of 31 October 2009), largely due to resource mobilization to respond to the earthquake in Haiti and flooding in Pakistan.

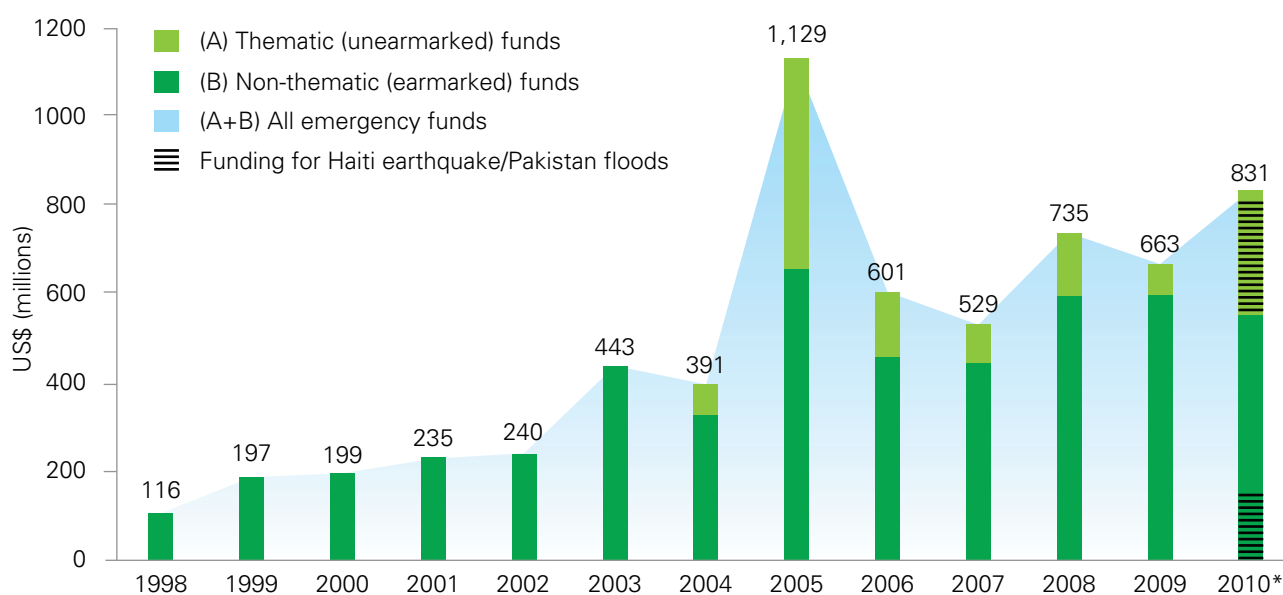
Humanitarian funding received by UNICEF as of 31 October 2010 reflects a large increase over 2009 in absolute terms (as seen in the chart below). More than US\$406 million, or 49

per cent, was contributed for the Haiti earthquake and Pakistan flood response, with the remaining US\$426.4 million directed towards UNICEF's other emergency operations.

For the HAR 2010 requested budget of US\$1.15 billion, US\$447.9 million – 39 per cent – was received as of 31 October, matching funding levels during this period in 2009.<sup>25</sup> Out of the total HAR requirement, those countries and regions with Consolidated Appeals Processes (CAPs) were 37 per cent funded compared to 43 per cent in 2009. Flash Appeals in 2010, on average, received a higher level of funding than in 2009 – particularly because of the Haiti Earthquake Flash Appeal. Sixty-nine per cent of Flash Appeal needs were funded in 2010, versus 47 per cent in 2009. Excluding Haiti from the aggregate Flash Appeals, however, would reduce the average funding level to 45 per cent.

**FIGURE 1.1 EMERGENCY FUNDING TREND, 1998–2010\***

Source: UNICEF Public-Sector Alliances and Resource Mobilization Office



\* As of 31 October 2010

UNICEF gratefully acknowledges the generous contributions made by public and private sector donors in support of the children and women affected by humanitarian crises throughout the world. The largest proportion of UNICEF's humanitarian funding was from government donors (40 per cent), followed by UNICEF

remained the largest source of humanitarian funding, with a total contribution of US\$87.3 million.<sup>26</sup> The United States Fund for UNICEF was the second-largest source of humanitarian funding, providing US\$79.5 million – out of which nearly 88 per cent was for emergency operations in Haiti. As of 31 October 2010, the top 10 donors of humanitarian funding (shown in the chart below) accounted for approximately 63 per cent of the humanitarian contributions received by UNICEF for emergency operations.

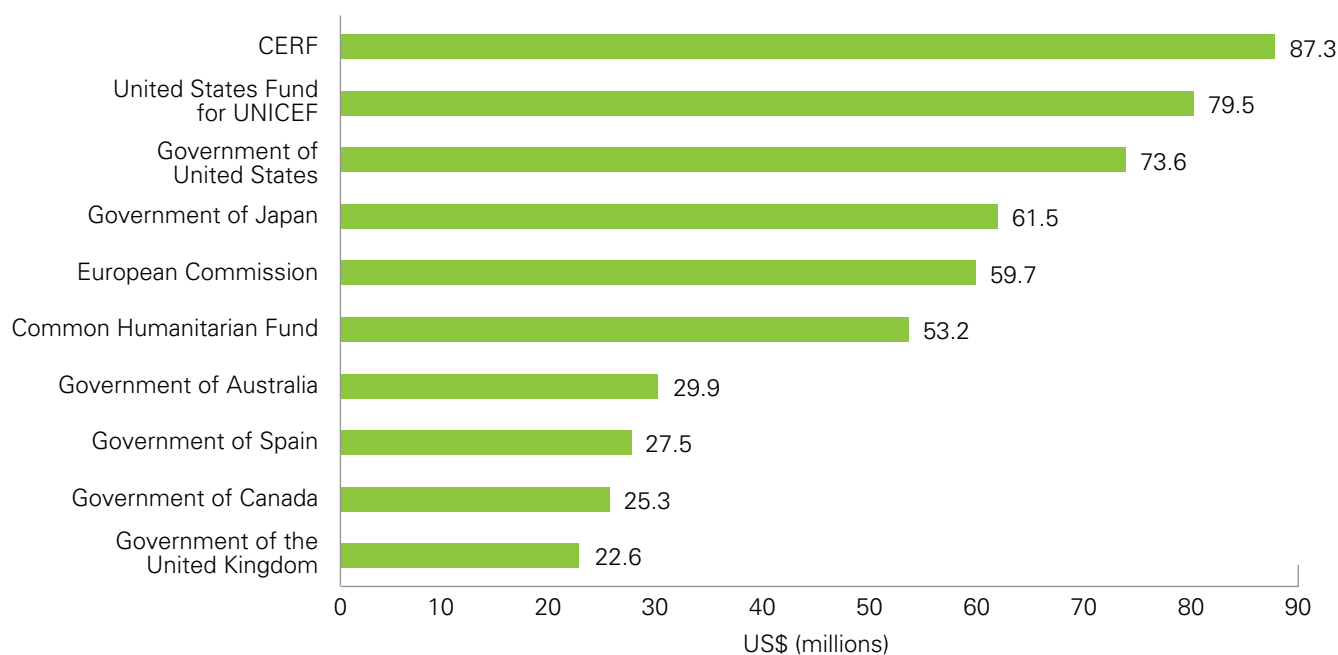
**Global thematic humanitarian funds enable UNICEF to invest efficiently in new initiatives; meet its commitments to humanitarian reform, particularly its cluster leadership responsibilities; prioritize underfunded crises; and build capacity. These actions help strengthen UNICEF's programmatic focus on sustainable results for children.**

national committees (34 per cent). Sources for the remaining funding included multi-donor trust funds, intergovernmental organizations and funds raised through UNICEF field offices. As of the end of October 2010, the Central Emergency Response Fund (CERF)

Out of the total humanitarian contributions of US\$830.9 million received as of 31 October 2010, US\$278.5 million (33.5 per cent) was received as thematic funds, which are not earmarked for particular activities, thus allowing UNICEF to invest in those sectors where resources are most needed. This represents a significant increase compared to the 2009 figure of US\$52.7 million. Thematic contributions reduce transaction costs and simplify management of programme budgets at the country level, and UNICEF is grateful for the ongoing generosity of donors who provide thematic funding.

**FIGURE 1.2 TOP 10 SOURCES OF HUMANITARIAN FUNDS, 2010\***

Source: UNICEF Public-Sector Alliances and Resource Mobilization Office



\* As of 31 October 2010

UNICEF would especially like to acknowledge national committee partners, which have provided more than 90 per cent of thematic funding received as of the end of October. The United States Fund for UNICEF was the top thematic donor, with a contribution of US\$72 million, followed by the United Kingdom Committee for UNICEF, the German Committee for UNICEF, the Japan Committee for UNICEF and the Canadian UNICEF Committee, as seen in the chart below.

While the 2010 level of thematic funding is much higher than the 2009 level, an analysis of the recipients highlights that so far in 2010, more than 90 per cent of the thematic funds were provided for response to the Haiti earthquake and the Pakistan floods. Only US\$27.6 million was provided for the remaining countries and regions. UNICEF continues to urge donors to provide flexible humanitarian funding for all countries, particularly at the global level. Next to regular resources, global thematic funding is UNICEF's preferred funding structure. However, only 0.7 per cent of the thematic humanitarian funds received in 2010 were provided as global thematic humanitarian funds. Global thematic funding is the most effective option because it allows UNICEF to respond strategically to the priority needs of children worldwide. Global thematic humanitarian funds enable UNICEF to invest efficiently in new initiatives; meet its commitments to humanitarian reform, particularly its cluster leadership responsibilities;

prioritize underfunded crises; and build capacity. These actions help strengthen UNICEF's programmatic focus on sustainable results for children.

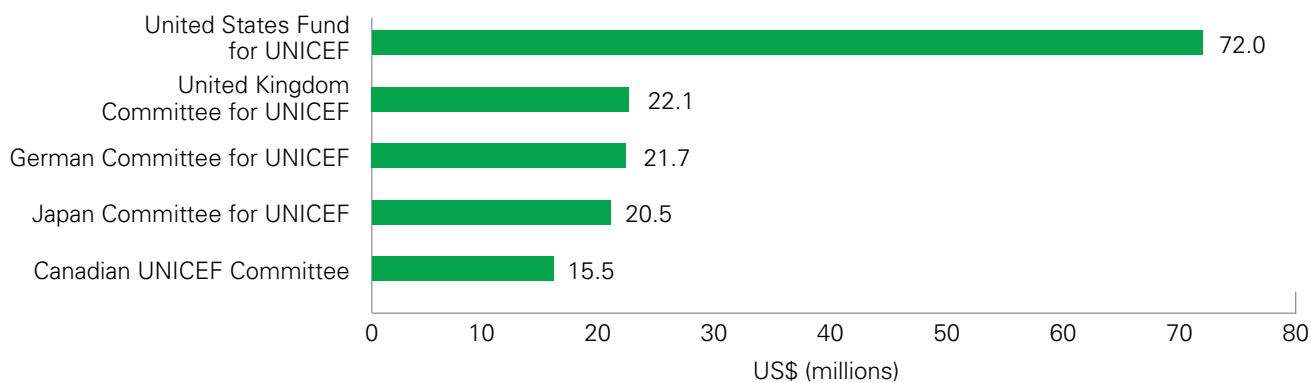
The level of funding received determines UNICEF's capacity to help improve the prospects and the resilience of children and women affected by sometimes multiple crises.

In **Yemen**, with a funding level of 66 per cent of the requested amount by the end of October, UNICEF, together with partners, treated more than 11,000 children for undernutrition in 32 outpatient treatment sites; provided access to safe drinking water for more than 46,000 internally displaced adults and children in the northern governorates and 5,000 people from host communities; offered educational opportunities to 125,000 children in conflict-affected governorates; and provided psychosocial support for 3,500 vulnerable children facing trauma associated with conflict and displacement.

In **Somalia**, where 27 per cent of the population requires humanitarian assistance, funding enabled UNICEF to provide 1.5 million children under 5 years of age and 1.3 million women of childbearing age with an essential package of life-saving health and nutrition services. Access to safe water was provided to 1.2 million people in emergency-affected areas, and more than 92,000 emergency-affected children were enrolled in school.

**FIGURE 1.3 TOP FIVE DONORS – THEMATIC HUMANITARIAN FUNDS\***

Source: UNICEF Public-Sector Alliances and Resource Mobilization Office



\* As of 31 October 2010

Tajikistan, struck by an earthquake, floods and a polio outbreak in 2010, had received only 3 per cent of funding needs as of October 2010. Despite this shortfall, UNICEF, in close collaboration with World Health Organization and the Government of Tajikistan, was able to respond to a major polio outbreak through the launch of a rapid and comprehensive polio campaign that successfully contained the virus. UNICEF, diverting funding from other sources, also responded to the flood-affected population in Kulob District, where approximately 2,000 people benefited from an emergency hygiene campaign. Approximately 300 households received water containers, hygiene kits, soap and water purification tablets. More than 1,000 teachers in 510 schools in the 20 most disaster-prone districts were trained in simple and effective disaster risk reduction measures. Psychosocial support was provided to an estimated 750 children and 560 adults following the earthquake in Vanj District.

With higher funding levels, much more could have been achieved in these countries as well as in other crisis-ridden countries featured in the *Humanitarian Action Report 2010*.

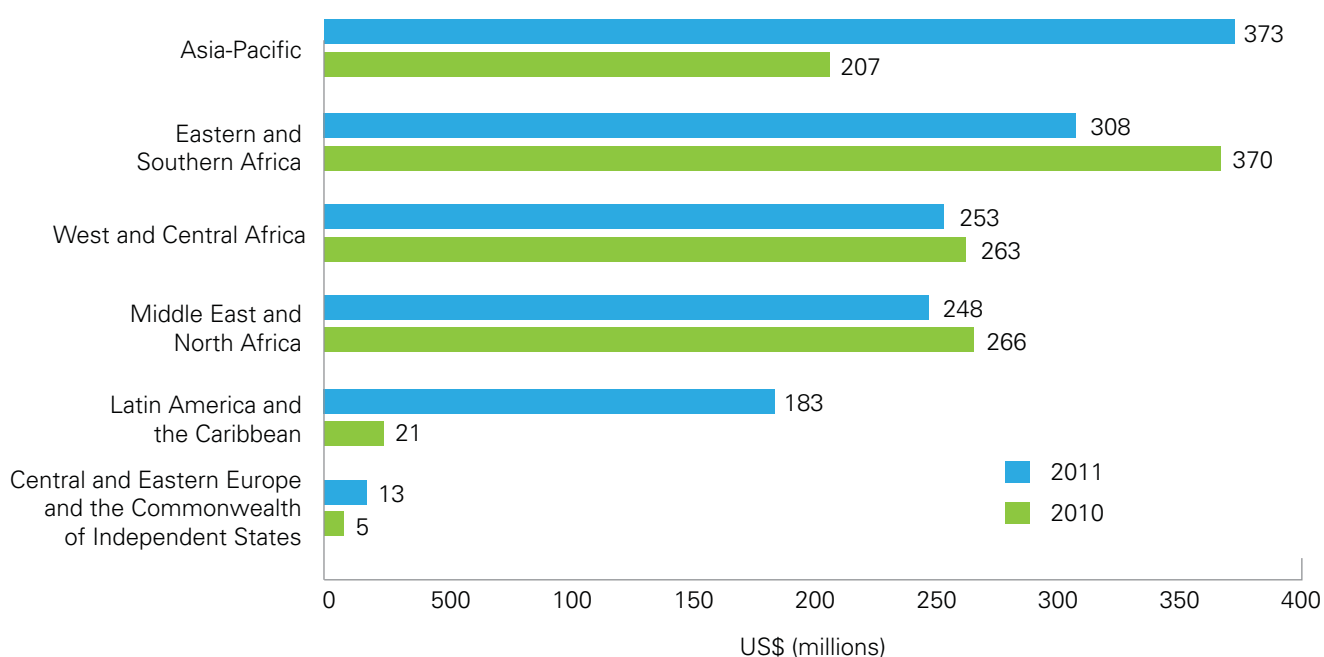
## UNICEF funding requirements for 2011 humanitarian action

In 2011, US\$1.4 billion is needed to support UNICEF-assisted humanitarian action in 32 countries and territories.<sup>27</sup> Compared to the 2010 appeal launched in February 2010, this requirement increased 21 per cent, with the bulk of funding needs represented by Pakistan and Haiti, requiring US\$296 million and US\$157 million respectively. As shown in Figure 1.4, the financial needs for emergencies in **Asia-Pacific** have significantly increased and represent the region with the highest funding request: US\$373 million. Of the funding for Asia, 80 per cent is needed for assistance to Pakistani children and women affected by flooding and conflict.

The requirements for **Latin America and the Caribbean** have increased eightfold, mainly as a result of emergency situations in Haiti and the addition of the Guatemala appeal. Although such precarious conditions as those in Colombia also require a scaled-up response, the increase is linked to promoting preparedness throughout the region as well as support for smaller-scale emergencies.

**FIGURE 1.4 ESTIMATED EMERGENCY FUNDING NEEDS BY REGION, 2010 AND 2011**

Source: UNICEF Office of Emergency Programmes, end 2010





The 2010 regional requirements for **Central and Eastern Europe and the Commonwealth of Independent States (CEE/CIS)** have also increased with the inclusion of the Kyrgyzstan appeal as well as increasing needs in Tajikistan. Requirements for **Eastern and Southern Africa** have been significantly reduced, particularly in such countries as Burundi, Eritrea and Uganda. While maintaining funding requirements for preparedness following the Sudan referendum, overall requests in **West and Central Africa** and the **Middle East and North Africa** have also been reduced.

*UNICEF's ability to undertake humanitarian assistance depends entirely on funding from donors. UNICEF gratefully acknowledges donors' strong response during 2010 and invites supporters to maintain or increase their commitments to fostering resilience and meeting the humanitarian needs of children and women in emergencies during 2011.*

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25. All funding requests through the *Humanitarian Action Report 2010* refer to figures updated as per mid-year review.
26. US\$45.8 million was provided through the rapid response window and US\$41.5 million through the underfunded window.
27. Twenty-eight country appeals were included in the *Humanitarian Action Report 2010*. The Congo was added through the HAR mid-year review. New countries included in 2011 are Burkina Faso, Cameroon, Djibouti, Guatemala and Kyrgyzstan. Remaining funding needs for Guinea and Mauritania, with their own appeals in 2010, have been included in the West and Central Africa regional chapter for 2011. In contrast to 2010, UNICEF offices in Guinea, Mauritania and Nepal have not included an appeal in the *2011 UNICEF Humanitarian Action for Children* publication.





2011 UNICEF HUMANITARIAN ACTION FOR CHILDREN

# **Global Support for UNICEF Emergency Response Operations**

## Global Support for UNICEF Emergency Response Operations

Major disasters in Haiti and Pakistan struck within six months of each other in 2010, eliciting an extraordinary global response that mobilized the full community of humanitarian organizations and partners. The scope of destruction and humanitarian need in these two countries alone, occurring in difficult geographical locations and affecting large populations (more than 22 million vulnerable people altogether), highlighted, once again, the need to strengthen humanitarian systems for a more effective response to major crises.

On average, UNICEF responds to more than 200 emergencies every year, informing and shaping these interventions as a global leader for children. Ultimately, stronger and better adapted systems will result in a more efficient response and lead to greater fulfilment of children's and women's rights.

For UNICEF, humanitarian action encompasses more than rapid response. It also involves reliable preparedness and calls for investment in early recovery from the very onset of a response. UNICEF increasingly recognizes the need for all its programmes (both development- and emergency-related) to build resilience and reduce risk. These aims are achieved in various ways that are fully reflected in the revised Core Commitments for Children in Humanitarian Action (CCCs) and include supply and logistics, programming, human resources, policy and practice, communication and information technology.

UNICEF brings the full range of support from all corners of the organization to meet the humanitarian needs of children and women. Headquarters in New York, Geneva, Copenhagen, Brussels and Tokyo are centres of global support for country offices that require additional assistance in staffing, supplies and logistics, and in identifying sources and mechanisms to better access financial resources to respond to emergencies. These offices mobilize external support and identify surge capacity from UNICEF offices worldwide. Supply hubs with strategic stocks in Copenhagen, Dubai, Panama and Shanghai enable quick delivery of life-saving supplies within the first few hours of a rapid-onset emergency as well as coordinated supply chain management for disaster- or conflict-affected areas. In addition, UNICEF's seven regional offices provide leadership, advocacy, oversight, quality assurance and technical and operational support to country offices working to meet humanitarian needs.

### **HUMANITARIAN FUNDING AT WORK: GLOBAL HIGHLIGHTS FROM 2010**

In April 2010 UNICEF adopted the third revision of the CCCs, its humanitarian policy for upholding the rights of children affected by crisis. The CCCs

promote predictable, effective and timely collective humanitarian action, around which UNICEF engages with partners including host governments, Member States, operational and cluster partners, and staff. Key changes to the CCCs include the recognition that humanitarian action encompasses sound preparedness as well as an immediate emergency response, and an emphasis on the importance of applying an early recovery approach in the response. The policy now reflects UNICEF's cluster accountabilities as a vital strategy to realize humanitarian results. It recognizes the importance of national capacity development, advocacy, partnerships and other key strategies throughout preparedness and response.

Strong collaboration with non-governmental organizations (NGOs) is crucial to achieving results for children through humanitarian action. In 2010 UNICEF continued to expand the use of revised cooperation and small-scale funding agreements with NGOs. This expansion has created more flexible funding options, enhanced joint results, fostered capacity development of local institutions and better aligned UNICEF's work with that of partners.

Like other agencies with cluster leadership responsibilities, UNICEF mobilized significant capacity and support for timely and appropriate coordination in the face of unparalleled disasters in Haiti, Pakistan and 27 other countries where the cluster approach has been activated. UNICEF also strengthened gender and human rights programming in the context of humanitarian action through training, deployment of gender experts to advise clusters on mainstreaming, and dissemination of best practices. UNICEF headquarters provided guidance and on-demand advice to country and regional offices regarding the application of international humanitarian law and humanitarian principles in challenging operational environments and in complex emergencies such as Kyrgyzstan, the Occupied Palestinian Territory and Somalia.

During the first six months of 2010, more than 400 surge capacity assignments were requested for the Haiti office. In comparison, during all of



2009, 259 internal and standby surge staff were deployed across the entire organization. For countries facing both large- and medium-scale emergencies in 2010, UNICEF mobilized a significant emergency staff surge to strengthen the capacity of country offices. This surge took the form of technical support, management and cluster coordination, and such operational support as human resources, supply and logistics, and information management. Emergency capacity from within the organization was complemented by expertise drawn from standby partners from government and private companies, as well as from 18 NGOs. These partnerships allowed UNICEF to deploy 185 personnel to 35 different offices, representing more than 23,000 days of deployment and an increase in standby deployments of more than 34 per cent.

In 2010, global emergency supply needs more than doubled as compared to 2008 and 2009 combined. Through accelerated use of all its assets, the UNICEF Supply Division in Copenhagen met its commitment to pack and ship emergency supplies within 48 hours. Logistics networks in the field and at headquarters contributed to better information sharing between partners and better identification of what products were needed and where, as well as to renewed supply training and the release of crucial staff for temporary deployment. Competing demands for large quantities of similar supplies during simultaneous large- and medium-scale emergencies proved challenging, however, and ways to improve supply flow in such circumstances will be addressed during 2011.

In the immediate aftermath of the Haiti earthquake, which also damaged UNICEF's premises, emergency information technology and telecommunications response kits were shipped to Port-au-Prince from in-house stockpiles and set up by emergency-trained experts from within UNICEF and standby partner organizations. While these kits enabled essential telecommunications links for the makeshift office, other key information technology services could not immediately be established on site. The office had to rely instead on a shadow office operating out of the Dominican Republic to host key UNICEF information systems which were accessed remotely from Port-au-Prince.

In 2010 UNICEF made considerable investments in developing a programming approach that is more in tune with and informed by emergency-related risks. A key goal of this transformation is for all UNICEF country programmes to increase their attention to disaster and conflict prevention, mitigation and preparedness. The new approach provides a strong platform for engaging governments and other partners in sustainable strategies for reducing humanitarian risks, with long-term benefits to communities potentially affected by emergencies. Mainstreaming risk-informed programming and providing guidance to country offices on disaster

risk reduction are essential to strengthening practice in this area.

Investing in national capacity development before, during and after crises can help national actors fulfil their obligations to uphold and promote children's and women's rights in humanitarian situations. While not new to UNICEF, capacity development has not been systematically applied in emergency settings and has often not been comprehensive enough to ensure real and lasting change. UNICEF is now developing technical guidance on capacity development in humanitarian settings and has provided direct support to Southern Sudan and to the Uganda country office in applying this approach, including in post-conflict and fragile settings.

Headquarters further provided guidance to UNICEF staff on the purpose, principles and key management entry points for applying an early recovery approach in humanitarian action. Staff surge support on early recovery focused particularly on Haiti and Pakistan to strengthen planning and response. UNICEF remained very engaged in policy development and country-level initiatives to ensure enhanced United Nations coherence in the context of complex emergencies. A technical note on engaging integrated United Nations presences was developed to complement inter-agency guidance and a peer reference group was established for UNICEF staff working in countries with these missions. UNICEF staff participated in a number of inter-agency integrated strategy planning and assessment missions, including to Burundi, Côte d'Ivoire, the Democratic Republic of the Congo, Somalia and Timor-Leste.

## **GLOBAL SUPPORT: LOOKING FORWARD**

### **Core Commitments for Children in Humanitarian Action and performance monitoring**

UNICEF is continuing the rollout of the revised CCCs and is encouraging all country and regional offices to adopt a standard- and coverage-based approach to monitoring and reporting during emergency responses. The approach includes performance indicators aligned to the CCCs and global standards, which will also be consistent with Inter-Agency Standing Committee (IASC) initiatives. This monitoring and reporting initiative is benefiting from experience acquired in Haiti and Pakistan and is now being piloted in Southern Sudan.

### **Humanitarian reform**

Capacity building to strengthen UNICEF's role as the global cluster lead in water, sanitation and hygiene (WASH); nutrition; education (along with Save the Children); and the child protection and gender-based violence areas of responsibility (the latter along with the United Nations Population Fund) will build on lessons learned in Haiti and Pakistan and during other emergencies.

UNICEF will work with other IASC members to clarify expectations and chart a way forward to further enhance collective humanitarian action. In the clusters where it has global accountabilities, UNICEF will continue to look for more predictable funding arrangements for cluster activities, organize training on the roles of lead and members, and clarify cluster accountabilities within the organization. Human-resources rosters for quality cluster support will be further enhanced. UNICEF is also actively involved in inter-agency efforts to strengthen pooled humanitarian funding mechanisms and other tools to improve response.

### Emergency risk-informed programming

UNICEF aims to ensure that emergency risks are addressed in all phases of planning and programming, with an eye towards identifying, assessing, reducing and managing risk in a more holistic manner. This process begins with harmonized risk assessments as a key tool to map programme priorities. At the same time, the United Nations Security Management System has shifted to a targeted model for specific high-risk situations; this model helps determine the kind and level of staff deployment required, as well as what programme activities should take place.

As part of this process, the organization continues to work with the members of the Programme Criticality Working Group, which UNICEF is chairing, on the development of a draft framework to enable effective prioritization in high-risk environments. In a related effort, UNICEF is developing a conflict analysis tool to help its country offices better map conflict risks to inform programmes. UNICEF is also working to identify more specifically its contribution to peacebuilding and to provide country and regional offices with required guidance to ensure that this contribution helps societies evolve towards sustainable peace.

### High-threat environments

Better delivery of quality programmes in environments with high security risks is a priority for UNICEF, as is ensuring that Member States and other actors understand and recognize humanitarian principles, and that UNICEF country offices receive the necessary support to decide on an effective strategy in highly volatile and complex environments. As part of this process, UNICEF continues to work with the members of the Programme Criticality Working Group on the development of a draft framework to enable effective prioritization of programme activities in order to ensure that their impact on the populations, and not on the organization, determines each activity's criticality. UNICEF is also working with other humanitarian partners to find solutions to the many challenges faced in delivering humanitarian assistance in today's crisis contexts. Good practices and support, such as use of remote programming, will also be provided to country offices in areas of high security risk.

### Efficiency of response

Building on the experience of 2010, UNICEF will further vet talent pools, streamline processes, and revamp and merge its surge roster to allow for a larger, high-quality group of external candidates and more rapid deployment to enhance country office capacity during single or concurrent emergencies. An internal review of business processes in sudden-onset emergencies – including of corporate emergency activation procedures, standard operating procedures and simplified processes – is under way. Support for countries at the onset or in the midst of protracted emergencies will become stronger with rollout of minimum human resources management standards and regional surge capacity training. UNICEF will also enhance its global supply strategy, preparedness and logistics network for rapid emergency response through ongoing coordination with partners and suppliers.

### Advocacy

UNICEF is undertaking an analytical review of humanitarian advocacy practices to persuade decision makers to adopt policies and take actions to promote and protect the rights of children and women in humanitarian situations; to promote the international agendas for children in the context of emergencies; and to identify the role that other actors, including donors, can play in addressing sensitive advocacy issues such as humanitarian access. Advocacy work will strengthen engagement with the Security Council, including on the United Nations Monitoring and Reporting Mechanism on Grave Child Rights Violations in Situations of Armed Conflict; capacity to monitor, report and respond to violations; and the development of key policy, guidance and tools. UNICEF will also engage the Security Council on issues related to children and women in conflict situations and will continue to advocate with international media, civil society partners and the public.

### Funding requirements

In the midst of several large-scale emergencies, UNICEF is seeking US\$22.4 million to support an effective and integrated response to today's global humanitarian crises. This funding will complement the existing US\$22.7 million that has already been earmarked for this purpose from UNICEF's core budget and generous contributions from donors.

UNICEF will ensure implementation of strategic approaches, work with national governments, provide technical support, strengthen predictable humanitarian action through clusters and build resilience at all levels with partners and governments across all sectors of work.

To accomplish these goals, carry out its responsibilities to children and families in crisis situations and meet the serious challenges of humanitarian action through sustainable and effective global support to regional and country offices, UNICEF is pursuing secure and predictable funding.





2011 UNICEF HUMANITARIAN ACTION FOR CHILDREN

# Asia-Pacific

**Afghanistan • Democratic People's Republic of Korea  
Myanmar • Pakistan • Philippines • Sri Lanka**



## HUMANITARIAN FUNDING AT WORK: HIGHLIGHTS FROM 2010

In 2010, UNICEF estimated that US\$1.9 million was needed to fund its humanitarian coordination and technical support work in the Asia-Pacific region. As of October 2010, a total of US\$987,637 had been received, representing 52 per cent of the goal. Through UNICEF's Asia and Pacific Shared Services Centre (APSSC), preparedness activities were strengthened in 13 out of 22 country offices during the yearly monsoon and cyclone season. During flooding in Pakistan, this readiness paid off when APSSC provided massive surge capacity for a prolonged period: the regional emergency adviser, the senior emergency nutrition, education and WASH emergency specialists all directly supported the emergency response, helped identify additional staff for the education and nutrition clusters and also conducted the rapid assessment. During the extreme cold weather in Mongolia, known as *dzud*, the emergency officer from Nepal was sent to support coordination of the response. Towards the end of the year, a disaster risk reduction specialist joined APSSC to strengthen the focus on prevention and mitigation.

## Asia-Pacific

### CHILDREN AND WOMEN IN CRISIS

From earthquakes to cyclones to monsoons, 89 per cent of people who suffered from natural disasters in 2009 lived in Asia.<sup>1</sup> In Pakistan alone, 20 million people were affected in 2010 by flooding that submerged one fifth of the country's land mass, prompting UN Secretary-General Ban Ki-Moon to state: "Their hardship is on a scale I have never seen before. Words cannot describe what I have seen, what I have felt while being in Pakistan. It requires a response to match."<sup>2</sup> With such a disproportionate distribution of disaster impacting this part of the world, UNICEF's ability to bolster prevention, readiness and response is crucial to lessening the impact of crises when they occur. Every missed opportunity to alleviate the impact of natural disasters and failure to respond quickly to emergencies results in a ripple of life-altering consequences diminishing survivors' health, nutritional status, and access to education and adequate water and sanitation.

### MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

UNICEF's priority remains strengthening the ability of all 22 country offices in the region to prevent, prepare for, mitigate and respond to crises affecting women and children.

- The APSSC will conduct comprehensive risk assessments to better understand current trends, which are shaped by increased exposure, haphazard development processes and climate change.
- At the onset of emergencies, APSSC cluster specialists will provide technical support and advice to country offices about access to financial and human resources, along with supplies, to ensure a coordinated and results-based response.
- The APSSC will strengthen the capacities of country offices, government counterparts and cluster members through customized capacity-building events on UNICEF preparedness as well as cluster development. Training and implementation of tools enhancing the fulfilment of UNICEF's revised Core Commitments for Children in Humanitarian Action and cluster leadership accountability will be provided to country offices. Capacity development on disaster risk reduction will also be offered during early recovery, preparedness and regular country programme planning.

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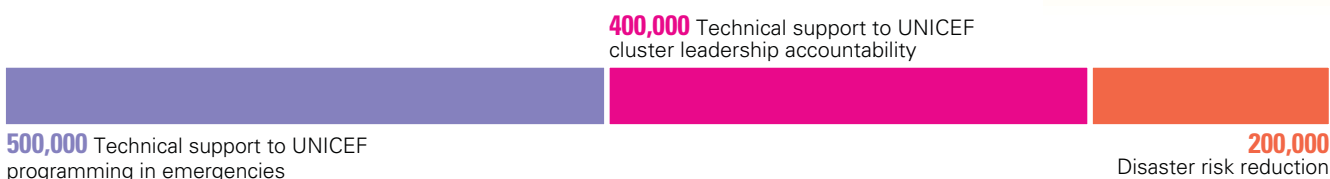
### FUNDING REQUIREMENTS FOR 2011

UNICEF is requesting US\$1.1 million in 2011 to continue its work on improving the delivery, speed and coordination of emergency and risk reduction programmes in a region characterized by increased frequency and intensity of natural and human-made disasters. Without in-country training aimed at prevention, mitigation, preparedness and response, the health and lives of millions of vulnerable women and children will continue to be threatened. It is imperative to strengthen country office capacities to provide basic services quickly in the face of disaster.

**More information regarding the details of the humanitarian action plans for the Asia-Pacific region can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011) and the regional office website at [www.unicef.org/eapro](http://www.unicef.org/eapro).**

### UNICEF EMERGENCY NEEDS FOR 2011 (in US dollars)

Total **\$1,100,000**







# Afghanistan

## CHILDREN AND WOMEN IN CRISIS

In 2010, damaging floods added to the humanitarian needs experienced by children and women in Afghanistan, where children live in the midst of a deadly conflict piercing the surface of the country's social and political life. The total population of internally displaced people has recently increased to over 440,000 people, 60 per cent of whom fled due to conflict.<sup>1</sup> These individuals have heightened vulnerability to illness and undernutrition. Widespread violence has decimated infrastructure, and around 5 million children, mostly girls, cannot access education.<sup>2</sup> In 2010, heavy flooding throughout the country damaged water systems and adversely affected the lives of thousands of families. Relief efforts for internally displaced children and families are stymied by violence aimed at aid workers, and worsened security conditions are forecast for 2011, a testament to the need for strong, effective humanitarian aid and the challenge in providing it.

## MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

Together with the Government of Afghanistan, other UN agencies and NGOs, and as cluster lead for nutrition and WASH and co-lead for education, UNICEF will meet the basic humanitarian needs of an estimated 2.4 million people.

- Some 23,000 severely malnourished children and 216,000 pregnant and lactating women will benefit from community-based nutrition care, counselling from emergency-skilled health workers and supplementary feeding.
- As many as 40,000 internally displaced persons will be provided with family kits, and nationally, 270,000 children and 108,000 women who are pregnant or lactating will have access to adequate health care.
- WASH activities will include construction of 1,200 community water systems, 40 strategic water points and rehabilitation of 1,000 non-functional water supply systems.
- Immediate educational needs will be met for over 584,000 students and 12,000 teachers in the most remote and vulnerable areas of the country, while relief supplies of emergency teaching materials will continue to be built up.
- Child protection actors, including Save the Children Alliance, Child Fund Afghanistan, War Child UK and Children in Crisis will be supported to provide services tailored to the needs of children affected by armed conflict and those who are victims of violence, abuse or exploitation.

## FUNDING REQUIREMENTS FOR 2011

UNICEF is requesting US\$29,750,000 to carry out its planned activities in Afghanistan. This request is aligned with the 2011 Consolidated Appeals Process (CAP) requirements. Full funding will empower UNICEF to respond to the many humanitarian needs experienced by children and women in Afghanistan and continue its work building the resilience of a vulnerable population.

**More information on achievements of 2010 and the humanitarian action planned for Afghanistan in 2011 can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011).**

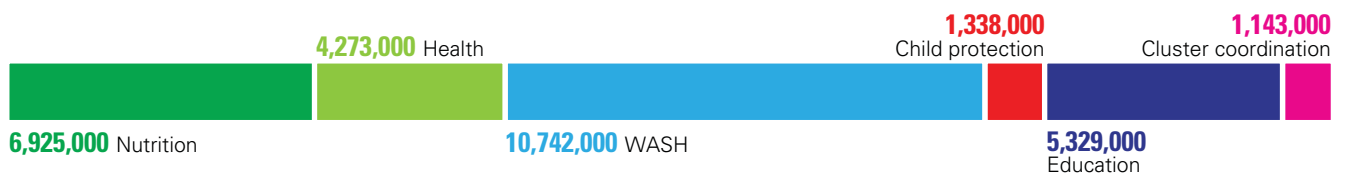
1. Office for the Coordination of Humanitarian Affairs, "Afghanistan 2011: Consolidated Appeal", United Nations, Geneva, November 2010, p. 1.
2. Initial Assessment of the Afghanistan National Education Strategic Plan (NESP II) 1389-1393 (2010-2014), p. 16.

## HUMANITARIAN FUNDING AT WORK: HIGHLIGHTS FROM 2010

In 2010, UNICEF estimated that US\$25,064,484 was needed for its humanitarian work in Afghanistan. As of October 2010, a total of US\$9,572,677 had been received, or 38 per cent of the 2010 request. Given this level of funding, UNICEF made progress in improving the prospects of children and women by providing paediatric medicines for over 40,000 children suffering from respiratory infections related to the H1N1 epidemic. Some 6.5 million children under 5 years old were successfully supplemented with vitamin A. About 700,000 people received access to safe water through construction of numerous new water facilities. UNICEF assisted in the ongoing operation during the difficult winter months of more than 1,300 schools for 584,000 students and was involved in the reporting, monitoring and management of 1,700 child protection cases (700 girls and 1,000 boys).

## UNICEF EMERGENCY NEEDS FOR 2011 (in US dollars)

Total **\$29,750,000**





# Democratic People's Republic of Korea

## CHILDREN AND WOMEN IN CRISIS

Stunting, wasting, undernutrition – these harsh words should have no place in the vocabulary of childhood. Yet in the Democratic People's Republic of Korea, they define the reality for many children and their mothers. Persistent domestic food shortages, brought about by recurrent natural disasters and decreased international food aid to the country,<sup>1</sup> have added new dimensions to a landscape marked by food insecurity. These are grim tidings in a country where an estimated 37 per cent of the population depends on food aid.<sup>2</sup>

Access to the population in need remains problematic in the Democratic People's Republic of Korea, with the exception of the Expanded Programme on Immunization and micronutrient supplementation. UNICEF and other UN agencies follow the principle of 'no access, no support' and continue to advocate for access to people who need aid and transparency of information.

## MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

UNICEF, together with the Government of the Democratic People's Republic of Korea, non-governmental organizations and other international agencies, will focus on assisting the most vulnerable and hard-to-reach people in rural areas. The organization serves as leader of the education and WASH theme groups in the country. UNICEF expects to reach around 4.4 million people, including 3.3 million women of childbearing age and around 573,000 girls and 581,000 boys. Just over 60 per cent of intended beneficiaries live in rural areas.

- In 2011, UNICEF and its partners will treat 13,000 children suffering from severe acute malnutrition, with the goal of a 100 per cent cure rate. Another priority will be to promote adequate infant and young child feeding: exclusive breastfeeding for the first six months, introduction of safe and nutritious foods after six months, and continued breastfeeding for two years or beyond, augmented by micronutrient supplementation when necessary.
- To reduce mortality rates among infants and children, UNICEF intends to surpass the 95 per cent vaccination coverage target for children under age 1 and will also increase access to maternal and neonatal health-care services.
- To help stop child deaths caused by diarrhoea and acute respiratory infections due to contaminated water sources, 185,000 people will benefit from more consistent access to safe water brought by gravity-fed water supply systems and repaired water and sanitation infrastructure.
- UNICEF will support the Government in the rehabilitation of kindergartens and schools post-emergency to facilitate early resumption of normal curricular activities. UNICEF will also pre-position emergency school supplies for around 25,000 children to enhance emergency preparedness and early response and maintain children's vital link to school and learning in times of distress.

## FUNDING REQUIREMENTS FOR 2011

UNICEF is requesting US\$12 million for its 2011 humanitarian work, an increase reflecting the expanded geographical reach of its programmes that now cover more people, as well as record numbers of people affected by natural hazards and food insecurity. Without funding for the key activities, the adverse effects of lack of food will continue to haunt the country's women and children, with no sign of abating.

**More information on achievements of 2010 and the humanitarian action planned for the Democratic People's Republic of Korea in 2011 can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011) or the country office website at [www.unicef.org/dprk](http://www.unicef.org/dprk).**

1. World Food Programme, 'Protracted Relief and Recovery Operations – Democratic People's Republic of Korea' (WFP/EB.A/2010/9-C/1), WFP, Rome, 11 May 2010, p. 6.  
 2. Food and Agriculture Organization of the United Nations, 'Special Report: FAO/WFP Crop and Food Security Assessment Mission to the Democratic People's Republic of Korea', FAO, Rome, 8 October 2008, p. 4.

## HUMANITARIAN FUNDING AT WORK: HIGHLIGHTS FROM 2010

In the 2010 *Humanitarian Action Report*, UNICEF estimated that US\$10 million was needed to fund its work in the Democratic People's Republic of Korea. As of October 2010, a total of US\$2,050,636 – only 21 per cent – had been received. With this funding, priority was given to key interventions for highest impact. 80 per cent of pregnant women nationwide received micronutrient supplements to prevent or treat anaemia. According to the ministry of public health, children in 105 counties where rates of severe acute malnutrition were high received treatment, with 75 per cent making a complete recovery. In addition, 3.5 million children and women had access to essential medicines, and six community water systems were rehabilitated to provide clean water for 46,000 people, including 16,000 children – thereby helping prevent the recurrent spread of disease.

## UNICEF EMERGENCY NEEDS FOR 2011 (in US dollars)

Total **\$12,000,000**





# Myanmar

## CHILDREN AND WOMEN IN CRISIS

The most severe and recent hardships affecting children and women in Myanmar are attributable to cyclones. As the worst natural disaster to ever befall the country,<sup>1</sup> the legacy of Cyclone Nargis includes housing devastation, destruction of agricultural land and declining job opportunities for the many labourers who inhabit the delta. Children in hard-to-reach areas continue to suffer from undernutrition and inadequate sanitary facilities. Another cyclone, Giri, hit the impoverished area of Rakhine State in October 2010, affecting at least 260,000 people; more than 100,000 were left homeless and most infrastructure was destroyed in the most severely hit townships. Young children, in particular, have been placed at high risk of undernutrition and disease.

## MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

UNICEF, the cluster lead for nutrition and WASH and co-lead for education, will work together with the Government of Myanmar, other UN agencies and NGOs to focus on assisting the most vulnerable and hard-to-reach children in areas of Rakhine (including Northern Rakhine State), Chin State and the Irrawady Delta. In 2011, UNICEF expects to reach over a million people, including 190,000 women, 380,000 girls and 370,000 boys living in emergency conditions.

- The range of nutritional relief and support will be expanded: 2,400 children with severe acute malnutrition will receive therapeutic feeding, at least 90 per cent of children (from 6–59 months old) will get vitamin A supplements and 60 per cent of pregnant and lactating women will receive the micronutrients essential for maternal well-being and a healthy pregnancy in the targeted hard-to-reach areas.
- Better access to health services for children and women will be experienced at the local level as referral systems and capacity of the primary health staff are improved in under-served and hard-to-reach areas.
- Clean water is key to better health. Around 70,000 families will gain access to satisfactory water and good storage receptacles, and 4,100 families will receive materials to construct and use sanitary latrines.
- Education provides stability in times of crisis. To enhance the resilience of the education sector, in 2010 UNICEF will advocate for improved school infrastructure across the country. To this end, an additional 20 cyclone-resistant schools will be constructed or improved in the delta, and the lack of proper water and sanitation facilities in existing schools structures will also be addressed.
- Vulnerable children from poor families in emergency areas will have access to improved local support and referral networks.

## FUNDING REQUIREMENTS FOR 2011

UNICEF is requesting US\$9,950,000 for its 2011 plans, about half of the amount requested last year because the level of funds required to restore social infrastructure (schools and rural health centres) is significantly reduced.

**More information on achievements of 2010 and the humanitarian action planned for Myanmar in 2011 can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011) or the country office website at [www.unicef.org/myanmar](http://www.unicef.org/myanmar).**

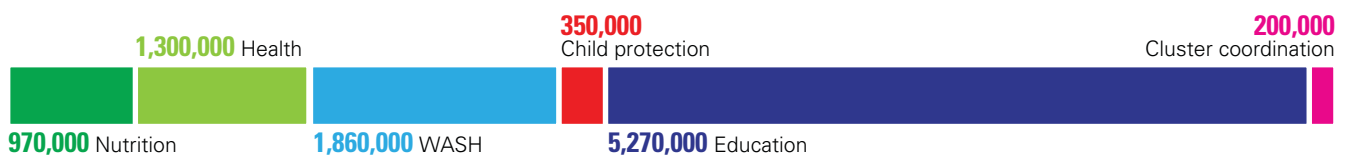
1. Tripartite Core Group, 'Post-Nargis Joint Assessment', Association of Southeast Asian Nations, Government of the Union of Myanmar and United Nations, Jakarta, July 2008, p. 1.

## HUMANITARIAN FUNDING AT WORK: HIGHLIGHTS FROM 2010

In 2010, UNICEF estimated that US\$15,899,722 was needed to fund its humanitarian work in Myanmar. As of October 2010, a total of US\$3,624,422 had been received, 23 per cent of the goal. Despite the shortfall in funding, UNICEF was able to improve the well-being of women and children affected by the cyclones. Twenty-four health centres were rebuilt to new cyclone-resistant standards; 52,000 households received mosquito nets to stave off malaria. Around 94 per cent of children under age 5 (280,000 children) received vitamin A supplementation; micronutrients were provided to 81,000 pregnant and breastfeeding women. UNICEF met urgent needs for drinking water by providing 7.5 million litres of water for 37,500 people and improved water-storage capabilities for approximately 53,000 families. Nearly 50 schools were rebuilt, and UNICEF helped community groups protect and assist 7,000 vulnerable children.

## UNICEF EMERGENCY NEEDS FOR 2011 (in US dollars)

Total **\$9,950,000**







# Pakistan

## CHILDREN AND WOMEN IN CRISIS

Millions of children and women in Pakistan had their lives forever marked by flooding in July and August 2010, one of the worst natural disasters of the past decades in terms of the population, land area, number of households and social infrastructure affected. Unusually heavy monsoon rains that were part of an anomalous weather pattern across Asia caused the Indus River to overflow its banks, submerging one-fifth of Pakistan's land area at the peak of the flooding.<sup>1</sup> More than 20 million people were affected, 7 million lost their homes, and an entire agrarian economy and way of life was altered. Six million boys and girls were severely affected. This extreme emergency, however, was only the most visible of the humanitarian crises of 2010. In northern Pakistan, a landslide in January obliterated a village and dammed up the Hunza River, creating a lake that swallowed up the surrounding villages, affecting some 40,000 people. In north-western Pakistan, more than 1.2 million people remained displaced following the 2009–2010 conflict. Pakistani families are experiencing a bewildering array of humanitarian needs rooted in ongoing instability, temporary displacement and widespread poverty. The key challenges for mounting an effective humanitarian response include frequent population movements and an insufficient number of partners able to assist the most vulnerable populations.

### HUMANITARIAN FUNDING AT WORK: HIGHLIGHTS FROM 2010

In 2010, UNICEF estimated that US\$66,871,298 was needed to fund humanitarian work in Pakistan. As of October 2010, US\$18,995,215 had been received, 28 per cent of the goal. Following the flooding, UNICEF requested an additional US\$251 million.<sup>2</sup> To respond to the flooding, UNICEF provided clean water to 2.8 million people daily and sanitation facilities to over 1.5 million. Measles and polio vaccines reached 9 million children. Nutrition support was extended to reach nearly 292,500 children and pregnant and lactating women. Over 143,516 children accessed education in 2,522 temporary learning centres, and 104,400 vulnerable children and women benefited from child-friendly spaces. In politically unstable north-western Pakistan, UNICEF provided safe drinking water to 500,000 people in camps and host communities (including 320,000 children) and to 1.5 million people (940,000 children) in areas of return. UNICEF is supporting 32 primary and 8 secondary schools for nearly 29,000 displaced children in IDP camps. In Hunza, UNICEF provided safe drinking water, sanitation and hygiene to over 19,000 people, including 10,000 children.

## MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

UNICEF is the cluster lead in WASH and nutrition, co-lead in education and lead of the child protection sub-cluster in Pakistan. In 2011, UNICEF will work with the Government of Pakistan, other UN agencies and NGOs to respond to the needs of over 18 million people, including 12 million children and 3.5 million women.

- To reduce vulnerability to waterborne diseases, access to safe water supplies will be provided for 5 million people in flood-affected areas and 920,000 affected by armed conflict. This initiative will include education on safe hygiene.
- More than 11 million children under age 5 at risk of contracting measles will be vaccinated, including over 2.5 million in flood-affected areas. Over 1 million pregnant and lactating women, and 320,000 newborn babies, will be reached with life-saving interventions and essential health services.
- The nutritional status of 1.2 million children 6–59 months old and 700,000 pregnant and lactating women will be protected through interventions including screening, blanket feeding and behaviour change messaging on infant feeding practices, sanitation and hygiene.
- Over 2 million children in flood-affected regions and 800,000 in conflict-affected districts will be provided with secure and stable educational opportunities through temporary learning centres, school rehabilitation, school supplies and teacher training.
- To protect their well-being and safety, 5.4 million flood-affected children and adolescents, and 120,000 women, will benefit from child protection services including child-friendly schools, reunification of separated and missing children, counselling and helplines. UNICEF will also distribute information on HIV transmission and prevention to 220,000 women of childbearing age.

## FUNDING REQUIREMENTS FOR 2011

In 2011 UNICEF is requesting US\$295,951,000 for Pakistan. This includes support to children and women in both flood- and conflict-affected regions.

**More information on 2010 achievements and details of the humanitarian action plans for Pakistan can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011) or the country office website at [www.unicef.org/pakistan](http://www.unicef.org/pakistan).**

1. United Nations Environment Programme, 'Near Real-Time Environmental Event Alert: Pakistan's flood of the century is a global disaster', UNEP Global Environmental Alert Service, November 2010, p. 3.  
 2. This request was through the Pakistan Floods Emergency Response Plan, August 2010, revised in September 2010. Office for the Coordination of Humanitarian Affairs, New York, September 2010.

### UNICEF EMERGENCY NEEDS FOR 2011 (in US dollars)

Total **\$295,951,000**





# Philippines

## CHILDREN AND WOMEN IN CRISIS

In the Philippines, women and children face revolving cycles of conflicts and disasters. The country typically experiences annual displacement due to political conflict or natural disaster. Typhoon Ketsana (known in the Philippines as Ondoy), hit in 2009, and its aftermath – massive displacement, ill health, poor nutrition, dirty water – plunged millions of people into extreme distress that reached well into 2010. This was followed by Typhoon Megi in October 2010. Such natural disasters, along with protracted armed conflict and exposure to violence, hinder attempts to alleviate the effects of poverty, unsafe water and inadequate sanitation facilities, limited health-service delivery and poorly functioning governance.

## MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

In 2011, UNICEF will work with the Government of the Philippines, UN agencies and NGO partners to respond to the needs of more than 300,000 women and children in conflict- and disaster-affected areas.

- To provide appropriate treatment for children closer to their homes, the community-based management of acute malnutrition programme will be expanded to three more provinces in the Central Mindanao region – screening a total of 37,500 children and treating those with severe acute malnutrition.
- Disease outbreaks often proliferate in disaster areas, where there are limited health and sanitation services. To keep children healthy and stop such outbreaks in their tracks, the Vulnerability Assessment Committee has estimated needs for a population of 150,000 in emergency-affected areas. The essential commodities that will be procured and pre-positioned include: 75 basic health kits, 105,000 micronutrient supplements, 150,000 doses of measles vaccines and bundled devices or immunization supplies, and 95,000 doses of deworming drugs. In addition, access to safe water and sanitation facilities for children in 52 schools will be ensured.
- Carrying on with schooling during emergencies provides much-needed stability for children. Replacement of lost or damaged school supplies and learning materials (school packs, teacher packs, sets of library books, etc.) will benefit 100,000 children.
- Emergencies create new and exacerbate existing child protection issues. Child protection networks will be organized in more than 600 affected and at-risk communities, providing psychosocial support to 136,000 children through the establishment of child-friendly spaces in selected locations.
- To help young people protect themselves from HIV, a directory of services, informative games and educational materials related to HIV and AIDS will be provided.

## FUNDING REQUIREMENTS FOR 2011

UNICEF is requesting US\$14,022,000 for its humanitarian activities in the Philippines to cover the conflict-affected areas in Mindanao and potential natural disasters – earthquakes, floods, typhoons – that can occur anywhere in the country, as well as the after-effects of recent typhoons in the north.

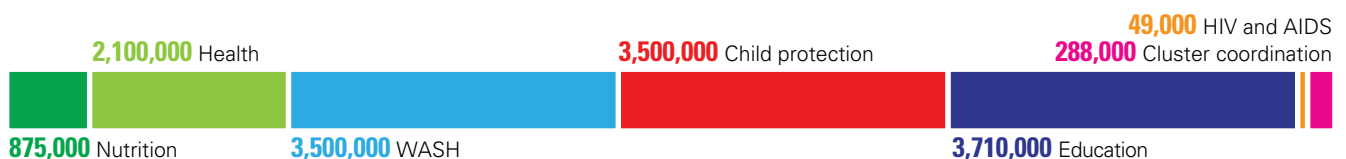
**More information on 2010 humanitarian action in the Philippines and plans for 2011 can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011) or the country office website at [www.unicef.org/philippines](http://www.unicef.org/philippines).**

### HUMANITARIAN FUNDING AT WORK: HIGHLIGHTS FROM 2010

UNICEF estimated that US\$17,890,000 was needed for UNICEF's humanitarian activities in the Philippines, according to the mid-2010 revised request. As of October 2010, a total of US\$6,067,089 was received, or 34 per cent of the goal. Quick and efficient disaster management enabled UNICEF to achieve key results: One million people benefited from emergency health supplies, and nearly 20,000 children (6 months to 15 years old) received a dose of measles vaccine through organized mobile health teams in evacuation centres. More than 16,000 children were screened through the community-based management of acute malnutrition programme and approximately 500 of these children were treated for severe acute malnutrition. Through cooperation with partners, WASH services were rapidly delivered to at least 40,000 families. An estimated 27,000 preschool-aged children, 3–5 years old, and more than 50,000 schoolchildren benefited from safe learning environments and child-friendly spaces in the disaster- and conflict-affected areas.

### UNICEF EMERGENCY NEEDS FOR 2011 (in US dollars)

Total **\$14,022,000**





# Sri Lanka

## CHILDREN AND WOMEN IN CRISIS

Sri Lanka's 30-year civil war, which ended in May 2009, took a serious toll on health services, water and sanitation facilities, education systems and protective safety nets for women and children living in Northern and Eastern Provinces. There is a massive effort at recovery under way, with each step both a promise for the future and a reminder of the past. Many of those who are able to return to their homes find their movements – and their livelihoods – circumscribed by fields littered with unexploded ordnance and landmines. Many children are able to attend school, but find they need to catch up from a severe schooling deficit wrought by years of violence and periodic displacement. After years of conflict, there are approximately 42,000 women who find themselves alone as head of household, which causes significant economic stress and has a detrimental impact on the quality of care for children.

The humanitarian need of those who remain displaced is particularly acute. In the last months of fighting, more than 280,000 people were displaced due to the conflict, and around 100,000 are still threatened by poor nutrition and health care, insufficient sanitation and education, and unexploded ordnance and landmines.<sup>1</sup> An additional 300,000 people displaced over the course of the conflict – some since 1990 – also remain in need of solutions.<sup>2</sup> The great humanitarian challenge is to help Sri Lankans safely and completely return to their homes.

## MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

UNICEF Sri Lanka is leading the WASH and nutrition clusters as well as the child protection sub-cluster, and is co-lead of the education cluster with Save the Children. In 2011, UNICEF will continue to work with the Government of Sri Lanka, other UN agencies, local and international NGOs, and host communities in addressing the needs of 362,000 children and 214,000 women.

- Nutritional aid will focus on the treatment of acute malnutrition. Some 55,000 children under age 5 will receive therapeutic and supplementary feeding for treatment of severe and moderate acute malnutrition. Rehabilitated health facilities in returnee locations will benefit more than 77,000 people.
- UNICEF will supply potable water and adequate sanitation and hygiene facilities for more than 150,000 people in returnee and internally displaced person sites.
- Educational quality and access will be increased. Formal education will be re-established for returnee children through the repair of at least 30 schools damaged or destroyed during the conflict, benefiting approximately 6,000 children. An Accelerated Learning Programme will support reintegration and retention within the formal education system of up to 100,000 conflict-affected children.
- UNICEF will contribute to the restoration of Government child protection services and community-based structures to support more than 20,000 highly vulnerable children in northern Sri Lanka.

## FUNDING REQUIREMENTS FOR 2011<sup>3</sup>

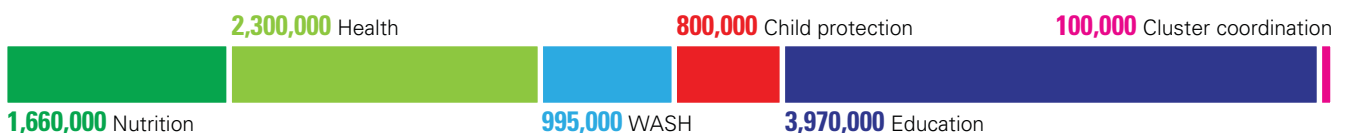
UNICEF is requesting US\$9,825,000<sup>4</sup> to carry out its planned activities in Sri Lanka in 2011, half of the amount requested in 2010 due to the rapidly changing context. Full and prompt funding by donors is crucial to ensure the well-being of children and women in a country marked by a long-standing civil war.

**More information on 2010 achievements and details of humanitarian action planned for Sri Lanka in 2011 can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011) or at the country office website at [www.unicef.org/srilanka](http://www.unicef.org/srilanka).**

1. United Nations High Commissioner for Refugees, '2010 UNHCR Country Operations Profile: Sri Lanka', Geneva, <[www.unhcr.org/pages/49e4878e6.html](http://www.unhcr.org/pages/49e4878e6.html)>, accessed 7 December 2010.
2. Ibid.
3. A six-month Flash Appeal was launched on 18 January 2011 in response to devastating floods and landslides. The UNICEF requirements of US\$9,903,600 through the Flash Appeal are in addition to the Humanitarian Action for Children requirements.
4. These funding requirements are part of the Joint Plan for Assistance (JPA) for Northern Province in 2011, launched in-country on 1 February 2011.

## UNICEF EMERGENCY NEEDS FOR 2011 (in US dollars)

Total **\$9,825,000**



## HUMANITARIAN FUNDING AT WORK: HIGHLIGHTS FROM 2010

In 2010, UNICEF estimated that US\$20,082,000 was needed to fund its humanitarian work in Sri Lanka. As of October 2010, a total of US\$10,781,415 had been received, or 54 per cent. With this level of donor funding, UNICEF made progress towards improving the prospects of children and women by helping construct and equip essential health facilities in Kilinochchi, Mullaitivu, Mannar and Vavuniya. UNICEF ensured the supply of anthropometric equipment, therapeutic milk and other nutritional and health supplements to treat about 42,000 children, adolescents and pregnant and lactating women among at-risk populations. Safe water supply to the resettled population was provided through the cleaning and upgrading of 3,582 dug wells, repairing of 91 tube wells, and drilling of 27 tube wells for 196,000 internally displaced persons, while hygienic means of waste disposal was provided through the rehabilitation or construction of 32 latrines. Learning supplies for around 75,000 returnee and host school children were distributed in Northern Province. Mine-risk education reached an estimated 333,983 individuals including 84,785 boys and 92,580 girls.







2011 UNICEF HUMANITARIAN ACTION FOR CHILDREN

# **Central and Eastern Europe and the Commonwealth of Independent States**

**Kyrgyzstan • Tajikistan**



## HUMANITARIAN FUNDING AT WORK: HIGHLIGHTS FROM 2010

In 2010, UNICEF estimated that US\$1,650,000 was needed to fund emergency response work in the CEE/CIS region. As of October 2010, a total of US\$2,110,059 had been received. In 2010, the UNICEF CEE/CIS Regional Office supported the country offices in responding to a number of emergencies, including earthquakes in Tajikistan and Turkey, and floods in Kazakhstan, Montenegro, the Republic of Moldova and Tajikistan. UNICEF country offices responded by supporting national authorities and partners in conducting rapid assessments and carrying out the relief response. In Kyrgyzstan, UNICEF was able to respond quickly to the needs of displaced women and children by being an active member of the humanitarian country team – and within this framework, led the clusters for WASH, child protection and gender-based violence, and co-led the education cluster with Save the Children. In response to the polio outbreak in Tajikistan, the regional office coordinated a major vaccination effort, with the goal of a 99 per cent coverage rate for children under 15 years old.

# Central and Eastern Europe and the Commonwealth of Independent States

## CHILDREN AND WOMEN IN CRISIS

CEE/CIS is a region prone to an array of natural disasters, from floods to earthquakes and avalanches, as well as occasional political crises. Such conditions leave women and children highly vulnerable to displacement, protection concerns and severe health problems. In 2010, a combination of floods and earthquakes in the Pamir Mountains and in southern Tajikistan resulted in displacement of families, destruction of schools and public health facilities, and loss of life. In addition, 476 cases of polio were reported in the country, some 70 per cent of them in children,<sup>1</sup> in the first outbreak since the European Region was certified polio-free in 2002.<sup>2</sup> In spring 2010, the violent overthrow of the Kyrgyzstan Government became a regional humanitarian crisis when about 400,000 people were displaced and an additional 75,000 refugees, among them 30,000 children, briefly sought shelter in Uzbekistan.<sup>3</sup>

## MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

In 2011 UNICEF's CEE/CIS Regional Office will place priority on continuing to build capacities for emergency response among staff in country offices and partner agencies. Risk reduction activities will be further expanded, with particular attention to the education sector.

- The CEE/CIS Regional Office will roll out the organization's Early Warning and Preparedness system as the primary tool for implementing emergency preparedness procedures and activities in the region.
- The regional team will coordinate, manage and oversee the Disaster Preparedness Programme of the European Commission's Humanitarian Aid Department (DIPECHO)-funded disaster risk reduction programme in South Caucasus and Central Asia. The programme covers risk reduction activities in the education and early childhood development sector in the following countries: Armenia, Azerbaijan, Georgia, Kazakhstan, Kyrgyzstan, Tajikistan and Uzbekistan.
- The regional office will expand and build a regionally based surge capacity of trained staff for rapid emergency response and deployment.

1. Global Polio Eradication Initiative, 'October/November 2010: Facts & Figures', World Health Organization, Geneva, 9 November 2010, <[www.polioeradication.org/Mediareom/Monthlysituationreports.aspx](http://www.polioeradication.org/Mediareom/Monthlysituationreports.aspx)>, accessed 1 December 2010.
2. World Health Organization, 'Polio in Central Asia and the North Caucasus Federal Region of the Russian Federation', WHO, Geneva, 13 November 2010, <[www.who.int/csr/don/2010\\_11\\_13/en/index.html](http://www.who.int/csr/don/2010_11_13/en/index.html)>, accessed 30 November 2010.
3. Kyrgyzstan extended and revised flash appeal, June 2010 – June 2011, June 2010, p. 12.





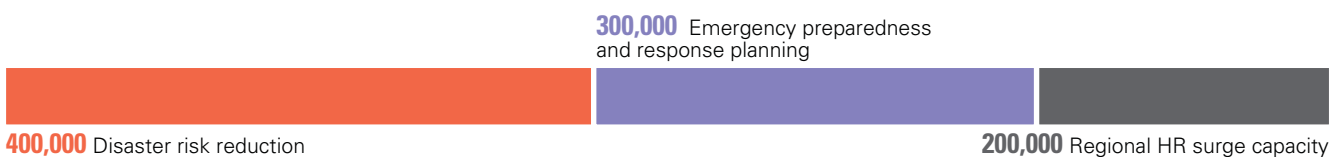
**FUNDING REQUIREMENTS FOR 2011**

UNICEF is requesting US\$900,000 for its regional support to humanitarian work in Central and Eastern Europe and the Commonwealth of Independent States in 2011 in order to strengthen readiness and response to the different types of disasters that could leave women and children in the region vulnerable to displacement, serious protection concerns and health-related issues.

**More information regarding the details of the humanitarian action plans for Central and Eastern Europe and the Commonwealth of Independent States can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011) and at the regional website at [www.unicef.org/ceecis](http://www.unicef.org/ceecis).**

**UNICEF EMERGENCY NEEDS FOR 2011** (in US dollars)

Total **\$900,000**





# Kyrgyzstan

## CHILDREN AND WOMEN IN CRISIS

In the summer of 2010, ethnic conflict and the subsequent movements of people displaced from their homes jarred the state of Kyrgyzstan, the second poorest country in Central Asia.<sup>1</sup> The fragility of the interim government has heightened the atmosphere of imminent violence and tension among those living in the southern part of the country. People are coping with undernutrition and diarrhoeal diseases from poor sanitation created by the political crisis and displacement, along with ongoing energy scarcity, food insecurity and poverty. Currently, 36 per cent of all children in the country live and grow in poverty, with 7 per cent living in extreme poverty.<sup>2</sup> During winter the absence of proper heating systems in schools and homes contributes to an increased number of acute respiratory infections and pneumonia in children.

## MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

In 2011, UNICEF will continue to work with the Government of Kyrgyzstan, other UN agencies and NGOs to increase the sustainability of the emergency response and to strengthen the country's emergency preparedness mechanisms. Part of this work is taking the lead in the WASH and education clusters, and in the nutrition, child protection and gender-based violence sub-clusters. Efforts are designed to improve the welfare of more than 1.3 million women and children.

- To make up for nutrient deficiencies, 81,000 children (6–24 months old) will receive essential micronutrient supplements, with 90 per cent coverage in Osh and Jalal-Abad Provinces.
- To decrease the high rates of diarrhoeal illness and acute respiratory infection, 2,500 medical staff will be trained on prevention, management and treatment of these conditions.
- To address urgent needs for safe water and sanitation, 70,000 students in Osh and Jalal-Abad Province will have improved sanitation facilities in their schools.
- 91,000 schoolchildren will have access to a safe learning environment and peace-building education through the 'Welcome to School' initiative.
- Around 15,000 children and youth will benefit from protection and psychosocial support found in 36 child-friendly centres.

## FUNDING REQUIREMENTS FOR 2011

To make significant strides in stabilizing the welfare of women and children in Kyrgyzstan, particularly their nutritional status, access to safe water, and education and protection, UNICEF is requesting US\$6,996,000 to carry out its planned activities.

**More information on 2010 results and humanitarian action planned in 2011 can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011) or the country office website at [www.unicef.org/kyrgyzstan](http://www.unicef.org/kyrgyzstan).**

1. United Nations Development Programme, *Human Development Report 2010 – The Real Wealth of Nations: Pathways to human development*, UNDP, New York, 2010, p. 145.
2. Chzhen, Yekaterina, 'Child Poverty in Kyrgyzstan: Analysis of the Household Budget Survey – A report for UNICEF', Working Paper, no. EC 2410, Social Policy Research Unit, University of York, Heslington, UK, January 2010, p. 3.

## HUMANITARIAN FUNDING AT WORK: HIGHLIGHTS FROM 2010

As a result of funding through the Flash Appeal launched in June 2010, UNICEF made a significant impact on the welfare of women and children affected by multiple emergencies in Kyrgyzstan. Emergency health and nutrition supplies were provided to hospitals in the city of Osh and in Jalal-Abad Province as well as to temporary health centres and health outreach posts, serving more than a million people. UNICEF provided 'Sprinkles' micronutrient powders for home nutritional fortification and UNIMIX special food for undernourished children to 43,000 children. Diarrhoea information and kits benefited 21,000 children, and family water kits were provided to 40,000 children and 10,000 women. A flagship 'Welcome to School' initiative provided temporary learning spaces for 2,600 children whose schools were destroyed. Forty-five child-friendly spaces in affected communities provided access to psychosocial services for more than 6,000 children on a daily basis.

## UNICEF EMERGENCY NEEDS FOR 2011 (in US dollars)

Total **\$6,996,000**





# Tajikistan

## CHILDREN AND WOMEN IN CRISIS

In 2010, a string of emergencies caused by natural disasters and epidemics affected thousands of children and women in Tajikistan, the poorest country in Central Asia.<sup>1</sup> Imposing mountainous terrain and geographical isolation make assisting the most vulnerable children even more difficult. An earthquake in Vanj District in January and flooding in Kulob District in April knocked out schools, medical centres, and water and sanitation facilities, restricting women's and children's access to essential services, and weakening the health and nutritional status of close to 10,000 people. The first known outbreak of polio in the country since 1997<sup>2</sup> struck 458 people, nearly 90 per cent of them under age 15, and severely taxed the capacity of national response systems.<sup>3</sup> The outbreak was contained, but not before it spread to several neighbouring countries. The global economic crisis, high food prices, political tension with Uzbekistan and deteriorating internal security, particularly in the Rasht Valley, have compounded the acute distress and humanitarian need of ordinary people in Tajikistan.

### HUMANITARIAN FUNDING AT WORK: HIGHLIGHTS FROM 2010

In 2010, UNICEF estimated that US\$6,200,000 was needed for humanitarian activities in Tajikistan. As of October 2010, a total of US\$200,000 – only 3 per cent of the goal – had been received. UNICEF, however, was able to mobilize resources quickly for the polio emergency and supported six rounds of national and one round of sub-national polio immunizations. Around 2,000 people affected by floods in Kulob District benefited from an emergency hygiene campaign that included distribution of chlorine tablets; around 300 households (2,100 people) received water containers, hygiene kits, soap and water purification tablets. In 510 schools of the 20 most disaster-prone districts, over 1,000 teachers were trained in simple and effective disaster risk reduction measures. In addition, about 750 children and 560 adults received psychosocial support following the earthquake in Vanj.

## MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

In 2011, UNICEF will continue to work with the Government of Tajikistan, other UN agencies and NGOs to improve the welfare of 3.1 million children as well as 1.7 million women of reproductive age. UNICEF, which is the lead agency for the WASH cluster and co-lead in the education cluster with Save the Children, expects to achieve the following results:

- Children will be protected from the scourge of polio through the supply of two rounds of oral poliovirus vaccine, along with social mobilization interventions to ensure a 99 per cent coverage rate against polio among 3 million children under age 15.
- Micronutrient supplements will help prevent deterioration in the nutritional status of 20,000 undernourished children and mothers at risk.
- Up to 30,000 households affected by floods, earthquakes and human-made disasters will benefit from ongoing emergency hygiene education and the distribution of 100,000 20-litre water containers, 270 water purification packs, 300,000 hygiene kits and 600,000 bars of soap to ensure access to safe water, sanitation and basic hygiene.
- Children in emergency-affected areas will find continuity in schooling when temporary learning centres are established: 1,500 schoolchildren will benefit from School-in-a-Box kits with essential supplies for learning; 10,000 children in residential care institutions and boarding schools will have access to basic care and services, should an extreme weather emergency occur, and psychosocial support will be provided for an estimated 10,000 children through established child-friendly spaces in resettlement areas and communities.
- UNICEF, together with the ministry of education and the Government of Tajikistan's Committee of Emergency Situations and Civil Defense, will pilot a school-based disaster risk reduction (DRR) model in selected schools in disaster-prone areas. The model helps DRR capacity building of schools by training teachers and relevant local officials, promoting emergency preparedness activities, mobilizing communities and providing emergency preparedness and response-related supplies.

## FUNDING REQUIREMENTS FOR 2011

To make significant strides in stabilizing the welfare of women and children in disaster-prone areas of Tajikistan, UNICEF is requesting US\$5,540,000 for 2011. Immediate and full funding can help children and women in Tajikistan find a foothold of health and stability.

**More information regarding the details of the humanitarian action plans for Tajikistan can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011) and the country office at [www.unicef.org/tajikistan](http://www.unicef.org/tajikistan).**

1. United Nations Development Programme, *Human Development Report 2010 – The Real Wealth of Nations: Path-ways to human development*, UNDP, New York, 2010, p. 145.
2. World Health Organization, 'Polio in Tajikistan, First Importation Since Europe Certified Polio-Free', WHO Global Alert and Response, Geneva, 23 April 2010, <[www.who.int/csr/don/2010\\_04\\_23/en/index.html](http://www.who.int/csr/don/2010_04_23/en/index.html)>, accessed 7 December 2010.
3. World Health Organization, 'Polio in Central Asia and the North Caucasus Federal Region of the Russian Federation', WHO Global Alert and Response, Geneva, 13 November 2010, <[www.who.int/csr/don/2010\\_11\\_13/en/index.html](http://www.who.int/csr/don/2010_11_13/en/index.html)>, accessed 7 December 2010.

### UNICEF EMERGENCY NEEDS FOR 2011 (in US dollars)

Total **\$5,540,000**









2011 UNICEF HUMANITARIAN ACTION FOR CHILDREN

# Eastern and Southern Africa

**Burundi • Eritrea • Ethiopia • Kenya • Madagascar  
Somalia • Uganda • Zimbabwe**





## HUMANITARIAN FUNDING AT WORK: HIGHLIGHTS FROM 2010

In 2010, UNICEF estimated that US\$4.5 million was needed to fund coordination and technical assistance carried out by the Eastern and Southern Africa Regional Office. As of October 2010, no funding had been received. Other resources, however, have been used to strengthen emergency preparedness and response capacities. Burundi, Comoros, Ethiopia, Kenya, Madagascar, Malawi, Mozambique, Rwanda, Somalia, South Africa, Swaziland, Uganda and Zimbabwe are among the countries that benefited from capacity-building support. To combat an increasing number of measles cases, the regional health team helped respond to outbreaks in all 14 countries affected during late 2009 and early 2010; in South Africa and Zimbabwe, the team assisted with nationwide measles immunization campaigns. In addition, UNICEF reached more than 1,200 front-line responders, with workshops on emergency preparedness and response as well as risk reduction in education.

# Eastern and Southern Africa

## CHILDREN AND WOMEN IN CRISIS

For much of the past decade, millions of children and women in Eastern and Southern Africa have endured war, political instability, droughts, floods, food insecurity and disease. 2010 was no exception. In eastern Africa, an estimated 17.4 million people<sup>1</sup> are food-insecure despite improvement in food security following favourable long rains, particularly in Ethiopia and the Sudan.<sup>2</sup> Adverse weather patterns also caused severe flooding and landslides in early 2010; 48,000 people in Uganda and more than 55,000 people in Kenya, Namibia, Rwanda and Zambia were temporarily displaced.<sup>3</sup> Flooding and poor sanitation among displaced people led to outbreaks of cholera, acute watery diarrhoea and measles. Armed conflict in southern Somalia threatens children and women and impedes delivery of essential services. In Madagascar and Zimbabwe, political instability, deteriorating physical infrastructure and the public sector's inability to deliver basic social services have led to further decline in the overall health and well-being of the population. Millions of children remain out of school across the region, the vast majority in countries affected by chronic crises.

## MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

In 2011, the Eastern and Southern Africa Regional Office will continue to work with UN agencies, NGOs and other partners to address humanitarian needs across the region. The regional team will continue to provide technical assistance to countries in areas of WASH, health and nutrition, education, and child protection. This will include supporting countries applying the cluster approach with emphasis on ensuring global standards.

- To curtail outbreaks of vaccine-preventable diseases, the regional office will collaborate with immunization partners and country offices to provide technical assistance to countries with high numbers of children who have not been immunized.
- UNICEF country offices in Eastern and Southern Africa will receive support to ensure that child-friendly schools are reopened in a timely manner after emergencies to minimize disruption to schooling, provide relevant and quality education, and offer all children a protective environment.
- In anticipation of potential humanitarian needs, country offices in Eritrea, Ethiopia, Kenya and Uganda are factoring the upcoming secession referendum in Sudan into their multi-hazard preparedness plan based on UNHCR figures. Should the situation deteriorate, UNICEF will require additional funding to adequately respond to needs and support these four countries in their response.

1. This figure includes the Democratic Republic of the Congo.

2. OCHA Sub Regional Office for Eastern Africa, 'Humanitarian Snapshot (3rd Quarter)', United Nations Office for the Coordination of Humanitarian Affairs, Geneva, October 2010, p. 1.

3. OCHA Sub Regional Office for Eastern Africa, 'Humanitarian Snapshot (1st Quarter)', United Nations Office for the Coordination of Humanitarian Affairs, Geneva, 30 April 2010, p. 1.



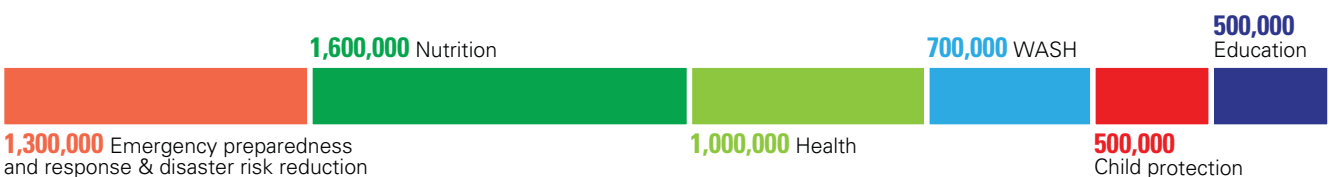
**FUNDING REQUIREMENTS FOR 2011**

UNICEF is requesting US\$5.6 million for its humanitarian work in the region in 2011, an increased requirement compared to 2010 stemming from the need to strengthen country office capacity in emergency preparedness and response across all programme sectors. Additional funding will be needed to respond to a refugee influx should the humanitarian situation in Sudan deteriorate in the wake of the referendum in January 2011.

**More information on achievements of 2010 and the humanitarian action planned for Eastern and Southern Africa in 2011 can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011) and at the regional office website at [www.unicef.org/esaro](http://www.unicef.org/esaro).**

**UNICEF EMERGENCY NEEDS FOR 2011** (in US dollars)

Total **\$5,600,000**





# Burundi

## CHILDREN AND WOMEN IN CRISIS

In late 2010, Burundi found itself in a tenuous transitional phase, bracketed by a recent past of political and social unrest and a near future threatening renewed violence and tension, already manifest by an increase in such criminal incidents as armed robberies, assassinations, grenade attacks and rapes recorded in the country.<sup>1</sup> At stake is the well-being of children and women who must cope with expatriation and displacement and the risks of violence, underage recruitment into armed combat, loss of education access, undernutrition and recurrent epidemic illness that such upheaval engenders. The prospect of diminished rainfall in 2011 resulting from the La Niña phenomenon further dims the outlook for the people of Burundi.

## MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

In 2011, UNICEF will continue its work leading the education, nutrition, and water and sanitation clusters in Burundi, as well as the child protection sub-cluster. The organization will work with the Government of Burundi, other UN agencies and NGOs as well as host communities in addressing the needs of more than 175,000 people, including 15,000 women, 80,000 girls and 80,000 boys.

- The range and efficacy of nutritional relief and support will be expanded to reach 23,000 children with severe acute malnutrition. Community-based screening and referral systems for such treatment will be strengthened in 13 priority provinces.
- More than 1.4 million children under 1 year old will receive deworming tablets and vitamin A supplements; 409,000 pregnant women will be given deworming tablets and tetanus toxoid vaccines. Households will receive 250,000 mosquito nets, and 30,000 people will receive kits of essential drugs and equipment to improve feeding and health-care practices.
- WASH education needs will be met at greater levels. UNICEF will construct 10 safe water networks in 'peace villages' (established to promote reconciliation among different ethnic groups) and surrounding communities, primary schools and health-care centres.
- Educational support will focus on raising crisis-preparedness levels for students in all 17 provinces.
- The focus in child protection will be improving conditions for 5,000 children affected by recruitment into armed conflict, and some 90 per cent of the population in emergency situations will be reached and provided with information on HIV prevention, care and treatment.

## FUNDING REQUIREMENTS FOR 2011

UNICEF is requesting US\$5,223,000 to carry out its planned activities in Burundi. Full funding will mean a greater positive impact on the lives of children and women who have already endured substantial hardship.

**More information on achievements of 2010 and the humanitarian action planned for Burundi in 2011 can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011).**

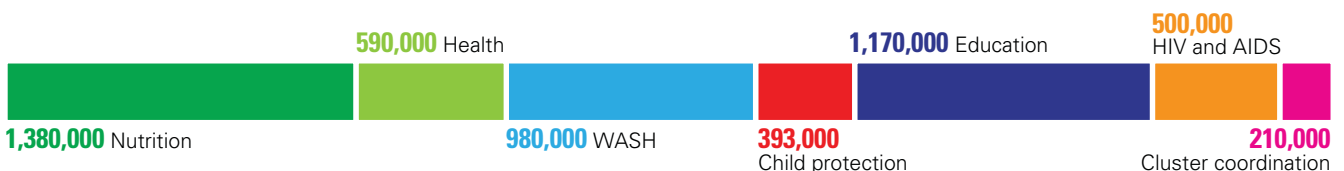
1. UNICEF Burundi Monthly Situation Report, 1 November 2010, p. 1.

## HUMANITARIAN FUNDING AT WORK: HIGHLIGHTS FROM 2010

In 2010 UNICEF estimated that US\$6,546,599 was needed to fund its humanitarian work in Burundi. As of October 2010, a total of US\$2,053,689 had been received, 31 per cent of the revised request. Despite the funding shortfall, UNICEF was able to achieve important results for women and children. More than half a million children aged 9 months to 14 years received measles vaccine; more than 10,000 children with severe acute malnutrition and 21,000 with moderate acute malnutrition were cured. Thirty-one sanitation facilities were constructed at 10 primary schools. Some 786,000 students were able to maintain some continuity in their education through essential learning kits. Over 600 children formerly associated with armed forces and groups began the process of reintegration into communities.

## UNICEF EMERGENCY NEEDS FOR 2011 (in US dollars)

Total **\$5,223,000**





# Eritrea

## CHILDREN AND WOMEN IN CRISIS

The children and women in Eritrea remain vulnerable to pervasive undernutrition that limits young children's physical growth and development and to landmines that demarcate an often hidden border between safety and danger. High consumer prices, drought and floods contribute to continuing levels of food insecurity, and a perennial political impasse with neighbouring Ethiopia hinders efforts to reduce poverty, lessen disaster risk and develop human capacities. Finding a way to work amid government restrictions to deliver effective assistance is crucial to improving the immediate well-being of the country's most vulnerable people.

## MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

In 2011, UNICEF will continue to work with the Government of Eritrea, UN agencies and non-governmental partners to respond to the needs of about 1.5 million people, primarily children, mired in poverty, plagued by food insecurity and vulnerable to natural hazards. UNICEF's focus will be ensuring access to health and nutrition care, safe drinking water, and appropriate sanitation and hygiene, and on improving mine-risk education and child protection.

- About 530,000 pregnant and lactating women and children under age 5 will benefit from micronutrient supplementation, vitamin A supplementation and therapeutic feeding programmes.
- One million such children will have access to better health services that offer more trained staff, improved equipment and more efficient drug procurement.
- A safe water source is one of the gateways to health. More than 20,000 people throughout all six of the country's regions will have access to drinkable water and better sanitation through new or rehabilitated boreholes.
- Around 15,000 nomadic and internally displaced children will be able to count on the stability of an education when they attend child-friendly learning spaces.
- UNICEF will ensure that vulnerable children in communities affected by armed conflict benefit from child-focused landmine risk education and child protection. This work includes providing first aid kits and training community medical volunteers.

## FUNDING REQUIREMENTS FOR 2011

To make significant strides in stabilizing the welfare of women and children in Eritrea, particularly their nutritional status, their access to safe water, and education and protection, UNICEF is requesting US\$14,075,000 to carry out its planned activities. Any delay in fully funding programmes will further limit the health and the human potential of Eritrea's vulnerable population.

**More information on achievement of 2010 and the humanitarian action planned for Eritrea in 2011 can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011).**

## HUMANITARIAN FUNDING AT WORK: HIGHLIGHTS FROM 2010

In 2010, UNICEF estimated that US\$24.8 million was needed to fund its work in Eritrea. As of October 2010, only 27 per cent of this request had been received. Despite the shortfall, funding from donors enabled UNICEF and its partners to meet immediate humanitarian needs. Nearly 6,000 children with severe acute malnutrition received life-saving treatment, and more than 37,000 people gained access to safe drinking water and sanitation. Landmine risk education reached close to 200,000 people, including 150,000 children.

## UNICEF EMERGENCY NEEDS FOR 2011 (in US dollars)

Total **\$14,075,000**







# Ethiopia

## CHILDREN AND WOMEN IN CRISIS

Emergency conditions are all too familiar to many families in Ethiopia. In 2010, flooding affected nearly 1 million people across several regions.<sup>1</sup> Periodic shocks such as droughts and heavy rains can add immediate crisis to chronic difficulties linked to high poverty levels, dependence on rain-fed agriculture, low availability of safe drinking water, poor hygiene and sanitation, and inadequate disease surveillance. As a result, children and women, especially pregnant women and children with poor nutritional status, are at higher risk of death and disease.

## MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

In 2011, UNICEF will work with the Government of Ethiopia, other UN agencies, NGOs and communities to respond to the needs of more than 7 million people, including 6 million children who live in areas vulnerable to natural disasters and political tensions – including the Afar, Amhara, Gambella, Oromiya, Somali, Southern Nations, Nationalities and Peoples (SNNP) and Tigray regions. UNICEF continues to lead the WASH and nutrition clusters, the child protection sub-cluster and co-leads the education cluster. In addition, since February 2004, UNICEF has supported the Government's emergency nutrition coordination unit.

- Six million children will be healthier because they will receive a series of essential child survival interventions, including nutritional screening and referral (with management of severe acute malnutrition for 210,000 children), vitamin A supplementation and deworming.
- 600,000 pregnant and lactating women will receive nutritional screening, and those who are undernourished will be referred for supplementary feeding.
- Many rural and remote communities lack ready access to essential prevention and care. Mobile health teams will bring such services to 2 million people in Somali region, 90,000 people in Afar region and 302,000 people in the South Omo zone of the SNNP region.
- Whether too much rain or not enough, both put access to safe water for drinking, hygiene and sanitation at risk. UNICEF will help 480,000 people in drought- and flood-affected areas maintain access to safe water.
- UNICEF will ensure that 210,000 children in flood- and conflict-affected areas can attend child-friendly learning spaces, especially in the Afar, Amhara, Gambella, Oromiya, Somali, SNNP and Tigray regions.
- At-risk children are especially vulnerable during times of natural disaster or other upheaval. UNICEF will ensure that child protection structures and mechanisms are in place to prevent and respond to the situation of at least 15,000 out of an estimated 40,000 vulnerable children in the worst-affected regions of Gambella and Somali, including the provision of child-focused social welfare services; additionally, survivors of gender-based violence will be able to tap into a network of necessary services through a stronger referral system.

## FUNDING REQUIREMENTS FOR 2011

UNICEF is requesting US\$57,416,000 for Ethiopia. This is almost US\$11 million less than the 2010 request due to the improved harvest season of 2010 and integration of the emergency nutrition strategy (Enhanced Outreach Strategy) in non-food-insecure areas into regular nutrition programming. However, the precarious welfare of women and children in the chronically food-insecure regions of Ethiopia means that full funding is crucial.

**More information on achievements of 2010 and the humanitarian action planned for Ethiopia in 2011 can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011) or the country office website, [www.unicef.org/ethiopia](http://www.unicef.org/ethiopia).**

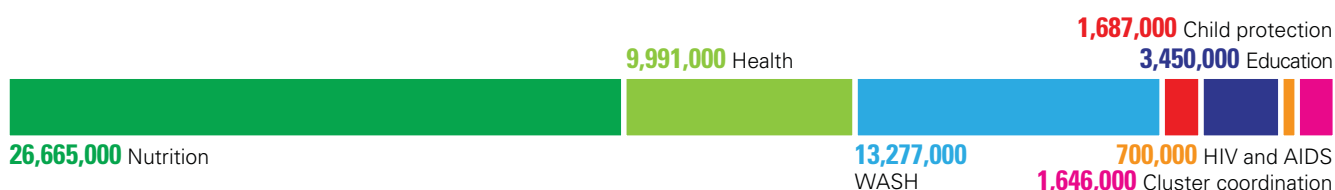
1. Ministry of Agriculture and Rural Development, Disaster Risk Management and Food Security Sector, 'Flood Response Plan', Federal Democratic Republic of Ethiopia, Addis Ababa, September 2010, p. 4.

## HUMANITARIAN FUNDING AT WORK: HIGHLIGHTS FROM 2010

According to the mid-2010 review, an estimated US\$68,660,000 was needed for UNICEF's humanitarian activities in Ethiopia. As of October 2010, a total of US\$22,973,851, or 33 per cent of the revised request, had been received. An additional US\$21,326,000 carried forward from 2009 was also programmed. One key achievement of 2010 was a 44 per cent increase over 2009 in the number of local health posts able to treat children with severe acute malnutrition on an outpatient basis. More than 760,000 people affected by floods used clean water made possible by household treatment chemicals and safe water receptacles or by providing water through delivery in tankers, and 67,000 children continued with their education in temporary learning spaces.

## UNICEF EMERGENCY NEEDS FOR 2011 (in US dollars)

Total **\$57,416,000**







# Kenya

## CHILDREN AND WOMEN IN CRISIS

While 2010 has seen some improvement in the humanitarian situation in Kenya, progress is tempered by the chronic vulnerabilities of emergency-affected populations. Despite recent good rainfalls, high food prices and the lingering impact of the 2007–2009 drought have mitigated recovery. More than 40,000 children are suffering from severe acute malnutrition<sup>1</sup> and weather patterns predicted for 2011 could introduce another period of drought. The current influx of Somali refugees, coupled with the potential for displaced populations from the Sudan, adds to concerns about refugee and host community welfare and the vulnerability of children and women.

## MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

UNICEF, together with the Government of Kenya, other UN agencies and NGOs, will focus on assisting the most vulnerable people in affected areas of the country. UNICEF co-lead the nutrition, education, child protection and WASH clusters along with the relevant government ministry.<sup>2</sup> UNICEF expects to reach 1.9 million people living in emergency conditions in 2011, including around 988,000 girls and 912,000 boys.

- Increased coverage of integrated high-impact nutrition interventions – including management of moderate and severe acute malnutrition, infant and young child feeding, and micronutrient supplementation – in health facilities and at the community level will benefit 250,000 children under 5 affected by moderate malnutrition, 40,000 children under 5 affected by severe acute malnutrition, and 55,000 pregnant and lactating women.
- Some 85 per cent of children under age 5 in selected districts will be vaccinated for measles. At least 1.12 million children and pregnant and lactating women will receive immunization, services to prevent mother-to-child transmission of HIV and obstetric care.
- Safe water and sanitation will be provided to 1.6 million disaster- and disease-affected people.
- About 15,000 primary-school children in Dadaab, a refugee camp hosting primarily Somali refugees, will have improved access to education. Awareness-raising among parents about the importance of early childhood development will lead to an additional 40,000 boys and girls accessing education; 100,000 children will be educated on disaster safety in a school environment.
- A child protection framework will be established in Dadaab, child-friendly spaces will continue to receive support, and up to 150,000 vulnerable children will be protected from separation from their families during times of emergency; separated children will be reunited with caregivers and provided with essential services.

## FUNDING REQUIREMENTS FOR 2011

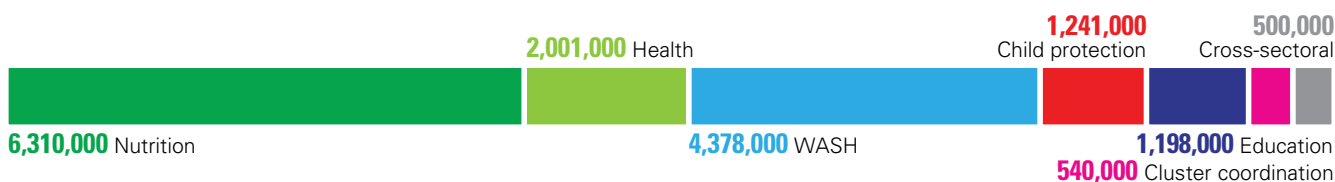
UNICEF is requesting US\$16,168,000 for its 2011 humanitarian work in Kenya. UNICEF has aligned its request with the 2011 Consolidated Appeals Process (CAP) requirements. This amount represents a decrease of almost US\$7 million compared to 2010 due to improvements in the food security situation; however, continued funding is required to support recovery and prevent deterioration.

**More information on achievements of 2010 and the humanitarian action planned for Kenya in 2011 can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011) or at the country office website, [www.unicef.org/kenya](http://www.unicef.org/kenya).**

1. Office of the United Nations Humanitarian Coordinator in Kenya, 'Kenya Humanitarian Update', vol. 65, United Nations, New York, 17 October–15 November 2010, p. 3.  
 2. UNICEF co-leads the nutrition cluster with the Ministry of Public Health and Sanitation of Kenya, education cluster with the Ministry of Education; the child protection cluster with the Ministry of Gender and Children's Affairs; and the WASH cluster with the Ministry of Water and Irrigation.

## UNICEF EMERGENCY NEEDS FOR 2011 (in US dollars)

Total **\$16,168,000**



# Madagascar

## CHILDREN AND WOMEN IN CRISIS

In Madagascar, extreme poverty, recurrent natural disasters, and a political crisis have created a potent recipe for crisis. The suspension of most external assistance to the country has resulted in reduced capacity of the government to respond to emergencies. Food insecurity has become a daily reality for many. In fact, unless food insecurity in the southern areas of Androy, Anosy and Atsimo Andrefana is addressed immediately, it is very likely that the nutritional status of 136,000 children-at-risk under age 5 will deteriorate – requiring an emergency intervention in the first three months of 2011.<sup>1</sup> This will be a crucial year for UNICEF in its efforts to improve the welfare of Madagascar's women and children.

## MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

UNICEF, together with partners including the Government of Madagascar, other UN agencies and non-governmental organizations, will focus on assisting the most vulnerable women and children in the drought-affected food-insecure southern region and areas prone to cyclone. One important aspect of UNICEF's assistance is the leadership of the education, nutrition, and WASH clusters, as well as the protection cluster. UNICEF expects to reach more than 1 million women of childbearing age and around 560,000 girls and 584,000 boys under 5 years old.

- To mitigate the effects of rising food insecurity in the south, UNICEF and its partners will treat nearly 91,000 children aged 6–59 months for severe acute malnutrition through a community management model.
- Children and women will have access to basic preventive and curative care for the diseases that affect them most through essential drugs and commodities provided to 150 health centres in emergency areas.
- Having access to clean water is challenging, yet essential, in an environment subject to drought, flooding and political uncertainty. A total of 1,520,000 vulnerable people across a range of contexts will have access to safe water and proper sanitation through household water purification products, adequate collection and storage containers, access to emergency water points and better latrines.
- To provide children with continuity in education, UNICEF together with cluster partners will construct an estimated 400 temporary learning spaces for 424,000 children whose lives have been disrupted by flooding and drought.
- To decrease violence and abuse of youth, and to empower young people in emergencies, UNICEF will reinforce child protection networks in the high-risk areas of Fenerive Est and Morondava.

## FUNDING REQUIREMENTS FOR 2011

UNICEF is requesting US\$19.2 million for its 2011 humanitarian work in Madagascar, a 40 per cent increase over the 2010 request. In the context of crisis in Madagascar, the reduction of financial resources allocated for the health sector has prompted a significant increase in the request for funds for health-related work – funding necessary to stave off a massive crisis in health services that millions of people depend on. Without funding for key humanitarian activities, the well-being of women and children in Madagascar will be jeopardized to the point of requiring additional emergency intervention.

**More information on details about achievements of 2010 and the humanitarian action planned for Madagascar in 2011 can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011).**

1. World Food Programme, 'Prognostic definitif 2010' [Final assessment 2010], Powerpoint.

## UNICEF EMERGENCY NEEDS FOR 2011 (in US dollars)

Total **\$19,200,000**



## HUMANITARIAN FUNDING AT WORK: HIGHLIGHTS FROM 2010

According to the mid-2010 revised request, UNICEF estimated that US\$11,113,565 was needed to fund its humanitarian work in Madagascar. As of October 2010, a total of US\$331,565 – 3 per cent – had been received. Donor funding, complemented by the use of pre-positioned stocks and regular resources, helped UNICEF achieve the following results: More than 1.4 million people were able to stay healthier with the essential medicines given to 145 health centres. About 48,000 children aged 6–59 months were screened to diagnose severe acute malnutrition at least twice during the year. In the southern region of the country, 8,000 children were diagnosed and treated, and among them, 1,506 were referred to a district hospital. Safe water, so important for preventing disease, became a reality for 50,000 people when 170 water points were disinfected. Children whose lives were thrown into turmoil by Cyclone Hubert were able to start learning again when 84 damaged classrooms in 69 schools were repaired.



# Somalia

## CHILDREN AND WOMEN IN CRISIS

Somalia has endured a complex socio-political environment for 20 years, alongside extreme poverty, food insecurity, conflict and instability. Despite a 25 per cent drop since 2009 in the number of people in need of humanitarian assistance (largely as a result of above-average 2010 rains), an estimated 2 million people – a staggering 27 per cent of the entire population – continue to require humanitarian assistance.<sup>1</sup> Only 29 per cent have access to clean water.<sup>2</sup> Somali women and children caught up in the country's reduced circumstances are at increased risk of disease and undernutrition, routinely experience violations of their human rights and face limited access to essentials for a healthy life: health care, education, adequate food and safe drinking water.

## MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

UNICEF is the largest service provider in key sectors in Somalia and leads three clusters: nutrition; education; and WASH; and also leads the child protection sub-cluster. UNICEF will continue to work with the Government, UN agencies and non-governmental partners in 2011 to meet the pressing needs of children and women who are among the 2 million people displaced or otherwise affected by conflict.

- At least 54,600 children with severe acute malnutrition and 22,000 acutely malnourished pregnant and lactating women will receive treatment.
- 250 maternal and child-health clinics – reaching 2.5 million women and children – will have sufficient essential drugs, vaccines, basic equipment and training as well as stronger outreach health services for life-saving interventions.
- Around 274,000 adults and 224,000 children will have access to safe water through rehabilitation and construction of water supplies.
- 60,000 girls and boys will have the opportunity to play and learn with textbooks in 200 schools or temporary learning centres set up to mitigate the psychosocial effects of conflict. Worn tents that serve as temporary learning centres will be transformed into traditionally constructed classrooms with mud walls and iron-sheeting roofs.
- At least 200 vulnerable communities in the South Central Zone (with an estimated child population of 180,000) and displaced communities in the north of the country will be mobilized to prevent abuse and address child protection in emergencies.

## FUNDING REQUIREMENTS FOR 2011

To make significant strides in stabilizing the welfare of women and children in Somalia, particularly their nutritional and health status, access to safe water, and education and protection, UNICEF is requesting US\$60,698,000 to carry out its planned activities. UNICEF has aligned its request with the 2011 Consolidated Appeals Process (CAP) requirements.

**More information on achievements of 2010 and the humanitarian action planned for Somalia in 2011 can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011) or on the country office website at [www.unicef.org/somalia](http://www.unicef.org/somalia).**

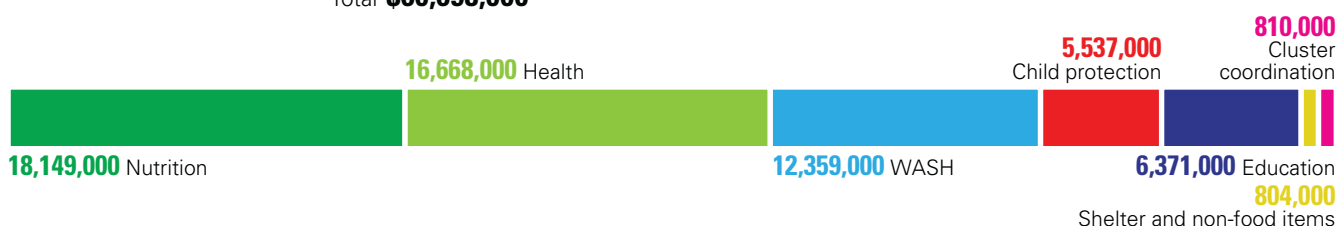
## HUMANITARIAN FUNDING AT WORK: HIGHLIGHTS FROM 2010

In 2010, UNICEF estimated that US\$66,020,900 was needed to fund its humanitarian work in Somalia. As of October 2010, a total of US\$36,509,777 had been received, or 55 per cent of the 2010 request. In 2010 and despite the challenging context, UNICEF worked with partners to deliver a coordinated humanitarian response, to alleviate suffering and save lives. Funding enabled UNICEF to achieve a number of results, including the following: 1.5 million children under 5 years old and 1.3 million women of childbearing age received an essential package of life-saving health and nutrition services; 1.2 million people in emergency-affected areas were given access to safe water; more than 92,000 emergency-affected or displaced children were enrolled in school.

1. Food Security and Nutrition Analysis Unit-Somalia, 'Food Security Post Gu 2010', FSNAU, Nairobi, 27 September 2010, <[www.fsnau.org/in-focus/food-security-post-gu-2010](http://www.fsnau.org/in-focus/food-security-post-gu-2010)>, accessed 15 November 2010.  
 2. Multiple Indicator Cluster Survey, 2006.

## UNICEF EMERGENCY NEEDS FOR 2011 (in US dollars)

Total **\$60,698,000**







# Uganda

## CHILDREN AND WOMEN IN CRISIS

Uganda is in the midst of an extensive recovery from a deep humanitarian crisis that affected the entire northern region. At the same time, recovery may also be affected by the Ugandan presidential elections and the referendum in Sudan in early 2011, which draft estimates say may cause an additional 100,000 new refugees to seek shelter in Uganda. There are currently still over 112,000<sup>1</sup> displaced persons in northern Uganda, including 28,000 children. Additionally, climate change is expected to produce increasingly erratic rainfall, resulting in floods and landslides and exacerbating the effects of cyclic drought. Although severe acute malnutrition and global acute malnutrition are below emergency levels, undernutrition is persistent in the north and north-eastern regions and sanitation coverage in some districts is significantly below the national average.

## MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

Following the handover of cluster coordination responsibilities in 2010, UNICEF's work in Uganda in 2011 will include ensuring continued coordination of cluster activities through the delegated agencies responsible for managing humanitarian response. UNICEF expects to partner closely with the Government of Uganda, other UN agencies and a host of non-governmental organizations to meet the humanitarian needs of around 732,000 people, including approximately 183,000 children.

- UNICEF will equip and train staff in 115 health facilities to identify and manage treatment of 13,000 children with severe acute malnutrition.
- Preventive and curative health services will be provided for children under age 5 and pregnant women in camps for internally displaced persons, areas of return and emergency-affected regions.
- UNICEF will support scale-up and implementation of community case management and commodity security for essential drugs so that women and children included in the 732,000 targeted caseload for 2011 are more resilient to potential emergencies. Nearly 4 million people are at risk of meningitis in Uganda, and UNICEF will help carry out national vaccination campaigns.
- 232,000 people in areas affected by drought or flooding, places experiencing outbreaks of waterborne diseases, or remaining vulnerable people in former internally displaced person camps will benefit from improved access to safe water and sanitation.
- Around 780,000 students, 50 per cent boys and 50 per cent girls, in the north and north-eastern regions and in new refugee communities will have better access to safe learning environments crucial to education and well-being.
- UNICEF will help protect and reintegrate more than 250,000 children who have returned from northern Uganda's internally displaced community to areas of origin. UNICEF will help these children access existing social services and will respond to any violence against them.
- Potential fallout from the referendum in neighbouring Sudan is part of UNICEF's multi-hazard preparedness plan, based on figures developed as part of the organization's regional planning approach.
- UNICEF's efforts to build the capacity of national partners to prepare for and respond to various types of emergencies will also remain an important focus.

## FUNDING REQUIREMENTS FOR 2011

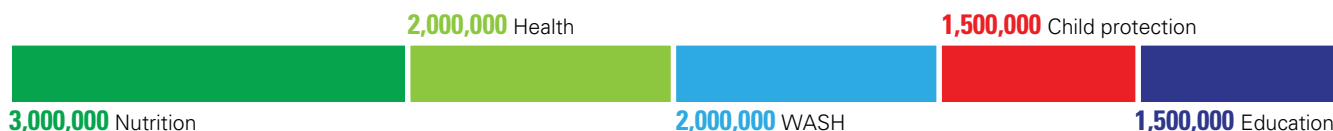
In the context of reduced humanitarian focus and increased recovery programming, UNICEF is requesting US\$10 million for its 2011 humanitarian work in Uganda, less than half of what was requested for 2010. Full funding will enable the organization to maximize its positive impact on the lives of children and their families at a crucial moment in Uganda's history.

**More information on achievements of 2010 and the humanitarian action planned for Uganda in 2011 can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011).**

1. United Nations High Commissioner for Refugees, 'UNHCR Operation in Uganda: Fact Sheet', UNHCR, Kampala, 19 November 2010, p. 1.

### UNICEF EMERGENCY NEEDS FOR 2011 (in US dollars)

Total **\$10,000,000**



## HUMANITARIAN FUNDING AT WORK: HIGHLIGHTS FROM 2010

In 2010, UNICEF estimated that US\$27,096,711 was required to fund its humanitarian work in Uganda. As of end-October, only US\$4,919,350 – 18 per cent – had been received. This limited the scope of UNICEF's emergency activities, but significant results were achieved nonetheless. Nearly 12,000 children with severe acute malnutrition in the north and north-eastern regions received treatment. In the aftermath of landslides in eastern Uganda, UNICEF helped survivors gain access to water, sanitation and hygiene, and provided learning and other safe spaces for children. In the wake of cholera and hepatitis E outbreaks in the Karamoja region, UNICEF supported WASH-related interventions and helped communities mobilize to prevent disease from spreading. UNICEF also was able to build the protection and emergency response capacities of District Disaster Management Committees in the north and north-eastern regions by providing training in preparedness and response.



# Zimbabwe

## CHILDREN AND WOMEN IN CRISIS

The children and women of Zimbabwe are under threat. The crises affecting them are multiple and complex: political and economic instability, abject poverty, the deterioration of the social service sector, an HIV epidemic that has raged across the country, erratic rains, and food insecurity. Only 10 per cent of children in the country eat a nutritious diet, exclusive breastfeeding is only 6 per cent, and as a result, undernutrition affects 34 per cent of children 6–59 months old.<sup>1</sup> Diminished water and sanitation access, particularly in rural areas, means that 33 per cent of all Zimbabweans must practise open defecation.<sup>2</sup> Social and education limitations perpetuate violence, exploitation and the trafficking of children. Assistance is hampered by systemic vulnerability, the country's reduced resources and its lack of child protection mechanisms.

## MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

UNICEF, working with the Government of Zimbabwe, UN agencies and civil society partners will continue to meet the needs of children and women in 2011 through humanitarian relief, recovery programming and transitional activities designed to strengthen essential social services. UNICEF, as the co-lead of the nutrition cluster with the Government, co-lead of the WASH cluster with OXFAM, and co-lead with education cluster with Save the Children and the Government, expects to reach around 6,612,000 people, particularly mothers and newborns, orphans and other vulnerable children, child migrants, and those affected by HIV and AIDS.

- Up to 1 million people, including 100,000 pregnant women and their children, will benefit from integrated paediatric HIV and AIDS services within maternal health, immunization and nutrition programmes.
- More than 17,000 children, about 70 per cent of those in need, will be treated for severe acute malnutrition.
- Safe water in sufficient quantities will become reality for 4 million people through the distribution of essential water treatment chemicals in 20 urban locations and the construction of boreholes and rehabilitation of wells in the neediest urban centres and rural areas.
- To support the recovery of the education system, so crucial to children's well-being and the foundation of a stable society, UNICEF will target 2.8 million students, 10,000 out-of-school youth, 15,000 unqualified teachers and 1,000 schools, providing them learning materials, alternative education programmes, emergency in-service teacher education upgrading and school WASH. Additionally, a national network of civil society organizations will be launched to improve disaster risk reduction.
- The protection and well-being of 25,000 boys and girls who have survived violence will be enhanced through work to ensure their access to essential legal, care and support services.

## FUNDING REQUIREMENTS FOR 2011

UNICEF is requesting US\$119,973,000 for its 2011 humanitarian work in Zimbabwe. UNICEF has aligned its request with the 2011 Consolidated Appeals Process (CAP) requirements. Any delay in funding puts the well-being of vulnerable women and children at risk during a crucial time in Zimbabwe's transition out of complex crisis into political and economic recovery.

**More information on 2010 results and humanitarian action planned in 2011 can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011) or the country office website at [www.unicef.org/zimbabwe](http://www.unicef.org/zimbabwe).**

1. Food and Nutrition Council, 'Zimbabwe National Nutrition Survey – 2010: Preliminary findings', Ministry of Health and Child Welfare, Harare, 2010, pp. 31, 47, 18.
2. Central Statistical Office, Zimbabwe, and United Nations Children's Fund, 'Multiple Indicator Monitoring Survey (MIMS) 2009: Preliminary report', CSO and UNICEF, Harare, November 2009, p. 19.

## UNICEF EMERGENCY NEEDS FOR 2011 (in US dollars)

Total **\$119,973,000**



## HUMANITARIAN FUNDING AT WORK: HIGHLIGHTS FROM 2010

UNICEF estimated that US\$108,700,000 was needed to fund its humanitarian work in Zimbabwe, according to the mid-2010 revised request. As of October 2010, a total of US\$19,819,156 had been received, or 18 per cent of the 2010 request. This funding enabled UNICEF to achieve key results for women and children, among them: 375,000 mothers and newborns benefited from essential supplies for emergency obstetric care and rapid HIV testing; 13,200 children with severe acute malnutrition were treated, partly in 229 new treatment sites; the scourge of cholera was put at bay when 211,000 people in areas at high risk for cholera gained access to safe water; 2.8 million primary school children saw the quality of their education improve because of better teaching and learning materials.





2011 UNICEF HUMANITARIAN ACTION FOR CHILDREN

# Middle East and North Africa

**Djibouti • Iraq, Egypt, Jordan, Lebanon and the  
Syrian Arab Republic • Occupied Palestinian Territory •  
Sudan • Yemen**



## HUMANITARIAN FUNDING AT WORK: HIGHLIGHTS FROM 2010

In 2010, UNICEF estimated that US\$5 million was required for humanitarian activities in the Middle East and North Africa, including US\$4 million for drought relief in Djibouti. As of October 2010, a total of US\$3,321,603, or 66 per cent of the goal, had been received. In Djibouti, UNICEF was able to assist a large number of children in need of nutritional support, repair drinking-water sources and increase availability of hygiene supplies (see Djibouti chapter). During conflict-related crises in Iraq, the Occupied Palestinian Territory, the Sudan and Yemen, the regional office dispatched emergency and technical support staff. In addition, UNICEF strengthened partnerships at the regional and global levels by working closely with the inter-agency regional emergency network on preparedness and response. Efforts to improve overall disaster preparedness moved forward when the regional team drafted a disaster risk reduction strategy focusing on education and WASH.

# Middle East and North Africa

## CHILDREN AND WOMEN IN CRISIS

The Middle East and North Africa region is marked by long-term political instability in Iraq, the Occupied Palestinian Territory, the Sudan and Yemen. The number of internally displaced people in the region is estimated in the millions, and many women and children lack access to essential services and protection systems. Natural disasters are also a growing concern as climate change, combined with increases in rapid urbanization, resource depletion and the degradation of the environment is resulting in more frequent disasters. During the past 19 years, approximately 100 million people in the region have felt the impact of these hazards, resulting in damage of around US\$39 billion,<sup>1</sup> further challenging the economic stability of millions of vulnerable people.

## MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

A primary goal for UNICEF in the Middle East and North Africa region in 2011 is strengthening disaster preparedness by helping country offices through technical assistance and resource mobilization. The regional office will continue to provide technical assistance to countries using the inter-agency cluster coordination mechanism to meet UNICEF's commitments as cluster lead in the areas of WASH; nutrition; education; and child protection.

- Emergencies in the region are becoming more complex and require increasingly targeted yet nuanced advocacy. In 2011, the regional team will continue to strengthen ties to government partners and to advocate for awareness of sensitive issues and the effects of emergencies on children.
- UNICEF will establish a subregional standby capacity, likely to be located in Jordan and easily accessible by road, to cover the immediate emergency supply needs of 50,000 people in Iraq, Jordan, Lebanon, the Occupied Palestinian Territory and the Syrian Arab Republic.
- The regional office will provide technical support to ensure that at least 80 per cent of UNICEF country offices in the region have active and operational emergency preparedness and response plans.
- In anticipation of a potential humanitarian crisis in the Sudan, country offices will continue to receive support in preparedness planning, including preparation for an enhanced regional response for children and women within and outside the Sudan.
- Disaster risk reduction practices will be integrated into regional and national education policies and plans. Strategies to achieve greater safety and resilience at the local level will be taught in schools and through public awareness campaigns.
- The regional office will provide support to the Algeria Country Office in its efforts to address the vulnerabilities of Sahrawi refugees living in Tindouf.

1. The WHO Collaborating Centre for Research on the Epidemiology of Disasters (CRED) emergency events database (EM-DAT).





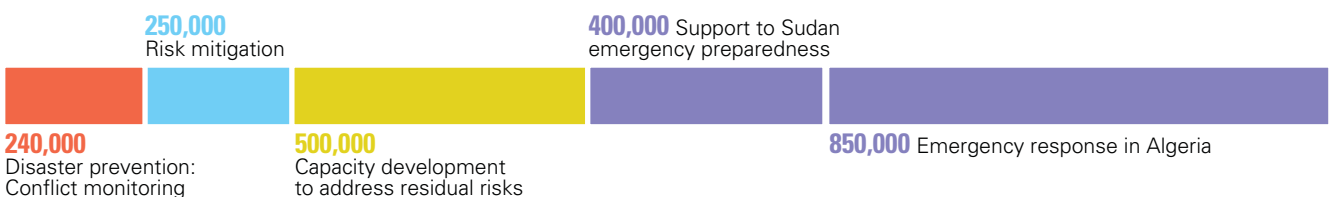
### FUNDING REQUIREMENTS FOR 2011

UNICEF is requesting US\$2,240,000 to continue its work on pre-empting risks to the women and children of the Middle East and North Africa region. The organization will also work to strengthen both regional and in-country capacity to prevent, prepare for and respond to crises affecting children, with a focus on Djibouti, Iraq, the Occupied Palestinian Territory, the Sudan and Yemen. Funding for Djibouti drought relief, which last year was included in the request for this region, is now covered in a separate *Humanitarian Action for Children* request.

Further details on achievements of 2010 and UNICEF's humanitarian action planned for the Middle East and North Africa in 2011 can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011).

### UNICEF EMERGENCY NEEDS FOR 2011 (in US dollars)

Total **\$2,240,000**





# Djibouti

## CHILDREN AND WOMEN IN CRISIS

Food and water, intimately interlinked, cannot be taken for granted in Djibouti. Rainfall since September 2007 has been less than half the normal average<sup>1</sup> and the drought has tested the population's ability to adequately feed itself. As the country's children and women face parched earth and extreme undernutrition, an influx of refugees from conflict in neighbouring Somalia further stretches resources and government capacity. In Djibouti, 120,000 people – 15 per cent of the population – are already experiencing a crushing lack of food, health care, nutrition support, drinking water and sanitation facilities. The number of asylum seekers in Djibouti increased by 20 per cent over the last year, to some 14,500 by late 2010.<sup>2</sup>

## MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

UNICEF, together with the Government of Djibouti, NGOs and partners, will help improve the well-being of 120,000 people affected by drought and other hardships, including 5,000 women and 25,000 girls and 29,000 boys, in the following ways:

- Management of undernutrition will be strengthened within 40 health centres with the scaling up of a community-based approach, and blanket feeding will be implemented in 10 health centres.
- Nearly 25,000 children aged 6–59 months will stay healthier after receiving essential vaccines and immunizations, and 15,000 children will receive deworming tablets.
- 30 clean water sources will be rehabilitated and expanded. Hygiene promotion campaigns will help people in the northern and western regions adopt healthier practices.
- 10,000 orphans and vulnerable children will receive social service packages (access to school, conditional cash transfers for food consumption and vocational training for school dropouts); additionally, a drop-in centre will cater to the needs of 500 street children.
- Around 42,000 adolescents will be able to better protect themselves from HIV by using essential information provided through community mobilization, capacity building and communication for development.

## FUNDING REQUIREMENTS FOR 2011

In 2010, the UN system in Djibouti launched a US\$39 million Drought Appeal, covering the period from October 2010 to October 2011. This Appeal includes nearly US\$4.8 million for nutrition and water, sanitation and hygiene interventions carried out by UNICEF.<sup>3</sup> In line with this, UNICEF is requesting US\$4,255,000 for its 2011 humanitarian work in Djibouti to respond to the increasing needs of the population affected by persistent drought, food insecurity and conflicts in neighbouring countries. Without funding for the key activities described above, the shortfall of food, water and safe housing will continue to threaten the welfare of Djibouti's children and women.

**More information on achievements of 2010 and the humanitarian action planned for Djibouti in 2011 can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011) or on the country office website at [www.unicef.org/djibouti](http://www.unicef.org/djibouti).**

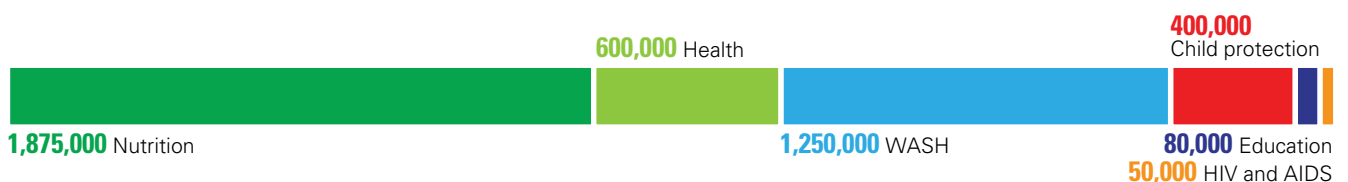
1. United Nations, 'Djibouti Drought Appeal', Office for the Coordination of Humanitarian Affairs, New York and Geneva, 2010, p. 1.
2. Ibid.
3. United Nations, 'Djibouti Drought Appeal', Office for the Coordination of Humanitarian Affairs, New York and Geneva, 2010, p. 4.

## HUMANITARIAN FUNDING AT WORK: HIGHLIGHTS FROM 2010

By late 2010, UNICEF had made significant achievements in nutrition, health, sanitation and hygiene, as well as improvements in education and the welfare of children. Some 70 per cent of children who suffer from severe acute malnutrition were enrolled into the country's 20 therapeutic feeding centres and 30 community therapeutic centres. About 75 per cent of families in affected areas benefited from rehabilitated drinking-water sources and increased hygiene supplies. Social services helped protect and support 700 vulnerable and orphaned children, all of whom received clothing. Out of the 700, only 461 children go to school; they received school kits and have access to tutoring. Forty-seven benefit from vocational training. And 195 children living on the streets gained access to a safe, child-friendly environment with adequate sanitation.

## UNICEF EMERGENCY NEEDS FOR 2011 (in US dollars)

Total **\$4,255,000**





# Iraq and vulnerable Iraqis in Egypt, Jordan, Lebanon and the Syrian Arab Republic

## CHILDREN AND WOMEN IN CRISIS

Unremitting violence not only sets the backdrop of daily life in much of Iraq, it has also weakened governance and crippled the ability of the country to feed, protect and educate its citizenry. Political and economic turmoil has led to the great vulnerability of women and children, who are threatened by poverty, undernutrition, lack of safe water and sanitation, insufficient educational resources and the prospect of personal violence and abuse. Iraqis must contend with threats of drought, decimated infrastructure and a large population of refugees and internally displaced people. The number of displaced Iraqis is counted in the millions, with a large number of Iraqis seeking refuge in neighbouring countries and over a million displaced inside the country since the height of 2006 violence. Return of people to their homes is thwarted by continuing fears and insecurity. Vulnerable Iraqi women and children – whether in Iraq, Egypt, Jordan, Lebanon or the Syrian Arab Republic – require sustained, intense assistance to assure basic living standards and fundamental protection in a context of war, violence and political discord.

## HUMANITARIAN FUNDING AT WORK: HIGHLIGHTS FROM 2010

In 2010, UNICEF estimated that US\$49,857,545 was needed to fund its humanitarian work in Iraq and neighbouring countries. As of October 2010, a total of US\$7,220,298 had been received for Iraq and a total of US\$10,158,315 for the regional response to vulnerable Iraqis living in Egypt, Jordan, Lebanon and the Syrian Arab Republic. Despite the shortfall in funding, UNICEF provided 7 metric tons of F100 and F75 therapeutic milk for the recovery of over 2,000 undernourished children in Iraq. In Anbar, Basrah, Missan and Thiqr Provinces, 43,000 children under 5 and 17,000 pregnant women gained better access to primary health care. Improved access to safe water and sanitation was provided to over 1 million people in 48 communities. Some 286,700 students (38 per cent of them girls) and 17,390 teachers (44 per cent women) were directly supported through emergency education interventions. UNICEF also trained 750 teachers and 7,500 children on risks and prevention of abuse.

## MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

UNICEF has multiple cluster responsibilities in Iraq as lead of the education and WASH clusters, deputy lead of the health and nutrition cluster with the World Health Organization, and deputy of the protection cluster with UNHCR. In 2011, UNICEF will continue to work with the Governments of Iraq, Egypt, Jordan, Lebanon and the Syrian Arab Republic, other UN agencies and NGOs in addressing the needs of 3.5 million vulnerable Iraqis.

- In Iraq, some 140,000 children and women will receive essential vitamins, nutrients and nutritional interventions to combat undernutrition. Children under age 5 will be a special focus in the 26 priority districts, including those in the Marshlands and drought-affected areas.
- In Iraq, training of medical personnel and expanding access to public health centres will give 50,000 children and women better access to primary health care. Repair and expansion of three maternity wards will improve the chances for safe childbirth.
- In Iraq, safe drinking water and improved sanitation will be provided to over 200,000 people in vulnerable communities in the 26 priority districts.
- Educational support will benefit 300,000 children and youths in Iraq through creation or rehabilitation of learning facilities, and via second-chance learning for children who were deprived of basic education as a result of conflict.
- Services in Iraq for preventing, monitoring, reporting on and responding to child protection violations during emergencies will be strengthened. In Egypt, Jordan, Lebanon and the Syrian Arab Republic, UNICEF will continue to provide for recreational activities, outreach interventions for the most marginalized and psychological support of Iraqi refugee children as well as building capacity of service providers to meet the basic social needs of Iraqi refugee children. About 100,000 people in Iraq will be reached with awareness-raising initiatives on HIV and AIDS and prevention of mother-to-child transmission.

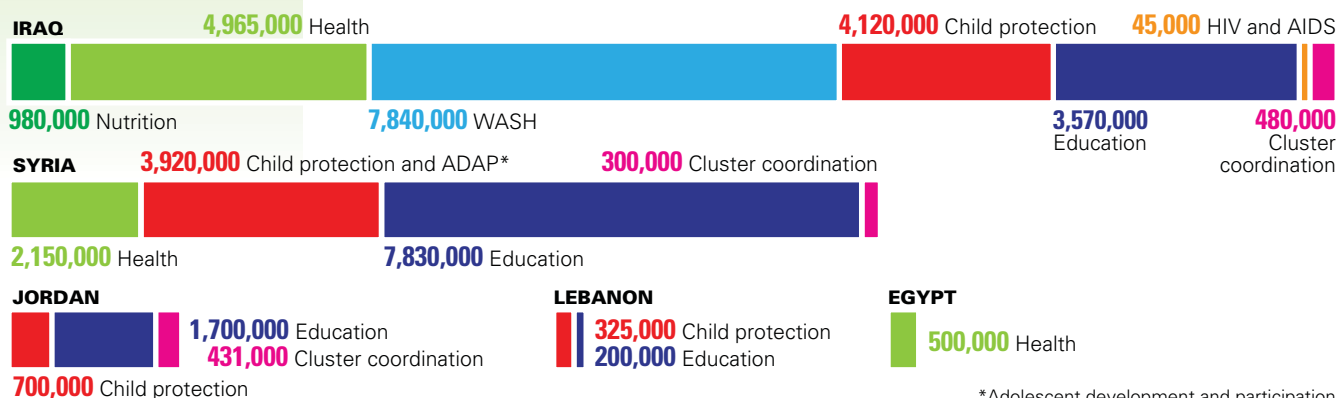
## FUNDING REQUIREMENTS FOR 2011

UNICEF is requesting a total of US\$40,056,000 for its work assisting vulnerable Iraqis: US\$22,000,000 to carry out its planned activities in Iraq, US\$14,200,000 to assist vulnerable Iraqi women and children in the Syrian Arab Republic, US\$2,831,000 for those living in Jordan, US\$525,000 in Lebanon and US\$500,000 in Egypt. This request is in line with the UNHCR-led Regional Response Plan for Iraqi Refugees.

More information regarding results from 2010 and humanitarian action plans to benefit Iraqis in 2011 can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011).

## UNICEF EMERGENCY NEEDS FOR 2011 (in US dollars)

Total **\$40,056,000**



\*Adolescent development and participation



# Occupied Palestinian Territory

## CHILDREN AND WOMEN IN CRISIS

Successive waves of violence caused by prolonged Israeli military occupation have chipped away at the living conditions in the Occupied Palestinian Territory, leading to psychological damage, poverty and lack of such essentials as health services, safe drinking water, sanitation and education. As the Israeli blockade of Gaza enters its fourth year, serious humanitarian consequences continue for the 1.5 million people – at least half of them children – who live there. In the West Bank, the intrusive barrier, which when complete will be over 700 kilometres long, restricts access to land, water and education for thousands of children, while restrictions on movement affect the total population of 2.4 million. Distressing effects of settler violence and forced displacements are manifest among Palestinians, particularly children.

## MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

UNICEF leads the WASH and education clusters, the child protection sub-cluster and the Monitoring and Reporting Working Group on grave violations against children in Israel and Occupied Palestinian Territory. The organization also contributes to the health, food security and nutrition clusters. Together with the government, other UN agencies and NGOs, UNICEF plans to use funds gathered for 2011 to improve the prospects of 1.5 million women and children.

- 311,000 mothers will be reached through counselling and awareness-raising on exclusive breastfeeding and adequate micronutrient supplementation in order to reduce nutritional deficiencies among infants and pregnant women.
- Hospitals and primary health-care centres will be provided with life-saving medical equipment, and families will benefit from early interventions and improved knowledge on caring for infants in crisis. This will help provide better care for around 50,000 high-risk newborns.
- 207,000 people (including 144,000 children) will have access to safe water and sanitation through five newly installed desalination plants and through emergency repairs of water and sewage networks. UNICEF will distribute water to 80 primary schools and rehabilitate WASH facilities in 55 schools.
- 210,000 children will have improved access to basic education when UNICEF facilitates transportation, supplies and learning material for affected schools, and gives support to remedial and recreational programmes. Access to alternative learning opportunities will be provided to 13,500 children aged 10–18, who are at risk of dropping out.
- To mitigate the impact of violence and armed conflict on children, 310,000 children and 20,500 older children aged 10–18 will receive child protection and psychosocial support, and 95,000 caregivers and volunteers will be mobilized in child protection networks.

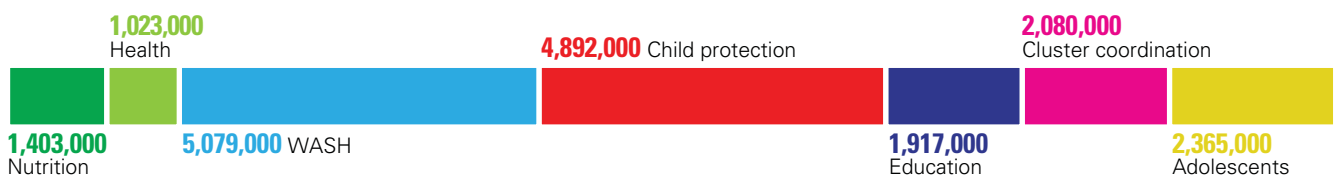
## FUNDING REQUIREMENTS FOR 2011

UNICEF is requesting US\$18,759,000 for its 2011 humanitarian work to achieve the objectives stated above. UNICEF has aligned its request with the 2011 Consolidated Appeals Process (CAP) requirements, with additional monies requested in the health sector to cover pressing needs.

More information on 2010 results and humanitarian action planned in 2011 can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011) or the country office website at [www.unicef.org/oPt](http://www.unicef.org/oPt).

## UNICEF EMERGENCY NEEDS FOR 2011 (in US dollars)

Total **\$18,759,000**



## HUMANITARIAN FUNDING AT WORK: HIGHLIGHTS FROM 2010

In 2010, UNICEF estimated that US\$24,247,910 was needed to fund its humanitarian work in the Occupied Palestinian Territory. As of October 2010, a total of US\$9,794,657 had been received, or 40 per cent of the goal. UNICEF used these funds to improve access to safe water and sanitation for roughly 131,000 people, including 101,000 children. Protection and psychosocial services helped strengthen coping skills of more than 70,000 children and 36,000 caregivers in Gaza; group and individual counselling benefited an additional 5,000 children and 1,800 caregivers. To address health concerns, including micronutrient deficits, UNICEF helped educate 7,500 mothers in infant feeding practices and provided emergency polio vaccines to 42,000 children. Catch-up school sessions have benefited around 19,000 children whose education has been disrupted or stalled, and around 35,000 adolescents participated in after-school learning and recreational activities.





# Sudan

## CHILDREN AND WOMEN IN CRISIS

The Sudan is home to more internally displaced persons than any other country in the world, with nearly 4.3 million people displaced after many years of conflict.<sup>1</sup> Flooding, undernutrition, lack of sanitation and health care and inadequate education as well as direct threats from violent conflict continue to be the reality for many Sudanese. The spectre of secession by Southern Sudan via a referendum in January 2011 raises concerns about the potential for additional acute needs and may further complicate delivery of humanitarian assistance. The unstable political atmosphere and insecurity permeating the country already hamper humanitarian relief, as do administrative hurdles, making many at-risk populations hard to reach – or entirely inaccessible.

## MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

In 2011, as the cluster lead agency for nutrition and WASH and sub-cluster lead for child protection, UNICEF will continue to work with the Government of the Sudan, other UN agencies, and local and international NGOs as well as host communities in addressing the needs of more than 12 million children and about 4 million women.

- Health care and nutritional relief will be provided for 16.5 million people in Northern Sudan; in Southern Sudan, 3.2 million children under 5 years old and 2 million women of childbearing age will have increased access to basic health services.
- The WASH goal for 2011 will be reducing childhood morbidity and mortality due to WASH-related illnesses; 327,000 people in Southern Sudan will receive water, sanitation and hygiene services.
- Children whose lives have been destabilized by emergency conditions will receive protection services including family tracing and reunification. Temporary care and psychosocial support will be provided for the children and their families/communities.
- Among other child protection efforts, UNICEF will support the release, reunification and rehabilitation of 2,200 children formerly associated with armed groups.
- UNICEF's Emergency Education Project will benefit more than 350,000 children and 6,400 teachers in Northern Sudan and assist 1.3 million emergency-affected children in Southern Sudan. The spread of HIV will be curbed among a population of 17 million people across 10 states in Northern Sudan through HIV preventive education, counselling and testing as well as the prevention of mother-to-child transmission through antiretroviral prophylaxis.

## FUNDING REQUIREMENTS FOR 2011

UNICEF is requesting US\$162,481,000 to carry out its planned activities in the Sudan. This request is in line with UNICEF requirements in the upcoming '2011 United Nations & Partners Work Plan for Sudan'. Immediate and full funding is needed to prevent further deterioration of the welfare of women and children in the Sudan.

More information on 2010 achievements and details of humanitarian action planned for the Sudan in 2011 can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011) or at the country office website, [www.unicef.org/sudan](http://www.unicef.org/sudan).

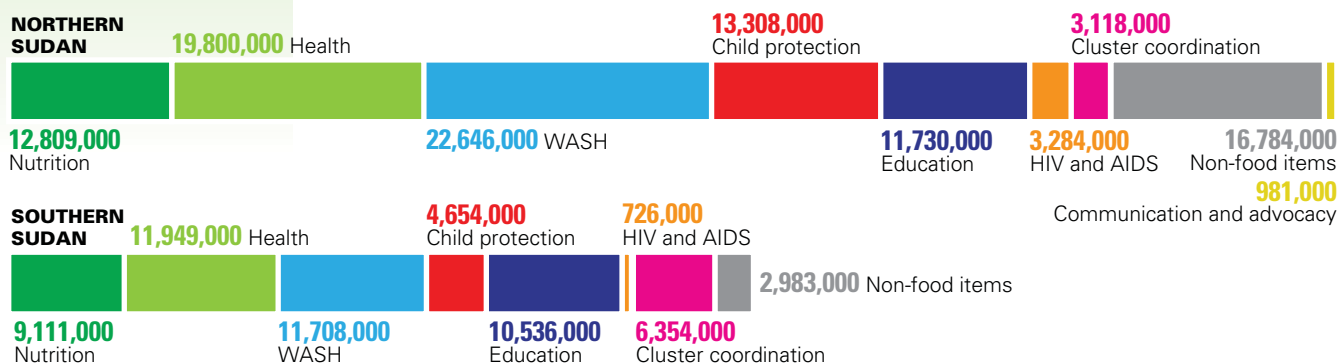
1. United Nations High Commissioner for Refugees, 'UNHCR Global Appeal 2011 Update', UNHCR, Geneva, 1 December 2010, p. 52.

## HUMANITARIAN FUNDING AT WORK: HIGHLIGHTS FROM 2010

In 2010, UNICEF estimated that US\$172,025,003 was needed to fund its humanitarian work in the Sudan. As of October 2010, a total of US\$66,805,039 had been received, or 39 per cent of the goal. Funding helped UNICEF assist millions of children and women in the following ways. More than 9 million children received vitamin A supplementation, over 6 million received deworming medication, and some 63,000 children were treated in therapeutic feeding centres. Chlorinated water was supplied to 3.2 million people and more than 450,000 had improved access to safe water and sanitation. In Northern Sudan, 306,600 children received access to basic education, and 1.6 million children and 23,000 teachers in Southern Sudan benefited from essential learning kits and teaching materials. In Darfur and other areas of Northern Sudan, emergency packages, non-food and shelter items were provided to 172,400 newly displaced and disaster-affected people; 1.25 million displaced persons were given packages with jerry cans and plastic sheets for the rainy season.

## UNICEF EMERGENCY NEEDS FOR 2011 (in US dollars)

Total **\$162,481,000**





# Yemen

## CHILDREN AND WOMEN IN CRISIS

The lives of Yemen's children and women are being severely circumscribed by a complex mix of acute emergencies and chronic underdevelopment: insecurity in the Sa'ada Governorate in the north; strife in the south; displacement resulting from both; lack of food and water; significant numbers of migrants and refugees;<sup>1</sup> poor status of women; and flooding. At the same time, there is minimal access to services to mitigate these conditions, such as health care, potable water and sanitation, education and protection, and minimal humanitarian space for outside actors to address immediate needs. Hundreds of thousands of displaced persons, 70 per cent of them women and children,<sup>2</sup> require assistance. The communities hosting them require support. The protracted nature of the emergency environment in Yemen has severely tested the coping mechanisms of all who are affected.

## MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

In 2011, UNICEF will continue to work with the Government of Yemen, other UN agencies, local and international NGOs as well as host communities in addressing the needs of nearly 1.2 million women and children affected by conflict, including those displaced in the northern and southern governorates and those affected by other potential emergencies. The organization leads the WASH, nutrition and education clusters in Yemen, as well as the child protection sub-cluster.

- Children living in displaced settlements are more vulnerable to undernutrition. Some 80,000 children with severe acute malnutrition will receive life-saving treatment.
- Access to better health-care services can decrease child deaths and illness. To that end, at least 60,000 children under age 5 in Sa'ada will benefit from a full set of vaccinations.
- Safe water contributes to individual and community health. At least 120,000 vulnerable people will benefit from one or more of the humanitarian WASH components: access to safe water, sanitation and hygiene promotion. For example, 8,000 children will benefit from improved WASH facilities at 20 schools in Sa'ada and Hajjah.
- Around 200,000 children affected by instability throughout the country will be able to count on a return to some form of normalcy as they attend child-friendly learning spaces that provide access to quality education.
- 1,600 children who have experienced violence, recruitment, detention, separation or trafficking will receive psychosocial, medical and judicial assistance and be reintegrated into their communities.
- UNICEF continues to address the chronic underdevelopment of the country, including chronic undernutrition, by mid- and long-term interventions through its regular programmes.

## FUNDING REQUIREMENTS FOR 2011

In the midst of protracted emergencies, stabilizing the welfare of women and children in Yemen – particularly their nutritional status, their access to safe water, and their ability to obtain education and protection – is crucial. UNICEF is requesting US\$20,294,000 to carry out its planned activities, approximately the same amount as last year. UNICEF has aligned its request with the 2011 Consolidated Appeals Process (CAP) requirements.

**More information on details on achievements of 2010 and the humanitarian action planned for Yemen in 2011 can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011).**

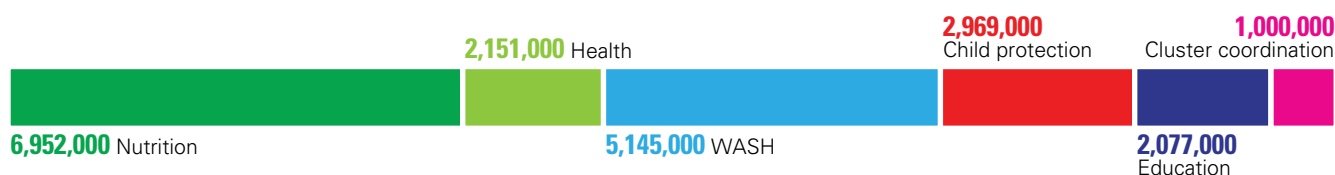
1. United Nations High Commissioner for Refugees, 'Yemen Factsheet', UNHCR, Geneva, September 2010, p. 1.  
 2. United Nations Children's Fund, 'UNICEF Yemen 2009 Annual Report', UNICEF, Sana'a, Yemen, December 2009, p. 7.

## HUMANITARIAN FUNDING AT WORK: HIGHLIGHTS FROM 2010

In the mid-2010 request, UNICEF estimated that US\$9,669,689 was needed to fund its humanitarian work in Yemen. As of October 2010, a total of US\$6,343,774 had been received, or 66 per cent of the goal. This funding has enabled UNICEF to improve the prospects of Yemeni children, as seen in some key results: More than 11,000 children were treated for undernutrition in 32 outpatient treatment sites; more than 46,000 internally displaced adults and children in the northern governorates and 5,000 people from host communities gained access to safe drinking water; 125,000 children in conflict-affected governorates received educational opportunities; and 3,500 vulnerable children were given psychosocial support to overcome the traumas associated with conflict and displacement.

## UNICEF EMERGENCY NEEDS FOR 2011 (in US dollars)

Total **\$20,294,000**





2011 UNICEF HUMANITARIAN ACTION FOR CHILDREN

# Latin America and the Caribbean

Colombia • Guatemala • Haiti





## HUMANITARIAN FUNDING AT WORK: HIGHLIGHTS FROM 2010

In 2010, UNICEF estimated that US\$1.8 million was needed to fund its humanitarian work in Latin America and the Caribbean. As of October 2010, no funding had been received. The regional office, however, was able to use DIPECHO (Disaster Preparedness ECHO) funds carried over from 2009, as well as resources from the Government of the Netherlands and UNICEF emergency thematic funds to respond quickly and effectively when the earthquake devastated Haiti. UNICEF, in cooperation with partners,<sup>2</sup> mobilized supplies from its hub in Panama, deployed specialized human resources to aid in the response, and provided emergency response technical advisory and advocacy support in the early response stages. Throughout the year, the regional team continued to aid country offices facing emergencies – including Barbados, Belize, Chile, Colombia, the Dominican Republic, Guatemala and the Plurinational State of Bolivia – organizing early warning/early action training in 11 countries and conducting 17 capacity-building workshops for disaster risk reduction in the education sector.

# Latin America and the Caribbean

## CHILDREN AND WOMEN IN CRISIS

The region of Latin America and the Caribbean is marked by extreme natural disasters, ranging from intense hurricanes, torrential rains and flash flooding to prolonged drought, intense volcanic activity and devastating earthquakes. In addition to the repeated loss of livelihood that leaves the most vulnerable populations in a cycle of insecurity, displacement caused by disaster increases risks of abuse, sexual and gender-based violence, HIV transmission, exploitation and trafficking – each already a significant problem in the region. Severe droughts are causing serious water shortages in South America's Gran Chaco region from Paraguay to the Plurinational State of Bolivia, and food and nutrition crises in Central American dry corridors stretching from Guatemala to Honduras and Nicaragua.

Currently, nearly 24 per cent of children under age 5 in the entire Latin America and Caribbean region are stunted due to poor nutrition.<sup>1</sup> Lack of preparedness for and response to these crises increases risks for women and children, who are already extremely vulnerable. With great disparities between rich and poor in the region, the main challenges to disaster response are addressing the needs of the poorest and working with national structures for more effective disaster management.

## MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

UNICEF's Americas and the Caribbean Regional Office (TACRO), together with partners including government agencies across the region and other international agencies through the Risk, Emergency, and Disaster Task Force Inter-Agency Workgroup for Latin America and The Caribbean (REDLAC) mechanism, will continue to strengthen its ability to respond quickly to the array of natural disasters that characterize the region as well as humanitarian situations deriving from socio-political issues.

- The regional team will support training for country offices in emergency preparedness and response and use of such tools as the Early Warning, Early Action system. Preparedness actions will be developed in partnership with national governments.
- Country offices and government partners will receive technical assistance to address disaster prevention and mitigation in a multi-sector coordinated approach focusing on the most vulnerable.
- TACRO will advocate regionally for disaster preparedness, response and recovery in the education sector by promoting the inter-agency Minimum Standards for Education in Emergencies, training workshops for first-line responders and cluster coordinators around the region, and participation of national education ministries in the regional conference on risk reduction and education.
- TACRO will strengthen regional readiness for emergency WASH supply delivery, surge capacity of experts and cluster coordinators and provision of WASH-related technical support, in cooperation with regional partners.
- The UNICEF regional team will support capacity-building activities and operational assistance for vaccine coverage, deworming medication and distribution of insecticide-treated mosquito nets for malaria- and dengue-endemic areas and emergency areas.
- Through community-based approaches, TACRO will support UNICEF country offices and such partners as the World Food Programme, the World Health Organization and national NGOs to advocate for good nutrition practices.
- The regional office will support strengthened capacities (internally and among partners) to better prevent and respond to all forms of abuse, exploitation and violence affecting children, especially in disaster-prone areas. This includes training, translating and adapting guidelines, and creating a regional roster on protecting children in emergencies.





## FUNDING REQUIREMENTS FOR 2011

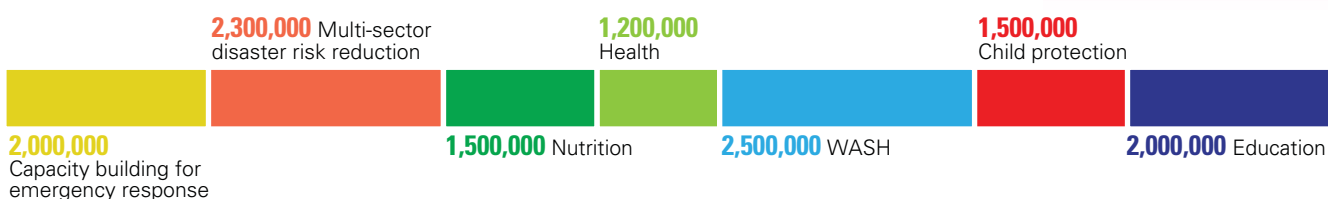
UNICEF is requesting US\$13 million for its humanitarian work in Latin America and the Caribbean to strengthen preparedness and response to the many disasters that affect the region. A strong focus will be on strengthening disaster risk reduction mechanisms in cooperation with national governments and partners.

**More information on achievements during 2010 and the humanitarian action planned for Latin America and the Caribbean in 2011 can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011) and at the regional office website, [www.unicef.org/lac](http://www.unicef.org/lac) (in Spanish) and [www.unicef.org/lac/english.html](http://www.unicef.org/lac/english.html) (in English).**

1. Lutter, Chester K., and Camila M. Chaparro, *La Desnutrición en Lactantes y Niños Pequeños en América Latina y El Caribe: Alcanzando los Objetivos de Desarrollo del Milenio [Malnutrition in Infants and Young Children in Latin America and the Caribbean: Achieving the Millennium Development Goals]*, Pan American Health Organization, Washington, D.C., 2008, p. 17.
2. UNICEF's partners in the region include the Agencia Española de Cooperación Internacional para el Desarrollo (Spanish Agency for International Development Cooperation), the UN Humanitarian Response Depot in Panama (run by the World Food Programme), and the International Federation of Red Cross and Red Crescent Societies, in cooperation with all agency members of the REDLAC regional coordination mechanism.

## UNICEF EMERGENCY NEEDS FOR 2011 (in US dollars)

Total **\$13,000,000**





# Colombia

## CHILDREN AND WOMEN IN CRISIS

The great humanitarian burden in Colombia is centred on violence related to a conflict that has disrupted the lives of Colombians for four decades and continuously violates international humanitarian and human rights law. The existence of illegal armed groups, the near-constant threat of violence related to conflict and illegal drug trafficking, massacres, landmine accidents, extortion, and forced recruitment put women and children at grave risk. During the past decade, on average hundreds of thousands of Colombians each year have been forced to abandon their homes – 289,000 in 2009 alone<sup>1</sup> – placing Colombia second only to the Sudan in its number of internally displaced people.

Against this backdrop of political turmoil, Colombians have also been exposed to natural hazards. During the last three months of 2010, the weather phenomenon La Niña caused flooding and landslides affecting close to 1.3 million people in 599 municipalities located in 28 of the country's 32 departments.<sup>2</sup> The heavy rains have already diminished access to safe drinking water, health care and education, and are expected to continue through March 2011. Taken together, these emergency conditions have increasingly eroded the rights of children, particularly those in rural communities and those who are already excluded from opportunity because of race, gender or geographical location. Reaching these children and their families is one of the key challenges to providing humanitarian assistance in Colombia.

### HUMANITARIAN FUNDING AT WORK: HIGHLIGHTS FROM 2010

In 2010, an estimated US\$6 million was needed for UNICEF's humanitarian activities in Colombia. As of October 2010, only 8 per cent of the funding goal had been received. However, funds from other sources have allowed UNICEF to improve the prospects of women and children in the following ways: 43,000 children and adolescents benefited from an integrated response in health, nutrition, water, protection, sanitation and education; 500 pregnant and lactating women and 6,500 children under age 5 were provided with nutrition care and education; 3,900 rural children under 5 and families affected by armed conflict were provided with food, protection and support for early child development. The paucity of funds meant that some humanitarian activities planned for 2010 in preventing and treating HIV and AIDS could not be undertaken.

## MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

UNICEF will work with the Government of Colombia, other UN agencies and NGOs to address the needs of 444,000 people, including 9,000 women, 208,000 boys and 223,000 girls. As lead agency supporting the national round tables on WASH, education and nutrition in emergencies, UNICEF expects to achieve a number of key results.

- Nutritional services and supplies will be provided to 20,000 children and 4,000 women who are pregnant or breastfeeding from African-descendent and indigenous communities affected by natural disaster, armed violence and displacement.
- 50,000 children, adolescents, and pregnant and lactating mothers in these communities will have access to services and emergency health supplies, including micronutrient supplements, therapeutic foods and insecticide-treated mosquito nets.
- Antiretroviral medicines and other critical supplies used to prevent HIV transmission and to provide post-exposure prophylaxis will be made available to 50,000 people affected by natural disasters, armed violence and displacement. 10,000 people (2,000 families) in rural communities will have access to safe and sufficient water and sanitation.
- 109,500 children from disaster-affected schools in rural communities will be able to exercise the right to education when their schools are repaired or refitted to make them safe, disaster-resilient and child-friendly.
- 200,000 children (102,000 boys and 98,000 girls) who live in rural areas of the country – and are affected by natural disaster, forced confinement or displacement, high risk of accidents from mines and unexploded ordnance, and recruitment by armed groups – will be protected through mine risk education and their participation in specific programmes aimed at recruitment prevention.

## FUNDING REQUIREMENTS FOR 2011

UNICEF is requesting US\$10.3 million for its 2011 humanitarian work in Colombia, an increase of almost US\$4 million compared with 2010. These funds are needed to expand aid to the most vulnerable communities and address increased emergency situations caused by natural disasters during the last months of 2010 and the escalating effects of ongoing armed conflict.

**More information on 2010 achievements and details of the humanitarian actions planned for Colombia in 2011 can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011) and at the country web site at [www.unicef.org.co](http://www.unicef.org.co) (in Spanish).**

1. Internal Displacement Monitoring Centre and Norwegian Refugee Council, 'Internal Displacement: Global overview of trends and developments in 2009', IDMC and NRC, Geneva, May 2010, p. 51.  
 2. United Nations Office for the Coordination of Humanitarian Affairs, "Colombia. Temporada de lluvias 2010, Fenómeno de La Niña" [The rainy season: The La Niña phenomenon], Bulletin, no. 9, OCHA, New York, 24 November 2010, p. 1.

### UNICEF EMERGENCY NEEDS FOR 2011 (in US dollars)

Total **\$10,300,000**





# Guatemala

## CHILDREN AND WOMEN IN CRISIS

'Not being able to get one's head above water' captures, literally and figuratively, the overwhelming nature of Guatemala's emergency conditions in 2010. Not only does the country continue to be severely affected by erratic rains as a result of the El Niño phenomenon, but in 2010, Tropical Storm Agatha and the Pacaya volcanic eruption also hit, causing US\$1.5 billion in damage and loss to the country and affecting 911,000 people, nearly 4 per cent of the population.<sup>1</sup> The irregular rains and unusually high temperatures have negatively affected crop production, heightening the population's food insecurity and leading to high levels of under-nutrition.<sup>2</sup> Structural vulnerabilities in Guatemala, including limited land planning processes, poor economic and territorial development and the decline of existing ecosystems pose challenges to effective disaster recovery and preparedness.

## MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

In 2011 UNICEF will have a positive impact on the lives of more than 100,000 children and women in the most-affected regions and communities, including the departments of Baja Verapaz, Chiquimula, El Progreso, Escuintla, Jalapa, Sololá, Suchitepéquez and Zacapa.

- To combat the slow weakening that undernutrition can cause in a population, 22,000 children and women in rural areas will receive micronutrients through fortified food, supplements or multiple micronutrient preparations. In addition, 660 children with severe acute malnutrition will receive treatment, with a goal of complete recovery and sustained health. UNICEF and partners will train 500 health staff, community workers and mothers in proper feeding of infants and young children.
- Around 80 per cent of children and women in shelters and communities affected by floods will receive routine life-saving vaccinations. UNICEF will provide vitamin A and deworming medications for 22,000 children.
- Together with the ministry of health, Catholic Relief Services, Oxfam and Water for People, UNICEF will provide access to safe drinking water for 12,000 people in rural communities, as well as sanitation facilities in schools and shelters.
- To maintain continuity of education and a safe environment for children, UNICEF will provide school materials, furniture and textbooks to 25,300 preschool and primary school children. Children will also have access to psychosocial support through UNICEF-trained psychologists and teachers.
- UNICEF will increase from 10 to 70 the percentage of people in the affected departments who receive information on HIV prevention, care and support.

## FUNDING REQUIREMENTS FOR 2011

For 2011, UNICEF is requesting US\$2.65 million for its planned humanitarian work in Guatemala. This request is prompted by the extensive nature of the emergency in Guatemala, which resulted in two Flash Appeals in 2010. The gravity of the plight of women and children cannot be overlooked and requires immediate and full funding.

**More information on results from 2010 and the humanitarian action planned for 2011 in Guatemala can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011) and the country office website at the [www.unicef.org/guatemala](http://www.unicef.org/guatemala).**

1. Government of the Republic of Guatemala, 'Evaluación de daños y pérdidas sectoriales y estimación de necesidades ocasionados por desastres en Guatemala desde mayo a septiembre de 2010' [Evaluation of damages, sectoral losses and needs estimates caused by disasters in Guatemala from May to September 2010], Guatemala City, 2010, pp. 21, 27.
2. Economic Commission for Latin America and the Caribbean, *Guatemala: Efectos del cambio climático sobre la agricultura* [The Effects of Climate Change on Agriculture], ECLAC, Mexico, June 2010, p. 1.

## HUMANITARIAN FUNDING AT WORK: HIGHLIGHTS FROM 2010

In 2010, UNICEF received US\$1,424,695 for work in Guatemala, 15 per cent of the US\$9,362,310 requested through two Flash Appeals. While full funding would have extended humanitarian assistance to more children and women, the funding that was received helped improve the welfare of many affected by Guatemala's multiple emergencies. UNICEF supported the treatment of 500 children with severe acute malnutrition across a number of affected departments, and provided powdered micronutrients to 20,000 children. Around 123,500 people (17,000 boys, 15,000 girls and 92,000 women) in temporary shelters opened due to the flooding and in the most-affected communities benefited from safe water and sanitation. Around 2,500 disaster-affected children received psychosocial support.

## UNICEF EMERGENCY NEEDS FOR 2011 (in US dollars)







# Haiti

## CHILDREN AND WOMEN IN CRISIS

The situation for women and children in Haiti was defined in 2010 by catastrophic emergencies that raised extreme challenges for the population. The earthquake on 12 January killed more than 220,000 people and displaced 2.3 million. An estimated 1 million people, including 400,000 children, are still living in crowded temporary settlements that elevate health and protection risks. Flooding caused by Hurricane Tomas in early November resulted in additional deaths, temporary displacement and aggravated food insecurity. By 15 December, a cholera epidemic had sickened over 117,580 people and caused the deaths of 2,481 people, including 169 children under 5. The impact of these crises was particularly severe due to the already deep vulnerability of children; the major emergencies further exacerbated food insecurity, degraded water and sanitation infrastructure, elevated protection risks for children, decimated the school system and led to disruptions in a weak health sector. When cholera emerged in the rural Artibonite region, it rapidly gained a foothold and spread nationwide, confirming that stark disparities in access to social services across the country represent a real and pressing threat to the health and stability of the nation as well as a denial of children's basic rights. The humanitarian mission rapidly introduced life-saving services and interventions designed to meet basic needs of earthquake- and cholera-affected children – but the challenge is ensuring that these services are decentralized and firmly rooted in sustainable community-based structures.

### HUMANITARIAN FUNDING AT WORK: HIGHLIGHTS FROM 2010

In the immediate aftermath of the disaster, UNICEF appealed for US\$222,757,000, adding US\$127,243,000 in requirements through the *Humanitarian Action Report (HAR)* over a two-year timeframe. As of October, US\$66,992,052 had been received against the HAR. With the generous funding of donors, UNICEF and partners were able to reach more than 1.9 million children with immunizations and close to 1.8 million people with basic health services through the distribution of 177 emergency kits to health-care facilities. Over 11,250 children with severe acute malnutrition received life-saving treatment in one of 159 outpatient therapeutic feeding programmes or 28 stabilization centres set up after the earthquake. Over 678,000 people had access to safe drinking water via trucking in the early recovery phase, and the installation of 8,900 latrines gave over 1.1 million access to emergency sanitation. More than 4,000 separated children were registered, and over 1,000 were reunited with family, with the rest accommodated in safe temporary care.

## MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

UNICEF will provide leadership for the WASH, education and protection clusters in Haiti during 2011 and will continue to work with the Government of Haiti, other UN agencies and NGOs.

- At least 2.5 million people at high risk of cholera infection will have access to safe drinking water as a result of improved surveillance and treatment. More than 9 million will be reached with health and hygiene messages designed to prevent the spread of cholera.
- Up to 3 million people will receive preventive and curative health services, with crucial supplies distributed and costs supported for facilities including cholera treatment centres and oral rehydration points. UNICEF will help nurses, auxiliary health-centre staff and community health workers improve their ability to recognize and manage cholera cases.
- 10,000 children 0–59 months old who are suffering from severe acute malnutrition (30 per cent of all those in need) will be treated with timely, quality care. Fifty thousand pregnant women – 17 per cent of all pregnant women in Haiti – will have increased knowledge on infant feeding, nutrition and cholera prevention.
- Around 90,000 children will benefit from the construction of 100 additional semi-permanent schools in earthquake-affected or marginalized areas.
- More than 500,000 earthquake-affected and other extremely vulnerable children and 20,000 women at risk or survivors of violence will benefit from protection and essential services, including HIV-related prevention, care, support and treatment.

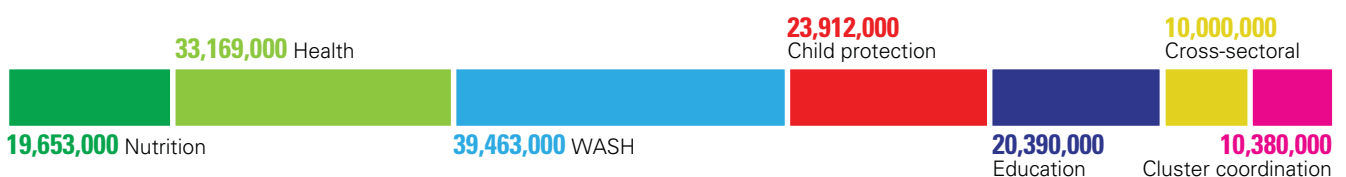
## FUNDING REQUIREMENTS FOR 2011

In 2011, UNICEF is requesting US\$156,967,000 for its humanitarian work in Haiti. This request exceeds the Consolidated Appeals Process (CAP) requirements because it includes commitments related to the expanded cholera response. Immediate and adequate funding is needed to avoid further degradation of the humanitarian situation in Haiti, and to build on the resilience already demonstrated by the country's women and children.

**More information on 2010 achievements and details of the humanitarian action plans for Haiti can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011) and the country office website at [www.unicef.org/haiti](http://www.unicef.org/haiti) (French).**

### UNICEF EMERGENCY NEEDS FOR 2011 (in US dollars)

Total **\$156,967,000**







2011 UNICEF HUMANITARIAN ACTION FOR CHILDREN

# West and Central Africa

**Burkina Faso • Cameroon • Central African Republic •  
Chad • Congo • Côte d'Ivoire • Democratic Republic of  
the Congo • Niger**



## HUMANITARIAN FUNDING AT WORK: HIGHLIGHTS FROM 2010

UNICEF estimated that US\$40,025,300 was needed to fund its humanitarian work in West and Central Africa in 2010. As of October 2010, a total of US\$4,911,757 had been received, representing 12 per cent of the goal. Nonetheless, UNICEF developed regional supply hubs in Douala and Accra to ensure rapid delivery of ready-to-use therapeutic food for the Sahel nutrition crisis. Over US\$1 million was raised via the Consolidated Appeals Process (CAP) to vaccinate 1,178,000 people against meningitis and increase vaccine stocks in Chad and Burkina Faso. Regional emergency funds were deployed for the first phase of flood interventions in Benin and Burkina Faso and for pre-election preparedness in the Central African Republic and Guinea. Regional teams provided training on minimizing school disruptions during emergencies for government and NGO partners and country office staff (Benin, Gambia, Ghana, Mauritania, Senegal, Sierra Leone and Togo) and on protecting children separated from families in displacements for police forces and government partners (Chad, Côte d'Ivoire, Ghana, Senegal, Sierra Leone and Togo).

# West and Central Africa

## CHILDREN AND WOMEN IN CRISIS

Life in West and Central Africa is marked by chronic poverty, recurring food insecurity and poor diets that have left a generation of children undernourished. Cyclical drought, severe pressure on limited natural resources and outdated farming practices cripple food production in the Sahel region; in 2010, nearly 10 million people faced a serious food crisis, while 859,000 children under 5 years old needed treatment for severe acute malnutrition.<sup>1</sup> Natural and human-made hazards multiply these needs and have taken a toll on infrastructure and access to basic services, hastening the spread of epidemics: during 2010, cholera, meningitis, measles and polio epidemics occurred in at least 20 countries in the region. The death rate among infants and children under age 5 in West and Central Africa is the highest in the world,<sup>2</sup> and more than a dozen countries in the region rank at the bottom levels of the Human Development Index.<sup>3</sup>

## MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

UNICEF's West and Central Africa Regional Office will continue to provide technical, coordination and planning support to help country offices assist millions of vulnerable people throughout the region. The regional office will also distribute funds to country teams in several countries to cope with ongoing, smaller-scale emergencies that nevertheless require a coordinated response and adequate resources.

- To enhance disaster risk reduction, an emergency regional fund will be established and used to increase surge capacity and maintain regional supply hubs in Douala, Cameroon, and the UN Humanitarian Response Depot in Accra.
- The regional office will monitor nutrition conditions by providing assistance with methodology, training or analysis for at least one nutrition survey, using SMART (specific, measurable, achievable, relevant and time-bound) methods, in each country.
- Technical support will bolster assistance to governments trying to control outbreaks of meningitis, cholera and measles. To have vaccine stocks ready, UNICEF will map areas at high risk for cholera, focusing on the central area (Cameroon, Chad, the Niger and Nigeria), and the coastal area (Benin, Guinea, Guinea-Bissau and Togo).
- UNICEF will develop home-based water treatment and storage strategies. The regional team will reinforce national and local preparedness by promoting hygiene, including adequate hand-washing practices and water treatment strategies in areas at high risk for cholera.
- In anticipation of a potential humanitarian crisis resulting from the referendum in Southern Sudan, country offices in the Central African Republic, Chad and the Democratic Republic of the Congo are updating their multi-hazard preparedness plans based on UNHCR planning figures. The regional office is seeking funding to pre-position emergency supplies and deploy surge resources for the early phase of any potential emergency response.
- The West and Central Africa Regional Office will channel funds and surge resources to support country offices as they coordinate emergency response, with a focus on rapid-onset emergencies, particularly in countries without access to resources through a separate *Humanitarian Action for Children* appeal.



#### FUNDING REQUIREMENTS FOR 2011<sup>4</sup>

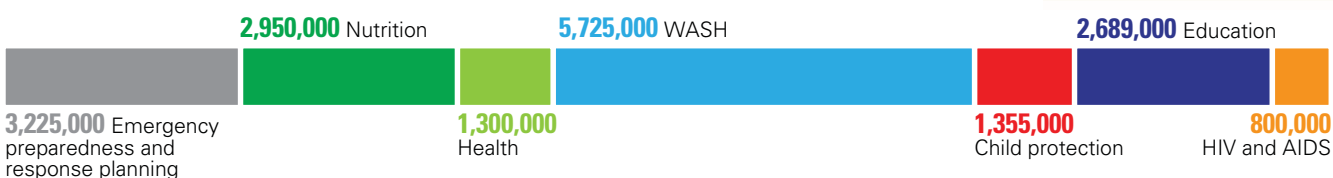
The UNICEF West and Central Africa Regional Office is requesting US\$18,044,000 to provide technical support, coordination, planning and other assistance to further UNICEF's humanitarian response in the region. This includes US\$9,751,000 to support countries not separately profiled in this *Humanitarian Action for Children* publication.

More information about achievements during 2010 and UNICEF's humanitarian action planned by the West and Central Africa Regional Office in 2011 can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011) and at the regional office website, [www.unicef.org/wcaro](http://www.unicef.org/wcaro).

1. ReliefWeb, 'Sahel: Snapshot on the food crisis', United Nations Office for the Coordination of Humanitarian Affairs, Geneva, 19 April 2010, p. 1.
2. United Nations Children's Fund, et al., 'Levels & Trends in Child Mortality: Report 2010 – Estimates developed for the UN Inter-agency Group for Child Mortality Estimation', UNICEF, New York, 2010, p. 16.
3. United Nations Development Programme, 'International Human Development Indicators', UNDP, New York, 2010, <<http://hdr.undp.org/en/statistics>>, accessed 2 December 2010.
4. Six-month Emergency Humanitarian Action Plans (EHAP) for Liberia and for Côte d'Ivoire and neighbouring countries (Burkina Faso, Ghana, Guinea, and Mali) were launched on 14 January 2011 in response to the humanitarian consequences of the political crisis in Côte d'Ivoire. The UNICEF requirements of US\$5,715,593 and US\$5,696,627 through the respective EHAPs are in addition to the Humanitarian Action for Children requirements for these countries. Humanitarian needs are likely to be reviewed as inter-agency assessments are carried out and as the volatile situation changes.

#### UNICEF EMERGENCY NEEDS FOR 2011 (in US dollars)

Total **\$18,044,000**







# Burkina Faso

## CHILDREN AND WOMEN IN CRISIS

Burkina Faso's systemic poverty and paucity of resources have made responding to recent catastrophic flooding and virulent epidemics all the more challenging. Unprecedented floods in Ouagadougou in September 2009 and subsequent torrential rains and flooding in many parts of the country from July through September 2010 affected several hundred thousand people. The flooding dramatically increased the risk of disease and undernutrition. Outbreaks of meningitis resulted in 5,980 cases in the first half of 2010, and 40 per cent of those affected were children under age 5.<sup>1</sup> While the prevalence of global acute malnutrition in Burkina Faso was reduced from 21.2 per cent in 2003<sup>2</sup> to 11.3 per cent in 2009,<sup>3</sup> the country is still considered to be at emergency undernutrition levels.

## MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

UNICEF, together with a number of partners, including the Government of Burkina Faso and non-governmental organizations, will focus on assisting the most vulnerable and hard-to-reach people in the rural areas that have been hard hit by drought, floods and disease. UNICEF expects to reach around 150,000 people living in emergency conditions in 2011, including 80,000 children.

- Disease often finds an opening where natural disasters have struck. Introduction of the conjugate Meningitis A vaccine in December 2010 will curb the number of meningitis cases nationwide in 2011.
- Safe water in sufficient quantity is a key to staying healthy. At least 85,000 flood-affected people, among them 18,000 children, will gain access to adequate drinking water; 80 per cent of the displaced population will have access to adequate sanitation.
- More than 49,200 boys and girls aged 3–15 will have access to quality education facilities in flood-affected areas of the Centre-North, East, Plateau Central and Sahel regions.
- Protection of children and women will be enhanced in 2011 through dissemination of data on threats to their well-being and by helping other organizations incorporate protection goals into their work.
- UNICEF will help improve community management of children with severe acute malnutrition, to save the lives of 45,000 children.

## FUNDING REQUIREMENTS FOR 2011

UNICEF is requesting US\$11,480,000 for its 2011 humanitarian work in Burkina Faso in response to the high number of children and women affected by disasters and food insecurity.

**More information on achievements of 2010 and the humanitarian action planned for Burkina Faso in 2011 can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011) or at the country office website at [www.unicef.org/bfa/english](http://www.unicef.org/bfa/english).**

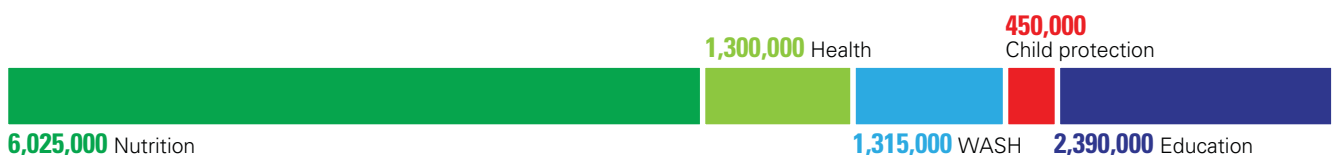
## HUMANITARIAN FUNDING AT WORK: HIGHLIGHTS FROM 2010

By late 2010, UNICEF had helped make significant achievements in a vulnerable population's nutrition status, access to health services, sanitation and hygiene, as well as improvements in the education and the welfare of children. Some 21,600 children were treated for severe acute malnutrition in the first half of 2010, compared with 26,000 in all of 2009. A vaccination campaign successfully immunized 678,000 people at risk for meningitis. The construction of six new water points provided 1,800 people in relocation areas with drinking water; 1,000 families benefited from better sanitation and from services promoting healthier hygiene behaviour. Education relief and assistance has reached nearly 15,000 children. UNICEF established psycho-social support services and child-friendly spaces that reached 3,800 vulnerable and affected children, adolescents and women. These are only a few of the results achieved during 2010.

1. National Epidemics Management Committee, Department of Disease Control, 'Report on the Epidemiology Survey', Ministry of Health, Ouagadougou, Burkina Faso, July 2010, p. 3.
2. UNICEF recalculation based on the Demographic and Health Survey 2003, and according to WHO Child Growth Standards.
3. Nutrition Department, 'National Nutrition Survey', Ministry of Health, Ouagadougou, Burkina Faso, 2009, p. 32.

## UNICEF EMERGENCY NEEDS FOR 2011 (in US dollars)

Total **\$11,480,000**







# Cameroon

## CHILDREN AND WOMEN IN CRISIS

People living in Cameroon's eastern and northern regions are struggling to share their limited access to basic services – potable water, health care and education – with a continuous and ever-shifting refugee population fleeing the Central African Republic. At the same time, 3,500 refugees who fled from Chad in 2008 remain at the Longi camp in Nord Province. Acute emergencies compound this stress. In 2010, flooding and cholera in the north took their toll, and the already precarious existence of many women and children was made even more so. In Adamaoua and Est Provinces, the acute malnutrition rate is about 8.5 per cent, which is close to emergency threshold levels. Such high levels of undernutrition render the population vulnerable to disease and unprepared for natural disasters, and reflect the long-term nature of the uncertain conditions in these regions.

## MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

In 2011, UNICEF will continue to work with the Government of Cameroon, other UN agencies, NGOs and local communities to assist 1 million women and children.

- In response to the increasing levels of undernutrition, 25,000 children with severe acute malnutrition will be admitted to the community-based management of acute malnutrition programme. The Communication for Development (C4D)-based essential nutrition package will be scaled up in emergency areas where 1 million children under age 5 and 1.3 million women of childbearing age are living.
- To help implement community-based management of acute malnutrition, about 300 health facilities located in Adamaoua, Est, Extreme-Nord and Nord Provinces will be provided with essential drugs, supplies for deworming and immunization, medical emergency equipment, ready-to-use therapeutic food and vitamin A.
- 300 communities, representing 6 per cent of the population in the most disadvantaged regions and 2 per cent of the national population, will benefit from Community-Led Total Sanitation activities – improving access to sanitation by 30 per cent in those communities and 1 per cent throughout Cameroon.
- In order for young refugee children to be able to access and stay in school, accelerated learning and other education re-entry programmes will be strengthened in 17 primary schools located in Adamaoua and Est Provinces where high numbers of refugees are living.
- More than 500,000 youths and adolescents will have better access to voluntary counselling and HIV testing.

## FUNDING REQUIREMENTS FOR 2011

To stabilize the welfare of women and children in Cameroon by achieving gains in nutritional status, access to health services and safe water, and education opportunities, UNICEF is requesting US\$3.35 million to carry out its planned activities.

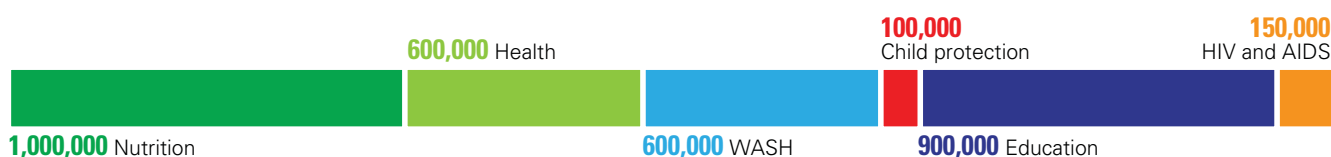
**More information on achievements of 2010 and the humanitarian action planned for Cameroon in 2011 can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011).**

### HUMANITARIAN FUNDING AT WORK: HIGHLIGHTS FROM 2010

UNICEF was able to meet immediate humanitarian needs experienced by both refugee and host populations in 2010. More than 17,000 children with severe acute malnutrition from both host and refugee communities in the emergency-affected Provinces (Adamaoua, Est, Extreme Nord and Nord) received life-saving treatment between January and August 2010. Among these children, more than 95 per cent of those who were 6–59 months old received one dose of vitamin A supplementation and 95 per cent of the 12– to 59-month-old children received deworming tablets. Around 1,000 families in villages benefited from construction of new latrines. Thirty-eight schools where refugee children are enrolled received teaching and learning materials for 5,700 children, of whom 2,500 are refugees.

## UNICEF EMERGENCY NEEDS FOR 2011 (in US dollars)

Total **\$3,350,000**



# Central African Republic

## CHILDREN AND WOMEN IN CRISIS

The Central African Republic is struggling to provide for its people, while overcoming internal political conflict ongoing since 2003 and accepting the thousands of refugees from surrounding countries who have sought shelter in the country in recent years. Only 30 per cent of Central Africans have access to clean water and even fewer to sanitation<sup>1</sup> – and there are alarming trends in undernutrition and disease. Children can be subjected to sexual violence and forced to join armed groups. Assistance, such as essential immunizations and AIDS education, is often provisional, given the destabilized environment in which most of the country's women and children are living.

## MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

UNICEF is leading the education and WASH clusters and co-leading the nutrition and shelter and non-food items clusters in the Central African Republic. UNICEF also actively participates in the health, protection, logistics and food security clusters. In 2011, UNICEF will continue to work with the Government of the Central African Republic, other UN agencies, local and international NGOs as well as host communities to address the needs of hundreds of thousands of children and adults.

- UNICEF will develop community protection networks to prevent the recruitment of about 30,000 children who are at risk of conscription into armed groups or government forces.
- Nearly 175,000 people (among them 71,000 children and 9,000 hospitalized patients) will have access to safe water after the construction of 50 new water points and the rehabilitation of 300 existing ones.
- More than 170,000 school-age children will gain access to safe schools after 129 temporary learning and rehabilitation spaces and 65 classrooms are rehabilitated or established in the remote and crisis-affected programme regions.
- 204,000 women and 650,000 children will be treated or supported to prevent their undernutrition when supplies are provided to 55 treatment centres, including 17 newly established outpatient therapeutic feeding centres, in the prefectures of Bamingui Bangoran, Haut Mbomou, Nana Mambere and Vakaga.
- As many as 900,000 people (including 156,000 children) will be able to avoid deadly disease through strengthened vaccination programmes.
- About 7,000 young men and women of reproductive age and 10,000 women will have receive education for HIV and AIDS prevention and care.

## FUNDING REQUIREMENTS FOR 2011

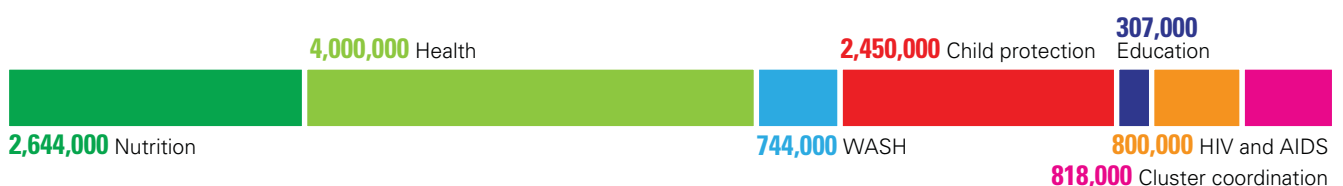
UNICEF is requesting US\$11,763,000 to carry out its planned activities. UNICEF has aligned its request with the 2011 Consolidated Appeals Process (CAP) requirements. Women and children of the Central African Republic, struggling to cope under the diminished capacities of their weakened social infrastructure as well as the effects of crises in neighbouring countries, require the urgent assistance this funding can provide.

**More information on achievements of 2010 and the humanitarian action planned for the Central African Republic in 2011 can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011).**

1. *Communiqué Final, Table Ronde Sectorielle Eau et Assainissement en RCA* [Round table on water and sanitation in CAR], Bangui, Central African Republic, 8 October 2009, p 3.

## UNICEF EMERGENCY NEEDS FOR 2011 (in US dollars)

Total **\$11,763,000**



## HUMANITARIAN FUNDING AT WORK: HIGHLIGHTS FROM 2010

In 2010, UNICEF estimated that US\$15,187,221 was needed to fund its humanitarian work in the Central African Republic. As of October 2010, a total of US\$5,652,257 had been received, or 37 per cent of the 2010 request. Among key results, 750,000 children were protected from disease by routine vaccinations and by the first phase of a yellow fever immunization campaign. UNICEF helped facilitate the release of 108 children from armed groups. More than 172,000 young children were enrolled in preschool.



# Chad

## CHILDREN AND WOMEN IN CRISIS

An estimated 2 million people in Chad are in need of food assistance. For many of them, undernutrition and chronic food insecurity now characterize 'normal' life, as food production across the Sahel region remains crippled by severe drought, pressure on scarce resources and progressive desertification. This hardship has been compounded by civil conflict in neighbouring countries that has caused over 300,000 people from the Darfur region of the Sudan and from the Central African Republic to seek refuge in Chad.<sup>1</sup> The same conflict has displaced an estimated 170,000 Chadian residents of border regions with Darfur.<sup>2</sup> Those who are displaced or living in refugee camps are highly susceptible to such health risks as cholera, meningitis and measles epidemics. Inadequate access to basic health care, safe water and sanitation and low levels of routine immunization coverage further compromise health among all populations in Chad. In eastern Chad, the recruitment of children into armed groups remains a critical problem. Concerns for the well-being of children and women have increased with the departure of the United Nations Mission in the Central African Republic and Chad in November 2010.

## HUMANITARIAN FUNDING AT WORK: HIGHLIGHTS FROM 2010

In 2010, UNICEF estimated that US\$51,237,840 was needed to fund its humanitarian work in Chad. As of October 2010, a total of US\$18,801,849 had been received, representing 37 per cent of the request. With this level of funding, UNICEF was able to improve the lives of children facing health and nutrition risks due to displacement and chronic food shortages. UNICEF supported increased coverage of immunization from 23 per cent to 95 per cent for children under age 1 in the refugee camps, sites for internally displaced persons and host community villages. The number of children benefiting from therapeutic feeding increased from 12,000 in 2009 to 46,000 in November 2010, thereby lessening the high mortality and morbidity related to undernutrition that characterizes the region. During the 2010 rainy season, excessive rain caused flooding in areas typically affected, and in the western and southern areas of the country, the rise of the Chari and Logone Rivers that criss-cross these regions created additional hazards. The extensive flooding helped propel a cholera outbreak that affected many areas. UNICEF's technical assistance and provision of medical equipment and medicine to the Government of Chad helped reduce the overall cholera fatality rate from 19 per cent to 3 per cent in Guéra, Kanem, Lac, Mayo-Kebbi East, Mayo-Kebbi West and N'Djamena Regions.

## MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

UNICEF Chad is providing cluster coordination leadership in WASH, nutrition and education. In 2011, UNICEF will continue to work with the Government of Chad, other UN agencies, NGOs and host communities to address the needs of 2.5 million people, including 300,000 women, 765,000 girls and 735,000 boys.

- To provide basic health-care services to the most vulnerable populations, UNICEF will ensure the routine immunization and supplementary vaccination campaigns for polio, meningitis, measles and tetanus, with a goal of reaching all 2.6 million children in the country under age 5.
- To reduce infant mortality caused by disease, UNICEF will ensure access to safe water, sanitation and improved hygiene for 505,000 refugees, internally displaced persons and those in host communities across Chad, particularly in the Sahelian belt and the east and south.
- UNICEF will provide access to quality education for 561,000 pre- and primary-school-aged children in eastern and southern Chad by recruiting and training teachers for areas severely impacted by displacement and by constructing 300 learning structures within the refugee camps.
- UNICEF will bolster protective services for 60,000 internally displaced and refugee children (roughly 50 per cent of them girls) and 240,000 young people (110,000 boys and 130,000 girls) will receive information on HIV prevention in schools and youth centres by trained teachers and peer youth educators.

## FUNDING REQUIREMENTS FOR 2011

UNICEF is requesting US\$45,639,000 for its humanitarian activities in Chad during 2011. These requirements are in line with UNICEF requirements in the 2011 Consolidated Appeals Process (CAP). Adequate funding levels are necessary to maximize progress in well-being and development for women and children in Chad.

**More information on 2010 achievements and details of humanitarian action planned for Chad in 2011 can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011).**

1. United Nations High Commissioner for Refugees, '2010 UNHCR Country Operations Profile: Chad', UNHCR, Geneva, <[www.unhcr.org/cgi-bin/texis/vtx/page?page=49e45c226](http://www.unhcr.org/cgi-bin/texis/vtx/page?page=49e45c226)>, accessed 14 December 2010.
2. United Nations, 'Chad: 2011 Consolidated Appeal', Office for the Coordination of Humanitarian Affairs, New York, November 2010, p. 1.

## UNICEF EMERGENCY NEEDS FOR 2011 (in US dollars)

Total **\$45,639,000**







# Congo

## CHILDREN AND WOMEN IN CRISIS

In 2010, more than 114,000 people fled the Democratic Republic of the Congo to shelter in the Congo.<sup>1</sup> Although arrival of refugees seems to have stabilized since May, there is currently no foreseeable timetable for safe return due to ongoing political strife and violence in their home country. Refugees in the Congo, of whom an estimated 80 per cent are women and children,<sup>2</sup> live in conditions that increase the risk of undernutrition and illness. Limited access to water, hygiene and sanitation facilities for many refugees creates an opening for the spread of waterborne diseases. Recurrent floods also take their toll: Thousands of children have a hard time getting to school, and around 350,000 people are at risk of cholera.<sup>3</sup> In November 2010, the Congo experienced a deadly outbreak of wild poliovirus, with nearly all cases reported from the port city of Pointe Noire. By early December, 498 cases and 209 deaths had been reported, mainly among young adults. Logistical constraints related to climate, limited air access and minimal air cargo access to some areas make providing humanitarian relief in the Congo extremely difficult.

### HUMANITARIAN FUNDING AT WORK: HIGHLIGHTS FROM 2010

In 2010, UNICEF estimated US\$5,973,032 was needed for aid in the Congo. As of October 2010, US\$1,995,016 had been received, or 33 per cent of the goal, partly through two rounds of UN Central Emergency Response Fund grants. With these funds, UNICEF provided essential drugs and equipment for safe childbirth and basic surgical interventions to benefit 2,400 refugee women and 12,000 children. Successful treatment of severe acute malnutrition was provided in 30 health centres. Out of 18 wells planned in Betou, Dongou and Impfondo, 15 were completed. UNICEF supported the education of 8,593 preschool-age refugee children by providing 102 school, 72 recreational and 60 early childhood development kits. UNICEF pre-positioned protection packages consisting of kits for HIV post-exposure prophylaxis (PEP) to assist women and children who are survivors of violence, reunification kits to facilitate reunification of families in case of separation and recreational materials for children and women.

## MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

Although the cluster approach has not been formally adopted in the Congo, within the UN country team UNICEF is the agreed sector lead in WASH, while it coordinates the education sector with UNESCO and provides significant support in the education and protection sectors. In 2011, UNICEF will continue to work with the Government of the Congo, other UN agencies and NGOs in addressing the needs of 210,000 people, including 80,095 boys and 74,375 girls.

- Nutrition interventions (prevention, detection and treatment of undernutrition) and surveillance will benefit 69,470 children as well as 45,000 women who are pregnant or breastfeeding their infants. In addition, they will have improved access to primary health care through provision of vaccines, essential drugs, cholera kits and other health commodities.
- Clean water and proper sanitation facilities are indispensable to health. WASH efforts will focus on refugees to maintain their existing water supplies and bring clean water and sanitation to 25,000 previously inaccessible refugee families.
- Some 85,000 children of preschool and primary-school age will access quality education opportunities, including child-friendly emergency education programmes. UNICEF will help construct 83 new temporary learning centres, maintain the 63 existing ones, and promote key hygiene practices through peer education.
- Two drop-in centres for psychosocial care of children and women survivors of violence and sexual abuse will open in Impfondo and Betou; protection kits and recreational materials will be pre-positioned at the Departmental Direction of Social Affairs in Impfondo.
- UNICEF, in close collaboration with the government and the World Health Organization, is supporting mass polio immunization campaigns targeting the entire population by ensuring availability of vaccines, as well as social mobilization including hygiene promotion. UNICEF will continue to do so until the wild poliovirus is interrupted.

## FUNDING REQUIREMENTS FOR 2011

UNICEF is requesting US\$4,830,000 to carry out its planned activities for the Congo in 2011. Prompt response on behalf of donors to the desperate needs of women and children will assist in improving their well-being and development.

**More information on details on achievements of 2010 and the humanitarian action planned for the Congo in 2011 can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011).**

1. UNHCR, "UNHCR gains access to 35,000 refugees in RoC", 4 May 2010. See <http://www.unhcr.org/4be00db16.html>
2. UNHCR, "UN seeking funding for tens of thousands of Congo refugees", 9 March 2010. See <http://www.unhcr.org/4b9626669.html>
3. Some quarters of Brazzaville and Pointe Noire, and three districts located in Pool and Bouenza are considered as at risk for cholera. Population figures are from the 2007 census, preliminary results.

### UNICEF EMERGENCY NEEDS FOR 2011 (in US dollars)

Total **\$4,830,000**







# Côte d'Ivoire

## CHILDREN AND WOMEN IN CRISIS

The difficulties of children and women in Côte d'Ivoire are linked to continuing fallout from the internal conflict that engulfed parts of the country from 2002–2007 and shattered the social cohesion of the country's 20.6 million citizens. All parties to that conflict have maintained an armed presence in the country, leaving women and children particularly vulnerable to sexual violence, prostitution and exploitative labour. The November 2010 post-presidential election period brought a return of volatility and serious tensions. Several violent incidents that occurred are symptomatic of the deterioration in Côte d'Ivoire's political climate. The risks for escalation of tensions are significant.

It has been estimated that at least 500,000 displaced persons remain in the country, and those who return to their homes, particularly in western Côte d'Ivoire, frequently encounter conflict over land they had left.<sup>1</sup> With around 49 per cent of the population living under the national poverty line,<sup>2</sup> humanitarian need is also rooted in poverty – and compounded by periodic natural disasters, such as the floods that occurred in Abidjan in June 2010, affecting 1,000 households.

### HUMANITARIAN FUNDING AT WORK: HIGHLIGHTS FROM 2010

UNICEF was able to achieve a number of gains for children and women affected by emergencies in Côte d'Ivoire during 2010. Nearly 9,000 children with severe acute malnutrition were treated in outpatient units and another 1,200 in therapeutic feeding centres. Over 5.5 million children under age 5 received deworming treatment and about 6.1 million were given vitamin A supplements. At least 12,000 people gained access to drinkable water, 28 villages were declared free of open defecation, and 1,400 households gained access to latrines. UNICEF helped cultivate emergency preparedness within the education sector through capacity building for 30 government education administrators. More than 60 survivors of sexual violence, mostly girls, were provided with medical and psychosocial support as well as legal counselling.

## MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

UNICEF currently is the lead agency for the WASH and nutrition sectorial groups, and is co-lead for education with Save the Children. In partnership with the Government of Côte d'Ivoire, other UN agencies and NGOs, UNICEF will assist 6.9 million people in 2011, including 4 million children.

- Around 33 per cent of children under 5 years old suffering from severe acute malnutrition in the northern and western parts of the country (15,000 children) will be treated; 6.2 million children under 5 will receive vitamin A supplementation and 5.8 million children under 5 will get deworming medication.
- Five Ivorian partner organizations<sup>3</sup> will increase their capacities in emergency preparedness and response through training and support provided by UNICEF, including disaster risk reduction and contingency planning. Emergency medical supplies will be consolidated and pre-positioned to respond to the needs of 20,000 people who may be affected by crisis.
- UNICEF will improve the capacity of 210 health-care providers by organizing specific training on medical prescriptions, psychosocial care, and guidance and assistance to survivors.
- To mitigate the deadly threat of waterborne disease, water quality and cholera outbreak surveillance teams will be set up in 50 at-risk communities in the Montagnes and Zanzan areas.
- Around 20,000 children aged 3 to 15 will benefit from procurement of emergency teaching and learning materials along with access to formal and non-formal education opportunities and psychosocial and recreational activities, including information on life skills and health and hygiene. In 150 at-risk communities, community-based child protection groups will receive training in preventing, monitoring, referring and reporting on grave violations of children's rights.
- In line with its emergency preparedness and response plan, the UNICEF country office stands ready to immediately assist children and women who may be affected by an eventual post-election conflict.

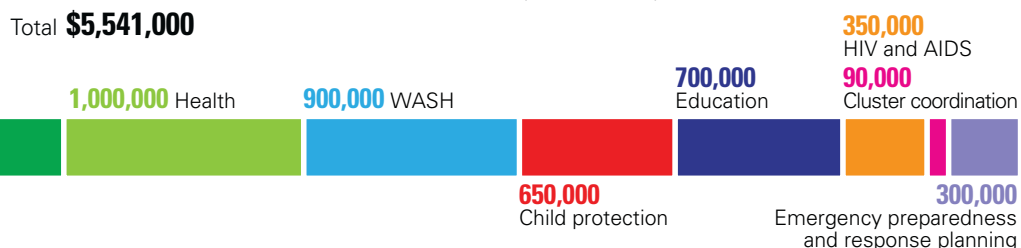
## FUNDING REQUIREMENTS FOR 2011

UNICEF is requesting US\$5,541,000 for its humanitarian work in Côte d'Ivoire in 2011, to assist children and women as they cope with the aftermath of years of armed conflict. UNICEF has aligned its request with the 2011 Consolidated Appeal Process (CAP) requirements.

More information on achievements of 2010 and the humanitarian action planned for Côte d'Ivoire in 2011 can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011) or the country office web site at [www.unicef.org/cotedivoire](http://www.unicef.org/cotedivoire).

1. Internal Displacement Monitoring Centre, 'Côte d'Ivoire: Quest for durable solutions continues as the electoral process moves forward', IDMC Norwegian Refugee Council, Geneva, 22 September 2010, pp. 1, 4.
2. Institut national de la statistique, 'Enquête sur le niveau de vie' [Survey of household wealth], INS, Abidjan, Côte d'Ivoire, 2009.
3. Akwaba, Animation rurale de Korhogo (ARK), Association de Soutien à l'Auto-promotion sanitaire (ASAPSU), Caritas Abidjan and Caritas Man.

## UNICEF EMERGENCY NEEDS FOR 2011 (in US dollars)





# Democratic Republic of the Congo

## CHILDREN AND WOMEN IN CRISIS

Ongoing and newly emergent conflict and insecurity combined with chronic flooding, cholera and emergency-level malnutrition make the Democratic Republic of the Congo home to one of the world's worst and most protracted humanitarian emergencies. Since the late 1990s, waves of violent conflict have forced hundreds of thousands of people from their homes; in late 2010, the displaced population was an estimated 1.7 million, more than half of them children.<sup>1</sup> Sexual violence continues at catastrophic proportions. Children and youths are routinely forced into armed groups against their will. Ongoing conflict in the east and northeast and dysfunctional or non-existent infrastructure throughout the country make delivering humanitarian aid extremely challenging for reasons of security and physical access to communities in need.

## MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

UNICEF and its network of partners are leaders in both humanitarian response and coordination in the Democratic Republic of the Congo. In 2011, UNICEF will work with the Government, other UN agencies, and local and international NGOs as well as affected communities to meet the needs of more than 4 million boys and girls and their families. As lead agency for the nutrition, education, WASH, emergency shelter and non-food items clusters and the child-protection sub-cluster, UNICEF plays a central role in the planning, coordination, and provision of technical guidance related to humanitarian response in the country.

- UNICEF's flagship Rapid Response to Movements of Population programme will reach more than 1.7 million displaced persons, returnees and people from host communities with integrated assistance in non-food item and shelter materials, emergency education, and basic water, sanitation and hygiene assistance.
- To save the lives of children who are severely undernourished, UNICEF will provide supplies for therapeutic feeding, including therapeutic food, equipment and drugs, and coordinate programmes to treat 122,000 children with severe acute malnutrition.
- Some 1.5 million children under age 5 in conflict-affected areas will be vaccinated against measles and receive deworming treatment and vitamin A supplementation.
- More than 800,000, or an estimated 40 per cent, of the country's displaced persons will gain access to adequate water and sanitation facilities; sanitation programmes in cholera-prone displaced and returnee communities will reach 140,000 people.
- Emergency education programmes for 150,000 vulnerable and conflict-affected children and youths will offer them a sense of normalcy and protection. 70,000 of these children will receive appropriate psychosocial support, with teachers and caregivers being given the tools to support the emotional needs of children.
- Around 50,000 displaced and returnee children will have access to the protective environment of child-friendly spaces; UNICEF will also assist in the separation and reintegration of 3,000 children formerly associated with armed groups and forces and support the identification and reunification of 2,000 unaccompanied children.
- Age- and gender-appropriate interventions will help 15,000 survivors of sexual and gender-based violence in conflict and displacement zones; 22,000 women who have experienced sexual abuse and violence will receive medical treatment.

## HUMANITARIAN FUNDING AT WORK: HIGHLIGHTS FROM 2010

In 2010, UNICEF estimated that US\$122,500,000 was needed for its humanitarian work in the Democratic Republic of the Congo. As of October 2010, a total of US\$54,647,298 had been received, 45 per cent of the goal. While full funding would have permitted humanitarian assistance to reach a greater proportion of those in need, UNICEF was able to improve the conditions of children and women affected by emergencies in a number of ways. These included providing emergency relief kits to more than 134,000 families and basic water, hygiene and sanitation packages to 588,800 people, and treatment for 2,500 people with cholera. In addition, more than 55,000 children had better access to education, and 47,300 vulnerable or conflicted-affected children participated in child-friendly spaces.

## FUNDING REQUIREMENTS FOR 2011

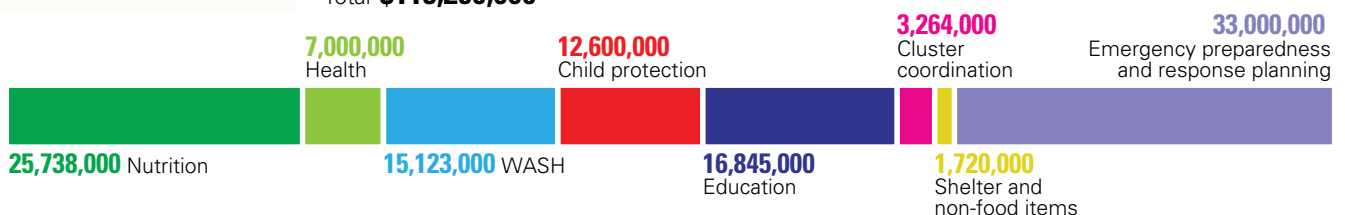
UNICEF is requesting US\$115,290,000 to carry out its planned humanitarian activities in the Democratic Republic of the Congo. This request is aligned with the 2011 Humanitarian Action Plan (HAP). Immediate and full funding is necessary to support the protection and recovery of women and children.

**More information on achievements of 2010 and the humanitarian action planned for the Democratic Republic of the Congo in 2011 can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011).**

1. United Nations High Commissioner for Refugees, 'Internally Displaced Persons (IDP) – Fact Sheet: Democratic Republic of Congo', UNHCR, Geneva, April 2010, p. 1.

## UNICEF EMERGENCY NEEDS FOR 2011 (in US dollars)

Total **\$115,290,000**





# Niger

## CHILDREN AND WOMEN IN CRISIS

The great humanitarian crisis that affected the Niger in 2010 deprived its people of the most important essential for life: food. This story of hunger echoed throughout the Sahel region, where climate change, demographic pressure and outdated farming techniques have stripped the people of their ability to feed themselves. In the Niger, food insecurity threatened 7.1 million of people, almost half of the country's population.<sup>1</sup> Children were hit hardest. Acute malnutrition in children rose to 16.7 per cent, with a peak of 26.1 per cent in those under age 2.<sup>2</sup> Unprecedented humanitarian action backed the Government of the Niger response and helped avoid a heavy death toll. Over 200,000 tons of food aid<sup>3</sup> were distributed to vulnerable families, and over 300,000 children were treated for severe acute malnutrition in therapeutic feeding centres.<sup>4</sup> Abundant rains in second-half 2010 raised hope for good harvests, but floods and outbreaks of cholera and malaria added hazardous elements and increased distress. Although the food outlook for 2011 is better than in 2010, chronic and acute undernutrition are expected to remain high. The country faces widespread poverty, limited health infrastructure and inadequate education facilities. In the northern area, the presence of Al-Qaida further complicates humanitarian access.

### HUMANITARIAN FUNDING AT WORK: HIGHLIGHTS FROM 2010

In 2010, UNICEF estimated that US\$38,735,292 was needed to fund its humanitarian work in the Niger. As of October 2010, a total of US\$27,205,183, or 70 per cent, had been received. With this funding, UNICEF ensured treatment of more than 300,000 children, aged 6–59 months and suffering from severe acute malnutrition, through the national network of 822 health centres that were strengthened with training (700) and recruitment of health workers (122). In partnership with the World Food Programme and 20 national and international NGOs, UNICEF co-funded operational costs of a blanket feeding operation that reached 675,000 children 6–23 months old. To improve food security in vulnerable households and prevent misuse of supplementary food, UNICEF set up an emergency cash transfer programme for 35,000 families. Flood-affected families in the Maradi, Niamey and Zinder Regions were provided with clean water and sanitation facilities and 33,191 emergency family kits. Psychosocial support and awareness-raising helped protect 13,000 flood-affected women and children from abuse, violence and exploitation. Repairs to flood-damaged schools allowed 7,000 students to resume their education.

## MEETING URGENT NEEDS AND BUILDING RESILIENCE IN 2011

As cluster lead agency for nutrition, protection and WASH, UNICEF will continue to work with the Government of the Niger, other UN agencies, and local and international NGOs as well as host communities in addressing the needs of more than 2 million children.

- At 822 therapeutic feeding centres, 200,000 children aged 6–59 months will be treated for severe acute malnutrition. More than 500,000 children will benefit from blanket feeding during the lean season.
- UNICEF will ensure immunization of 200,000 children against meningitis, supply 400,000 insecticide-treated mosquito nets, and provide health centres with medicine and equipment to treat 1.6 million paediatric cases of malaria and 1,500 cases of cholera.
- 200,000 households will receive water-purification tablets and 5,000 wells will be treated with calcium hypochlorite. Water tanks and latrines will be installed in flood-affected areas and water points restored in schools, hospitals and health centres.
- UNICEF will promote and protect the rights of children and women affected by natural disasters by providing psychosocial support, protection from violence and abuse, information through local media, and training for 400 humanitarian workers and 240 service providers among police, health promoters and social workers.

## FUNDING REQUIREMENTS FOR 2011

UNICEF is requesting US\$37,062,000 to carry out its planned activities in the Niger. This request is in line with Consolidated Appeals Process (CAP) requirements. Generous and rapid funding is needed to prevent child deaths due to malnutrition and disease.

**More information on 2010 achievements and details of humanitarian action planned for Niger in 2011 can be found at [www.unicef.org/hac2011](http://www.unicef.org/hac2011).**

1. National Institute of Statistics, 'Vulnerability and Food Security Survey in Niger', INS-Niger, Niamey, April 2010.
2. National Institute of Statistics and Ministry of Public Health, 'National Nutrition Survey', INS-Niger, Niamey, June 2010.
3. Nutrition crisis unit, Cabinet of the Prime Minister, *Projet de plan de soutien aux populations vulnérables 2010–2011* [Plan to support vulnerable populations], Republic of the Niger, Niamey, October 2010, p. 13.
4. United Nations Children's Fund, 'Scaling-Up' Niger 2010', UNICEF Niger, Niamey, November 2010, p. 1.

## UNICEF EMERGENCY NEEDS FOR 2011 (in US dollars)

Total **\$37,062,000**





# Photo Captions

## COVER

### BÉNIN

© UNICEF/NYHQ2010-2203/Asselin

In October 2010 in Benin, a boy avoids floodwaters as he returns from school in Mono Department. A dramatic increase in natural disasters has strained local capacities, leaving children and women increasingly vulnerable.

## FOSTERING RESILIENCE, PROTECTING CHILDREN: UNICEF IN HUMANITARIAN ACTION

### PAKISTAN

© UNICEF/NYHQ2010-1797/Ramoneda

Children displaced by massive flooding attend a temporary learning centre at a UNICEF-supported camp in the city of Sukkur. Early Warning, Early Action systems linking global, national and local responses are crucial to mitigating human suffering. Page viii.

## GLOBAL SUPPORT FOR UNICEF EMERGENCY RESPONSE OPERATIONS

### HAITI

© UNICEF/NYHQ2010-1299/Ramoneda

A Haitian girl carries water in a Port-au-Prince camp for people displaced by the 12 January earthquake. The devastating Haiti quake and the Pakistan flood emergency were only two of more than 200 emergencies UNICEF responds to every year. Page 13.

### ASIA-PACIFIC

© UNICEF/NYHQ2010-1628/Ramoneda

A girl stands near a tent camp for people displaced by flooding in Sukkur City, Sindh Province (Pakistan). In 2010, monsoon rains affected 20 million people in Pakistan alone. In 2009, 89 per cent of victims of global natural disasters were in Asia. Page 17.

### AFGHANISTAN

© UNICEF/NYHQ2010-0790/Holt

A young woman holds her daughter outside their home in Helmand Province. Neither the woman nor any of her 17 siblings attend school because there are none in the area. Five million Afghan children, mostly girls, do not have access to education. Page 20.

### DEMOCRATIC PEOPLE'S REPUBLIC OF KOREA

© UNICEF/NYHQ2004-0536/Horner

A woman cleans poultry at a UNICEF-supported water and sanitation cistern in North Hwanghae Province. Recurrent natural disasters and decreased international food aid have caused severe food shortages; 37 per cent of the population is dependent on food aid. Page 21.

### MYANMAR

© UNICEF/NYHQ2008-0352/Dean

Workers rebuild a cyclone-damaged home in Yangon Pauk in the south-western Irrawaddy Division. Cyclone Nargis, which affected millions of people in 2008, and Cyclone Giri, which affected 260,000 in 2010, have left thousands of people homeless. Page 22.

### PAKISTAN

© UNICEF/NYHQ2010-1636/Ramoneda

Displaced children cook over an open fire near a camp in Sukkur City, Sindh Province. Flooding in 2010 from heavy monsoon rains affected 20 million people, an immense emergency in a country also coping with conflict and widespread poverty. Page 23.

### PHILIPPINES

© UNICEF Philippines/2010/Palasi

A boy participates in recreational activities at a day-care centre in Isabela Province, one of several regions affected by typhoons this year. Filipinos are subject to ongoing cycles of natural disasters and conflict. Page 24.

### SRI LANKA

© UNICEF/2007-2642/Haviv

A girl queues with her mother at a nutrition clinic in Vaharai Village, Batticaloa District. The country continues to recover from 30 years of war, as refugees and the internally displaced return home and social services are slowly rebuilt. Page 25.

## CENTRAL AND EASTERN EUROPE AND THE COMMONWEALTH OF INDEPENDENT STATES

© UNICEF/NYHQ2010-1249/Volpe

Zulhumar Amanbaev kisses her son, Abdulmutalib, in their home in Jalal-Abad, Kyrgyzstan. Natural disasters in Tajikistan and the political crisis in Kyrgyzstan have displaced hundreds of thousands and increased health risks for children. Page 27.

### KYRGYZSTAN

© UNICEF/NYHQ2010-1249/Volpe

Brothers stand in the ruins of their fire-gutted home in the southern city of Jalal-Abad. Ethnic tensions remain high since the June 2010 outbreak of violence, exacerbating food and other shortages in Central Asia's second-poorest country. Page 30.



## **TAJIKISTAN**

### **© UNICEF Tajikistan/2010/Sodiqov**

A girl receives an oral polio vaccine during a country-wide immunization campaign. The first known outbreak of polio in the country since 1997 struck 458 people, nearly 90 per cent of them children under age 15.

Page 31.

## **EASTERN AND SOUTHERN AFRICA**

### **© UNICEF/NYHQ2007-0004/Kamber**

Children walk down a debris-strewn street in Mogadishu, the capital of Somalia. Conflict and disaster emergencies continue to negatively affect millions of people in Eastern and Southern Africa, exacerbating health, nutrition and education shortfalls.

Page 33.

## **BURUNDI**

### **© UNICEF Burundi/2009/Amani**

A child formerly associated with a rebel group is reunited with his mother in Bujumbura Rural Province. Increased political unrest is putting more children at risk of violence, including forced recruitment into armed groups.

Page 36.

## **ERITREA**

### **© UNICEF/NYHQ2008-1641/Pirozzi**

A health worker measures a toddler's mid-upper arm circumference to gauge his nutrition status. Pervasive child undernutrition is one result of ongoing political instability, food insecurity and recurrent natural disasters.

Page 37.

## **ETHIOPIA**

### **© UNICEF/NYHQ2009-2272/Holt**

Asiya Abdu, pregnant with her fifth child, stands in the home she shares with 20 family members, in Undada Village. Poverty, inadequate basic services and recurrent droughts and floods continue to threaten the welfare of children and women.

Page 38.

## **KENYA**

### **© UNICEF/NYHQ2006-0163/Kamber**

A Masai woman reads to her children in Kajiado Village, near Nairobi. Only four of the family's 80 cows survived a recent drought. Today, more than 40,000 Kenyan children suffer from severe acute malnutrition.

Page 39.

## **MADAGASCAR**

### **© UNICEF/NYHQ2009-1246/Pirozzi**

Children line up for lunch at a primary school in Soavinandriana District, Itasy Region. Recurrent natural disasters, poverty and political upheaval are likely to lead to a worsening of the nutritional status of more than 100,000 children.

Page 40.

## **SOMALIA**

### **© UNICEF/NYHQ2009-0639/Kamber**

A woman holds her son and peers through a thicket in a camp for people displaced by drought and conflict, near Dhusamareb. An estimated 2 million people, or 27 per cent of all Somalis, require humanitarian assistance.

Page 41.

## **UGANDA**

### **© UNICEF/NYHQ2010-1461/Noorani**

A family sits outside their home after a recent rain in Busoru III Village. Uganda is still recovering from a deep humanitarian crisis in the north. Lingering problems of displacement, undernutrition and inadequate sanitation continue to affect many people.

Page 42.

## **ZIMBABWE**

### **© UNICEF/NYHQ2008-1488/Nesbitt**

A woman and girl wait to be treated for cholera at a village clinic in Mashonaland West Province. Children and women remain under threat from political and economic crises, widespread poverty, a low level of social services, HIV and food insecurity.

Page 43.

## **MIDDLE EAST AND NORTH AFRICA**

### **© UNICEF/NYHQ2007-0737/Kamber**

During an electricity blackout, Amna, 7, lights candles at her home in Damascus, Syria. She and her family are refugees from the conflict in Iraq. Many children and women in the region lack access to essential services and protection systems.

Page 45.

## **DJIBOUTI**

### **© UNICEF Djibouti/2004/Pirozzi**

A girl participates in a school event in Balbala, on the outskirts of Djibouti's capital city. Persistent drought, food insecurity and conflict in neighbouring countries continue to threaten the welfare of the country's children and women.

Page 48.

## **IRAQ**

### **© UNICEF/NYHQ2010-0694/Kamber**

A boy stands on a debris-choked street in the city of Nasariyah, in Dhi Qar Governorate. Since the war began in 2003, violence has displaced millions of Iraqis, decimated infrastructure and deepened poverty.

Page 49.

## **OCCUPIED PALESTINIAN TERRITORY**

### **© UNICEF/NYHQ2009-0154/Pirozzi**

The climate of violence and distress in the Occupied Palestinian Territory emerges in a girl's drawing created as part of a group activity at a school in Qabatya in the West Bank. Many Palestinian children need ongoing psychosocial support.

Page 50.

## **SUDAN**

© UNICEF/NYHQ2006-0559/Noorani

Children and women line up to collect water, in the Abu Shouk camp, near El Fasher, capital of North Darfur State. Some 4.3 million Sudanese remain displaced by years of conflict.  
Page 51.

## **YEMEN**

© UNICEF/NYHQ2009-1734/Brekke

A woman bathes her son outside their tent in the Al-Mazrak camp in Hajja. Acute emergencies and chronic underdevelopment, characterized by shortages of food, water, sanitation and health care, have displaced hundreds of thousands of people.  
Page 52.

## **LATIN AMERICA AND THE CARIBBEAN**

© UNICEF/NYHQ2010-2639/LeMoyne

A girl stands in her Port-au-Prince home, which was heavily damaged by the 12 January 2010 earthquake in Haiti. Natural disasters characterize major emergencies in the region, which also has great disparities between rich and poor.  
Page 53.

## **COLOMBIA**

© UNICEF/NYHQ2009-1773/Markisz

Carlitos, 8, stands in front of his home, which sits on a toxic landfill in a poor Medellín neighbourhood. Decades of armed conflict, drug-related violence and recent intense flooding have displaced millions and deepened social inequalities.  
Page 56.

## **GUATEMALA**

© UNICEF/NYHQ2007-2754/Versiani

A girl walks on a dirt road in Salquil Grande Village, El Quiché Department. In 2010, irregular rains and unusually high temperatures cut food production, leading to high levels of undernutrition among children.  
Page 57.

## **HAITI**

© UNICEF/NYHQ2010-2128/Dormino

Sisters are treated for cholera in Artibonite Department. The cholera epidemic that began in October 2010 struck a blow to efforts to recover from the 12 January earthquake that killed more than 222,000 people and displaced more than 2 million.  
Page 58.

## **WEST AND CENTRAL AFRICA**

© UNICEF/NYHQ2010-1160/Gangale

Women bring their children for nutrition screenings in Nokou, Chad. Cyclical drought, severe pressure on limited natural resources and outdated farming practices have crippled food production in the Sahel region.  
Page 59.

## **BURKINA FASO**

© UNICEF Burkina Faso/2009/Tarpilga

A girl who was displaced by floods in 2009 eats ready-to-eat therapeutic food in Ouagadougou, Burkina Faso's capital. Entrenched poverty, flooding

and epidemics continue to challenge the country, despite a recent decline in global acute malnutrition rates.

Page 62.

## **CAMEROON**

© UNICEF/NYHQ2010-2322/Bouvet

Martine Daoundala sits outside her home with her daughter in the village of Ziver. Children and women in the eastern and northern regions of Cameroon struggle to share limited access to health and other services with a fluctuating refugee population.  
Page 63.

## **CENTRAL AFRICAN REPUBLIC**

© UNICEF Central African Republic/2009/de Hommel

Children stand in the town of Boura. Deep poverty, resurgent conflict and the flow of refugees from neighbouring countries, have left the country's children vulnerable to disease and exploitation.  
Page 64.

## **CHAD**

© UNICEF/NYHQ2010-1152/Asselin

A boy sits in a transit and orientation centre for children formerly associated with armed forces or groups in N'Djamena. Such recruitment remains a critical problem in eastern Chad.  
Page 65.

## **CONGO**

© UNICEF/NYHQ2010-2803/Asselin

A girl carries a boy in Djambala, where UNICEF participated in polio vaccination campaigns in late 2010 during the country's deadly polio outbreak. The epidemic was centred around the port city of Pointe-Noire.  
Page 66.

## **CÔTE D'IVOIRE**

© UNICEF/NYHQ2010-2469/Kamber

A girl carries a bowl in a market in Adjamé, a poor neighbourhood in the city of Abidjan. Ongoing conflict, including violently disputed national elections, have exposed children and women to exploitative labour and sexual violence.  
Page 67.

## **DEMOCRATIC REPUBLIC OF THE CONGO**

© UNICEF/NYHQ2008-1328/Asselin

Adolescent survivors of sexual violence wait to be seen at a hospital in Goma. By late 2010, an estimated 1.7 million Congolese were still displaced by conflict, and sexual violence was continuing at catastrophic rates.  
Page 68.

## **NIGER**

© UNICEF/NYHQ2010-1593/Holtz

A girl drinks a mixture of millet, milk and sugar in a village in Maradi Department. Inadequate rainfall, outdated farming methods and demographic pressure are causing food insecurity that threatens half the country's population.  
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**UNICEF**

Office of Emergency Programmes  
Palais des Nations  
1211 Geneva 10, Switzerland

**[www.unicef.org/hac2011](http://www.unicef.org/hac2011)**

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