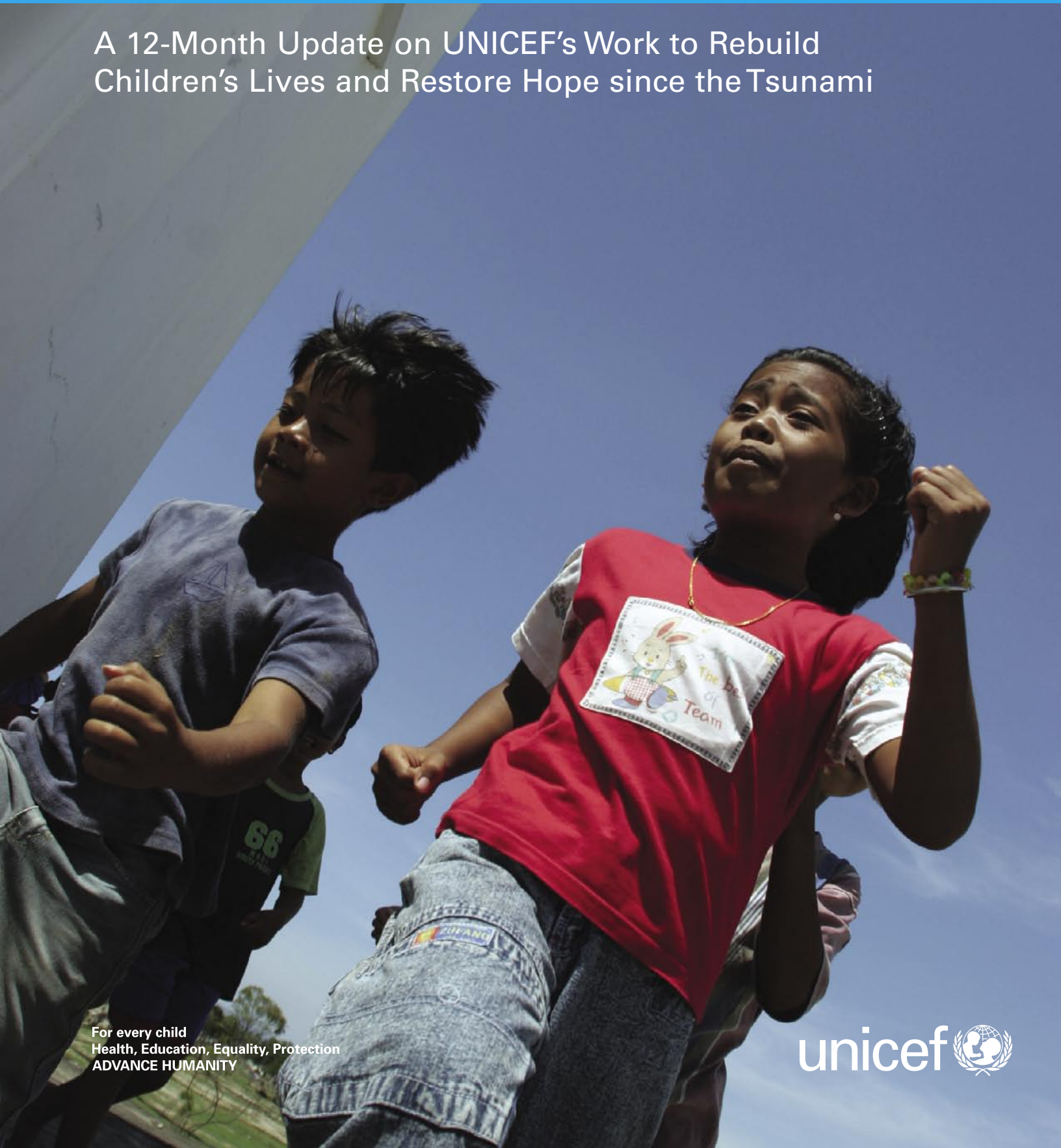


BUILDING BACK BETTER

A 12-Month Update on UNICEF's Work to Rebuild Children's Lives and Restore Hope since the Tsunami



For every child
Health, Education, Equality, Protection
ADVANCE HUMANITY

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Inside front cover, page 21
and inside back cover:
Drawings by children in
a psychosocial recovery
programme, sponsored by
the Government of Maldives
with UNICEF support.

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UNICEF Executive Director Ann M. Veneman joins girls at the Bharathypuram School in Killinochchi Town, Sri Lanka, in June 2005. The school was rebuilt with UNICEF assistance.

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THE GRADUAL RETURN OF HOPE

The massive destruction and loss of life caused by the tsunami required an unprecedented emergency response. And the world did respond, speedily and generously. A unique international relief effort prevented any major outbreaks of disease and has since provided for the general health and well-being of hundreds of thousands of people.

The work is far from over. Almost 12 months later, tens of thousands of families are still in temporary encampments and the process of rebuilding is really just beginning to move from conference rooms and drawing boards to bricks and mortar.

Yet every week has brought progress. People have been kept alive and healthy. Families have been reunited. More than 90 per cent of children were back in school within three months. Temporary schools and health centres have been built. And while these basic services have taken shape – often with community consultation – policies and standards are being put in place by national legislatures and local governments.

UNICEF country teams across the tsunami zone have played an important role in this enormous undertaking, from delivering immediate relief and ongoing care, to suggesting sensible standards and policies related to children, to actually building and

supplying schools, health centres, water and sanitation systems, and other facilities to improve the lives of children and families.

We could not have done this vital work without you. Millions of people around the world sent contributions to UNICEF within hours and days after the tsunami, expressing not only their concern for the children affected by the disaster but their ongoing faith in UNICEF's mission for children and its readiness to deliver in both the short and long run.

Your support has made it possible for UNICEF to respond quickly and sustain that response through these past 12 months. And your generosity will enable UNICEF to continue through the months ahead, as we replace temporary schools with permanent ones, replace makeshift health sites with new community clinics, and continue to work with our partners to rebuild the human capacity so tragically lost in the tsunami.

This update provides an overview of what UNICEF has been able to contribute to the recovery of the tsunami generation of children – children who lost everything, including their sense of hope. We have made important strides so far and look forward to making even more progress in the months just ahead.

Most importantly, we are seeing hope and optimism return. Through the ongoing work of relief and recovery, those who survived the tsunami have come to embrace the opportunity they now have to 'build back better'. We are inspired – every day – by their fortitude and heart. I was personally touched to see pictures of art that were sent as a show of solidarity and caring by children in the Banda Aceh region of Indonesia to children in the United States affected by Hurricane Katrina.

UNICEF could not have been there to support this extraordinary process of renewal if you had not been there for UNICEF. On behalf of the children whose lives your generosity has touched, we simply say, thank you.

Ann M. Veneman
Executive Director

BUILDING BACK BETTER

Important steps on a long road to recovery

It has been almost 12 months since the Indian Ocean earthquake and tsunami struck on December 26, 2004. More than 200,000 people perished or remain missing, more than a third of them children. The children who survived lost parents and siblings, teachers and doctors. They lost homes and schools. They lost their entire way of life.

With field programmes in each of the affected countries, UNICEF was in a position to respond quickly in coordination with governments and a wide range of partners within the United Nations and beyond. In the first weeks, the UNICEF emergency supplies delivered to the region became part of a concerted global response that saved lives and prevented outbreaks of disease.

UNICEF is both an emergency relief agency and a long-term development agency. We were founded in the wake of World War II to provide relief and renewal for children in Europe. Now operating in 157 countries and territories worldwide, UNICEF responds to natural disasters based on what we know is needed for children's healthy development over the long run, as well as what is urgently needed in times of crisis.

In general, these past months have been devoted to three kinds of activity. First was the immediate emergency relief effort, when the world sprang forward with contributions, supplies, relief workers and equipment. UNICEF was among the earliest to respond, shipping life-saving supplies into the region from local stocks and suppliers around the world. Ensuring that survivors were kept alive was the top priority, along with setting up the core of a relief operation that would grow over many months.

The second key activity has been to provide basic services on an ongoing basis to hundreds of thousands of displaced families. This effort requires us to continually expand delivery of safe water; provide adequate sanitation, immunization and basic care; reopen schools and deliver learning materials; and identify separated and unaccompanied children (who lost both parents), reunite them with family and ensure they are well cared for. While living conditions remain challenging for displaced families, basic health, nutrition, water and education needs are being met.

The third area of activity may be less visible but is crucially important: the process of planning and consensus-building. Apart from preserving life, health and basic protection, nothing is as important in a recovery effort of this magnitude as empowering people to take charge of their own future.

UNICEF has engaged daily in the tough, detailed work of coordinating with partners, governments, contractors and local communities. Our objective has been to ensure that funds we invest in the recovery of children go where they are most needed, are well spent, are sustainable and have lasting impact. Most importantly, we want our contributions to reflect the wishes and insights of the people most affected.

The tsunami wiped away not just buildings, but also many records of property ownership. Procedures for reconstructing land titles,

establishing new zoning and deciding where to build have slowed the pace of permanent construction. But in the interim, UNICEF has built temporary structures to serve as classrooms and health clinics. In Sri Lanka and Indonesia alone, 200 temporary or semi-permanent schools will be completed in 2005 by UNICEF in consultation with local communities. These will eventually be replaced by permanent facilities, but the short-term structures serve the dual purpose of putting children back in the classroom while acting as a magnet for community rebuilding.¹

UNICEF has also invested considerable time and thought in helping to set standards for the entire recovery effort. UNICEF helped set up systems that registered and identified lost children. Our plans for 'child-friendly' schools are being embraced by national governments as the template for all new schools in tsunami areas (and beyond, in some cases).

UNICEF research and advocacy led to policies to protect children from trafficking and ensure long-term care for orphans that emphasizes foster families over institutions. And even our work in keeping children healthy has reached beyond tsunami-affected areas to ensure that children in host families further inland are benefiting from immunization campaigns, vitamin A supplementation and other outreach activities.

In these ways and UNICEF has upheld the promise of 'building back better'. Our commitment to rapid results when they are essential to the well-being of children has been balanced with a deep commitment to fairness, sustainability and quality.

One reflection of our commitment to quality is good stewardship paired with effective use of funds. After less than one year of work, UNICEF has spent about a third of the US\$626.6 million we received from donors around the world.² UNICEF's spending in this first phase has focused on basic supplies, temporary construction, training and capacity-building and, vitally, on mobilizing UNICEF's experienced staff of experts who live in the affected areas and make the relief effort happen.

In the next few months, as construction begins on permanent schools and health facilities, UNICEF offices in the field will commit a large part of the remaining funds. Then, as now, we will focus first and foremost on the track record of our implementing partners, the quality of work delivered, and the adherence to high standards set in consultation with local communities and government.

In the pages ahead you will find country-by-country breakdowns of key activities, current and future spending, and plans and challenges. Taken together, this information represents the hard work, creativity, knowledge and passionate commitment to children of thousands of UNICEF workers and their partners in government, in other non-profit agencies, in private enterprise and in the affected communities themselves.

¹ The temporary or semi-permanent schools are prefabricated and can last from 5 to 15 years; they typically house three classrooms.

² Cash contributions based on UNICEF financial records as of 1 November 2005. All expenditure figures are interim; final expenditure figures for 2005 will be produced in early 2006.

UNICEF ASSISTANCE IN THE TSUNAMI YEAR

During the past year, UNICEF has been able to reach an estimated 3.5 million children and women in tsunami-affected areas. Nearly 1.2 million children were immunized against measles as part of UNICEF-supported campaigns and more than a half million children and mothers were given insecticide-treated bednets to protect against malaria.

To help bring children back to school, 184 temporary or semi-permanent schools were constructed and 370 schools were repaired. About 1.4 million children benefited from emergency education supplies, and 630,000 received textbooks with UNICEF support. UNICEF assisted the registration, placement and reunification of 3,793 separated/unaccompanied children in affected areas. To date, 318,000 children who experienced trauma have benefited from UNICEF-assisted psychosocial activities.

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INDONESIA

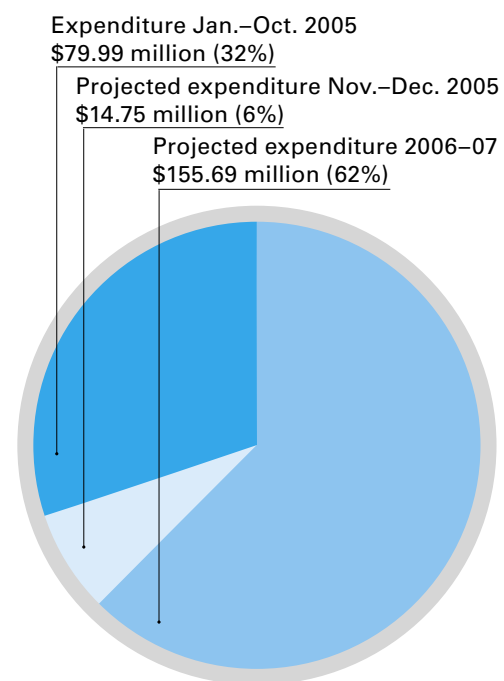
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The large province of Aceh presents two sides of the disaster: that of Banda Aceh, the provincial capital that witnessed extraordinary and well-documented destruction, and the remote towns and villages along the coasts that suffered in relative obscurity. UNICEF is working hard to reach both, ensuring that no children are left out. Major successes include the prevention of any serious outbreaks of disease, and the delivery of learning materials and supplies to virtually every part of the province in an all-out effort to get children back in school.

Addressing both the immediate and longer-term needs of Aceh's children is a core principle guiding UNICEF's work. We continue to help deliver basic services – including health care, safe water and education – to families living in temporary encampments. At the same time, we have been working to establish a foundation for the resurgence of local communities through planning for permanent schools, health centres, and basic water and sanitation systems. Some of these projects are already under way. With each new school or health centre that opens, we have seen a bit of vibrancy return – and with it a little more hope for children and their families.

Recovery for Aceh will take time. But UNICEF is committed to being part of the whole journey, helping every step of the way.

FINANCIAL SUMMARY



Child survival

Immediately after the tsunami, UNICEF rushed in to deliver medical supplies and since then has continued to support basic health care for children. In this massive effort, 1,113,494 children under 15 have been immunized against measles, 493,699 children have received vitamin A supplements, 26,040 pregnant women were supplied with iron tablets, and 199,924 women and children received insecticide-treated bednets to protect them against malaria. UNICEF has also provided 14 ambulances to 11 districts in Aceh, and 2,000 midwives are being supported with training or supplies to help ensure safe deliveries in the temporary encampments. UNICEF is now helping to construct new village health posts that will enable the people of Aceh to achieve a level of care they have never had before. And, because of an incursion of polio from outside Indonesia, UNICEF launched a major campaign to prevent polio.

Water and sanitation

UNICEF and partners helped bring clean, safe water to 376,600 people by rehabilitating two permanent and five mobile water treatment plants and providing nine tanker trucks. UNICEF also delivered 224,325 hygiene kits to individuals and families living in camps and temporary centres and trained 1,439 people to teach good hygiene practices.

Child protection

Working with local partners, UNICEF opened and continues to operate 21 special children's centres that offer learning, counselling and play activities in the temporary encampments. Nearly 20,000 children participated in games and recreational activities designed to help them cope with trauma. UNICEF and its partners have registered 2,242 separated and unaccompanied children and reunited 376 children with their families. To protect the children from violence and abuse, 140 policewomen were trained and deployed at the community level.

Back to school

Within weeks of the tsunami, UNICEF made schooling possible again, delivering textbooks and other learning supplies for 830,000 children across the entire disaster-affected area, even in remote villages. One year after the tsunami, more than 100 temporary or semi-permanent schools will be finished and another 100 are on the way. Already, 591 temporary learning centres have been set up in camps for internally displaced persons, mosques, community centres and other locations. UNICEF is providing salaries for 1,110 substitute primary school teachers for six months, as well as covering the salaries of 400 childcare workers – enabling 4,000 children to begin preschool. UNICEF has also delivered 6,940 'school-in-a-box' kits and other educational supplies – enough to cover 555,200 children in shelters – and 4,365 recreation kits that enable 349,200 children to take part in team sports and games.

Challenges

- Ensuring that safe water and sanitation services reach all locations where tens of thousands of families are still encamped has been a challenge in a region where fresh water is a precious commodity. One solution: UNICEF is providing safe-water systems with each new school it builds.
- Despite massive recruitment and training programmes, there are still shortages of health workers and teachers. It is estimated that 2,000 teachers were lost in the tsunami.
- Recovery is slow, as many families who have lost their livelihoods still rely on relief support.
- Coordination among more than 200 organizations, agencies and individuals working on various recovery projects is a continuing challenge.

Building back better

UNICEF is working closely with local education officials and communities in affected areas to construct hundreds of temporary schools, incorporating 'child-friendly' standards that include stronger foundations to protect against earthquakes, separate water/sanitation facilities for girls and boys, improved access for disabled students, and better classrooms and playgrounds. UNICEF is also assisting the Government of Indonesia to develop systems of foster care for separated children.



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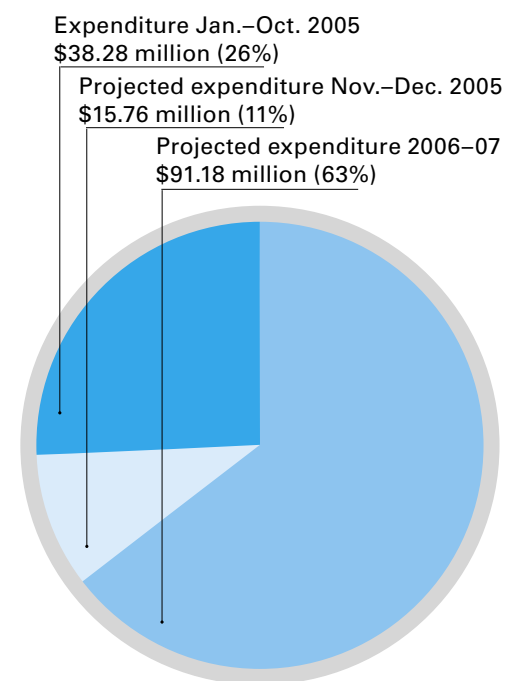
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In the immediate emergency, UNICEF released pre-positioned supplies across the country and rushed them into the affected coastal areas. It also opened suboffices in the heart of affected communities and helped prevent disease outbreaks with the rapid delivery of medical supplies, safe water and immunization campaigns.

UNICEF has had an impact far beyond immediate relief. As an established and trusted partner of the government, UNICEF has been in a position to offer guidelines for a 'child-friendly' recovery, including criteria for new schools, recommendations on foster care for orphaned children, standards for safe wells and water systems, and the building blocks for a national psychosocial care programme for traumatized children.

In concrete terms, UNICEF has helped get more than 95 per cent of children back in school. (And many of the temporary schools built by UNICEF are better than the ones they replaced.) UNICEF is redesigning and rebuilding the national cold chain, which keeps vaccines refrigerated and fresh from the moment they arrive in a country until they reach even the most remote locations. In all these ways and more, UNICEF is helping Sri Lankans to 'build back better'.

FINANCIAL SUMMARY



Child survival

Within 72 hours of the tsunami, UNICEF provided emergency health kits containing essential drugs and supplies for up to 150,000 people for three months in affected areas. UNICEF has delivered 91,000 insecticide-treated bednets to prevent malaria, as well as 1.6 million vitamin A capsules to boost 380,000 children's resistance to disease. UNICEF is rebuilding the cold chain for vaccines and supporting immunization campaigns in the tsunami zone.

Water and sanitation

In the immediate aftermath of the disaster, UNICEF distributed 100,000 bottles of water, 25,000 water-purification kits, and essential household and hygiene supplies for 66,000 families. UNICEF joined forces with other agencies to provide safe water daily in nearly 220 camps and settlements, and to date has completed construction of about 2,400 latrines. UNICEF worked closely with the Government of Sri Lanka to develop public information messages on health promotion, prevention of disease and safe hygiene. Some 250,000 people were provided with temporary wooden shelters, but construction of the shelters outpaced construction of water and sanitation facilities; UNICEF continues to help upgrade water and sanitation service in these areas, including contingency planning for the upcoming rainy season.

Child protection

Along with the Sri Lankan government and non-governmental organizations, UNICEF worked to identify and register unaccompanied children and reunite them with their families. To date, 6,538 separated, unaccompanied and single-parent children have been visited by social workers. UNICEF set up 'child-friendly' spaces in camps and villages and distributed 1,350 recreational kits containing sports, games and art materials so that children could play. UNICEF and partners are also reaching out to 32,092 children by offering psychosocial activities in nearly 50 projects. One stunning success has been the placement of 967 separated children with members of their families.

Back to school

To quickly draw children back into learning environments, UNICEF dispatched school supplies for 128,825 students. These included 3,100 school-in-a-box kits, 52,000 desks and chairs, 114,000 school bags, and material to make uniforms. To replace destroyed materials, UNICEF also assisted in printing new textbooks for 160,000 students. UNICEF supported the repair of 104 schools – cleaning, painting and, in some cases, repairing toilets and sanitation facilities. UNICEF is supporting the construction of 114 temporary or semi-permanent schools while working to construct or repair 26 permanent schools.

Challenges

- Families remain in transitional accommodations because permanent housing – a top priority – is difficult to find.
- Commitment to build back at higher standards requires long-term planning but must be balanced against providing daily assistance.
- Reconstructed health centres and schools need to be adequately staffed. There is still a human resources gap, despite government training and redeployment of staff.
- Due to an insufficient number of experienced contractors, construction is moving more slowly in areas controlled by the Liberation Tigers of Tamil Eelam (LTTE).

Building back better

A three-year recovery plan (2005-2007), supported by UNICEF in Sri Lanka's 10 most affected districts, includes the construction and rehabilitation of 36 health centres and hospitals, rehabilitation and improvement of water supply and sanitation facilities, the construction of 26 'child-friendly' schools and the repair and construction of 77 social-care centres for children.

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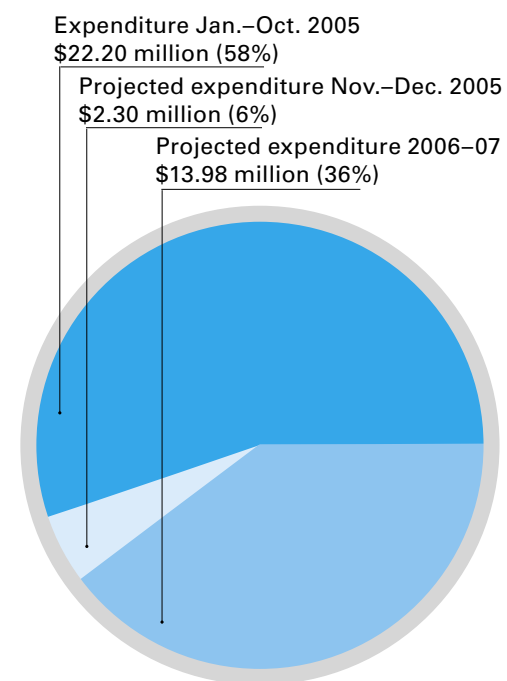


MALDIVES

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The well-being of children remains a concern in Maldives, where the tsunami affected most of the islands, destroyed the livelihoods of about one third of the population and displaced one tenth of the islands' people. Yet recovery is under way and basic services are functional.

FINANCIAL SUMMARY



Child survival

Mobile teams conducted three rounds of immunization on the 199 inhabited islands of Maldives, reaching more than 95 per cent of children with vaccines against measles, polio, tuberculosis, diphtheria, pertussis, tetanus and hepatitis B. By the end of the year, a campaign conducted with the World Health Organization (WHO) will reach 100,000 children and young adults – a 90 per cent coverage rate – with vaccines against measles and rubella. Health systems are being re-established and have begun to resume regular service. Malnutrition, a chronic problem, has been exacerbated by the tsunami and will be a UNICEF priority in the medium to long term.

Water and sanitation

As the lead agency for the water and sanitation sector in Maldives, UNICEF provided and supported the installation of 23 reverse-osmosis desalination units (5 of which are mounted on boats for rapid distribution), with a potential combined daily capacity of supplying 230,000 litres of potable water across the country. Through UNICEF's assistance, more than 37,000 people are benefiting from improved rainwater harvesting capacity made possible by the delivery of 2,600 water storage tanks, while more than 50,000 people benefit from new desalination units. Additionally, 1,500 septic tanks for the installation of environmental sanitation systems and sewage treatment units will be delivered in the coming months.

Child protection

A UNICEF-supported training course provided 321 teachers with basic skills in recognizing trauma and in the use of creative arts and expressive therapy. More than 1,000 children, parents, teachers and health workers participated in workshops, organized by UNICEF in collaboration with the government, on coping with the psychological impact of the tsunami. In total, 21,000 children benefited from psychosocial support.

Back to school

UNICEF assisted in the repair of 39 existing schools and 15 teachers' quarters. About 24,000 children received recreation materials, and 28,636 received school supplies, textbooks, uniforms, bags and toys. To address a shortage of teachers after the tsunami, UNICEF supported the deployment of 180 final-year education students as temporary teachers, making it possible to reopen the schools only two weeks after the scheduled start of the school year. By the end of 2005, about 50 community preschools will have been rehabilitated and converted into integrated early childhood development centres.

Challenges

- Mobile teams need to reach a dispersed population to make sure that every child is immunized. The government is addressing this problem by enabling health posts to store vaccines locally.
- Lack of transportation was a major constraint even before the tsunami; when jetties were destroyed it got worse. In addition, the cost of transport has tripled.

Building back better

In Maldives, building back better begins in the education sector. A key initiative over the next two years will be the establishment of 20 training resource centres, equipped with broadband Internet access, which will provide teachers with on-the-job training. As part of the 'child-friendly' schools concept, quality and safety improvements are planned in more than 100 preschools and 90 primary schools during the next two years. To enhance this island nation's long-term psychosocial response, counsellor training, peer support programmes and a 24-hour telephone helpline are being established with UNICEF assistance. Actions to ensure safe drinking water continue as part of UNICEF's ongoing support in Maldives, along with the installation of environmentally friendly sewage treatment systems.

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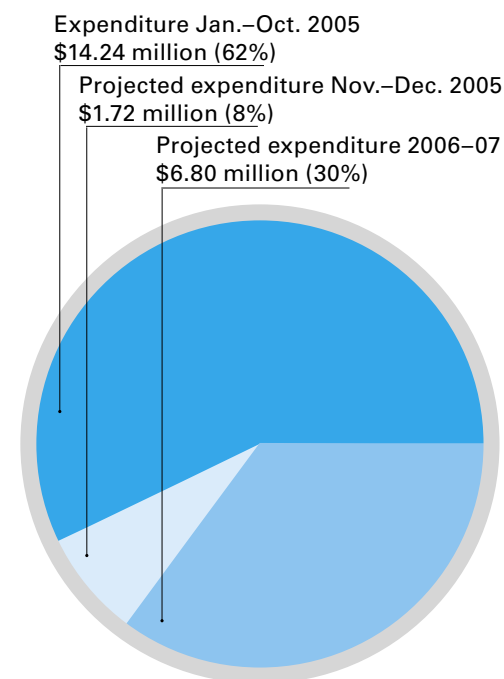
INDIA

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Of 18,045 people who lost their lives in the tsunami or remain missing, an estimated one third were children. The largest toll was in the state of Tamil Nadu, with nearly 8,000 dead or missing.

UNICEF, the Government of India and other partners have worked towards a shared goal – to keep children alive and healthy – through immunization, the restoration of essential health services, water supply, improved sanitation and hygiene promotion. The tsunami recovery programme is working to improve the quality of education for more than 200,000 children. Thousands of children received psychosocial care, and the focus now is to return stability to children’s lives.

FINANCIAL SUMMARY



Child survival

UNICEF delivered medical supplies and equipment to 935 hospitals and health centres in affected districts of India and supported training in managing newborn and childhood illnesses for 1,641 doctors, nurses, community health workers and volunteers. UNICEF also provided equipment and supplies to 9,688 childcare centres. In the state of Tamil Nadu and across the 572-island archipelago of Andaman and Nicobar, UNICEF joined with partners to immunize against measles and deliver vitamin A supplements to 103,629 children. UNICEF’s delivery of 20,000 bednets and mosquito repellent, along with its support of efforts to reduce mosquito breeding, has resulted in a decline of malaria cases in Andaman and Nicobar since the tsunami.

Water and sanitation

UNICEF supported the restoration of emergency water supply for 170,424 people. In affected areas, water and sanitation conditions were improved and disease incidence was reduced with the construction of basic sanitation facilities, the supply of water tanks to shelters and schools, and community mobilization by volunteers trained by UNICEF on hygiene education. In Tamil Nadu, UNICEF is monitoring sanitary conditions in 92 shelters and has trained 25,000 teachers, parents and children on good hygiene practices; 300 women were trained on low-cost toilet construction and handpump repair. UNICEF has increased the availability of safe water in Andaman and Nicobar by installing 400 rainwater harvesting units and providing 4 water tankers. In Andhra Pradesh, 700 water pumps will be replaced by December 2005.

Child protection

UNICEF supported training in psychosocial techniques for 3,500 teachers, volunteers and education officers, whose efforts reached 94,500 children in all tsunami-affected states. In Andhra Pradesh, UNICEF assisted in developing anti-trafficking action plans that focus on community-based prevention. In the 362 affected villages in Tamil Nadu, UNICEF is helping to strengthen ‘watchdog’ committees to be vigilant in protecting children. In Andhra Pradesh, Andaman and Nicobar, and Kerala, UNICEF is supporting the establishment of databases and tracking systems to monitor affected children, with a particular focus on those who have lost one or both parents.

Back to school

A ‘Quality Education Package’ has been introduced to about 200,000 children in the worst-affected districts. Teachers have been trained in ways to improve learning outcomes through child-centred teaching methods. Many communities are now becoming involved in the management of their schools. By the end of 2005, school furniture will be introduced to 1,333 schools in Andhra Pradesh and Tamil Nadu, and lost equipment will be replaced in 145 schools in Andaman and Nicobar.

Challenges

- Crowded conditions in temporary shelters, the uncomfortable summer conditions caused by heat in corrugated tin constructions and insufficient drainage during the monsoon season are being addressed, but these factors contribute to a general anxiety that currently affects the 19,000 families in Tamil Nadu and the 46,000 people in Andaman and Nicobar who remain in temporary shelters.
- Key partners working with UNICEF to provide psychosocial care for children need support to ensure that they are adequately staffed.

Building back better

UNICEF actions in tsunami-affected areas of India include support to community health services for children and women, training of health workers in infant care and feeding practices, and counselling for families in good nutrition and essential hygiene practices. Additional support is being provided to ensure safe drinking water and adequate sanitation in affected communities. UNICEF is also working to strengthen community-based systems to protect children from exploitation and abuse, raise awareness of HIV/AIDS among young people and prevent mother-to-child transmission of HIV.



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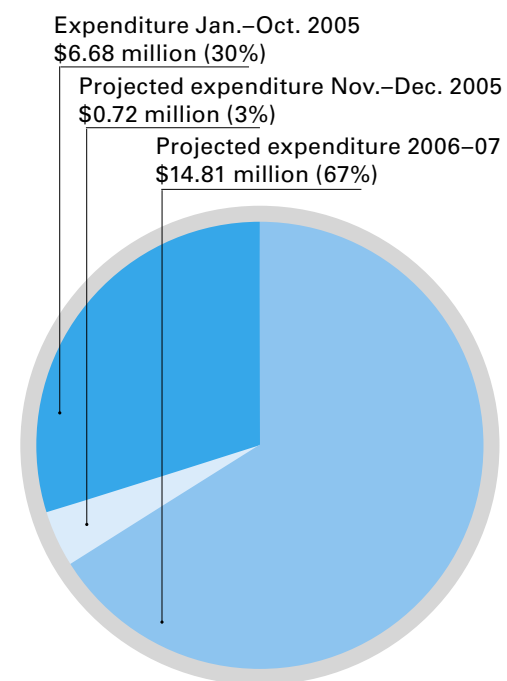


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Widespread devastation along Thailand's south-east coast left 5,395 people dead; 2,932 more are still missing. To date, nearly 3,000 people still reside in temporary shelters.

Thanks to the assistance of UNICEF and partners, shelter, food, water and health-care needs were met in the immediate emergency, and rehabilitation of infrastructure began within days. Although relief activities continue, UNICEF's present focus is on longer-term rehabilitation and HIV/AIDS prevention.

FINANCIAL SUMMARY



Water and sanitation

About 9,000 people benefited from the delivery of UNICEF supplies, including water purification equipment, and the construction and repair of latrines and drainage systems. These combined efforts prevented any outbreak of water-borne diseases among affected populations.

Child protection

UNICEF provided training and orientation in childcare that reached 150,000 children. Expert teams of child psychologists and social workers visited schools and communities in affected areas and trained teachers and families to help children cope with grief. Some 100,500 children in schools and young child development centres have received sports and play equipment. About 1,500 teachers, social workers and counsellors were trained in psychosocial activities.

Back to school

Efforts by UNICEF, the Government of Thailand and other partners helped more than 75 per cent of children in tsunami-affected areas return to school within two weeks of the disaster; this figure includes children who lost their parents. UNICEF supported the urgent repair of 12 damaged school buildings and provided emergency grants, uniforms, school materials and transport. For the 25 per cent of children who did not attend school in the month after the tsunami, fear was reported to be the reason; the problem is being addressed through expansion of the psychosocial recovery programme, with a focus on schools and teacher involvement. Enrolment is now at 85 per cent.

Challenges

- Reducing barriers to assistance for some groups, especially minorities and migrant workers and their families, is an ongoing challenge.
- Some children lagged in health and education even before the disaster. Improving their situation is a high post-tsunami priority.

Building back better

The spread of HIV/AIDS is a concern in Thailand. Risk factors have increased as individuals and families who have lost their livelihoods seek alternative sources of income, including work in the sex industry. UNICEF-supported actions include prevention services for young people in temporary camps and affected communities; the establishment of networks of youth volunteers; and the expansion of access for ethnic minority and other vulnerable groups to information, counselling and testing services. (For more on the global campaign to put children at the centre in the fight against HIV/AIDS, see www.unicef.org/uniteforchildren.)

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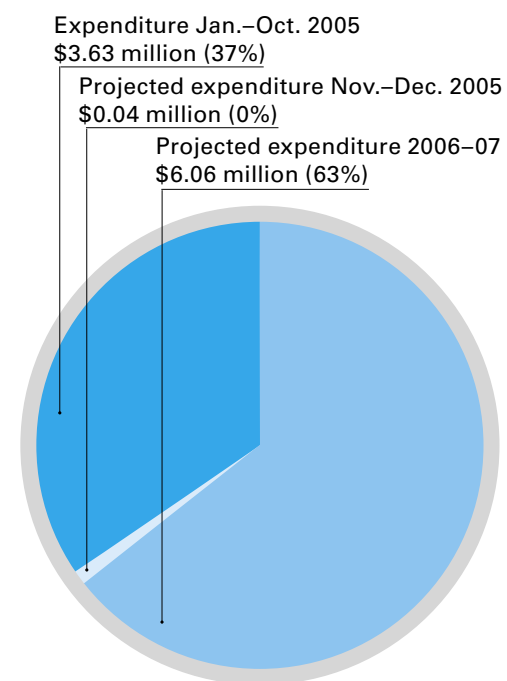
MYANMAR

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Fishermen and their families were particularly hard hit by the tsunami in Myanmar; many lost their boats and their livelihoods. In some areas of relocation, clean water is still in short supply and health networks remain fragmented.

Thanks to efforts by UNICEF and local partners, there were no major outbreaks of disease. But primary school enrolment has dropped in several communities. Also, although they are anecdotal, reports of increased risks of child exploitation and trafficking in affected areas are of particular concern to UNICEF.

FINANCIAL SUMMARY



Child survival

UNICEF provided 64,272 insecticide-treated bednets for 128,544 women and children, as well as 129,000 malaria rapid-test kits and antimalarial drugs. UNICEF delivered 53 essential drugs kits to affected coastal townships. To monitor children's nutritional status, UNICEF supported the operation of 570 weighing centres.

Water and sanitation

Through UNICEF support, 18,000 people have had access to safe water restored, 3,380 have benefited from improved latrines. UNICEF's continuing support includes the provision of solar-powered water pumps and the improvement of existing systems in 100 communities that have conducted a needs assessment and recommended additional measures to enhance access to clean water.

Child protection

About 2,100 kits containing toys for children, drawing books, pencils and other supplies have been distributed to families and communities to assist with emotional and mental recovery from the tsunami.

Back to school

UNICEF support contributed to the rehabilitation of 215 schools and provided textbooks, exercise books, school bags and pencils for 73,240 students. Another 1,200 schools received supplies, including 550 schools that received tables and chairs. Some 2,387 teachers and principals were trained in child-centred learning approaches.

Challenges

- Access to basic social services – health care, water and sanitation – has become a greater challenge, as families relocated inland after the tsunami.
- Keeping children in school will continue to be a challenge because drop-out rates usually increase as the school year progresses.
- There may be a direct relationship between psychological trauma and abuse and exploitation; further assessments are needed to understand this phenomenon.
- To prevent new disparities, it must be ensured that assistance does not create bigger gaps between families living in tsunami-affected areas and disadvantaged families living in other areas.

Building back better

The overarching goal of UNICEF's work in tsunami-affected areas of Myanmar is not only to help families resume the life they enjoyed before the tsunami but to provide them with better-quality social services. UNICEF is doing this by strengthening support for malaria prevention and treatment, by improving water and sanitation systems in close collaboration with communities, by working with educators and parent-teacher associations to keep children in school, and by providing support to strengthen community protection mechanisms for children.



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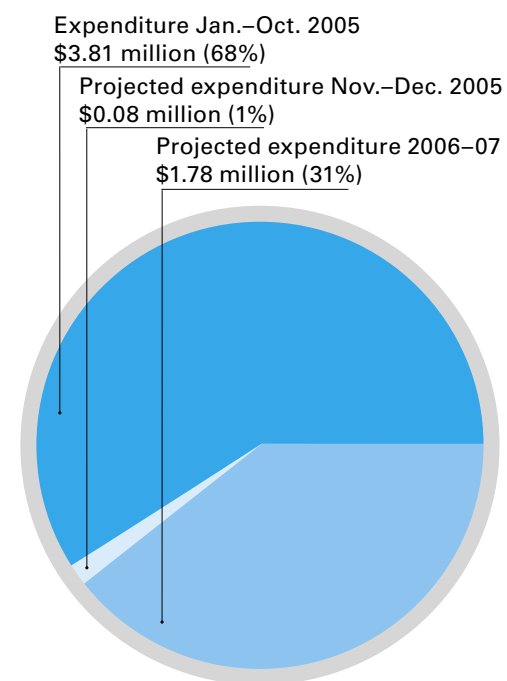


SOMALIA

©UNICEF/Somalia/2005/Mohamed

Nearly 300 people on the coastline of north-eastern Somalia were killed by the tsunami. Hafun, a fishing village on the easternmost tip of the coastline, was the worst-affected location, with over 5,000 people displaced. Most homes were destroyed; water and sanitation facilities were damaged and food shortages ensued. Yet, emergency efforts by UNICEF and partners reached thousands of people, preventing outbreaks of diarrhoeal disease, among other health problems, and sparking a surge in school enrolment.

FINANCIAL SUMMARY



Child survival

In Hafun and other affected areas, UNICEF and local partners reached 1,728 children with measles vaccine and vitamin A capsules to boost their resistance to disease. UNICEF also provided medical equipment and supplies to the health post in Hafun and supported the training of health workers in managing and treating diarrhoeal diseases, acute respiratory infections and anaemia, and providing antenatal care. In remote areas, UNICEF supported the construction of four health posts, bringing services to villages where they had never existed. To prevent malaria, 3,740 bednets were distributed. UNICEF continues to work in partnership with district authorities in such places as Hafun to support maternal and child health clinics, nutrition screening of young children, outpatient services and home visits to bedridden patients.

Water and sanitation

In immediate response to the emergency, UNICEF supported chlorinating drinking water, trucking in water supplies and repairing damaged wells. Continued support included the construction of 13 new water points serving 4,500 people, as well as provision of safe water and latrines in seven schools, benefiting 3,375 students. UNICEF is rehabilitating five water systems, benefiting 26,500 people, and working with communities on water committees to increase local involvement in the provision of water and sanitation services and to minimize dependence on external support in the operation and maintenance of such services.

Back to school

In Hafun, the centrepiece of the development strategy is education, around which all other interventions revolve. Health and water services are being coordinated with education initiatives towards fully integrated service provision. So far, 7 temporary or semi-permanent schools have been completed and another 14 are under construction, benefiting more than 2,700 students. Prior to the tsunami, only 35 boys and 15 girls attended school in one tiny classroom in Hafun. On land donated by the community, UNICEF supported the construction of a new, six-room school and community learning centre – with a playground, office, storeroom and community hall – that will comfortably accommodate the additional 340 children who have enrolled in school since the tsunami.

Challenges

- Somalia has lacked a central government for the past 15 years, and communities in north-eastern Somalia have been affected by a sustained drought. All of the tsunami-affected locations along the 650-kilometre Somali coastline, and particularly Hafun, are extremely remote, difficult to access and have limited presence of capable partners. Logistics for staff and supplies remain complicated.
- Some locations are difficult to access due to security concerns, particularly those within the central and southern zones. UNICEF relies heavily on partnerships with local authorities and a limited number of non-governmental organizations that have a permanent presence in these areas.

Building back better

Due to the remoteness and inaccessibility of the affected locations, almost all of the interventions are providing a level of service previously not enjoyed by these communities. This includes increased access to health care, better water systems and schools where none had existed. While the tsunami has caused great hardship for many communities, UNICEF and partners are helping to create stronger, more sustainable services that will help these villages be better equipped to handle future challenges and to create a more healthy and protective environment for their children.

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MALAYSIA

©UNICEF/Malaysia/2005/Kumari Nadchatram

The tsunami in Malaysia left more than 8,000 people homeless and without livelihoods and claimed 80 lives. It destroyed farming, fish processing and other economic activities typically engaged in by women, increasing the vulnerability of children and families.

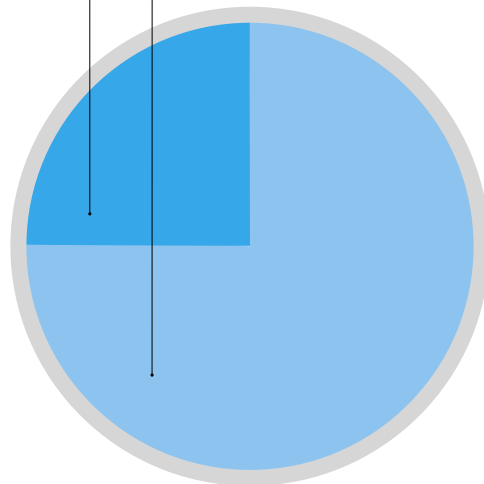
To help children cope, UNICEF supported psychosocial training among community leaders: 72 teachers, medical officers, nurses, welfare officers, village heads and religious officials took part, and 1,000 children and their families now have direct access to activities to promote emotional and mental health, including counselling and local support networks. In a pilot programme in schools in the State of Kedah, UNICEF in collaboration with the Ministry of Education brought life skills education to 5,511 individuals; the programme covered HIV/AIDS prevention, especially in emergency situations.

Concerned about the tsunami's impact on women's economic opportunities, UNICEF worked with local organizations to provide 100 women with training in leadership, gender awareness and marketing and economic skills. In the long term, UNICEF will engage with government officials, lawmakers and the media to address issues of exploitation and violence against children, including trafficking.

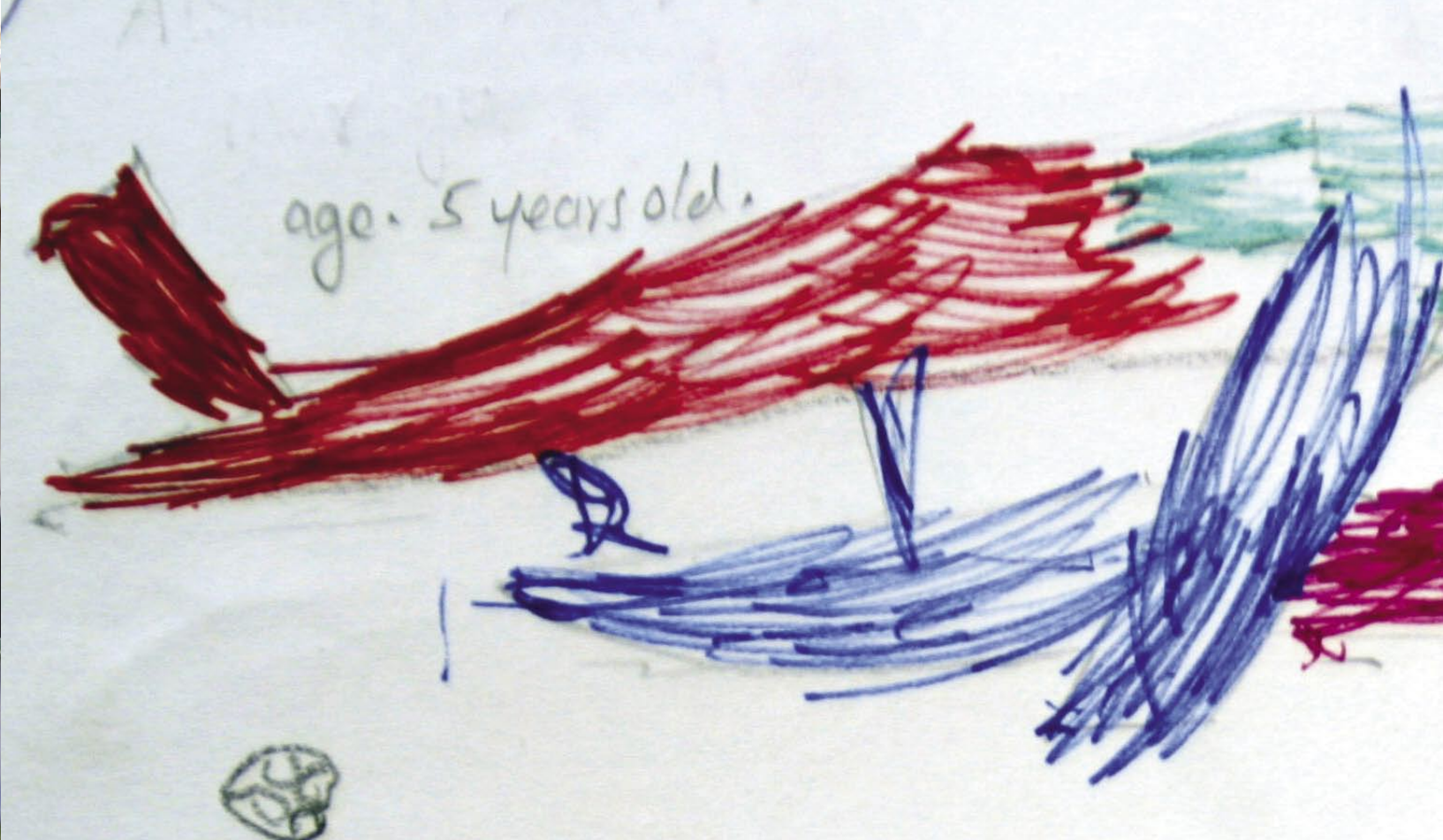
FINANCIAL SUMMARY

Expenditure Jan.–Oct. 2005
\$0.70 million (25%)

Projected expenditure 2006–07
\$2.14 million (75%)



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CHILDREN'S STORIES



Batik Painting in Thailand: A Life Restored Through Art

By Natthinee Rodraksa, UNICEF Bangkok (Thailand)

After narrowly escaping death in the tsunami, Songklod takes solace in batik painting, a healing form of art in which the bright colours he splashes on the cloth canvases help blot out bad memories.

“I was depressed after the tsunami about losing my house and seeing my parents lose their jobs,” says Songklod, a shy 14-year-old. “Batik painting helps cheer me up, calm me down and improve my concentration.”

UNICEF and the Thailand Ministry of Education’s Non-Formal Education Department introduced batik painting to promote psychosocial recovery for children at the Nong Kok temporary shelter, home to over 70 households from Phi Phi Island.

The batik centre has slowly grown into a small community business from which children can earn income to help their families. Paintings made at the centre are sold for 100-1,000 baht (US\$2.50-US\$25).

Naturally talented, Songklod is one of the centre’s most promising painters. He is pleased that he can earn money to help his family while his father looks for work. The money also makes it possible for him to go to school, which his family could not afford before the tsunami.

“It’s so good to go back to school where I have friends and can practise drawing and painting during the art class. My art teacher always gives me tips and new techniques to improve my painting skills,” he says.

When asked about his future plans, the usually reticent Songklod eagerly explains: “I want to continue doing batik painting. I really enjoy it. And I hope one day to open a batik shop in Krabi.”

In the meantime, he enjoys going to school and painting batik – two opportunities that came his way after the tsunami.



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Home Visits Add Weight to India’s Health Care System

By Tani Ruiz, UNICEF Bangkok (Thailand)



©UNICEF/EAPRO/2005/Ruiz

Vijaya is privy to some very particular information. At the temporary shelter where she works, she knows who is pregnant, who has given birth, who is anaemic and which children need tending to or medical help. A 19-year-old dedicated volunteer, Vijaya gleans that information from the home visits she makes each afternoon, seven days a week, to dispense advice on health and nutrition to pregnant women and mothers with children up to six years old.

The home visits project, funded by UNICEF and supported by the government, aims to thwart malnutrition and promote maternal and child health in the wake of the tsunami. The home visits are something quite new, very significant, and, if successful, could be rolled out right across India.

Fourteen-month-old Imran has benefited from the knowledge that his mother has acquired from Vijaya. Four months old when the tsunami wrecked his home, he’s now a perky, chubby-faced infant.

“Imran could easily have become ill, but he received good care at the *anganwadi* (child development) centre at the shelter, and he is perfectly healthy,” says Vijaya. She is one of 317 volunteers trained in maternal and child health and nutrition by Trust for Hope, an NGO implementing the project for UNICEF in Nagapattinam district.

Ensuring that malnutrition does not establish a foothold is a big task that requires human resources and fresh pools of energy. While house-to-house health visits per se are not new in India, what is new is the systematic way in which they are being carried out in Nagapattinam and six other tsunami-affected districts in Tamil Nadu.

Vijaya loves what she does. “I’d like to continue as long as I can,” she says. “It is rewarding to know that you are helping mothers and children.”

UNICEF Helps Indonesian Villagers Set Up Simple Water Supply Systems

By Anna Stechert, UNICEF
Banda Aceh (Indonesia)

Along the road in the Krueng Raya area in Aceh – a rural area at the foot of a mountain range – a number of toilets and washing areas have been set up by UNICEF in nearby villages and camps for internally displaced persons. UNICEF has been working closely with local NGOs and village residents to establish a long-term water supply system that is easy to maintain.

There are two types of water sources that can be used for this purpose. The first type is a natural spring that can be tapped. To actually find these small sources of water in the midst of woods, bushes and forests, UNICEF relied largely on the knowledge and expertise of the local villagers. Where a spring was identified – sometimes just a trickling water flow – workers created a dam and used gravel as a cleaning mechanism. From there, underground pipes take the water down the mountain to the facilities in the villages.

A second type of water source is called ‘swampy soil’. Perforated pipes wrapped with palm fibre and covered with gravel are put into very moist soil. The water sinks through the gravel and finds its way through the palm fibres into the pipes, getting cleaned in the process. Once in the pipes, the water then makes its way down the hills.

These systems are easy to maintain: Many villages have already established committees of village members to check pipes and faucets regularly for leaks. With the five systems in place in the area, more than 5,600 people now have access to clean water.



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Tsunami Offers Opportunities to Build Back Better in Sri Lankan Schools

By Leanne Mitchell, UNICEF
Colombo (Sri Lanka)



©UNICEF/HQ05-0210/Pietrasik

It was one of her teachers who recognized Zeenath, 14, temporarily blinded and in a hospital, miles away from her hometown of Hambantota, in southern Sri Lanka. The Zahira College student lost her parents in the tsunami but regained her sight after treatment in Colombo. She now lives with her aunt and is back at school with her friends, hopeful that life will take more positive turns for her.

Zeenath’s school was hard hit by the tsunami. Five teachers from Zahira College, including the principal, and 100 students perished. Ninety students lost one or both parents. The school’s primary section was completely destroyed, and all 1,000 students now share one small area, using furniture, stationery and school supplies provided by government and aid organizations soon after the disaster.

But while their means are certainly modest now, their visions for the future are far greater. Zahira College is being rebuilt as a ‘child-friendly’ school following the tsunami.

Developed by UNICEF, the child-friendly school approach has been adopted by the Sri Lankan government to ensure that schools restored after the tsunami are better than they ever were. This will be achieved by providing access to quality teaching and learning environments, material support and the establishment of minimum health and child protection standards both within the school and among the greater community.

By mid-2006, the school’s new grounds will give more space for recreation and incorporate new teaching facilities, a library, ventilated classrooms, and separate amenities for girls and boys.

“Our students have the potential and ability to move forward, but until now they haven’t had the resources,” says Mr. Risham, an English teacher at Zahira College. “There is an opportunity now. We have suffered a lot, but we don’t like to think that our children were badly let down by the tsunami. Rather, they are facing a new future in the wake of it.”



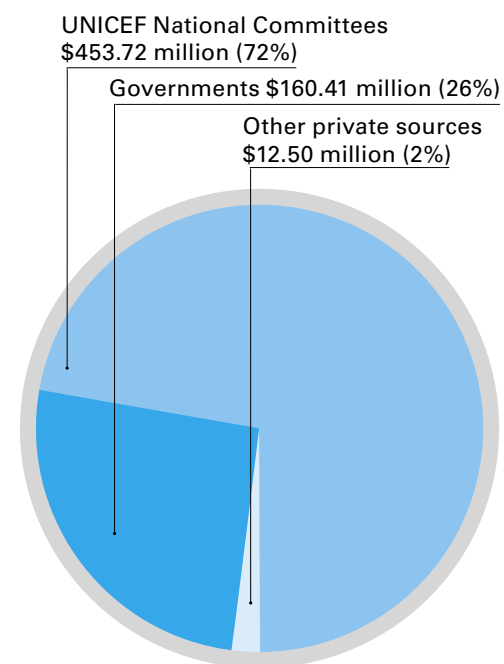
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REMARKABLE GENEROSITY

During the past 12 months, individuals, donor countries and other supporters contributed a total of US\$626.6 million to UNICEF for relief and recovery efforts in the tsunami region. These funds allowed UNICEF to respond immediately with life-saving supplies and expertise and to remain committed to the recovery effort over the long run.

For the first time, UNICEF received more from private donors than from governments. Seventy-two per cent of these funds came from individuals, foundations and businesses through UNICEF's National Committees, totalling US\$453.7 million. Also notable was that US\$11 million was donated by individuals and governments in developing nations.

Cash contributions received for the Tsunami Appeal



ACCOUNTABILITY

UNICEF takes accountability seriously. For 60 years, UNICEF has managed complex relief and development programmes in the field. Tested management systems were already in place, and these have helped UNICEF address the challenges of working in difficult environments like the tsunami-affected countries.

Included in UNICEF's accounting systems are regularly conducted internal and external audits. UNICEF's overall funding for the tsunami is updated publicly on the website of the United Nations Office for the Coordination of Humanitarian Affairs (<http://ochaonline.un.org/>) and managed by PricewaterhouseCoopers. In the field, UNICEF thoroughly investigates its potential partners and encourages a phased approach to project funding, approved only when progress is monitored and verified by UNICEF staff. Advances are made in small increments, and larger contracts undergo an extensive screening and selection process by a Contract Review Committee. For the tsunami, public updates have been published at three and six months, and an additional update will be released in early 2006.

PERTINENT FACTS

To date³, US\$181.6 million has been spent in response to the tsunami. About 93 per cent of total expenditures (US\$169.5 million) went directly to tsunami relief and recovery efforts by eight UNICEF country offices; and 7 per cent (US\$12.1 million) to headquarters and regional offices for activities directly associated with the tsunami response. Table 1, below, provides a breakdown of these allocations and expenditures. Table 2 provides a breakdown of expenditure by sector in the eight assisted countries.

³All figures are as of 1 November 2005. Totals in the tables may not be exact because of rounding.

Table 1. Allocations and expenditures by country, including headquarters and regional offices (in millions US\$)

	Total allocation	Expenditure as of 1 Nov. 2005
India	22.76	14.24
Indonesia	250.43	79.99
Malaysia	2.84	0.70
Maldives	38.48	22.20
Myanmar	9.73	3.63
Somalia	5.67	3.81
Sri Lanka	145.17	38.23
Thailand	22.21	6.68
Total: Country level	497.30	169.48
Headquarters (offices in New York, Copenhagen, Tokyo and Geneva)	18.67	7.15
East Asia and Pacific Regional Office (EAPRO)	5.95	2.27
Regional Office for South Asia (ROSA)	4.59	2.69
Total: Headquarters and regional offices	29.20	12.11
Unallocated funds	100.13	-
Grand total	626.63	181.59

Table 2. Allocations and expenditures by sector, as of 1 Nov. 2005 (in millions US\$)

Sector	India	Indonesia	Malaysia	Maldives	Myanmar	Somalia	Sri Lanka	Thailand	Grand total
Health	2.79	23.62		1.50	1.40	0.16	8.67	2.65	40.79
Nutrition	1.31	3.77		0.54		0.07			5.68
Water and sanitation	1.96	22.66		7.68	0.30	0.23	7.58	1.05	41.47
Education	6.73	22.04		10.24	1.49	0.39	7.82	1.41	50.12
HIV/AIDS	0.19		0.17			0.06		0.03	0.45
Child protection	0.24	7.89	0.32	0.28	0.16	0.03	11.02	0.92	20.86
Advocacy	0.25					0.19		0.62	1.07
Planning and monitoring	0.76					2.23	0.12		3.10
Cross-sectoral/operational			0.21	1.96	0.29	0.47	3.02		5.95
Grand total	14.24	79.99	0.70	22.20	3.63	3.81	38.23	6.68	169.48

UNICEF PARTNERS IN TSUNAMI RELIEF AND RECOVERY

INDIA

Aazhi; ActionAid International–India; Andaman and Nicobar Administration; Andaman and Nicobar AIDS Control Society; Andaman and Nicobar Public Works Department; Bharatiya Jain Sanghatan; Butterflies; CARE India; Churches of North India; District Institutes of Education and Training; District Rural Development Agency; Government of India and its Directorates; Government of Andhra Pradesh; Government of Tamil Nadu and its Departments (of Education, Health, Labour, Rural Development and Social Defence); Government of West Bengal; Memory Clinic; Myrtle; Nehru Yuva Kendra Sangathan (NYKS); Oxfam; People's Council for Social Justice; Planning Commission of India; Prayas; Register of Engineers in Disaster Relief (RedR); Save the Children India; Society for Education, Village Action and Improvement (SEVAI); SocioEconomic Unit Foundation (SEUF); Tamil Nadu AIDS Control Society; Tamil Nadu Directorate of Teachers Education Research and Training; Tamil Nadu Science Forum; Unnathi; West Bengal Voluntary Health Association.

INDONESIA

Air Minum dan Penyehatan Lingkungan (AMPL; Drinking Water and Environment Health); Alisei; Centers for Disease Control and Prevention (CDC–United States); Deutsche Gesellschaft für Technische Zusammenarbeit (GTZ; German Agency for Technical Cooperation); Government of Indonesia and its Ministries; Helen Keller International (HKI); Indonesian Association of Obstetrics and Gynecologists; Indonesian Midwives Association; Indonesian Red Cross; International Organization for Migration (IOM); International Rescue Committee; International Social Service; Johns Hopkins Program for International Education in Gynecology and Obstetrics (JHPIEGO); Joint United Nations Programme on HIV/AIDS (UNAIDS); Kuala; Lembaga Bantuan Hukum Anak (LBH-Anak; Legal Aid for Children); Muhammadiyah; National Planning Agency; Perinasia Suryakanti Foundation; Perusahaan Daerah Air Minum (PDAM; Regional Drinking Water Company); Pusaka; Save the Children Alliance; Sentra Laktasi; United Nations Development Programme (UNDP); United Nations Educational, Scientific and Cultural Organization (UNESCO); United Nations Office for Project Services (UNOPS); United Nations Population Fund (UNFPA); University of Indonesia; University of Syiah; World Food Programme (WFP); World Health Organization (WHO); Yakita; Yayasan Dian Desa.

MALAYSIA

Centre for Psychology of HELP University College; Government Departments of Kedah State; Pusat Jana Daya (EMPOWER); UN Country Team in Malaysia; United Nations Population Fund (UNFPA).

MALDIVES

Care Society; Educational Development Centre (Ministry of Education); Government of Maldives and its Ministries; Islands Administrations and Women's Committees; Japanese Overseas Corporation Volunteers (JOCV); Maldives Water and Sanitation Authority; United Nations Population Fund (UNFPA); World Health Organization (WHO).

MYANMAR

Adventist Development and Relief Agency (ADRA); Government of Myanmar and its Ministries; United Nations Development Programme (UNDP); World Food Programme (WFP); World Vision; local NGOs.

SOMALIA

Partners in the Puntland Committee for Tsunami Intervention, including NGOs and religious organizations; United Nations High Commissioner for Refugees (UNHCR); United Nations Human Settlements Programme (UN HABITAT); World Food Programme (WFP).

SRI LANKA

Action contre la Faim (ACF); Adventist Development and Relief Agency (ADRA); African Water Facility (AWF); Agency for Technical Cooperation and Development (ACTED); Ahavoli Family Service; Annai Illam; Asian Development Bank; Association for Health and Counselling; Associazione per lo Sviluppo Psicologico dell'Individuo e della Comunità (ASPIC); Basic Needs; Caritas; Christian Children's Fund; Cooperative for Assistance and Relief Everywhere (CARE); Cricket Board; Danish Refugee Council; Department for International Development (DFID–U.K.); Deutsche Gesellschaft für Technische Zusammenarbeit (GTZ; German Agency for Technical Cooperation); District Child Protection Committees; Eastern Rehabilitation and Relief Organization (ERRO Lanka); Eastern Self-Reliant and Community Awakening Organization (ESCO); Family Rehabilitation Centre; FORUT (Norwegian/Swedish-based development agency); French Red Cross; Global Outreach and Assistance League (GOAL); Government of Sri Lanka and its Ministries; Green Movement; Hira Foundation; Holistic Health Centre; Human Development Organization (HDO); International Committee of the Red Cross (ICRC); International Development Law Organization (IDLO); International Federation of Red Cross and Red Crescent Societies (IFRC); International Labour

Organization (ILO); International Medical Corps; International Organization for Migration (IOM); International Programme on the Elimination of Child Labour (IPEC); Italian Civil Protection Mission; Jaffna Social Action Centre; Jamthul Islam; Leads; Loadstar; Malteser International; Médecins Sans Frontières (MSF; Doctors Without Borders); Meesan; Mental Health Society; Merlin; Migrant Services Centre; Multi Diverse Community (MDC); National Centre for Victims of Crime; National Child Protection Authority; National Youth Services Council; Norwegian People's Aid (NPA); Norwegian Refugee Council; Oxfam; Peace and Community Action; Pfizer; Plan Sri Lanka; Psychosocial Trauma and Human Rights Trust (Philippines); Relief International; Rotary International; Rural Development Foundation; Rural Economic Education Research Development Organization (REEDO); Sahanya; Samaritan's Purse; Samata Sarana; Sarvodaya; Save the Children Sri Lanka; SERVE; Seva Lanka; Sewa Lanka Foundation (SLF); SHADE; Shantiham; Social and Economic Development Centre (SEDEC); Solidarités; Sri Lankan Human Rights Commission; Swedish Agency for International Development Cooperation (Sida); Tamils Rehabilitation Organisation; Thakva Mosque; Tsunami Education Rehabilitation Monitor (TERM); United Nations Educational, Scientific and Cultural Organization (UNESCO); United Nations High Commissioner for Refugees (UNHCR); United Nations Population Fund (UNFPA); University of Delaware Disaster Research Center; Women in Need (WiN); World Bank; World Food Programme (WFP); World Health Organization (WHO); World University Service of Canada (WUSC); World Vision International; Young Men's Christian Association (YMCA); Zuid Oost Azie (ZOA; Dutch organization for refugee care in South-east Asia).

THAILAND

Community Organisations Development Institute; Government of Thailand and its Ministries; Institute of Nutrition and Faculty of Public Health of Mahidol University; Joint United Nations Programme on HIV/AIDS (UNAIDS); Kanjanapisak Home; Knowledge Network Institute of Thailand (KNIT); Kohn Kaen University Centre for the Protection of Children's Rights; Muslim Youth Association; National and Provincial Statistics Offices; National Institute for Child and Family Development; Pattanarak Foundation; Prince of Songkla University; Provincial and District Offices of Public Health, Education and Local Administration; Queen Sirikit National Institute of Child Health; Radio Thailand; Rajanukul Institute; Save the Children UK; Thai Breastfeeding Centre; Thai Youth News Association; Walailak University; World Health Organization (WHO); World Vision Foundation of Thailand.



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