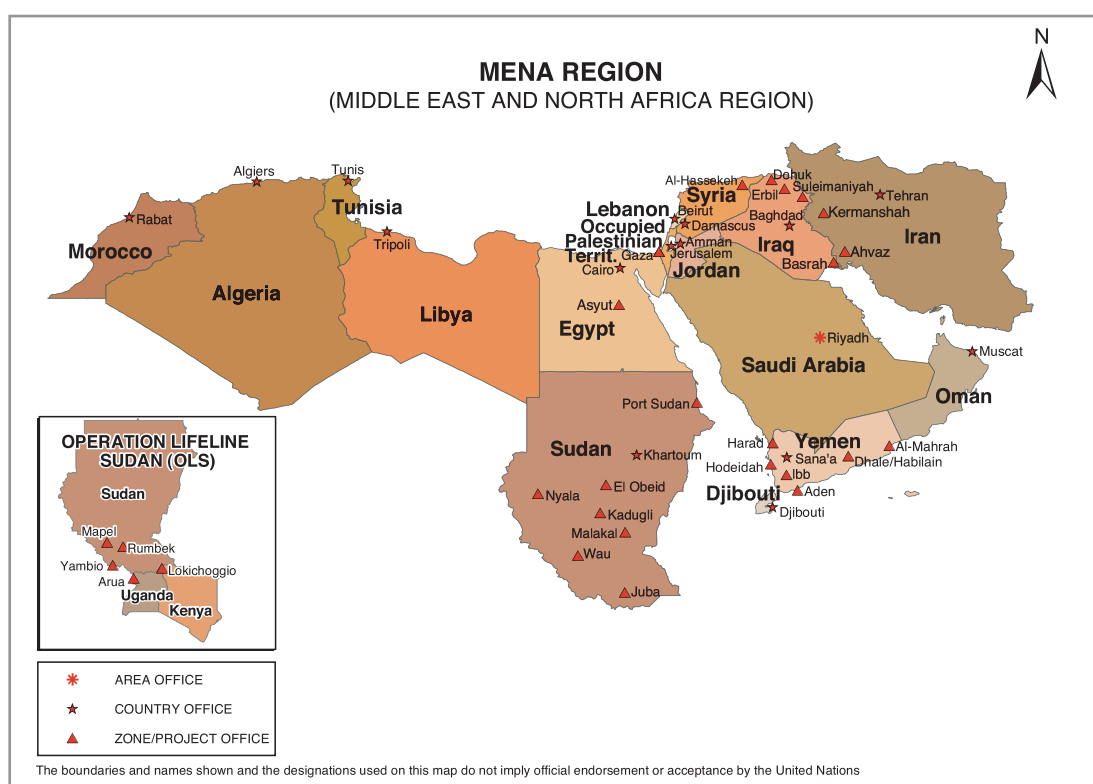


UNICEF HUMANITARIAN ACTION MIDDLE EAST AND NORTH AFRICA REGION IN 2004



Financial Summary

Sector	US\$
Emergency Preparedness: Planning, operationalization, including supplies, MOSS compliance, training activities and initial emergency response	650,000
Surge Capacity: Emergency staffing for preparedness and initial response	150,000
Humanitarian Response Unit: Support on emergency and response planning, and staff safety and security	330,000
Personnel Support: Operating expenses, country assessment and travels	200,000
Total*	1,330,000

* Includes a maximum recovery rate of 12 per cent. The actual recovery rate on individual contributions will be calculated in accordance with the Executive Board decision 2003/9 of 5 June 2003.

1. CRITICAL ISSUES FOR WOMEN AND CHILDREN

The year 2003 has been a year of contrast for the populations of the Middle East and Northern Africa (MENA) region, with periods of great hopes alternating sharply with times of great disillusion. The situation in Iraq, which dominated both the geopolitical and humanitarian agenda during the whole year of 2003, is a striking example of such a schism between the hopes borne by both the population of the country and the international community about the future of the country, and the harsh reality on the ground today. By the same token, the hopefulness prompted on both Palestinian and Israeli sides by the setup and strong support of the Road Map Process by the Government of the United States has by now led to bitter disillusion and renewed anger on both ends at what appears, again, like an impasse.

Both conflicts, and the perception of the role of the Western World in their inception or lack of resolution, have prompted increasing anger and political distrust from significant portions of the populations of the region towards the international community and, to a certain extent, towards the humanitarian community as well. This, added to a mounting rate of terrorist attacks against the so-called “soft targets”, be their embassies, public institutions or humanitarian premises, has rendered the task of providing humanitarian support a difficult and increasingly dangerous one in the context of the Middle East and Northern Africa Region. The latter is a particularly thorny development when taking into account the very acute needs for humanitarian support for both populations affected by the respective conflicts. Iraq, on one hand, continues to demand high levels of support, if only in the health sector – with about six maternal deaths a day and an overall maternal mortality ratio over 300 for 100,000 live births. The evolution is equally worrisome for the Occupied Palestinian Territory, with an estimated one million children now living under the poverty line of US\$ 2 per day,¹ while the “wall”, or security fence currently being built by the Israeli Government is set to impact dramatically on the lives of up to 274,000 Palestinians who will be stuck between the fence and the green line, with another 400,000 being cut off from their farms or working place due to the position of their house east of the said “security barrier”. Restricted access to services and employment, limited freedom of movement and witnessing daily violence, directly or through media channels, are some of the factors that impact extremely negatively on the wellbeing and psychological development of Palestinian children in the region.

Despite the grim forecast related to both of the above crises, 2003 still bears good expectations for the whole Sudanese population, Northerners and Southerners alike, along with the serious prospect of the signing of a peace agreement before the end of the year, which would close a historical chapter of up to 20 years of civil war in country. If indeed signed, at last, the agreement would still entail a need for tremendous humanitarian action for the coming years. One needs hardly to recall that Sudan has the highest number of internally displaced persons in the world (between 3 to 4 million), along with an estimated 384,000 refugees in surrounding countries, and staggering social and health statistics that will take strong and continuous measures to be properly dealt with.

Women and children are furthermore at risk as a result of natural disasters in the region. This is particularly true for countries such as the Islamic Republic of Iran and Algeria, which both experienced serious occurrences of floods and earthquake at least twice over the last five years, each disaster leaving in its wake several thousands casualties along tens of thousands of displaced and homeless. Though on a lesser scale or less regularly, countries such as Syria, the Sudan and Yemen have also proven to be disaster-prone.

All of the above risk factors constitute threats to populations of the respective countries. While civilians are too often caught between, or even directly targeted, by warring factions, it is known that women and children are generally most at risk, and most vulnerable, in situations of conflict and/or displacement. Indeed, research in the matter has reflected that children and women living in conflict areas are much more vulnerable to violence and abuse and may have witnessed extreme acts of violence perpetrated against family members that are likely to affect their psychosocial growth and development. Children also run the risk of becoming separated from their parents during the violence and confusion of war or disaster.

¹ The numbers of the poor have tripled from 637,000 in September 2000 to nearly 2 million now (World Bank, March 2003), while the gross national income per capita is said to have fallen to nearly half of what it was two years ago.

2. ACTION AND ACHIEVEMENTS IN 2003

UNICEF's commitment to strengthening emergency response in a manner that is fully integrated into all country programmes was reaffirmed as a central corporate strategy meeting during the Martigny II session in June 2003. The consultation reviewed steps, progress and need for reorientation/refocus, since the organization's renewed emphasis on emergency response and setup of Core Corporate Commitments in emergencies during 1998. UNICEF's MENA Regional Office created in 2002 a Humanitarian Response Unit, in order to improve the organization's capacity in the region to plan for, prepare and respond to emergencies in a timely and efficient manner, thus minimizing the impact of the crisis on the affected populations, and more specifically on children and women.

Technical guidance has been provided to country offices in the region to improve emergency preparedness and staff security measures in country offices and to enhance the existing knowledge base on children affected by conflict or natural disasters. Capacity has been built at the country level to more effectively advise counterparts on developing advocacy strategies and policies and in assessing emergency and transition response. This capacity has proven crucial in UNICEF's capacity to prepare for and respond to the Iraq crisis over the course of the year. It also allowed for strengthened capacity in a number of areas and countries of the region.

Specific activities and achievements over the year included:

Iraq Emergency Preparedness Planning and Response

The contingency planning exercise for an Iraq crisis scenario was started under the leadership of the Regional Office, and with the participation of potentially affected countries including Iraq, the Islamic Republic of Iran, Jordan, Syria, the Gulf Area Office and Turkey in October 2001, and was subsequently vastly expanded and refined over the course of 2002 and early 2003. The Regional Office coordinated and facilitated the improvement of the response capacity of these UNICEF offices in: development of scenario-specific contingency plans and fine-tuning of existing ones; inter-agency contingency planning and coordination exercises; training of staff and partners in humanitarian principles, rapid assessment, and a number of technical training (child protection, security and telecommunications, etc.). Critical stocks of emergency supplies were ordered for pre-positioning in strategic locations. Detailed plans for redeployment/recruitment of staff were developed and updated continuously. On the security side, significant efforts were made to strengthen awareness, systems and buildings regarding safety and security, including window protecting film, set-up and staff training on VHF and HF network, establishing a 24 hour regional radio and operation centre, etc. This, added to the full-time support of the three professionals of the HRU Unit during the early stages of the conflict and post-conflict situation, and the setup of an alternative office able to accommodate and provide immediate functional working environment for evacuated Iraq staff, allowed UNICEF to be one of the few agencies fully operational and implementing in the first months of the crisis, with offices in Iraq only closing for three days throughout the conflict.

Evaluation and Lessons Learned from the Iraq Crises for Future Emergencies

Based on the above elements, HQ set up an external evaluation of preparedness and early response activities as related to the Iraq crisis, while the Regional Office developed an internal lessons learnt document on the same subject. The aim is clearly to objectively assess the efficiency and appropriateness of UNICEF's operations throughout the studied period, and learn lessons in order to strengthen the response in potential future multi-country humanitarian crises.

Additional Emergency Preparedness Planning and Response

Beyond the support to Iraq and its five neighbouring country offices, the Regional Office was able to provide support and guidance on emergency preparedness measures to other countries in the region, including scenario-specific planning (non-Iraq related) to the Gulf area office, the Islamic Republic of Iran, Syria, and Yemen. Preparedness planning activities included the identification of risks and threats specific

to a country situation, consultation on the capacity and ability of government and partner agencies to react to a given emergency scenario, and decision on UNICEF's planned role and operations in such a context. It entailed the development of a rapid assessment and response capacity, strengthened capacity through training and strengthened coordination and collaboration mechanisms with partner agencies and ministry counterparts alike, and initiation of the integration of future prevention, early warning and capacity building measures into the country. Capacity-building training of staff included the organization and facilitation of the training of all of the UNICEF OPT staff on emergency preparedness and response thematic and programme, emergency telecommunication training on office connectivity for seven country offices, review and detailed guidance on security and added required security steps following the Iraq August bombing in up to seven countries in the region, monitoring and evaluation in emergencies training for two country offices, and civil-military coordination training in emergency for senior programme staff.

Inter-Agency Collaboration on Emergency Preparedness Planning and Response

The preparation as well as the response to the Iraq crisis clearly required strong and continuous inter-agency collaboration throughout. In this regard, UNICEF proved itself to be a strong and reliable team player, substantially inputting into inter-agency plans at country, regional and HQ levels, while accepting the responsibility to shoulder, host and lead the sub-regional coordination role for the sectors of water and sanitation, education, nutrition and child protection at the preparedness stage as well as at the onset of the Iraq crisis. In addition, UNICEF recently initiated and facilitated a joint contingency plan in Saudi Arabia, and is instigating a stronger cooperation and contacts on emergency preparedness and response with agencies such as the World Health Organization and the International Federation of the Red Cross and Red Crescent Societies.

Emergency Response Management Support

In addition to helping the country offices planning and preparing for an emergency, the HRU also provided direct programme support to country offices for particular emergency situations including Iraq, the Algeria earthquake, the Sudan Darfur conflict, and support to the restructuring of the OPT country field-based structure.

Documenting the use of Children in Armed Conflict in the MENA Region

The Regional Office has initiated work, in collaboration with the "MENA Network to stop the use of children as soldiers", to establish a website aimed at documenting the experiences and to share information related to both the use of children in armed conflicts and the impact of such conflicts on affected children. The purpose of the website is to provide an avenue for Arab-region NGOs to collect and share information, announce activities and events and engage in on-line training related to the protection of children in conflict zones.

Raise Awareness and Capacity Regarding Children's Rights in Emergencies

Through the initiation of a sub-regional ARC (Action for the Rights of Children) training, UNICEF, and its partner agencies on the ARC project (the United Nations High Commissioner for Refugees, Save the Children, the Office of the United Nations High Commissioner for Human Rights) gathered up to 30 national and international NGO and government staff in order to convey knowledge and practices, share experiences and establish networks of professionals in relation to the rights of Palestinian children.

Responding to Children's Psychosocial Needs

The Regional Office provides technical guidance and support for the review of the UNICEF Algeria psychosocial programme, in a view to assess the appropriateness and efficiency of the said programme, and identify potential requirements for methodology modification as well as the potential future use of the programme given its estimated effectiveness for the well-being of affected children in other countries of the region.

Mine Action

Based on the UK Department for International Development-supported Mine Action capacity-building programme, the Regional Office provided technical guidance and budget support to training and activity initiatives for Mine Risks Education Programmes in Sudan, OPT and Lebanon.

Advocacy

UNICEF has continued to advocate for the ratification of key international instruments relating to the issue of children affected by armed conflict. Advocacy efforts have focused on promoting the Convention on the prohibition of the use, stockpiling, production and transfer of anti-personnel mines and on their destruction; and the Optional Protocol to the Convention on the Rights of the Child (CRC) on the Involvement of Children in Armed Conflict. Over the course of the year, Syria has ratified the two CRC optional protocols on child soldiers and child prostitution, while the Sudan ratified the Ottawa convention – mine ban treaties.

Despite the high number of initiative and significant amount of activities undertaken by the MENA Regional Office's humanitarian response unit during the year 2003, it is clear that less has been implemented than originally planned for. This is mostly related to the Iraq crisis, and the amount of fully dedicated resources (staff, time, financial and operational support) that the crisis required, and continues to require, from the MENA's Regional Office (MENARO). This has prompted a number of additional activities to be put on a lower priority level.

3. UNICEF'S PLANNED HUMANITARIAN ACTION FOR 2004

The emphasis of preparedness efforts over the past several years has been to establish a preparedness framework and system within UNICEF so that staff was clear as to what was required of them to be prepared, to respond and to collaborate with others at country and regional levels. During 2004-2005, UNICEF's MENARO will continue the preparedness planning and response work at country and regional office levels, but with a shift in emphasis towards the operationalization of Emergency Preparedness and Response Plans (EPRPs) planning activities as well as building the capacity of partners. The overall objective remains effective, dependable, timely humanitarian response to the needs of children and women in emergency situations, stimulating where possible prevention and mitigation actions and ensuring that assistance contributes to recovery efforts. The continued efforts to enhance preparedness are rooted in the belief and experience that enhanced preparedness enhances the timeliness and effectiveness of response and is an essential pillar for helping partners (Governments and NGOs) build stronger response capacities. Key activities foreseen include:

Preparedness Planning Operationalization and Integration in Programme Plans

Continuing efforts are needed to make this capacity more dependable and integrated, and, most importantly, to ensure that plans are translated into actual readiness and response capacities. Next year will include activities to continually improve preparedness tools and practice, with continued support from regional offices and the global focal point office to help country offices a) develop and update, b) operationalize and c) practice their preparedness planning.

Expected Output:

- All MENA offices have developed/reviewed their preparedness plans (emphasis will be put on offices still lacking a plan, or on those most prone to an emergency situation). Priority countries for EPRP development include Oman, Morocco and Tunisia, plan reviews will include Egypt, Lebanon, Algeria, among others.
- Activities identified through the EPRP process to operationalize the plans are included in regular yearly work plans, completed and reported on. This will include activities related to MOSS compliance, capacity and knowledge, training of staff and partners, coordination mechanisms both internal and external.

Timely, Efficient and Safe Response to Emergencies

Above and beyond planning and internally preparing for potential emergencies, the Iraq crisis has proven that going to the next step, and actually planning ahead in terms of -limited- local procurement of supplies, as well as the immediate availability of additional human resources, can go a long way in mitigating the impact of a crisis on the wellbeing of children and women in a timely manner. As such, provided funding is made available, MENARO will both support early procurement of supplies in countries considered most at risk, and design and establish a regional surge capacity mechanism by which the office will be able to immediately dispatch additional professional staff required by the situation. UNICEF will support its planning and preparedness operations on the principle of safe programme delivery, under the technical guidance of UNICEF security officers and in accordance with UNSECCORD guidelines and procedures.

Expected Output:

- Countries most at risk in the MENA region will be in a position to respond to at least 10,000-20,000 affected people at the onset of any crisis, with a possible total beneficiary figure of 40,000 to 50,000 by the year 2005. In high risk countries UNICEF plans to procure a limited amount of supplies that will enable its country offices to respond in a timely, safe and comprehensive manner to the needs of children and women.
- A surge capacity mechanism will be designed and established for the MENA region, which will allow fast deployment of emergency-experienced staff to crisis situations. Staff deployed will be both internal and drawn from stand-by support partner agencies (Norwegian Refugee Council, Danish Refugee Council).
- UNICEF will plan for and implement emergency operations in a safe and secure manner, protecting the well-being of its staff and staff families as a pre-requisite to potential activities implementation. UNICEF's programmes for children and women will adhere to UN/UNICEF security policy guidelines and instructions, operate within the framework of the United Nations security management system and coordinate fully with UNSECCORD field security coordination officers and designated officials.

Capacity-Building with Partners

Emphasis will be given to strengthen coordination mechanisms and efforts aimed at building the capacity of partners: building capacities of national and NGO partners, and supporting the development of inter-agency preparedness and contingency planning with UN partners.

National partners: in support of UNICEF's medium-term strategic plan priorities and core corporate priorities, all country offices will be encouraged and supported to work with partners to enhance preparedness and emergency response capacity building related to primary health, nutrition, water/sanitation, education and child protection.

Expected Output:

- At least three MENA offices have integrated into their programmes, activities to enhance the capacities of national partners and NGOs to better prepare and respond to most essential emergency needs of children and women in accordance with UNICEF's priorities in health and nutrition, water/sanitation, education, and child protection.
- UNICEF's preparedness experience is shared with other agencies for the mutual benefit of such exchanges.

Inter-Agency Preparedness and Contingency Planning

- While corporate efforts have, over the last years, dedicated most activities to emergency preparedness capacity-building within UNICEF, the coming years will place greater emphasis on inter-agency preparedness and contingency planning. It is increasingly clear that a properly organized inter-agency contingency planning exercise (with NGO participation) is a good entry point for UNICEF's technical support, with coordination, support and technical guidance from the Inter-Agency Standing Committee (IASC) preparedness and contingency task force.

Expected Output:

- Stronger and more effective systems are in place regarding inter-agency early warning, preparedness and contingency planning, with particular attention to UN country teams facing critical emergencies. At least three inter-agency contingency plans have been developed over the coming year.

Early Warning/Early information System

Over the past several years country and regional offices, HQ, the UN framework team and IASC preparedness and contingency planning task force and others laboured to enhance early warning systems. Over the next year, the Regional Office will initiate reflection in at least three of the country offices considered as at risk, in order to develop an initial, and at first internal, early warning system. Once available, this will be shared with partner agencies in order to try and develop common indicators and mechanisms.

Expected Output:

- At least three UNICEF's MENA country offices have developed an initial early warning system – or at least a list of indicators –, they have shared the same system/list with partner agencies. A more clearly defined internal early warning system is in place and functioning, which effectively stimulates appropriate early preparedness and mobilization to potential crisis situations.

Advocacy and Children in Armed Conflict

The UNICEF's MENA Regional Office will continue to advocate for the ratification and implementation of key international child protection instruments, such as the CRC and optional protocols, the Convention on the elimination of all forms of discrimination against women, and the Ottawa Convention. In 2004, UNICEF and its partners will seek to take that information and develop an advocacy strategy that will aim to raise awareness of the problems faced by children and to promote effective protection of children. Meanwhile the work on the website on the use of children in armed conflict and the impact of conflicts on children will continue to be supported, until the website is created and various stakeholders have created a strong collaboration network on best practices and training.

UNICEF HUMANITARIAN ACTION OCCUPIED PALESTINIAN TERRITORY IN 2004



"I have only lost around 20 girls out of the 200 that are currently enrolled in the school. They were discouraged by the settlers' beatings and the harassment by the Israeli soldiers. All the other girls keep on facing up to bad weather, long waiting hours at checkpoints, insults and harassment. Some female teachers and parents gave up and moved out of the area. Some time ago, one settler was killed and the army searched our houses in retaliation. I was on my own when two young Israeli soldiers entered my house firing shots on my sideboards and wardrobe with their machine guns, thereby destroying all my china and putting bullet holes through my clothes. That same evening, the settlers came around 11 p.m., they smashed all the windows. When I went out that night in my little garden, I told myself that all

that was nothing, that I lived on my land and I thanked God for it. My trees give me their scent, the rustling of their foliage and the filtering light through the leaves. At the end of that same week, the army came back and cut down my trees. I cried but then told myself that if I abandoned the school, the teachers and the pupils would do the same. I am still here and in the evening I write poems for myself and for all the little girls, and I recall the scent of the trees, the rustling of the glittering leaves."

By the headmistress of a primary school in the H2 area of Old Hebron populated by 450 Israeli settlers and 35,000 Palestinians.

Financial Summary

Sector		US\$
Health	Extended Programme on Immunization	3,400,000
Health	Nutrition	1,200,000
Health	Mother and Child Health	500,000
Health	Integrated Management of Childhood Illnesses	550,000
Health	Psychosocial Support	1,490,000
Protection	Child Detainees	575,000
Education	Distant Education	3,000,000
Education	Reducing Impact of Conflict on Children's Learning	2,700,000
Education	Mine Risk Education	423,000
Total*		13,838,000

* Includes a maximum recovery rate of 12 per cent. The actual recovery rate on individual contributions will be calculated in accordance with the Executive Board decision 2003/9 of 5 June 2003.

1. CRITICAL ISSUES FOR CHILDREN AND WOMEN

Since September 2000, the Israeli occupation has tightened significantly. In response to the outbreak of fighting and a series of suicide bombs, Israel imposed a closure system consisting of a series of over 500 checkpoints and roadblocks made up of ditches across roads, earth mounds and gates preventing Palestinian movement throughout the West Bank and Gaza.

Unable to move from villages to cities by vehicle or between cities within the occupied territory without a permit, these obstacles have decimated the Palestinian economy. This year 60 per cent of the population live below the poverty line and almost 2.5 million people are living on less than US\$ 2 per day.

The decline in the rights and livelihoods of Palestinian children has been rapid and profound. This is directly linked to the violence and mobility restrictions children experience daily, including the death and injury to their person and that of their family and friends, damage to their property including the demolition of their homes, and the frustration and poverty they sustain:

Health facilities are difficult to access and the quality of services they provide are further weakened by the severe shortage of public funding.

Educational facilities are even worse affected. Frequent disruptions imposed by closures and military operations have heavily compromised attendance rates since September 2000 with a vast number of lost school days as a result.

In a large number of documented cases teachers are not granted access to their schools due to mobility restrictions; the general economic situation of the state impacts on the quality of teacher's education as well as the state of the overall educational system. At the same time, the school-aged child population is growing constantly, putting additional stress on capacities, which have reached their maximum absorption capacity.

As a result of the above-mentioned, the quality of education children receive in schools is in constant decline, as studies on learning achievements show.

Another consequence of the mobility restrictions combined with the socio-economic situation is the constant and ongoing decline in net enrolment rates since the beginning of the Intifada, which dropped by nearly 3 per cent since beginning of 2000. Traditionally high scores in literacy and numeracy in OPT are under threat.

Traumatic events such as the death or injuries within families and friends, house-to-house searches, and the humiliating round-up and detention of fathers and brothers lead to particularly acute psychological problems. Today, far more than half of all children under the age of 18 show moderate or severe post-traumatic symptoms of distress; 80 per cent of parents have noticed changes in their children's behaviour since the beginning of the Intifada, including problems in sleeping, being afraid and finding it hard to concentrate. Tackling the psychosocial impact of the conflict on children is being hampered by the fact that adults and parents, too, are subject to daily harassment and humiliation, and live in constant fear.

Despite all of these impediments, UNICEF is continuing the fight for the protection of the rights and the well-being of women and children.

2. ACTION AND ACHIEVEMENTS IN 2003

Health

UNICEF has been able to implement an Expanded Programme on Immunization to strengthen the National Immunization Programme in the OPT. This programme has ensured uninterrupted provision of immunization services to children and women in the West Bank and Gaza Strip and hence to safeguard the success of the national immunization programme undertaken by the Ministry of Health (MoH) throughout 2003.

In addition to the vaccine and injection safety supplies (syringes, safety boxes), UNICEF has supported the upgrading of cold chain and logistics equipment (refrigerators/freezers, vaccine carriers, cold-boxes) and devices (temperature monitor equipment) as well as management information systems (MIS).

Some 500,000 children under five years have been reached for routine immunization. Other supplemental immunization activities for children in their first school year ("booster immunization") and measles, mumps and rubella immunization for 13-year-old girls were able to reach 100,000 additional children.

The immunization coverage rate is expected to exceed 90 per cent with the six basic antigens of the Extended Programme on Immunization.

Shortfalls: Limitation in funding has had serious impacts on the planned upgrading of maternal and child health care (MCH) facilities in order to decrease morbidity and mortality among children and women in OPT.

The applied strategy chosen was to combine training of primary health care (PHC) staff in improved MCH practices with training on growth monitoring and improved nutrition practices (see below). The improvement of MCH services remains high on the agenda for 2004 and needs urgent funding if a further deterioration of services supplied to pregnant women and new born children is to be avoided.

Nutrition

Despite an overall unsatisfactory funding situation, UNICEF has stepped up activities directed towards a decrease in stunting and wasting among children under five years of age, as well as a decrease in high anaemia prevalence rates among children and women. These activities, although on a limited scale, were implemented within the regular UNICEF programme with its own resources available.

Using multiple media channels (TV, radio and print media) directed at raising awareness on breastfeeding practices, micro-nutrients supplementation and consumption of iodized salt, an estimated 60 per cent of the population have been reached.

Shortfalls: Due to limited funding, the envisaged strengthening of iron, folic acid and micronutrients supplementation intake of children and women which was planned to be realized in particular through flour fortification could not be achieved. In addition to the UNICEF strategy to boost the national capacities for food fortification, the emergency supply of these micronutrient supplements remains crucial for 2004.

Psychosocial

A key focus of UNICEF's work has been the strengthening of district-level psychosocial interventions and rehabilitation services. This has included the provision of training, supervision and materials to the Ministry of Social Affairs to provide psychosocial care to children and families. In Jenin and the five districts in the Gaza Strip, UNICEF provided training, supervision and materials to support counsellors in district-level psychosocial committees to conduct fun days, family and group counselling and community meetings for children and families.

The development of peer-to-peer psychosocial support groups, whereby adolescents themselves are trained and mobilized to support each other in times of distress, has also achieved positive results in contributing to the psychosocial well-being of adolescents. A hotline was established offering support to adolescents, designed to support youths in situation of increased tensions or day-to-day mobility restrictions preventing access to Ramallah-based services. In addition, approximately 1,000 psychosocial support kits containing educational material, games and play equipment for children were distributed to particular affected families in the West Bank.

Shortfalls: Due to limited funding, the number of children reached with regards to rehabilitation activities was limited to approximately 25,000. With the latest studies suggesting that up to 80 per cent of all children in OPT are showing changes in their behaviour, ranging from nervousness to sleeping problems, it becomes clear that the persisting needs for psychosocial rehabilitation are immense.

Psychosocial assistance to children and women in detention could not be extended due to the limitation of access to Israeli prisons and detention centres. At the same time this kind of intervention is crucial not only for the impact on the detainees due to the conditions of arrest and detention itself, but also for the families of the detainees.

Education

UNICEF, in close coordination with the Ministry of Education and Higher Education (MoEHE), has worked to ensure that all Palestinian children be offered a place in school both for the current and coming school year. In this regard, UNICEF has focused its support on economically disadvantaged children, through the provision of several thousand school uniforms, school bags and footwear. In order to support the above, and ensure the active participation of the community, UNICEF worked with a number of media outlets and professionals in airing awareness messages OPT-wide promoting the importance of education for children. In addition, UNICEF has assisted over one hundred schools with limited amounts of school supplies and equipment, along with educational material.

In an effort to tackle erratic school attendance due to closures and mobility restrictions, UNICEF has embarked on a nationwide remedial education programme to compensate for lost school days in the OPT. UNICEF has been able to implement in full its remedial programme in the OPT, expecting to reach up to 250,000 children over a duration of one year, focusing primarily on the districts most affected by the current crisis – Jenin, Tulqarem, Hebron and Nablus. Whereas in these (most affected areas) all children could be reached, children in other areas in OPT, which are less affected could not be reached due to lack of resources.

3. UNICEF's PLANNED HUMANITARIAN ACTION FOR 2004

In the 2004 Consolidated Appeal Process, UNICEF has been the leading agency in the field of Education and Psychosocial Interventions. For the refugee population, the full and uncontested responsibility lies with the United Nations Relief Work Agency. However, it is important to mention that there are ongoing activities to adapt and synchronize activities and standards benefiting refugee and non-refugee populations. In the health sectors, UNICEF has coordinated with other participating agencies and covered important areas within its traditional benchmark areas of key competencies.

Health – Expanded Programme on Immunization

Objectives

- To sustain high immunization coverage rates with seven basic antigens for children under 15 months and for first-grade school entrants.
- To sustain a polio- and neonatal tetanus- free status through implementing supplementary immunization campaigns in the West Bank and Gaza.

Target Beneficiaries 150,000 children under 15 months, 500,000 under five years, and 100,000 first-grade students

Key Activities

- Procure vaccines and vaccination-related items to complement the national immunization schedule currently underway.
- Upgrade the cold chain system at the central and peripheral level providing refrigerators, freezers, and vaccine carriers, including sets of spare parts and dual power cold chain equipment.
- Training for health personnel on the Expanded Programme on Immunization (for those not trained in 2003) and the implementation of new training sessions on 1/ injection safety issues, and 2/ data collection and information system for immunization service delivery.
- Implement mop-up polio immunization activities in hard-to-reach areas of the West Bank and Gaza, (approximately 60,000 children).
- Strengthen the Management Information System.
- Implement the Injection Safety Plan of Action.
- Monitor and evaluate activities through the newly-established zonal offices and national-level reviews.

Health – Maintaining Nutritional Status of Children and Women

Objectives

- To support prevention and early detection of malnutrition among children.
- To support prevention of micronutrient deficiencies.
- To support the promotion of breastfeeding and appropriate complementary feeding.

Target Beneficiaries 500,000 children under five and 600,000 women in reproductive age

Key Activities

- Conduct a massive awareness-raising campaign to promote breastfeeding and appropriate complementary feeding, affordable nutritious food, supplementation and universal consumption of iodized salt.
- Train 1,000 PHC providers on growth monitoring and nutrition-related actions.
- Provide a one-year supply of iron-fortification premix to strengthen flour iron fortification in OPT, hence supporting the implementation and evaluation of food/flour fortification (after a national policy on iron fortification of wheat flour has been developed together with the MoH within UNICEF's regular programme).
- Provision of iron and folic acid tablets for children and women through the primary health care centres.
- Expand the utilization of iodized salt at the national level by launching an advocacy campaign; conduct a national survey on the utilization of iodized salt.
- Monitor project activities through UNICEF's newly created zonal offices and through the existing surveillance system.

Health – Training for Maternal and Child Health Care Providers

Objective

- To upgrade the capacity of maternal and child health personnel to provide quality MCH services at 75 centres.

Target Beneficiaries A catchment population of 180,000 individuals covered by 75 MCH centres
600 doctors, midwives and nurses of the MCH staff

Key Activities

- Training for all MCH cadres of doctors, midwives and nurses on the management of common childhood illnesses (at national level), and prevention of micronutrient deficiencies.
- Basic medical equipment and supplies, e.g. growth monitoring equipment ("dopplers", scales, growth charts), consumables (syringes, gloves, other disposable items), basic diagnostic equipment (chemical reagents, blood test kits) for 75 MCH centres.
- Together with the MoH, review the management of MCH centres in order to achieve a further decentralization of these centres.

Health – Integrated Management of Common Childhood Illnesses

Objective

- To build national decentralized capacity in Integrated Management of Childhood Illnesses (IMCI), thereby mitigating the impact of the closures and access restrictions on child health care.

Target Beneficiaries 600,000 children under the age of five within the catchment population of the PHCs; 5,000 family caregivers and 500 doctors and nurses and village health workers in the PHC setting

Key Activities

- Train MCH cadres of doctors, midwives and nurses on Integrated Management of Childhood Illnesses/disorders (IMCI) in the pilot districts.

- Basic equipment and consumables, including IMCI starter kits and limited quantities on drugs to upgrade 100 PHC centres to facilitate the implementation of IMCI.
- Advocacy and training to empower family caregivers to better manage childhood illnesses at the primary stage and at community level.

Health – Psychosocial Support to Palestinian Children and Families

Objective

- To prevent distress amongst children affected by the conflict and to heal psychosocial wounds, with a focus on re-integration into family routine and social groups.

Target Beneficiaries 500,000 school-aged children in the West Bank and Gaza

Key Activities

- The project will be implemented throughout all governmental schools, extending its outreach to all school-aged children in OPT, restored youth clubs and sport activities in five cities most affected by the current conflict, benefiting a total of 9,000 adolescents throughout OPT. The project activities will follow the national code of conduct for psychosocial intervention in OPT, in the development of which UNICEF has been the leader during 2003. Primary, secondary and tertiary prevention through means of mass awareness stands at the core of the programme, while a comprehensive rehabilitation coverage and outreach to all children attending school and suffering from signs of psychosocial distress is pursued through teachers and school counsellors.
- Finally the inter-linkage between the school counsellors and the health system will guarantee an effective referral system in place for those children, whose psychosocial suffering is exceeding the means of treatment within the framework of the schools.

Child Protection – Supporting Palestinian Child Detainees

Objectives

- To reduce the number of Palestinian children and women detained in Israeli prisons and detention centres.
- To improve the conditions and treatment of Palestinian children and women detained in Israeli prisons and detention centres.

Target Beneficiaries 800 Palestinian children and women detained in Israeli prisons and detention centres

Key Activities

- Monitor and report on the situation of Palestinian children and women detained in Israel.
- Advocacy for an abolishment of administrative detention of children and for improved conditions in places of detention, including access to educational and recreational materials.
- Distribute humanitarian aid such as hygiene items, and clothing and materials for remedial education and recreation in the detention centres.

Education – Distance Education

Objective

- Ensure that children are able to continue a quality learning process despite school closures, violence, and other restrictions imposed by the conflict.

Target Beneficiaries 250,000 Palestinian children in locations most affected by the crisis (Hebron, Jenin, Tulkarm, Nablus)

Key Activities

- Review of curriculum and materials in core subject areas of maths, language and science, and social studies.

- Technical assistance will be provided to adapt learning content into interactive radio instruction course material, and to train trainers, teachers and supervisors.
- Courses will be delivered through live radio broadcasts and by means of a transcription service. The latter, in the form of pre-recorded taped lessons, will aim at reinforcing the radio lessons while allowing students to proceed at their own pace. At the same time the possibility of TV media will be piloted on a limited scale. This piloting will cover the development of video programmes based on the school textbook and transmitting of programmes to households.

Education – Reducing the Impact of Conflict on Children’s Learning

Objective

- To strengthen the capacity of the Ministry of Education to prepare and deploy trained and qualified teachers who can adapt to emergency conditions and complement UNICEF’s distant learning project.

Target Beneficiaries 5,000 teachers; 250,000 school children

Key Activities

- Development of child-centred programme materials.
- Jointly with the MoEHE set standards for teacher qualification and certification.
- Training for teachers, education planners and practitioners on programme management and monitoring and evaluation.

Education – Mine Action and Risk Education

Objectives

- Strengthen the national landmine and unexploded ordnance (UXO) casualty information reporting system.
- Ensure victims receive adequate psychological and physical rehabilitation and support.
- To develop additional information education and communication materials to support UXO Risk Education activities and monitor their impact on girls and boys.
- Develop the local capacity to reduce the risks caused by mine/UXO in high risk areas: Jenin, Tulkarm, Qalqilya, Nablus, Ramallah, Bethlehem, Hebron in the West Bank and most of Gaza.

Target Beneficiaries 500,000 children and adolescents in high risk areas such as Jenin, Tulkarm, Qalqilya, Nablus, Ramallah, Bethlehem, Hebron in the West Bank and most of Gaza; 500 teachers, summer camp leaders and police

Key Activities

- Training of MoH and Police staff in data entry, analysis and case reporting.
- Train social workers and NGOs how to provide psychosocial support to the injured children and their families.
- Development of theatrical plays by famous Palestinian children’s characters to deliver Mine Risk Education messages
- In collaboration with the National Programme of Action secretariat develop information, education and communication materials while using peer to peer education to better engage children in the learning process.

UNICEF HUMANITARIAN ACTION

SUDAN

IN 2004



"I returned to school after the government waived the cost of school fees for displaced children and because through the school I now receive uniform and school books provided by UNICEF but I feel sorry that I am now one year behind my friends." Najat explained that she wakes up at 6 a.m., cleans the compound, fetches water in a five gallon container from a nearby hand pump about 10 minutes walk from home. She often goes to school without any breakfast. During the school break when the pupils return home for fatuur (breakfast), she often has nothing to eat. Even on an empty stomach, after school she helps to wash the younger ones, collects water, cleans the compound and washes the dishes.

Najat Ahmed Badawi

Financial Summary				
Programme	Project category	US\$		
		UNICEF SCO	UNICEF SS	Total
Health	HA, TR-CB, TR-QS	11,106,230	6,128,000	17,349,000
Nutrition	HA	1,695,000	1,030,000	2,725,000
Water and Environmental Sanitation	HA, TR-QS	11,838,000	7,117,000	18,955,000
Education	HA, TR-QS, TR-CB	11,465,000	6,660,000	18,125,000
Rights, Protection and Peace-Building	HA, TR-CB	2,216,000	1,898,000	4,114,000
Disarmament, Demobilization and Reintegration for Child Combatants	TR-QS	3,212,000	2,425,000	5,637,000
Mine Action	HA	810,000	760,000	1,570,000
HIV/AIDS Prevention	TR-QS	1,410,000	2,120,000	3,530,000
Communication and Advocacy		1,515,000	812,000	2,327,000
Emergency Preparedness and Response	HA	1,225,000	1,978,000	3,203,000
Community Development	TR-QS, TR-CB	1,830,000	8,762,000	10,592,000
Coordination and Planning	PES, TR-CB	750,000	3,840,000	4,590,000
Security	PES	0	3,725,000	3,725,000
TOTAL*/**		49,072,230	47,255,000	96,327,230

* Includes the security and staff safety project (on behalf of UNSECOORD).

** Includes a maximum recovery rate of 12 per cent. The actual recovery rate on individual contributions will be calculated in accordance with the Executive Board Decision 2003/9 of 5 June 2003.

SCO: Project in the Government of Sudan areas / SS: Projects in SPLM areas / HA: Humanitarian Action
TR-QS: Transitional Recovery- Quick Start Peace Impact Programme / TR-CB: Transitional Recovery- Capacity Building
PES: Programme Enabling Support

1. CRITICAL ISSUES FOR CHILDREN AND WOMEN

Except for eleven years (1972-1983), Sudan has been in a state of civil war since its independence in 1956. The situation of children and women in the Sudan during 2003 continued to be negatively affected by the civil war, drought, floods and related humanitarian emergencies. The Sudan continues to have the largest displaced population in the world with some 3 to 4 million internally displaced persons (IDPs) and an additional 384,000 Sudanese refugees in neighbouring countries. Despite a Memorandum of Understanding signed in October 2002 by the two main warring factions, the Government of Sudan (GoS) and the Sudan People's Liberation Movement/Army (SPLM/A), calling for cessation of hostilities, militia-based conflicts in Unity State/Western Upper Nile during December 2002-January 2003 caused displacement of an estimated 180,000 people. In February 2003, three ethnic-based opposition groups in the Darfur region emerged under the name of Sudan Liberation Movement (SLM). They took up arms in response to the lack of government protection against recurrent attacks by nomadic tribes on sedentary groups, the underdevelopment of the region and their own marginalization. By August 2003 the conflict had escalated significantly resulting in the creation of approximately 500,000 IDPs as well as 65,000 refugees who sought safety in Chad. A ceasefire agreement was signed between the GoS and SLM on 3 September. The ceasefire agreement was followed by the launch of the Greater Darfur Initiative to help consolidate the fragile peace process. Some 12,000 persons displaced in Kassala when fighting broke out between the National Democratic Alliance and Sudan Government Forces in late 2002 continued to live in camps and communities stretching north of Kassala town to the conflict-affected Hamish Koreib. The conflicts in Unity State/Western Upper Nile, Kassala and the Darfur region caused destruction of the infrastructure, and resulted in human rights violations. This was compounded by the effect of consecutive years of drought and periodic flooding in some parts of the country. These crises and the associated internal displacement and disruption of family livelihoods put children and women at special risk and set back progress toward fulfilling their rights to education and other basic services. The long duration of the civil war and the emergency of new conflicts have led to large numbers of children being recruited for combat. While demobilization efforts have begun with SPLA forces, planning for a programme for pro-Government fighting forces has just started.

In a country as vast, poor and ecologically marginal as Sudan, local access to resources (pasture, water and agricultural land) is literally a matter of life and death. This is especially the case in the politically and economically marginalized parts of the country. Local grievances are a factor in the mobilization of communities and the creation of militia in support of one side or another in the wars in the south, Darfur and the Beja Hills. Ending these wider wars will not necessarily address issues at the grass roots which contribute to cycles of poverty, destitution and child vulnerability. Communities and local authorities must be supported to address the local conflict themselves, both through direct peace-building and service delivery aimed at reducing disparities, as an issue of strategic importance.

Sudan remains one of the poorest countries in the world severely hampering the survival and development of its children. UNDP's Human Development Index for 2003 ranked Sudan 138th out of 175 countries. Sudan's overall progress on social development indicators remains a cause for concern. Child and maternal mortality rates remain unacceptably high with wide regional disparities. The safe motherhood survey conducted by UNFPA in 1999 estimated the under-five mortality rate at 104 per 1,000 live births and the infant mortality rate at 68 per 1,000 live births in GoS areas for the period 1990-99 using the direct estimation method. The under-five mortality rates ranged between 59 per 1,000 live births in El Gezira state to 172 in Blue Nile state. Statistically representative estimates for child mortality rates in SPLM areas are not available, but some sources estimate that infant mortality may be as high as 170 per 1,000 live births.

In the Sudan, women remain very vulnerable, with an increasing number of female-headed households eking out a living against all odds. The situation of women is profoundly affected by the innumerable social obstacles they face to the full realization of their rights. Female genital mutilation remains a factor contributing to the high maternal mortality ratio of 509 per 100,000 live births. The percentage of female-headed households in conflict areas and among IDPs is estimated at 40-50 per cent compared to the already high 25 per cent national average. Of these households, 40-65 per cent are among the most vulnerable. Southern Sudanese women are estimated to suffer from some of the poorest quality of life indicators in the world. A poorly educated and unempowered female population is not only a human rights problem, it is a barrier to the development of the Sudan as a nation.

2. ACTION AND ACHIEVEMENTS IN 2003

The October 2002 Memorandum of Understanding permitted access to an additional one million vulnerable Sudanese mostly in Upper Nile and Blue Nile for the delivery of basic services, including primary health care, increased access to education, and improvement of water and sanitation facilities.

Several other accomplishments also stand out: the expansion of water sources along the Shenable nomad migration routes made a significant contribution to alleviating tensions in the Nuba Mountains that developed over competition for scarce water resources, and threatened the ceasefire. Support for health, education and water/sanitation also contributed to the resettlement of IDPs and returnees in the Nuba Mountains and Abyei areas.

During 2003, more than 1,000 water points were rehabilitated and repaired by redeveloping old boreholes, reconstructing platforms, cleaning or deepening wells and repairing hand pumps. This has given additional access to safe drinking water to an estimated 600,000 people, and an estimated 100,000 additional people access to water and sanitation. In collaboration with Global 2000, UNICEF supported the improvement of water supply in guinea worm endemic areas contributing to a reduction in the prevalence of guinea worm.

In an ongoing testimony to the joint efforts undertaken by UNICEF and its partner UN Agencies, NGOs and Sudanese authorities through the Polio Eradication Campaign, no new cases of wild polio infection have been detected since April 2001. In addition, the outbreak of yellow fever in Equatoria in May-August 2003 was effectively controlled with a total of 225,000 people vaccinated. It is estimated that between 70,000 and 80,000 additional children were immunized against childhood diseases over the previous year, and that 1.8 million children were provided with vitamin A supplements.

UNICEF and its partners also contributed to expanded access to primary education in Sudan. In 2003 some 250,000 and 300,000 more children were enrolled in primary school throughout the country including a significant number of additional girls. With regard to women's rights more generally, UNICEF provided financial and technical assistance for a three-day regional *Symposium on Effective Measures for the Abolition of Female Genital Mutilation to Ensure Safe Motherhood* in August 2003 at which the GoS announced its endorsement of an Action Plan to ban this harmful practice in the Sudan.

In another positive step toward stability, 2,000 SPLM/A child soldiers were demobilized with UNICEF's support.

3. UNICEF'S PLANNED HUMANITARIAN ACTION FOR 2004

The anticipated peace agreement will bring with it unprecedented opportunities, as well as challenges, for the people of the Sudan and their international partners seeking to improve their human security. While a peace deal will provide the opportunity to advance transitional recovery interventions, in the immediate term humanitarian needs will remain paramount – and may well increase as vulnerable populations are accessed more fully. Expanded access to previously unreached populations in need, a vast anticipated increase in IDP and refugee return, together with the likely continuation of instability indicate that 2004 will see an increase in the number of vulnerable people requiring life-saving and life-sustaining assistance.

UNICEF will support humanitarian interventions in all areas of Sudan and at every level to ensure the rights of children and women and to support families and communities in times of crisis and conflict.

Specific sectoral interventions will include a mix of humanitarian and transitional recovery activities as outlined below:

Health and Nutrition

- Humanitarian assistance to provide basic health care services for 2.8 million children and women in areas affected by conflicts or natural disasters, IDPs or areas which are receiving returning IDPs/refugees (US\$ 3,662,000).

- Vaccination against measles combined with vitamin A supplementation for 700,000 children aged between 9 months and 14 years and 11 months; and vaccination for meningitis control 150,000 children and women aged 2 to 30 years in high risk areas (US\$ 1,926,000).
- Expansion of routine immunization services, including support for special immunization campaigns, cold chain equipment, vaccines and related supplies, to ensure the immunization of 460,000 under-five children and 342,000 women of child-bearing age (US\$ 2,583,000).
- Organization of one double round of polio sub-national immunization days campaign for 2.3 million children aged 0-59 months in selected areas (US\$ 1,435,000).
- Restoration/rehabilitation of community co-managed primary health care services with regular and adequate supply of essential drugs and provision of medical equipment to serve the needs of 944,000 children and women in conflict-affected and economically marginalized areas (US\$ 5,043,000).
- Strengthening essential obstetrical care services, in collaboration with UNFPA and the World Health Organization, to 122,000 pregnant women, 102,000 post-partum women and 250,000 women of child-bearing age including communication materials, training of 400 midwives and provision of midwifery kits and other supplies to increase the percentage of deliveries attended by trained personnel (US\$ 2,700,000).

Nutrition

Coordination of nutrition surveys and assessments in collaboration with the World Food Programme and NGOs to monitor the nutrition status of children in high risk areas; support to therapeutic and supplementary feeding programmes; training of counterparts and nutrition personnel on nutrition surveillance, rehabilitation, growth monitoring and integration of nutrition activities, and nutrition education to prevent and manage malnutrition among 35,000 under-five children in focus areas (US\$ 2,725,000).

Water and Environmental Sanitation

- Emergency assistance to provide safe drinking water and sanitation for more than 350,000 persons through rehabilitation of 800 existing hand pumps, drilling of 250 new boreholes fitted with handpumps and construction of 200 community and 100 school latrines in areas affected by conflicts or natural disasters, IDP communities or areas which are receiving returning IDPs/refugees (US\$ 7,044,000).
- To support the consolidation of the peace process through increased access to water and sanitation for 377,500 persons in conflict-affected areas, areas of return for IDPs and refugees, or areas that have been economically marginalized through the rehabilitation of 10 water yards and 800 existing hand pumps, drilling of 400 new boreholes fitted with hand pumps and construction of 200 school latrines thereby contributing to the interruption of water-borne and water-related diseases, including guinea worm (US\$ 6,600,000).
- Building institutional and human capacity through the provision of training, drilling equipment and transport facilities to expand water supply and sanitation services in newly accessible locations in conflict areas and areas inhabited by returning IDPs/refugees (US\$ 5,311,000).

Education

- Humanitarian assistance to re-establish or expand education services for 340,000 primary school-age children in areas affected by insecurity or natural disasters or in areas of return for IDPs and refugees.
- Rehabilitation of 200 schools with community involvement, provision of educational materials and training of 3,270 teachers, headteachers and educational planners/administrators to support the provision of quality primary education (US\$ 4,955,000).
- To support the post-conflict recovery of quality primary education services for 44,000 primary school-age children and 18,000 adolescent girls in conflict-affected areas and economically marginalized areas through the rehabilitation of 100 schools with community involvement, the establishment of 100 two-classroom and 300 one-classroom village schools, the introduction of radio teaching in 200 schools, the training of 900 facilitators in non-formal approaches, the provision of educational materials and the training of 2,300 headteachers and teachers (US\$ 4,715,000).

- Building institutional human capacity to train educational planners/administrators and teachers and to produce textbooks through the establishment of 80 cluster resource centres, reactivation of 20 teacher training institutes to train 4,000 under-qualified teachers, strengthening of 15 educational planning units and training of 3,475 educational planners, teacher trainers and teachers required to expand access to quality primary education in newly accessible locations in conflict-affected areas and areas inhabited by returning IDPs/refugees (US\$ 4,955,000).
- To demonstrate the positive impact of the peace process, provide education opportunities for 36,000 primary school-age girls in conflict-affected areas and areas of return for IDPs and refugees through the establishment of 900 one-classroom village schools and the training of 900 teachers in multi-grade teaching and child-centred learning approaches (US\$ 3,500,000).

Rights, Protection and Peace-Building

- Building institutional and human capacity to support retrieval and family reunification and the reintegration of 900 abducted children, 3,000 conflict-separated children, 300 abandoned babies and 500 children affected by HIV/AIDS; support family tracing, access to family and community-based care, and support the development of coherent policies on child protection and child welfare (US\$ 2,525,000).
- Support communities and local authorities to address the causes of inter-community conflict through training of partners on peace-building, problem-solving meetings, sports, play, leisure and cultural activities to contribute to conflict peace-building at the community level in the Nuba Mountains, West Kordofan, Darfur and Bahr El Ghazal (US\$ 541,000).
- Development of child-oriented systems for addressing juvenile offences that encourage behavioural change and recognition of accountability among juvenile offenders while reducing reliance on the purely punitive sanctions (US\$ 445,000).
- Support to implementation of the national strategy for the eradication and spread of female genital mutilation (US\$ 603,000).

Disarmament, Demobilization and Reintegration of Child Soldiers

The demobilization and community reintegration of 6,000 children (less than 18 years) associated with fighting forces in north and south Sudan. In addition to family tracing and interim care, an important element will be support for education, vocational training and community reintegration (US\$ 5,637,000).

Mine Action

Building the capacity of the Sudanese authorities and civil society to plan and implement the Mine Risk Education (MRE), thereby contributing to the prevention of casualties/injuries caused by mines/unexploded ordnance. MRE for IDPs and receiving communities in contaminated areas will be a priority (US\$ 1,570,000).

HIV/AIDS Prevention

Advocacy, mass media campaigns and community mobilization activities to facilitate adolescents/youth access to appropriate information to prevent HIV infection and promote the acquisition of life skills to enable them to avoid risky behaviour. Establishment of voluntary counselling and testing services in identified sites in SPLM areas and provide support to orphans, families and communities with people living with AIDS (US\$ 3,530,000).

Communication and Advocacy

- Support information centres, produce communication materials for different media and information gathering and dissemination to stimulate and sustain international awareness of and response to the needs of children in the Sudan and UNICEF's response (US\$ 812,000).
- Support 400 youth groups to empower them with skills for youth-to-youth peer education and community support services on peace education, hygiene, reproductive health and HIV/AIDS. Support youth to undertake environmental clean up campaigns in communities (US\$ 345,000).

- Increase access to information and awareness on prevention of childhood illness, on risky behaviours and practices pertaining to HIV/AIDS, malaria, landmines and female circumcision and to promote a culture of peace through support to FM and MW radio stations, establishment of 1,000 community radio listening groups equipped with radio sets, training of radio producers and production of 450 radio programmes in local dialects (1,170,000).

Security and Staff Safety

Support to UN security coordination and management system for humanitarian operations in all sectors of Sudan in order to ensure timely, effective and efficient delivery of humanitarian services in the Sudan (US\$ 3,725,000).

Emergency Preparedness and Response

Provide shelter and relief materials to improve the living conditions of 200,000 people (40,000 families) affected by conflict and/or natural disasters such as flood and drought (US\$ 3,203,000).

Community Development

- Establishment of community-based and managed structures to plan, manage and sustain programmes to deliver child and maternal health, nutrition, water and environmental sanitation and hygiene-related services to promote integrated early childhood development in selected communities (US\$ 3,660,000).
- Capacity-building of local authorities to manage service delivery and to support local NGOs and community-based organizations, in order to rehabilitate their communities and provide rapid, visible and tangible benefits to communities (US\$ 6,932,000).

Coordination and Planning

- Establishing Operation Lifeline Sudan (OLS) Support Unit to facilitate the delivery of timely humanitarian assistance by all OLS Consortium members through the provision of essential services, management, overall coordination and strengthening of the operating environment (US\$ 1,265,000).
- Capacity-building of the Sudan Relief and Rehabilitation Commission at the regional and county levels, and of local NGOs and community-based organizations, to enable them to plan and manage basic services projects (US\$1,190,000).
- Institutional development to facilitate the introduction of children's and women's rights at all levels of policy-making and establishment and operationalization of a credible and continuously updated database to contribute to reducing the disparities in social indicators (US\$ 2,135,000).