

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

Daniel Toole Office of Emergency Programmes New York

Tel: +1 212 326 7163 Fax: +1 212 326 7037 E-mail: dtoole@unicef.org Gary Stahl Programme Funding Office New York

Tel: +1 212 326 7009 Fax: +1 212 326 7165 E-mail: gstahl@unicef.org Olivier Degreef Office of Emergency Programmes Geneva

Tel: +41 22 909 5655 Fax: +41 22 909 5902 E-mail: odegreef@unicef.org

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GLOSSARY AND ABBREVIATIONS

ART Antiretroviral therapy

ARV Antiretroviral

BP5/100 High energy food supplement (biscuit)
CAAC Children Affected by Armed Conflict

CAP UN Inter-Agency Consolidated Appeal Process

CBO Community-based organization CDC Centres for Disease Control

CEDAW Convention on the Elimination of All Forms of Discrimination against Women

CERF Central Emergency Revolving Fund CRC Convention on the Rights of the Child

CSW Commercial Sex Worker

DDRR Disarmament, demobilization, rehabilitation and reintegration DfID Department for International Development (United Kingdom)

DHS Demographic and Health Survey

DPT3 3 doses of combined diphtheria/pertussis/tetanus vaccine

ECD Early childhood development

ECHA Executive Committee on Humanitarian Affairs
ECHO European Community Humanitarian Aid department

EFA Education for All

EPI Expanded Programme on Immunization

EPRP Emergency Preparedness and Response Planning FAO Food and Agricultural Organization of the United Nations

FGM Female genital mutilation GNP Gross National Product

IASC Inter-Agency Standing Committee

ICRC International Committee of the Red Cross

IDD lodine deficiency disorders

IEC Information, Education and Communication (campaign/material)

IMCI Integrated Management of Childhood Illness (initiative)

IMIS Integrated Management Information System

IMR Infant mortality rate

IOM International Organization for Migration KAP Knowledge, attitudes and practices

MCH Maternal and child health
MDG Millennium Development Goals
MICS Multiple Indicator Cluster Surveys

MMR Maternal mortality ratio MTCT Mother-to-Child Transmission

MTR Mid-term Review

MTSP Medium Term Strategic Plan
MUAC Mid-upper arm circumference
NGO Non-governmental organization
NID National Immunization Day

OCHA UN Office for the Coordination of Humanitarian Affairs

ODA Official Development Assistance OPV3 3 doses of oral poliomyelitis vaccine

ORS Oral rehydration salts

OVC Orphaned and Vulnerable Children

PCH Primary health care

PMTCT Prevention of Mother-to-Child Transmission PPTCT Prevention of Parent-to-Child Transmission

STD Sexually transmitted disease
TBA Traditional birth attendant
TFC Therapeutic Feeding Centre
TT2 2 doses of tetanus toxoid vaccine

U5M Under-five mortality rate

UNDAF United Nations Development Assistance Framework

UNDP UN Development Programme

UNESCO UN Educational, Scientific and Cultural Organization

UNFPA UN Population Fund

VCT Voluntary Counselling and Testing

WFP World Food Programme WHO World Health Organization

FOREWORD

One cannot begin without mentioning the catastrophic impact of the tsunami, which has taken over 150,000 lives and devastated the livelihoods of millions in the countries surrounding the Indian Ocean. The solidarity expressed by the international community has been extraordinary, evident through the generous donations of the general public, the private sector and governments. The response to the tsunami crisis is a clear statement of what humanity can achieve when the world comes together with a common vision. A common vision shared by UNICEF.



UNICEF fully supported the 2005 Consolidated Appeal (CAP) launched in November 20044 by the United Nations in favour of 14 countries and regions affected by severe humanitarian crises.

This *Humanitarian Action Report 2005* is UNICEF's own appeal for women and children, not only in the 14 CAP situations, but also in 19 other countries where children face conflicts, post-conflict situations, natural disasters, deep consequences of HIV/AIDS epidemics and many other threats to their survival and well-being.

Because we have been present for many years in most developing countries, governments facing crisis situations often call first on UNICEF's experience and expertise in emergency operations. Governments know that UNICEF is committed to assisting children by protecting their rights and helping to meet their basic needs wherever they are in the world. They also know that UNICEF will continue working with national authorities for children long after the emergency, when media and other attention has faded away.

UNICEF not only brings children 'back to school' or 'back to vaccination' but also makes sure that sustainable systems for children's education and vaccination (to give just two examples) will remain in place and are developed over the long term.

Children can never wait. Even a short crisis can have deep effects on them. Health and nutrition in the early years are crucial to the physical and intellectual development of every human being – along with education and psychosocial support to help them lead fulfilled lives.

The lives of millions of children and women are at stake in all parts of the world. Children of Internally Displaced Persons (IDPs) in Colombia, children night-commuting in Northern Uganda, village children affected by conflict in Nepal, children in devastated villages in the Pool region in Congo, children orphaned by conflict and now street children of Banqui... the examples go on and on.

As they struggle to survive, I therefore ask all of you to help us increase our support to these children in emergencies. They do not deserve to be forgotten.

Thank you.

Carol Bellamy Executive Director

INTRODUCTION

The 2005 United Nations Consolidated Appeal (CAP) was launched in November of 2004, requesting support for humanitarian assistance worldwide. UNICEF was an active participant in this process, having worked in close collaboration with our partners to ensure that the special needs of children and women – so vulnerable in times of crisis – were reflected in the appeal. As of end November 2004, a total of US\$ 241,291,421 had been received – less than 60 per cent of the funds required – in response to the UNICEF segment of the previous CAP. Consequently, many vital needs remain unmet, and much remains to be done to ensure that live-saving assistance reaches all children in need, everywhere, including those caught in emergencies left out of the media spotlight.

In the meantime, the tsunami disaster has claimed more than 150,000 lives and caused widespread infrastructural damage and destruction in several countries around the Indian Ocean, and shifted the world's attention from other critical emergencies such as Darfur. The tsunami crisis was of an unprecedented scale and therefore warrants the international community's aid and assistance. We must not forget, however, the daily fate of millions of people, especially children and women, caught in conflict, drought and extreme poverty.

It is for this reason that UNICEF has prepared the 2005 Humanitarian Action Report. Providing a supplement to the CAP, the report presents a broader and more detailed picture of our humanitarian work on behalf of children in emergencies worldwide. It outlines UNICEF activities in seven regional offices and 33 countries – including 21 countries not covered by the CAP.

For its activities in 2005, UNICEF is requesting a total amount of US\$ 762,953,813. This figure reflects the magnitude of the task ahead, and the sheer scope of the humanitarian crises we face today. With the generous support of donors, UNICEF works to shield children from the terrible harm inflicted by these crises, assisting and protecting them so they can grow, learn and live in dignity.

UNICEF has always worked in emergencies, both natural and man-made. Originally called the United Nations Children's Emergency Fund, the organisation was created to provide humanitarian assistance to children living in a world shattered by the Second World War. Much has changed since then, but UNICEF's fundamental mission has not. Though emergencies grow increasingly complex, their impacts ever more devastating, UNICEF remains dedicated to providing life-saving assistance to children affected by disasters, and to protecting their rights in any circumstances, no matter how difficult. In health and nutrition, water and sanitation, protection, education and HIV/AIDS, UNICEF's Core Corporate Commitments to Children in Emergencies are more than a mission statement – they are a humanitarian imperative.

To meet this imperative, UNICEF works in collaboration with local and international partners, including governments, UN agencies, and civil society. These partnerships are crucial to ensuring comprehensive and effective delivery of humanitarian assistance. They also permit the diverse array of programmes necessary to address the full spectrum of children's rights, a fact which is especially important in emergencies, when these rights are most under threat.

Key issues

During emergencies, children are especially vulnerable to disease, malnutrition and violence. In the last decade, more than 2 million children have died as a direct result of armed conflict, and more than three times that number have been permanently disabled or seriously injured. An estimated 20 million children have been forced to flee their homes, and more than 1 million have been orphaned or separated from their families. Some 300,000 child soldiers – boys and girls under the age of 18 – are involved in more than 30 conflicts worldwide. UNICEF focuses on these children and their families – on the essential interventions required for protection, to save lives and to ensure the rights of all children, everywhere.

The chaos and insecurity of war threatens or destroys access to food, shelter, social support and health care, and results in increased vulnerability in communities, especially for children. Measles, diarrhoea, acute respiratory infections, malaria and malnutrition are the major killers of children during humanitarian

crises. Therefore, emergency immunization is one of UNICEF's priority interventions, along with vitamin A supplementation and therapeutic feeding centres. UNICEF also works to ensure safe supplies of drinking water, and to improve sanitary conditions for communities and the displaced.

When children are uprooted by armed conflict, they are cut off from social support, family and schools. The loss of education robs young people of the stability and security so vital to their healthy development. Rehabilitating schools helps rebuild a protective environment for children by establishing normal routines within communities threatened by violence and war, providing a place for children to learn, play and simply be children. Schools offer a place for adolescents to develop their potential, for example by participating in peace-building efforts, which can help build their self-esteem while supporting community reconciliation. UNICEF-sponsored Back-to-School programmes thus help heal the wounds of war, while providing young people with the vital tools they need to succeed later in life.

Sexual and gender-based violence are a disturbingly common feature of emergencies. In situations of armed conflict, girls and women are routinely targeted in campaigns of sexual violence, including rape, mutilation, prostitution, forced pregnancy and sexual slavery. UNICEF works to protect children and women from gender-based violence, focusing its efforts in three areas: prevention; protection; and recovery and reintegration.

Many humanitarian crises cause the forced displacement of families, with children separated from their caregivers and at grave risk of violence, abuse, abduction and exploitation. A key part of UNICEF's work in humanitarian crises therefore focuses on child protection, including tracing and reunification programmes for separated children. UNICEF also works to prevent the recruitment of children into armed groups, and to ensure that those who have been recruited can benefit from demobilisation programmes.

Landmines and unexploded ordnance often impede post-conflict development and reconstruction, blocking access to much-needed resources and posing significant risks to refugee and internally displaced children fleeing from conflict or returning home. Mine risk education activities remain the most effective short-term solution to keeping displaced children and women safe.

Emergency conditions, including sexual violence and exploitation, displacement and the presence of armed groups, increase the risk of transmission of HIV/AIDS. UNICEF promotes access to information and basic care for HIV/AIDS to affected communities, including education messages for young people and post-rape and psychosocial health training for community health-care workers.

The impact of UNICEF actions

UNICEF's work has resulted in significant improvements for children and women affected by natural disasters and complex emergencies worldwide. In India, for example, when monsoon floods in July of 2004 affected almost 10 million people, UNICEF provided urgently-needed supplies such as water-purification tablets, bleaching powder and oral rehydration salts.

In the Darfur region of Sudan, UNICEF has established 127 health clinics, helped to vaccinate more than two million children against measles, and inoculated more than 1 million children against polio. Thirty feeding clinics and 699 classrooms have been set up. Working alongside its partners, UNICEF has provided more than 800,000 people with access to safe water. Several challenges remain to ensure that even minimum basic needs of the children and women are met.

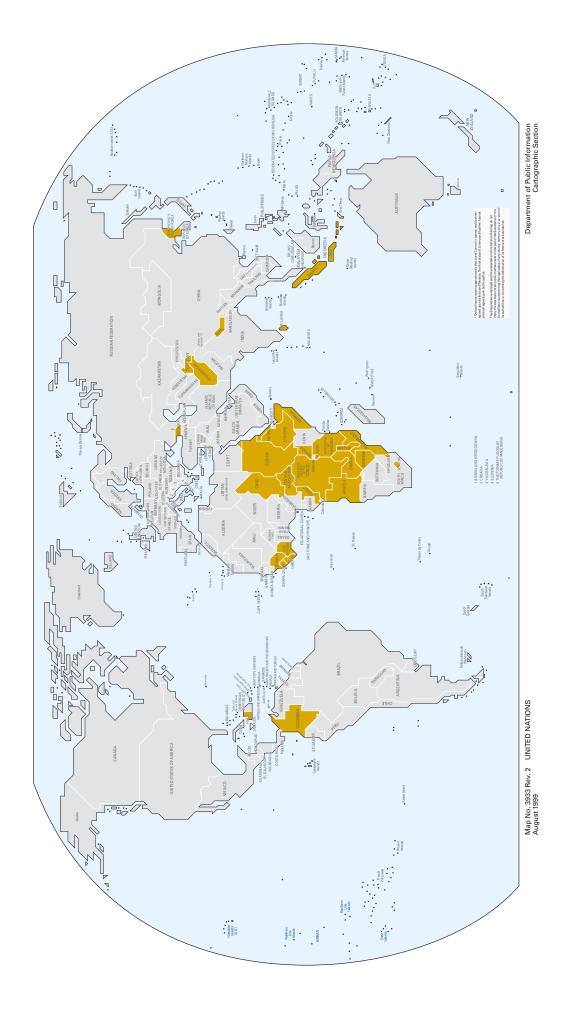
Within 48 hours of the massive earthquake in Bam, Iran, UNICEF was able to deliver two planeloads of essential supplies, including health kits and obstetric kits to help 120,000 people, more than 14,000 blankets, water purification tablets, water tanks, generators and other shelter supplies – a total of 60 tons worth of relief supplies. In the following days, UNICEF further provided 416 School-in-a-Box kits to benefit 33,280 pupils, each kit containing sufficient school materials for 80 students. We also distributed thousands of sets of winter clothing, including sweaters, boots and socks.

In Liberia, UNICEF has been instrumental in the disarmament, demobilization and reintegration process for children associated with fighting forces. Thus far, more than 1,800 children have benefited from demobilization programmes, and UNICEF hopes to reach thousands more in the coming months. The

Back-to-School campaign has enabled over 600,000 students to return to school, bringing a sense of stability and hope to many urban and rural communities across the country.

Our appeal to our donors

Successes like these are a dramatic illustration of the life-saving interventions donor support allows us to provide. Yet meeting the urgent demands of children and their families has stretched UNICEF resources, both financial and human. A number of high-profile emergencies, such as those in Darfur and the Democratic Republic of the Congo, have seized media attention – often justifiably, as some of these emergencies have witnessed grave and systematic violations of human rights, including the rights of children. Yet away from the glare of the media spotlight, a number of 'forgotten emergencies' continue to smoulder unnoticed. UNICEF is committed to assisting and protecting *all* children, *everywhere*, including those caught in forgotten crises. Meeting this commitment – and doing so effectively, with high standards of staffing and response – is an enormous challenge, one we cannot meet without the generous support of our donors. The US\$ 762.9 million requested here will help us defend the rights of our most vulnerable and precious resource – our children.



2005 UNICEF HUMANITARIAN ACTION FINANCIAL REQUIREMENTS

Region/Country	Funding requirements (US\$)
CEE/CIS AND BALTICS	
Chechnya and neighbouring republics	6,565,500
Georgia	1,260,000
Tajikistan	4,000,000
Support to Regional Office for CEE/CIS and Baltic States	705,000
EAST ASIA AND THE PACIFIC	
DPR Korea	16,905,000
Indonesia	2,650,000
Support to EAPRO	2,000,000
EASTERN AND SOUTHERN AFRICA	, ,
Angola	27,050,000
Burundi	20,882,159
Eritrea	13,090,772
Ethiopia	38,254,900
Lesotho	1,515,000
Malawi	3,292,800
Mozambique	8,970,000
Somalia	15,512,000
Swaziland	6,135,000
Tanzania, United Republic of	5,620,000
Uganda	28,493,180
Zambia	4,105,000
Zimbabwe	7,500,000
Support to ESARO	815,000
MIDDLE EAST AND NORTH AFRICA	813,000
Occupied Palestinian Territory	12,720,884
Sudan	288,903,945
Support to MENARO	1,200,000
SOUTH ASIA	1,200,000
Afghanistan	91 450 000
Nepal	81,450,000 5,951,500
Sri Lanka	13,580,000
Support to ROSA THE AMERICAS AND CARIBBEAN	784,000
	2 200 000
Colombia	3,300,000
Haiti	8,374,000
Support to TACRO	1,250,000
WEST AND CENTRAL AFRICA	0.074.004
Central African Republic	6,871,334
Chad	18,271,802
Côte d'Ivoire	17,267,385
Democratic Republic of the Congo	34,620,414
Guinea	8,311,136
Liberia	30,313,000
Republic of the Congo	4,245,030
Sierra Leone	3,600,000
Support to WCARO	1,961,822
TOTAL CAP	186,851,596
TOTAL NON-CAP	576,102,217
GRAND TOTAL	762,953,813

FUNDING OF UNICEF HUMANITARIAN ACTION

UNICEF presents its Humanitarian Action Report every year to provide an overview of its humanitarian assistance programmes around the world. The needs outlined in this report represent UNICEF's programmes included in the 2005 UN Consolidated Appeal launched in November 2004 as well as its humanitarian work in a number of non-CAP countries.

The total requirement for priority action in 33 countries and 7 regions amounts to US\$ 762,953,813, including US\$ 186,851,596 for CAPs and US\$ 576,102,217 for non-CAPs.

UNICEF greatly values the continued collaboration with a range of humanitarian partners, including local authorities, donor governments, international and national NGOs, the UN system, National Committees for UNICEF and the general public. It is particularly grateful to the support extended by donors during 2004, which was not only limited to cash contributions, but also included secondment of emergency response personnel, organizational capacity-building, in-kind donations and other forms of assistance to enable improved response to children's needs in crisis situations. Our appreciation to the top ten donors who contributed substantial amounts to support our humanitarian interventions: Japan, United Kingdom, European Commission, United States, Netherlands, Canada, Sweden, German National Committee for UNICEF, Norway and Australia. UNICEF is grateful to the following OECD countries: Sweden, Norway, Netherlands, Canada, United Kingdom, New Zealand, Ireland, Australia, Finland and Denmark, who are the leading donors of humanitarian aid in proportion to their Gross National Income.

While a significant proportion of financial resources were received from government donors, the general public in the industrialized and middle-income countries – through the National Committees for UNICEF – plays an important role in financing our humanitarian response, especially in situations of natural disasters. For example, National Committees covered most of the appeal needs for earthquakes in Iran and Morocco, for the winter emergency in Peru and for the drought in Kenya.

At the global level, UNICEF is particularly grateful to the continued financial assistance of the United Kingdom's Department for International Development (DfID) which, since 1999, has greatly aided UNICEF in strengthening its emergency response capacities at the country, regional and headquarters levels. Starting in 2005, UNICEF and the European Community Humanitarian Aid department (ECHO) will also be working together to further enhance capacity in emergency preparedness and response. This contribution will complement the ongoing DfID programme of cooperation and will allow UNICEF to accelerate the development of effective crisis preparedness and rapid response systems. In addition, a number of UNICEF Regional Offices have received financial assistance from the Australian and Swedish governments to support emergency preparedness and early action in the countries in their respective regions.

Adequate funding of emergency preparedness activities is extremely important for rapid and effective humanitarian response by UNICEF, thus allowing it not only to prepare itself for an emergency response,

ECHO and UNICEF - working together to help children -

The UN Children's Fund has had a long and fruitful working relationship with ECHO, the European Commission's humanitarian department. UNICEF is among ECHO's top five funding partners. In 2004, ECHO provided UNICEF with over 36 million euros for vital child-related projects in crisis zones throughout the world. As well as financing field projects, ECHO also provides thematic support to reinforce UNICEF's capacity to respond quickly and effectively.

With its mandate to assist the most vulnerable, ECHO pays particular attention to the needs of children in crises, making it a natural partner for UNICEF. In July 2004, ECHO adopted policy guidelines for children, aimed at ensuring that their needs are integrated into all its programmes. UNICEF was a valuable contributor to this document. For 2005, ECHO's strategy includes a specific focus on children's issues.

As an active and responsible donor, the Commission believes it is essential to fund its partners to provide integrated assistance for all emergency needs. Working with UNICEF and other aid agencies, it contributes to achieving the basic objectives of the Convention on the Rights of the Child:

- to diminish infant and child mortality,
- · to ensure the provision of necessary medical assistance and health care,
- · to combat disease and malnutrition through the provision of adequate nutrition and clean drinking water,
- to ensure adequate prenatal and post-natal health care for mothers, and,
- to ensure that children in crisis have access to education.

but also to contribute to inter-agency preparedness efforts. On its part, UNICEF has established two regional warehouses in Johannesburg and Dubai and plans another two this year in Panama and Bangkok in order to allow country offices involved in humanitarian action to rapidly procure relief items and expedite humanitarian response. However, field offices' ability to tap into these resources continues to be strained due to the lack (or late receipt) of funds.

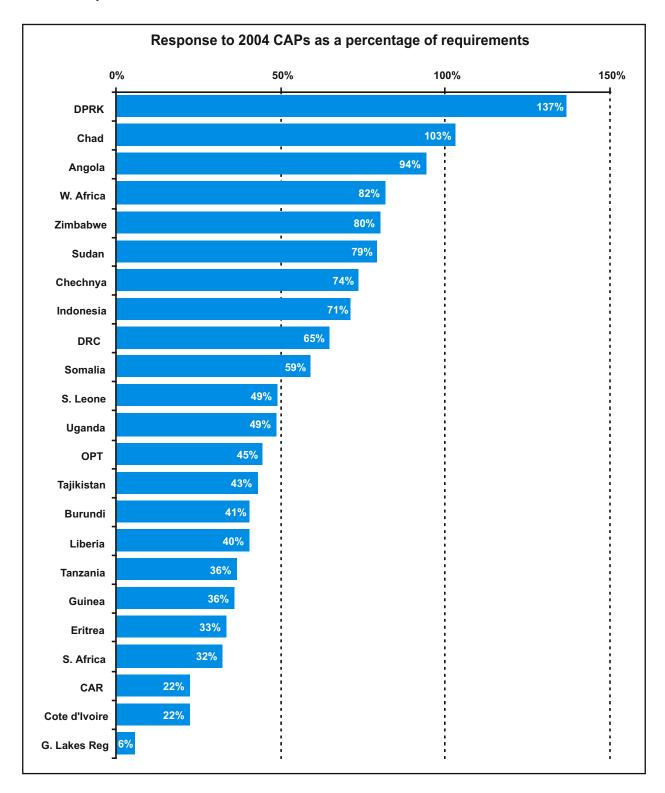
UNICEF humanitarian response is now guided by the revised Core Commitments for Children in Emergencies. These commitments have not only helped bring increased clarity within the organization in terms of emergency response, but have also informed partners about our actions in emergencies, thereby becoming more reliable partners in such circumstances. However, the ability to fulfill these commitments depends to a great extent on the availability of adequate resources to undertake actions in a timely manner.

UNICEF remains supportive of the Good Humanitarian Donorship Initiative and continues to work with donors as partners in many areas to help ensure the best possible response to children and women in crisis situations. In concrete terms, UNICEF, together with WHO, has led the inter-agency work to organize and analyze assessments more transparently across countries. The outcome assessment framework and matrix, which have been endorsed by all humanitarian agencies, are being piloted in Burundi and DR Congo.

The table below shows a detailed overview of the targets and receipts for the 2004 CAP as of 14 December 2004. The total funding received against the 2004 CAP requirements of US\$ 433.1 million was US\$ 262.7 million as of 14 December 2004.

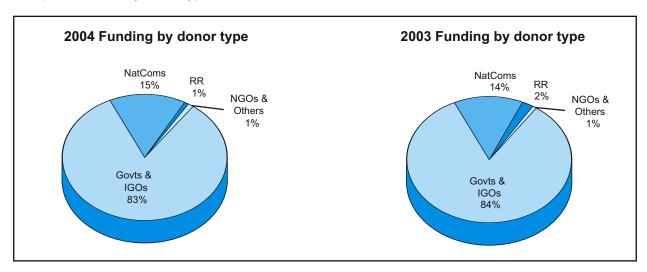
Country/Subregion	Target (US\$)	Total funding (US\$)	Per cent funded
Angola	10,917,350	10,285,590	94
Burundi	27,138,366	11,006,785	41
Central African Republic	3,857,727	864,310	22
Chad (Darfur)	10,735,976	11,072,349	103
Chechnya	6,265,200	4,613,844	74
Côte d'Ivoire	20,464,593	4,557,706	22
DPR Korea	14,803,960	20,247,055	137
DRC	37,249,771	24,070,087	65
Eritrea	13,694,674	4,560,393	33
Great Lakes Region	1,711,364	96,779	6
Guinea	4,469,972	1,611,864	36
Indonesia	5,040,700	3,584,605	71
Liberia	39,856,121	16,133,722	40
Occupied Palestinian Territory	13,838,000	6,168,680	45
Sierra Leone	11,897,000	5,834,422	49
Somalia	17,936,386	10,566,683	59
Southern Africa	34,570,250	11,154,504	32
Sudan (Darfur)	70,018,016	48,370,123	69
Sudan (Khartoum)	48,771,000	12,854,584	94
Sudan (OLS/Nairobi)		32,950,597	94
Tajikistan	5,345,000	2,295,469	43
Tanzania, United Republic of	7,749,680	2,826,961	36
Uganda	14,327,804	6,952,433	49
West Africa	1,625,137	1,327,906	82
Zimbabwe	10,810,000	8,671,903	80
Sub-total CAP	433,094,047	262,679,355	61

As can be seen from the chart below, 10 CAPs were funded above 50 per cent while 13 CAPs remained funded below 50 per cent. This points to the fact that a number of emergencies remain forgotten or received very little attention.



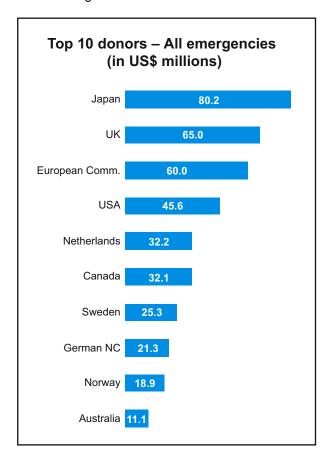
Of the total 2004 emergency income, approximately 83 per cent came from Governments and Intergovernmental Organizations (IGOs), compared with 84 per cent at the same time in 2003 and approximately 15 per cent from UNICEF National Committees (same as in 2003). As at 14 December 2004, UNICEF received financial contributions from a total of 31 governments and IGO donors (down from 38 in 2003), 29 UNICEF National Committees (29 in 2003) and 16 other donors (up from 5 in 2003).

The charts below compare the percentage emergency contributions received in 2004 (as of 14 December 2004) and in 2003 by donor type.

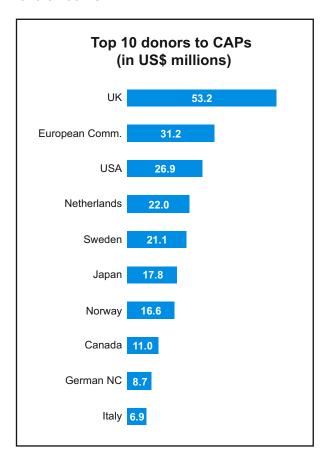


UNICEF is grateful to the 76 donors that supported emergency programmes in 2004 (same as in 2003), and is particularly appreciative of 20 donors who increased their support in 2004. While the majority of emergency assistance came from our traditional donors, there is a growing interest in humanitarian operations from donors in Africa, Asia, Eastern Europe, and the Middle East, a very encouraging development.

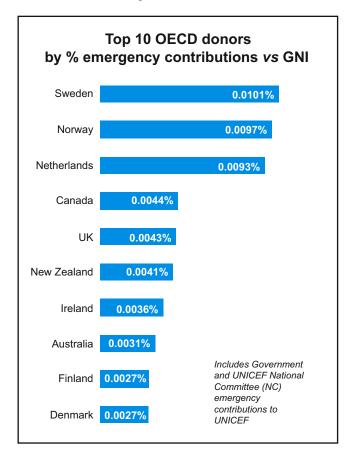
The graph below shows the top 10 donors for all emergencies in 2004.



The graph below shows the top 10 donors for the 2004 CAP.



The graph below shows the top 10 donors to all emergencies in terms of GNI.



During 2005, UNICEF hopes that donors will respond favourably to the humanitarian appeals included in this report in order to enable UNICEF to address the needs and rights of the most vulnerable children and women in the world. It also hopes that donors will continue to consider reducing the earmarking of contributions wherever possible – or consider channeling contributions as thematic funds to afford adaptability and flexibility to UNICEF's humanitarian action in the ever-changing context of the humanitarian sphere.