

# CHILDREN OF HAITI



**Progress, Gaps and Plans in Humanitarian Action  
Supporting a Transformative Agenda for Children**

**April 2010**

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Stanley carries his 2-year old cousin, Marie Love, near their family's makeshift tent shelter in the Parc Jean Marie Vincent settlement in the Piste Aviation neighbourhood of Port-au-Prince.

## EXECUTIVE SUMMARY

The earthquake that devastated Haiti on the 12<sup>th</sup> January 2010 killed over 220,000 people, injuring over 300,000 and causing up to 4,000 amputations. Three million people, or 30 per cent of the population, have been affected; almost 1.3 million are living in temporary shelters in over 400 spontaneous sites in the Port-au-Prince area, while more than 600,000 have moved to outlying areas, including some 300,000 children.

This disaster has been a children's emergency: nearly 1.5 million children have been directly affected by the disaster; many more remain at risk and continue to require assistance and protection. Girls and boys, who make up almost half of the population, are among the most vulnerable groups.

Already before the earthquake, Haiti's children were up against unfavourable indicators: one in every 13 infant died before the age of five; over 30 per cent of Haitians under the age of five were chronically undernourished; 55 per cent of school-aged children were out of school; 50,000 were in some 600 residential care facilities; an estimated 2,000 girls and boys were trafficked across borders annually.

In the immediate aftermath of the earthquake, the logistical, communication and coordination challenges were massive: the capital was debilitated with damaged and destroyed infrastructure, including key Government buildings and entry points into Port-au-Prince like the seaport. UN capacity was weakened by the loss of lives under the collapsed building, while UNICEF staff lost family members and homes. Despite this, the mobilisation of international humanitarian assistance in support of the Government of Haiti has been on a scale rarely - if ever - seen in the past, thanks to the generosity, commitment and support of governments, partners, and the public.

UNICEF's global response to this rapid-onset emergency has been unprecedented. UNICEF has taken extraordinary measures to mobilise some 300 staff and consultants from around the world to work on the Clusters response, programmes and operations. There were visits from the Executive Director and Deputy Executive Director of UNICEF, senior management, and from various National Committees.

To help address the unprecedented devastation and the subsequent logistical constraints, the UNICEF Country Office in the Dominican Republic established a support hub of a fluctuating 20 – 25 staff, called Lifeline Haiti (LLH). The hub has supported the needs of Haitian earthquake victims in delivering services at the border, facilitating relief efforts and the flow of supplies into the country.

UNICEF, in line with its Core Commitments for Children and with its partners, has been delivering life-saving assistance to Haitian children in the sectors of water, sanitation and hygiene (WASH), nutrition, and health. As part of its commitments, UNICEF has been providing children with a sense of safety and normalcy through designated spaces and materials for education, recreation, and early childhood development. UNICEF has also been working towards building and strengthening systems to protect girls, boys and women from violence, exploitation, abuse and neglect.

In accordance with its inter-agency commitments, UNICEF, in close partnerships with respective Ministries, is leading the Clusters in WASH, Nutrition, Education together with Save the Children, and the Sub-Cluster in Child Protection. UNICEF is also working with WHO and the Ministry of Health on resuming and expanding primary health care services.

It is clear that the humanitarian action taken over the past three months has averted a post-earthquake crisis. There have been no outbreaks of diseases or epidemics so far. Much however, remains to be done. With the upcoming rainy and hurricane seasons, the relocation of displaced people to safer shelters, along with the provision of basic services and the protection of children and women, remain a priority.

UNICEF, with its partners, will continue to support the relief operations and assist in the reconstruction and recovery phase. Children must remain at the forefront of the reconstruction, recovery, and development processes. It is important that children's voices are heard, their rights are upheld, and their needs are addressed. UNICEF Haiti's three priorities for 2010 include:

1. Ensuring that children are in school;
2. Preventing and addressing the threat of under-nutrition in children;
3. Protecting the most vulnerable from violence, exploitation, abuse and neglect.

UNICEF's response has been possible due to the generous support provided by donors, including Governments, National Committees, and individuals. Implementing partners have been central to ensuring that services and supplies have been delivered to beneficiaries. UNICEF acknowledges the tremendous efforts undertaken by voluntary organizations and individuals. Particularly commendable is the courage and commitment demonstrated by Haitians inside the country and abroad, within UNICEF, among displaced persons, in camp committees, and all those who have dedicated their efforts to assisting the country.

The challenge now is to build a Haiti with a transformative agenda to make it a better place for all children and youth. We are taking a step further: as an example, we are going beyond the "back to school" approach to an "all children in school" approach. Haiti's recovery must begin with its children and their communities. Only with children at the centre of the reconstruction effort can we build a new Haiti – a Haiti Fit for Children.

## GLOSSARY

<b>ACF</b>	Action Contre la Faim (INGO)
<b>ACTED</b>	Agency for Technical Cooperation and Development
<b>ADF</b>	Americas development Foundation
<b>ADMD</b>	Asociación Dominicana de Mitigación de Desastres (The Dominican Disaster Relief Association)
<b>ADRA</b>	Adventist Development and Relief Agency
<b>AIDS</b>	Acquired Immune Deficiency Syndrome
<b>APROSIFA</b>	Association for the Promotion of Integral Family Healthcare
<b>ARIS</b>	Acute respiratory Infection
<b>ARV</b>	Anti Retroviral
<b>AVSI</b>	Associazione Volontari per il Servizio Internazionale
<b>BPM</b>	Brigade de la Protection des Mineurs – Child Protection Brigade within the Police
<b>BUGEP</b>	Bureau de Gestion du Préscolaire (MoE's Preschool Education Unit)
<b>CCCM</b>	Camp Coordination Camp Management
<b>CES</b>	Centre d'Education Spéciale (National NGO for Special Education)
<b>CFS</b>	Child Friendly Spaces
<b>CIDA</b>	Canadian International Development Agency
<b>Cluster Approach</b>	Concept of partnership between UN agencies, the International Red Cross and Red Crescent Movement, international organizations, and NGOs. Partners work together towards agreed common humanitarian objectives at global and field level to facilitate inter-agency complementarity by maximising resources.
<b>CMAM</b>	Community Management of Acute Malnutrition
<b>CNSA</b>	Commission Nationale sur la Sécurité Alimentaire (National Commission on Food Security)
<b>CONANI</b>	Dominican republic National Child Protection Authority
<b>CP</b>	Child Protection
<b>CRS</b>	Catholic Relief Services
<b>DHS</b>	Demographic and Health Survey
<b>DINEPA</b>	Direction Nationale de l'Eau Potable (National Unit for WASH)
<b>DPC</b>	Civil Protection Directorate
<b>DPT3</b>	Diphtheria, Pertussis and Tetanus vaccine
<b>DTM</b>	Displaced Tracking Matrix
<b>DR</b>	Dominican Republic
<b>DRR</b>	Disaster Risk Reduction
<b>DSNCRP</b>	Document de Stratégie Nationale pour la Croissance et pour la Réduction de la Pauvreté (PRSP Document)
<b>ECD</b>	Early Childhood Development
<b>ECHO</b>	European Commission's Humanitarian Aid Office
<b>EFA</b>	Education for All
<b>EFSA</b>	Emergency Food Security Assessment
<b>EID</b>	Early Infant Diagnosis
<b>EMMUS</b>	Enquete de morbidite, mortalite et utilisation des services
<b>EPF</b>	Emergency Programme Fund
<b>EPI</b>	Expanded Programme of Immunisation
<b>FAO</b>	Food and Agriculture Organisation of the United Nations
<b>FIGO/SOGC</b>	International Federation of Gynaecology and Obstetrics
<b>FOKAL</b>	Fondasyon Konesans Ak Libète (National NGO on Education and Culture)
<b>Fondefh</b>	Fondation pour le Développement de la Famille Haïtienne
<b>FOSREF</b>	Fondation pour la Sante Reproductive et l'Education Familiale
<b>FPGL</b>	Fondation Paul Gérin Lajoie (International Development NGO)
<b>GAM</b>	Global Acute malnutrition

## GLOSSARY CONTINUED

<b>FPGL</b>	Fondation Paul Gérin Lajoie (International Development NGO)
<b>GAM</b>	Global Acute malnutrition
<b>GAVI</b>	Global Alliance for Vaccines and Immunisation
<b>GBV</b>	Gender Based Violence
<b>GDP</b>	Gross Domestic Product
<b>GHESKIO</b>	Groupe Haïtien d'Etudes de Sarcome de Kaposi et d'Infections Opportunistes (National NGO on HIV/AIDS)
<b>GTEF</b>	Groupe de Travail pour l'Éducation et la Formation (Presidential Commission on Education and Training)
<b>HAVEN</b>	House and community building charity
<b>HEAS</b>	Epidemic Advisory System in Haiti
<b>HIV</b>	Human Immunodeficiency Virus
<b>HRC</b>	Haiti Response Coalition
<b>IASC</b>	Inter-Agency Standing Committee
<b>IARTE</b>	Inter-Agency real time Evaluation
<b>IBESR</b>	Institut de Bien-Etre Social et de Recherches (MoSA's Institute on Social Welfare and Research)
<b>IDB</b>	Inter-American Development Bank
<b>IDEJEN</b>	Initiative pour le développement des jeunes
<b>IDP</b>	Internal Displaced People
<b>IHE</b>	Institut Haïtien de l'Enfance (National Haitian Child Institute)
<b>IHSI</b>	Institut Haïtien de Statistiques (National Institute of Statistics)
<b>IMC</b>	International Medical Corps
<b>IMCI</b>	Integrated Management of Childhood Illness
<b>IMEP</b>	Integrated Monitoring and Evaluation Plan
<b>IMR</b>	Infant Mortality Rate
<b>I-NGO</b>	International NGO
<b>IOM</b>	International Organization for Migration
<b>ICRC</b>	International Committee of the Red Cross
<b>IFRC</b>	International Federation of Red Cross
<b>IRC</b>	International Rescue Committee
<b>ISF</b>	Integrated Strategic
<b>IT</b>	Information Technology
<b>IYCF</b>	Infant and young child feeding
<b>JCICS</b>	Joint Council on international children's services
<b>JPHRO</b>	Jenkins-Penn Haitian Relief Organisation
<b>MDG</b>	Millenium Development Goal
<b>MdM</b>	Médecins du Monde
<b>MHPSS</b>	Mental Health and psycho-social support
<b>MICS</b>	Multiple Cluster Inidator Survey
<b>MINUSTAH</b>	Mission des Nations Unies pour la Stabilisation d'Haïti (United Nations Stabilization Mission in Haiti)
<b>MENFP</b>	Ministère de l'Éducation et de la Formation -Ministry of Education
<b>MSPP</b>	Ministère de la Santé Publique et de la Population - Ministry of Health
<b>MJSP</b>	Ministère e de la Justice et de la Sécurité Publique - Ministry of Justice
<b>MoP</b>	Ministère de la Planification et de la Coopération Externe - Ministry of Planning
<b>MAST</b>	Ministère des Affaires Sociales et du Travail - Ministry of Social Affairs
<b>MoU</b>	Memorandum of Understanding
<b>MSB</b>	Swedish Civil Contingencies Agency
<b>MSF</b>	Médecins sans Frontières (Doctors without Borders)

## GLOSSARY CONTINUED

<b>MSF</b>	Médecins sans Frontières (Doctors without Borders)
<b>MUAC</b>	Middle Upper Arm Circumference
<b>NCA</b>	Norwegian Church Aid
<b>NGO</b>	Non-governmental organisation
<b>NNF</b>	National Notario Foundation
<b>NRC</b>	Norwegian Refugee Council
<b>OCEDAH</b>	Office of Community Education and Diversity Affairs
<b>OCHA</b>	United Nations Office for the coordination of humanitarian affairs
<b>PCA</b>	Partnership Cooperation Agreements
<b>PCNB</b>	Points de Conseil de Nutrition Pour les Bébé
<b>PBR</b>	Programme Budget review
<b>PDA</b>	Presbyterian Disaster Assistance
<b>PDNA</b>	Post Disaster Needs Assessment
<b>Pesadev</b>	Perspectives pour la Santé et le Développement
<b>PMTCT</b>	Prevention of Mother-to-Child Transmission
<b>PNH</b>	Police Nationale d’Haiti
<b>PRSP</b>	Poverty Reduction Strategy Paper
<b>RUIF</b>	Ready-to-use infant formula
<b>RUTF</b>	Ready to Use Therapeutic Food
<b>SAM</b>	Severe Acute Malnutrition
<b>SC</b>	Save the Children
<b>SFP</b>	Engineers without Borders – San Francisco Professionals
<b>SOFA</b>	Solidarite Fanm Ayisyèn (National NGO for Women)
<b>SSA</b>	Special Service Agreement
<b>STD</b>	Sexually Transmitted Diseases
<b>TdH</b>	Terre des Hommes (I-NGO)
<b>U5</b>	Under 5 years old
<b>U5MR</b>	Under-five Mortality Rate
<b>UN</b>	United Nations
<b>UNAIDS</b>	Joint United Nations Programme on HIV/AIDS - Programme Acceleration Funds
<b>UNDP</b>	United Nations Development Programme
<b>UNFPA</b>	United Nations Population Fund
<b>UNIFEM</b>	United Nations Development Fund for Women
<b>UNOPS</b>	United Nations Office for Project Service
<b>UNPOL</b>	United Nations Police
<b>USAID</b>	United States Agency for International Development
<b>VRQ</b>	Very Rapid Qualitative Approach
<b>WASH</b>	Water, Sanitation and Hygiene
<b>WFP</b>	World Food Programme
<b>WHO/PAHO</b>	World Health Organisation/Pan American Health Organisation
<b>YCSA</b>	Young Child Survival and Development
<b>Zanmi Lasante</b>	Partners in Health



## FAST FACTS

- Over 3 million people have been affected by the earthquake, including some 1.5 million children.
- Over 220,000 people died and 300,000 were injured.
- Around 1.3 million are in emergency shelters in the Port-au-Prince area; over 600,000 people have left their home communes for rural areas, including 300,000 children.
- Total value of damages and losses estimated at \$7.86 billion—120% of Haiti's GDP in 2009. Over 4,300 education facilities and 50 hospitals and health centres have been rendered unusable.



## NUTRITION

- Over 100,000 affected children under-5 years and pregnant and lactating women have benefited from the Nutrition Cluster's blanket feeding to prevent the deterioration of nutritional status.
- UNICEF is supporting 19 of the established 23 baby tents and eight sites for community-based management of acute malnutrition targeting 20,000 infants under-1 year; 6,500 children with Severe Acute Malnutrition (SAM); 50,000 pregnant and lactating women; 166,000 children under-5 years.



## PRIMARY HEALTH CARE

- UNICEF has provided vaccines, injection devices and cold chain materials for the emergency vaccination campaign. To date over 104,000 children aged 9 months to 7 years have been vaccinated.
- UNICEF is supporting the Ministry of Health in expanding decentralized public health system for maternal, neonatal and child health services. Over 134 Emergency Health Kits and health basic units have been supplied to provide the minimum package of health services to approximately 134,000 people for three months.



## EDUCATION

- UNICEF and Cluster partners, with the Ministry of Education, have worked on a 'movement for learning' to promote the gradual enrolment of all children and adolescents in Haiti. The most affected areas have begun to progressively reopen in April. One week after the official reopening of schools, UNICEF visits have revealed an encouraging trend of large numbers of children returning to schools.
- UNICEF has distributed 875 school-in-a-boxes, 1,495 Early Childhood Kits (ECD), 2,226 recreation kits as well as 1,400 school tents for temporary classrooms, ECD classes and to support the education, protection and development of 170,000 children.



## WATER, SANITATION AND HYGIENE (WASH)

- Since 13 January, the Cluster has been supplying water trucks to some 400 destinations in Port Au Prince, Leogane, Petit Goave, Grand Goave and Jacmel, and water through subsidized private sector kiosks.
- UNICEF is supporting the provision of approximately 5 litres of water per day to some 1 million people through 451 water kiosks and over 300 sites through different organizations.
- Almost 5,350 latrines have been installed by Cluster partners for the benefit of around 500,000 persons.



## CHILD PROTECTION

- Over 55,000 children per week benefit from 78 child friendly spaces set up. Each CFS benefits around 50-100 children/day through several shifts.
- A call centre is receiving calls from frontline workers working with separated children. So far, over 767 separated children have been registered.
- The quality of care in 359 residential childcare centres hosting approximately 25,339 children has been evaluated, and immediate needs of children have been addressed in half of the centres, with UNICEF support.

## INTRODUCTION

### Overview

#### ***Impact of the earthquake***

Three months since the devastating earthquake of 12 January 2010, Haitians and the international community are only now coming to grips with the magnitude, depth and complexity of the crisis. The infrastructure, government institutions, economic systems—the fabric of society itself - have been dealt a blow on a scale probably unprecedented in modern times. A generation of children have been marked by this disaster: with nearly 40 per cent of all Haitians aged below 15 years; some 1.5 million children have been directly affected by the earthquake.

Unlike the Indian Ocean Tsunami, which devastated coastal communities in at least eight different countries, the Haitian earthquake resulted in a comparable death toll (over 222,000 persons) in the highly concentrated political and economic centre of a single, already fragile, nation. According to the Post Disaster Needs Assessment (PDNA), the total value of damage and losses is estimated at US \$7.86 billion. This is equivalent to more than 120 per cent of Haiti's 2009 gross domestic product (GDP) - the highest relative cost of a disaster since the methodology was applied 35 years ago.

Certainly, the emergency response phase has averted an even worse catastrophe: the basic needs of many of the affected population have been met, and major outbreaks of disease or unrest have not materialized - yet. This has been no small achievement. A vast array of international and national partners have mobilized huge resources and, after a slow start, ensured the delivery of shelter, food, water, health, nutrition and other basic services to well over a million affected people.

#### ***UNICEF Haiti in the crisis***

UNICEF has mobilized an unprecedented global response with some 300 staff and consultants from around the world deployed to Haiti over the past three months. There are currently over 200 staff and consultants, up from 56 prior to the earthquake.

In the Dominican Republic, Lifeline Haiti was set up as a support hub for the UNICEF Haiti Country Office with some 20—30 staff focussing on managing the emergency funds, channelling in aid personnel, facilitating warehousing, transportation, as well as supplies logistics into Haiti, delivering services at the border, and providing information communication technology support.

The earthquake also affected UNICEF personnel in Haiti, espe-

cially national staff. The majority had to leave their residences as a result of the earthquake: some have slept in the streets, in tents, in cars, others have stayed with family or relatives. All national staff lost someone they knew or loved. Some nationals chose to send their children abroad, to safe places where they can attend schools—this is a source of frustration for parents.

#### ***Three months after — taking stock***

This report takes stock of the main achievements in responding to the immediate needs of children and those who care for them— but also highlights the serious gaps and challenges that still exist to ensuring the large numbers of survival and protection of children affected by the earthquake.

The report also traces an outline of the emerging vision for the country's reconstruction and development, with children at the centre of the plan. This is a vision that springs from the diverse voices of Haitian children and youth, from an increasingly vocal civil society - and from the higher-level political consensus that merely “building back” to the status quo prior to the earthquake will not be sufficient to protect and progressively fulfil the rights of children.

The resources mobilized in the wake of the disaster hold the potential to think bigger—to plant the seeds of a “transformative agenda” for a more equitable and participatory state, with decentralised social services and a solid social protection floor. A vision, in other words, of a Haiti fit for children.

### Shallow quake – deep vulnerability

#### ***Damages and losses in a fragile state***

The 12 January earthquake registered 7 on the Richter magnitude scale, and was concentrated at a shallow depth of thirteen kilometres. In comparison to the Indian Ocean Tsunami which registered 9.3 - and the Chilean earthquake of 27 February registering 8.8, this was not the greatest magnitude quake. It was the location of the epicentre however, (close to the capital and the urban centre of Leogane) combined with Haiti's fragility, deep, extreme poverty and urban overcrowding that explains the particularly disastrous impact.

In 2009 the United Nations Human Development Index ranked Haiti 149th out of 182 countries, making it possibly the poorest country in the western hemisphere, characterised by weak institutions and governance structures. Social safety nets and protection instruments for children were virtually non-existent before the crisis, with the allocation to the Ministry of Social Affairs just 0.55 per cent of the national budget. Basic social services



At dawn on 30 January, a baby and many others begin to stir, having spent the night in the middle of a street in the impoverished Bel Air neighbourhood of Port-au-Prince, the capital. The fate of over 1 million homeless people continues to be uncertain, as they shelter in temporary settlements, or with family and friends.



such as health and primary education were limited (only about half of school aged children went to school and facilities were run almost entirely by non-state actors and the private sector), posing serious challenges for regulation of the sectors. In a country in which almost one in every 13 children died before the age of five, the national budget for 2010 for the Ministry of Health decreased by 50 per cent in comparison with 2009.

### **Impact on Government**

As the over-arching duty bearer for children, the government's overall capacity to enable children to progressively realise their basic rights has been further constrained by the earthquake. The majority of central government institutions was devastated by the quake, having lost staff as well as physical infrastructure, assets and equipment – thereby crippling emergency response and coordination and raising difficult questions about the credibility of country-wide governance. The Post Disaster Needs Assessment (PDNA) estimates that about 18,000 civil servants, 25 per cent of the total, died in the earthquake.

In addition to loss of life, all seats of all branches of government were flattened along with thirteen of the fifteen ministries and 180 government buildings. Over 4,300 education facilities and more than 50 hospitals and health centres have been rendered unusable. Damages and losses in the public sector comprised 30 per cent of the total.

### **Humanitarian consequences**

#### **A broad scope of challenges**

The first impressionable snapshots of the Haiti emergency captured the devastation wrecked by 35 seconds of horror (220,000 casualties, 300,000 injuries and, according to some sources up to 4,000 amputations) – but it is now the sprawling, makeshift settlements, nestled precariously amongst rubble and other hazards, that fill the cameraman's lens. Early humanitarian responses focused on search, rescue and surgeries – but the most pressing concerns now are for the survival, safety and overall wellbeing of homeless, displaced persons and the vulnerable communities that host them.

As of 1st March (the last available update), 604,215 persons have reported their arrival in “unaffected” *departements*, the majority (462,000 or 75 per cent) in Gonaïve, Jeremie, Hinche and Les Cayes. Among those, over 100,000 are in the border areas on the Haitian side, the poorest part of the country before the earthquake. Although this is a significant number, (and evidence of stretched coping mechanisms, infrastructure and basic social services is clear) – the actual number of persons moving beyond the borders of their *departements* is assumed to be much higher than this figure. A process of verification/update

led by government authorities is underway. Children make up approximately half of the general population – and, it can be assumed that they make up more than half of the displaced, therefore placing particular emphasis on the need for age-appropriate services such as immunisation, infant and young child feeding, education, and protection. There is also a need for disaster risk reduction considerations in these areas, as most are at high risk of floods.

The number of spontaneous settlement sites and persons living within them is under a process of review. A joint surge operation is underway between the Camp Coordination, Camp Management (CCCM), Shelter and Water, Sanitation and Hygiene (WASH) Clusters to consolidate information on population figures, location of sites and coverage of key interventions. Preliminary results indicate that there are considerably more sites than initially identified, and a much higher population in spontaneous settlements than has been tracked to date. Over the next weeks, an update to the Displacement Tracking Matrix (DTM) by CCCM will confirm the official figures. Complementing these efforts and expanding outside the metropolitan area, OCHA is tracking up to 1,600 separate sites, and will release an official update on population estimates shortly. The Post Disaster Needs Assessment (PDNA) estimated that the actual number of persons in spontaneous settlement sites was over 1.3 million - in the metropolitan area of Port-au-Prince only.

There are also those communities that are affected, but not displaced. This group includes children and those who care for them, whose homes remain intact- but who are living in shattered communities, where services, like education, and economic systems, including the transfer of remittances, have been disturbed or interrupted. This group includes host communities, who continue to bear the burden of new arrivals.

#### **Vulnerable groups (including disabled / disabled children and elder)**

The situation for vulnerable groups remains a concern. Accessibility to food, water and schools and so on needs constant reinforcement. Several good examples and best practices exist,, for example regarding disabled specific design for latrines. However, the lack of light and location of latrines in camps for example, remains a severe concern regarding women's and children's security. However, actions for improvement are ongoing. Vulnerable group's aspects are included in planning process for new camps.

## Psycho-social Impact on Children

### *Bricks and Mortar versus Hearts and Minds*

While damages to the physical world of buildings and bridges are somewhat measurable – assessing the impact on the less tangible world of human relationships, systems and social structures, which ensure the survival, protection and development of children, is more challenging.

Although a comprehensive study on the psycho-social impact of the crises on children and caregivers remains pending, Plan International, supported by UNICEF, assessed 925 children and youth in nine departments, to integrate their voices in the PDNA. This exercise noted that children all through the country continue to experience trauma, grief, sleeplessness and fear - even months after the quake - as the bodies of caregivers, brothers, sisters and friends still lie close by, below rubble. Anxiety is also an issue, as illustrated through anecdotal reports of the dark, lurking fear for the return of “Monseieur Gudoo-Gudoo”, (the frightening moniker given to the quake itself, reminiscent of the deep rumbling sound the earth makes as it shakes).

Expanding mechanisms for psycho-social support and a return to structure and stability (such as education), are an important part of the emergency response. At present, some 55,0000 children receive some kind of psycho-social support through recreational activities and 78 child friendly spaces in nine different departments. While this is positive, it only touches the surface of needs for nation-wide healing. A more in-depth assessment of protection needs will be taking place by IOM, in partnership with UNICEF and Protection cluster partners, within the next month. This assessment should fill a critical gap in knowledge and enable better targeted planning.

The most critical and appropriate intervention providing stability, structure and a range of opportunities for support and referral is the resumption and expansion of schooling. While a full-scale return to school is not possible at this time for a variety of reasons a phased approach to the resumption of learning opportunities, is being employed, in support of the Ministry of Education (see Education Section below).

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## FOCUS AREA REPORTS

### NUTRITION

#### **Situation**

Based on the admissions into selective feeding centres, the overall nutrition situation is stable with no reported significant increase in cases of severe acute malnutrition. However, the levels of acute malnutrition are elevated above those pre-crisis – and, child malnutrition (Middle Upper Arm Circumference <125mm) may be higher among displaced persons living in camps, as indicated by the Emergency Food Security Assessment (EFSA) completed by WFP and partners. The prevalence of global acute malnutrition (GAM) among 6-59 month old children was 4.5 per cent, out of which 0.8 per cent were severely malnourished. According to MUAC measurements taken from children under five, 6.0 per cent of children 6-59 months may be malnourished, with 1.3 per cent of them severely malnourished. This translates into a projected caseload of 108,000 children. The Cluster will begin data collection of a series of SMART methodology nutrition surveys on 19 April in Port-au-Prince and continue through all disaster-affected areas in May.

In the coming weeks, due to the arrival of rains, there is likely to be increased morbidity associated with diarrhoea, malaria and acute respiratory infections (ARIs) which could lead to malnutrition. Rains however, only compound a range of earthquake related threats. The quake disrupted the delivery of nutrition services in health facilities, schools and institutions, it increased food insecurity, destroyed and interrupted livelihoods, increased risks of infection and communicable diseases due to displacement, and made implementation of proper feeding practices more challenging for caregivers in general. These challenges have elevated the risk of acute malnutrition and micronutrient deficiencies in infants, pregnant and nursing women and other vulnerable groups.

These challenges are combined with deeper vulnerabilities that existed prior to the quake. Approximately 1.8 million people in Haiti were food insecure before the current crises. More than 60 per cent of 6-59 month old children suffered from anaemia. Vitamin A supplementation coverage was less than the target of 80 per cent in all but two *departements*. In addition, the prevalence of low birth weight was estimated at 25 per cent, a strong indication of poor maternal nutritional status and 46 per cent of women (15-49 years) suffered from anaemia. Whilst breast feeding was widely practiced, the rate of exclusive breast feeding was estimated at 46 per cent. In sum, children and women in Haiti face a variety of threats to nutritional status, not easily addressed in an emergency phase.

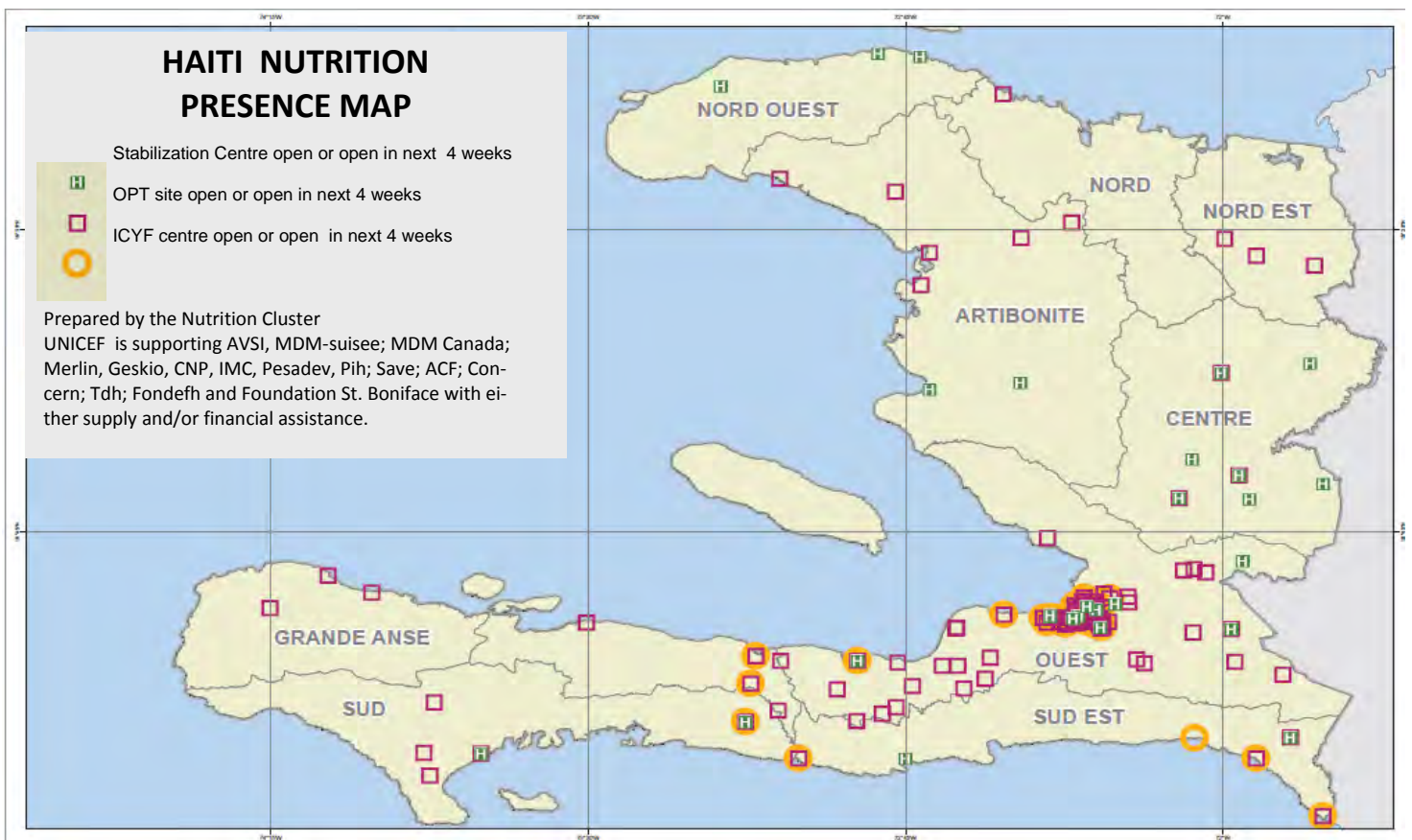
### UNICEF Nutrition

#### **UNICEF contribution and commitments**

UNICEF is providing technical assistance to the Ministry of Health for development of policies and programmes in CMAM, Infant and Young Child Feeding and micronutrient deficiency control – while also providing financial and supply assistance to a range of NGOs and the Ministry, procuring anthropomorphic equipment and therapeutic and supplemental foods. To recover the capacity of the Nutrition Department of the Ministry which was significantly decimated in the earthquake, UNICEF is supporting the provision of offices, vehicles, equipment and supplies and recruitment of additional staff.

#### **UNICEF achievements**

- Thus far, 19 of the total of 23 baby tents currently operating are supported by UNICEF and 8 new sites for CMAM, (targeting an estimated 20,000 infants under 1; 6,500 children with SAM; 50,000 pregnant and lactating women and 166,000 children under 5). However, UNICEF's partner NGOs will support delivery of the nutrition package to beneficiaries in a total of 95 planned baby tents/IYCF counselling sites, 80 sites for community management of severe acute malnutrition (CMAM) and two stabilization centres for complicated cases of SAM. UNICEF's supports partners with direct financial and supply assistance, as well as overall technical and coordination support.
- UNICEF financial support for implementation of the minimum nutrition package amounts to some \$7 million in signed project cooperation agreements (PCAs) with eight NGOs, and commitments to the Ministry of Health (MSPP). Four national NGOs – Fondafh, Pesadev, Zanmi Lasante and Gheskio - and four international NGOs - ACF, Concern, Save the Children and AVSI - are already partnering with UNICEF for implementation of the nutrition package.
- A further six NGOs are developing project proposals or have expressed interest in doing so, including for support outside of Port-Au-Prince. UNICEF Nutrition Section is expected to receive four additional proposals for review, from Fondation St Boniface for Fonds des Blancs, Haiti Participative, CFM and Save the Children.
- Coverage of the major camps in Port-Au-Prince with nutrition services is close to being assured under these agreements and through the wider Cluster response. As part of efforts to decentralise the humanitarian response, UNICEF is expanding partnerships in Artibonite and Nord-Ouest (with ACF) and in Petit & Grand Goave (MDM-CH), in Nippes (with CFM) and in Leogane and Jacmel (with Save the Children).



### UNICEF challenges

- A lack of tents to scale up the PCNBs has been noted.
- There is an urgent need to reinforce gap analysis of coverage for CMAM, SFP and IYCF programmes.
- Malnutrition is the outcome of a range of threats. Without rapid and at-scale responses across the food, health, WASH and nutrition sectors, inadequate nutrient intake in combination with the likelihood of disease outbreaks will increase the incidence of acute malnutrition and consequently the number of child deaths.
- The issue of breast milk substitutes constitutes a challenge. Mapping of donations of breastmilk substitutes, such as infant formula, milk products, bottles and teats is ongoing. Advocacy efforts are needed in both Haiti and Santo Domingo to stop the distribution of powdered milk or find new areas of use for the milk.

### UNICEF priorities

- UNICEF's key nutrition priorities in the next 12 months will be to deliver a minimum package of effective high impact nutrition interventions to vulnerable women and children under five. One significant success resides in the elaboration of a minimum package which has been agreed by the Ministry of Health and Cluster partners. The focus of the Nutrition Section is on consolidating implementation of a minimum nutrition package at scale, maximising opportu-

- nities for integration and partnerships and building capacities of the MSPP and *departements* in order to develop a sustainable national public health nutrition system.
- The immediate response, the increased interest and resources available for nutrition and the guidance being developed are seen by the MSPP as opportunities to build a sustainable public health nutrition system, which does not exist at present in Haiti. The establishment of a network of paid community nutrition workers is one of the core elements of the proposed system and it has been clearly articulated in the PDNA.

## Nutrition Cluster

### Cluster coordination

UNICEF continues to co-chair the Nutrition Cluster with the Ministry of Health (Ministère de la Santé Publique et de la Population—MSPP), who chairs coordination meetings. There are now 66 registered Cluster members and 25 active Cluster members that regularly attend meetings. MSPP is an active player in technical working groups and participates in monitoring visits.

The Cluster worked through its partners to finalize a plan for departmental level sub-cluster coordination with ACF, IMC, MDM-CH, Save the Children and Terres des Hommes all actively participating, in close collaboration with Ministère de la Santé

Publique et de la Population (MSPP) departmental nutrition focal points. The Cluster Coordinator based in the Dominican Republic has also visited Port au Prince to harmonize the programmes and coordinate planning. A Cluster Coordinator will be based in Jimani in the Dominican Republic for six weeks to complete an assessment and kick-start actions in the area.

The Cluster has two Information Management staff who have adapted 3Ws to meet the needs of the Cluster partners for operational planning. The Information Management Officer also participates in cross-sectoral meetings to follow up on the new site development and to better integrate responses.

## Cluster achievements

### Blanket Supplementary Feeding

In order to prevent the deterioration of nutritional status, the blanket feeding programme that was initiated by WFP, UNICEF, WHO and community groups was scaled up in late February through collaboration with: Pesadev, Fondefh, ACF, Save the Children, Concern and AVSI. Children 6-35 months were provided with a ready to use food (Supplementary Plumpy) that has 500 kcals per sachet, and micronutrients to supplement what children are receiving at home. Children 36-59 months and pregnant and lactating women received high energy biscuits during the first round of blanket feeding. Over 100,000 children under five and pregnant and lactating women in earthquake affected areas have benefited from blanket feeding which will continue over the next three months.

### Treatment of acute malnutrition

- Access to emergency nutrition services and optimal infant and young child nutrition services has improved in Port au Prince, Leogane (Petit Goave, Grande Goave) and Jacmel in the past three months. There are presently 136 outpatient therapeutic feeding centres for the management of acute malnutrition and 26 nutrition stabilization centres (to treat children with complications) in operation.
- Reports from partners indicate that at least 89 severely malnourished children under-five with medical complications were admitted into inpatient treatment; 1,055 children severely malnourished children under-five without medical complications were admitted to outpatient therapeutic care centres and 1,731 moderately malnourished children under-five were enrolled in targeted supplementary feeding programmes to date, based on 17 NGO reports out of 45 Cluster partners.
- Training related to infant and young child feeding and community management of acute malnutrition (CMAM) was supported by UNICEF and provided to 411 participants and

6,653 caretakers have received counseling on optimal infant and young child feeding. A training of trainers for Community-based Management of Acute Malnutrition (CMAM) for workers in all ten *departements* was also completed in March, supported by UNICEF and Cluster partners. The trainings will continue at a decentralized level in the coming weeks in order to continue the scale up and integration of selective feeding services.

### Infant and young child feeding

- *Points de Conseil de Nutrition Pour les Bebes* (PCNBs) provide mothers with a safe and private place to receive optimal infant and young child feeding counselling and to receive ready-to-use infant formula (RUIF) if the infant meets specific criteria. Three agencies (Save, ACF and Concern) reported from 20 sites that 1,744 mother/baby pairs attended PCNBs (362 pregnant women, 1,382 children).
- Two training sessions on the start-up and operation of PCNBs were also conducted for 70 Cluster members. In February, Ready-to-use Infant Formula (RUIF) was released for 388 infants.

### Cluster priorities

- The priorities remain the scaling up of provision of treatment services for acute malnutrition and supporting optimal infant and young child feeding in advance of the rains.
- While rains have already begun intermittently, the Cluster is preparing for the April/May heavy rains through mitigation strategies related to hygiene promotion and increased screening and detection of malnutrition. The Cluster has identified several NGOs, (Concern, Fondefh, IMC and Save the Children) willing to start nutrition activities in new sites as the situation continues to evolve.
- The Cluster has also prioritized the need for access to routine surveillance information. Nutrition surveys are planned for late April and a feeding centre database with quantitative data from Cluster partners has been designed for both CMAM and IYCF activities. The Cluster is working with health and food security partners to establish community sentinel sites in order to monitor monthly shifts in mean weight for height z-score and morbidity.

## PRIMARY HEALTH CARE

### *Situation*

The immediate health concerns of children following the earthquake were injuries. Three months later, women and children are at a much higher increased risk of various health threats, particularly communicable diseases. The stress of displacement combined with lack of proper shelter, safe water and adequate nutrition, and close proximity of persons in overcrowded shelters have increased children's susceptibility to acute respiratory infections and deadly childhood diseases such as measles and diarrhoea. Fortunately, there are no reports of increased childhood diseases as yet.

The devastation also had an impact on health institutions and staff. Given the extensive loss of infrastructure, of human lives, and of the system of payments and support for health workers, children and mothers have had extremely limited access to services for common illnesses, post-trauma care, emergency obstetric care, and preventive services such as the Expanded Programme on Immunization (EPI).

In 2007 and 2008, Haiti conducted a national vaccination campaign with measles and rubella vaccine targeting all children and young adults aged 1 – 19 years, regardless of previous vaccination status. Nationally, coverage was estimated at 80 per cent, but only roughly 70 per cent in Cite Soleil. This same survey estimated routine coverage for children 12 – 23 months of age with a measles vaccine at roughly 42 per cent, among children with vaccination cards. Routine coverage in the impacted areas ranged between 37 per cent and 71 per cent. There was an urgent need therefore, in the post-quake context, to protect children from vaccine-preventable disease.

Over 2.2 per cent of the adult population (pre-crisis) was estimated to be living with HIV and, according to pre-quake statistics, only one in five HIV-positive pregnant women has access to ARV therapy to prevent mother-to-child transmission. Approximately 5,000 babies are born every year with HIV.

## UNICEF Health

### *UNICEF contribution and commitments*

WHO is the IASC Cluster-lead agency for Health UNICEF is an active member of the Cluster and co-leads a working group on immunization. The Ministry of Health has stressed the importance of re-establishing the committee on HIV/AIDS, for which

UNICEF will play a key role in the Prevention of Mother to Child Transmission (PMTCT). UNICEF is also supporting the development of the health cluster work plan and participates actively in the maternal health working group.

UNICEF is supporting Regional Health Directorates with essential drugs and health equipments in Jacmel, Hinche, Gonaives and Jeremie -and is negotiating agreements with six partners including Hopital Saint Boniface, Hopital Albert Schweitzer, Koze La Sante, RHASADE Haiti, FIGO/SOGC project, and Quisqueya University. The UNICEF Annual Plan outlines a series of key outcome areas, with achievements grouped by these commitments:

UNICEF is providing support to ensure immediate access to basic health care for women and children, including support to emergency immunization activities. UNICEF is also working on the re-establishment of the sustainable decentralized public health system for maternal, neonatal and child health services (including HIV services) at community and health facility level:

### *UNICEF achievements*

- The immunization campaign, developed by the Ministry of Health jointly with WHO and UNICEF, is ongoing and targeting infants between 6 weeks and 7 months for diphtheria, tetanus, pertussis (DPT) vaccines, and children aged 9 months to 7 years for DPT /measles and rubella vaccines, and children more than 8 years old with adults for diphtheria and tetanus vaccines. Vaccination is associated with vitamin A and de-worming tablet distribution for children below the age of 7 years. The campaign started on 2 February and will reach 500,000 children under seven.
- UNICEF provided the needed vaccines, injection devices and cold chain materials for the emergency campaign targeting 250,000 children aged 9 months to 7 years. To date, over 104,000 children aged 9 months to 7 years were vaccinated in Port-au-Prince, with measles/rubella vaccine and received vitamin A supplement. Vaccination activities are almost completed in Port-au-Prince, and are ongoing in Leogane and Petit Goave; activities started early April in Gressier, Jacmel and Grand Goave.
- 53 new refrigerators were provided to health centres (Port-au-Prince, Gressier, Leogane, Jacmel, Gonaives and Hinche) and 3 NGOs (MSF, Red Cross and IFRC) to replace those damaged during the earthquake and ensure quality emergency and routine vaccination activities.
- 35 midwifery kits have been delivered to partners to perform 1,750 normal deliveries and four obstetric surgical kits to perform an average of 400 complicated deliveries;

- Some 400,000 long lasting insecticide treated nets have been ordered for distribution to 200,000 households or sleeping spaces including pregnant women and children under five years. The distribution strategy will include: information and education about using a net, supplying hanging materials (rope, safety pins, etc) with each net distributed, unpacking nets, direct hanging of nets and/or follow up visits to be organized for all net distributions. Dates for distribution are not yet set.
- Financial support is being provided and material and equipment needs identified at central and regional levels.
- 134 Emergency Health Kits and basic health units have been provided to primary health clinics through NGOs in affected areas to provide the minimum package of health services, including integrated management of childhood illnesses (IMCI), reproductive health, and safe delivery services, to some 134,000 people for three months through mobile and fixed health facilities .
- The cold chain system, vaccines storage and propane gas procurement and distribution have been assessed and a plan proposed for the rehabilitation of the cold chain system. UNICEF will support the procurement of propane gas over 12 months for 693 existing refrigerators for vaccination centres across Haiti. The contracting process of a local firm for gas provision and distribution has been finalized.
- UNICEF participated actively in a UN agencies joint mission (with UNAIDS, WFP, UNDP) assessing the post earthquake UN response to the HIV/AIDS situation in Haiti and evaluating the needs of the Ministry of Health, providers and UN agencies to increase services to People Living with HIV and AIDS. One Programme Cooperation Agreements has been submitted by FOSREF (Fondation pour la Sante Reproductive et l'Education Familiale) for youth spaces in IDP camps to kick-start this process.
- UNICEF has participated in strategic discussions through the health cluster and its working groups in community health, mobile clinics, reproductive health, disability, and waste management.

### **UNICEF priorities**

- The re-establishment of PMTCT services, including infant feeding support, along with partners, in at least 10 level-2 health facilities has not yet started. Discussions with partners are ongoing to define strategies to restore treatment to HIV positive children and pregnant women who were under treatment prior to the earthquake.
- Support is needed for the re-establishment of routine health services, including HIV/AIDS. There is a crucial need to reinforce the institutional capacity of the Ministry of Health at central and decentralized levels.

## **BASIC EDUCATION**

### **Situation**

Education is the key to the overall recovery, transformation and development of Haiti, though the challenges within the sector, in terms of access and quality, were already significant even before the earthquake struck. A government report for 2008 (EMMUS - Enquête de morbidité, mortalité et utilisation des services) recorded that 55 per cent of school-age children were out of school in Haiti, whereas the Poverty Reduction Strategy Paper (PRSP) and the National Education for All Strategy (2008) show 76 per cent net enrolment rate for primary schools. In addition, public primary schools accounted for only 8 per cent of all education facilities, and hosted approximately 20 per cent of the total number of students in the system. The non-public sector also presented significant challenges in terms of quality, with a virtual lack of regulation or control resulting in the majority of these schools operating below minimum standards. The vast majority of schools, both public and private, had poor infrastructure and school environments, as well as insufficient levels of basic furniture and learning materials. Combined with low levels of capacity and qualifications of teachers, the quality of education was already a major challenge before the earthquake.

Since schools across the country closed after the earthquake, up to 2.9 million children either experienced an interruption to their studies or continued to lack access to basic education. The earthquake destroyed an estimated 4,228 schools as well as the Ministry of Education building itself, and led to the deaths of around 38,000 students, 1,347 teachers and 180 education personnel (Initial Situation Assessment, conducted by the Ministry of Education with logistical support of the Education Cluster). The Education Rapid Joint Needs Assessment, conducted by the Education Cluster between 22-25 February, surveyed 240 sites in Port-au-Prince, Leogane and Jacmel and revealed that 28 per cent of schools had been destroyed and a further 57 per cent damaged—a total of 85 per cent of schools destroyed or damaged.

In the same survey, 88 per cent of students and 86 per cent of parents cited cost as the single biggest barrier to school attendance. There is a high demand for education though school fees and indirect costs associated with attending school (uniforms, books) need to be reduced or eliminated to ensure that households can afford to send their children to school. Overall, there is much work to be done to restore confidence in the education system – from the safety and security of school buildings and learning spaces, to the creation of a fully inclusive, regulated, free and effective education system. The Ministry of Education authorised schools to re-open in the



indirectly affected *departements* on 1 February. According to the Ministry, approximately 1,000 schools in South-East *Departement* resumed classes at the beginning of March while the focus in the immediate term will be on non-formal learning and provision of psycho-social support for school-aged children. The reopening of schools in the West *Departement* began from the 5th of April. One week after the official opening, visits by UNICEF have revealed a large number of children returning to schools.

Given the extent of damage to schools—with 85 per cent destroyed or damaged - one of the greatest challenges to schools opening in affected areas is the clearance of rubble (see special feature on schools in Leogane). Identification of sites for debris clearance as well as the clearance itself is in process throughout affected *departements* – but the process is slow and fraught with challenges. Delay in the identification of sites for debris clearance and authorisation for the clearance itself jeopardises the installation of temporary learning spaces and transitional structures for learning.

## UNICEF Education

### **UNICEF contribution and commitments**

- UNICEF is working with the Ministry of Education and other partners to implement a nationwide movement for learning which will promote enrolment of all children and adolescents (pre-school, primary and secondary). This implies both phased and parallel approaches with several activities already implemented for the re-opening of schools at the beginning of April.
- UNICEF's support to partners has focused on technical, coordination and supply assistance to date. Partnership-Cooperation Agreements are being negotiated with AVSI, CRS, The Red Cross, Concern Worldwide, IEDA, ADRA, Tear Fund, People in Need, and Operation Blessing, to support the resumption of education for displaced children and those living in spontaneous settlements.
- The supply of tents is the first stage of the strategy to restore learning. UNICEF also has a commitment to support with semi-permanent and later on permanent construction using the principles of building back better and child friendly schools in partnership with the government.
- To achieve free and equitable access to quality primary education for all children, including the elimination of direct and indirect costs, UNICEF is supporting the World Bank, to develop a strategy for teacher compensation. A workshop on the issue will be organised with the Ministry of Education in April, with technical inputs to be provided by UNICEF. The provision of teaching and learning materials to the children will reduce the cost burden on families and encourage enrolment and retention of students.

### **UNICEF achievements**

- UNICEF is continuing to facilitate the re-opening of 120 priority schools which started on 5th April. These schools are receiving a full supply package (tents, teaching/ learning materials, recreation kits and blackboards).
- For 28 of the 120 priority schools identified by the Ministry, UNICEF is supplying water and sanitation facilities. UNICEF has been preparing the ground through removal of debris and levelling the surface before erecting the tents, installing the water and sanitation facilities and raising the boundary walls. These 120 schools will accommodate 70,000 children through a system of double shifts.
- UNICEF has begun the distribution of 200,000 children and teacher kits containing essential school supplies and T-shirts to 600 schools to support children's enrolment and attendance. A further 520,000 student kits have been ordered. Agreement has also been reached with the Ministry of Education for the supply of 25,000 school benches and 1,000 teachers' chairs and tables, which will be procured and distributed before September.
- To support the resumption of learning in all phases and areas, UNICEF has already distributed 870 school in a box, 1,495 ECD kits and 2,226 recreation kits as well as 1,400 school tents for temporary classrooms, ECD classes and to support the education, protection and development of 170,000 children.
- In the first weeks of school, the teaching and learning process will focus on non-formal learning, life skills (including disaster preparedness in relation to the hurricane season) and the provision of psycho-social support. In Mid April, UNICEF will hold a workshop with the Ministry of Education and other partners to plan the scaling up of school reopening to cater for all the school-aged children in Haiti.
- Approximately 4,000 schools have been surveyed and mapped by a UNICEF team of 54 enumerators. The total number of schools to be mapped is approximately 5,000, of which 3,800 are in the West *Departement*. The enumerators have collected the GPS coordinates and measured available space on which temporary classrooms and water and sanitation facilities can be placed. The World Bank has trained 100 engineers who are now using these GPS coordinated to conduct damage assessments of the schools, which will determine requirements for demolition and clearance of debris.
- UNICEF continues to participate in inter-sectoral assessments of IDP camps within Port-au-Prince and to date a total of 24 sites with the largest populations have been

# HEAVY LIFTING

## Rubble clearance in primary schools slow but steady



College Chretien in Leogane, now only a pile of rubble.



MINUSTAH forces begin rubble clearance at a local primary school.

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The 12 January earthquake was particularly devastating in Leogane District, the closest urban area to the epicentre. Only nine out of 182 primary schools remain standing and over 1970 students and 66 teachers lost their lives. Schools were obviously closed following the quake, interrupting schooling for over 50,000 school aged children.

The single greatest obstacle to schools reopening now, in April, is rubble. Its everywhere. It blocks roads, spills into parks and dangerously tumbles down hillsides. In Haiti as a whole there are estimated to be over 40 million tonnes of rubble. This amount of debris would fill 4 million trucks. This is simply too much to handle. What is needed, for Leogane, and for other areas affected by the quake, is heavy lifting.

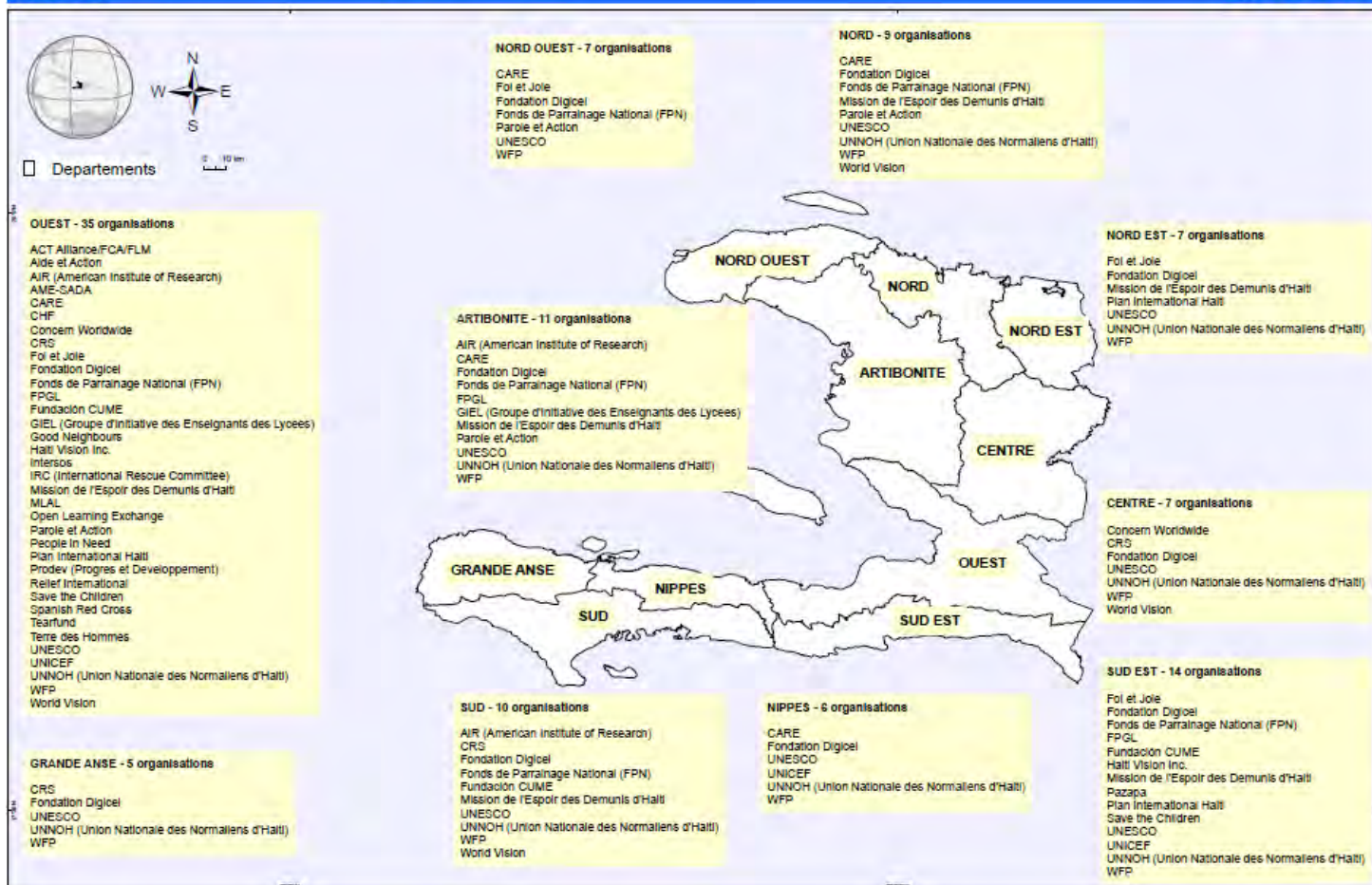
To lend a hand in Leogane, UNICEF and Education Cluster partners are coordinating with MINUSTAH forces, such as the Canadian and Korean forces, to ensure that primary schools are prioritized in clearance efforts. The process is slow, but there are many reasons for this.

The process begins with assessment. Schools must be mapped and visited and the potential for the heavy machinery to access the site must be confirmed. In some cases, access roads are blocked or too small to permit the entry of the heavy machinery. In other cases, the process cannot be approved, since the vibrations of the debris removal may actually bring down the fragile walls of surrounding compounds. If clearance is possible, meetings with local authorities and school directors must be held to secure authorisation— and, since the process can disturb daily life surrounding the site, a clear timeline must be established for the works.

In many unfortunate cases, there is also a need to arrange a form of psycho-social support for families – as the bodies of children continue to lie below the rubble. When remains are found in the debris, work must stop, and local authorities arrive to manage the recovery process. In Haitian culture, similar to many others, the return of the body to a grieving family is a sign that the spirit still lives and can now rest. Since too much time has past for identification of individual children, partners such as Medecins Sans Frontiers (MSF) are working with community leaders to facilitate a process of healing and support.

When the rubble is collected – disposal then becomes an issue. In Leogane, authorities are coming up with creative strategies to dispose of the debris. Some is being used to reinforce canal walls, in preparation for the upcoming rainy season. A large portion is also going towards elevating the foundations of new schools, to ensure that they rise above seasonal floodwaters. The majority however, finds its way to a dump site, which is rapidly becoming full. This is a huge issue all over the country... as rubble does not fit neatly in packages. The government is investigating the potential to re-process debris to recover useful parts (iron and cement can be transformed into aggregate) and recycling them for other uses.

Once the rubble is cleared, the land must also be made free of hazards and debris- and leveled to enable either temporary structures and/or reconstruction to occur. However, reconstruction may not be approved in the form that existed prior to the quake as the Government would like to avoid any reconstruction that thwarts efforts to introduce sound urban planning. Given the staggered state of readiness in this process, there will be a phased approach to the renewal of education in Leogane, and in most areas affected by the quake.



assessed by the education team. The assessments include identification of suitable spaces for creation of temporary learning spaces, availability of teachers and the identification of the number of school-aged children. To date UNICEF has supported 11 of these sites through the supply of teaching and learning materials. Schooling has resumed in eight of the supported sites (Place de la Paix, Dahome, Cour du Vergloire, Carrefour Centre Sportif, Fierté Cité Soleil, Tapis Vert, Terrain ACRA, Dadadou) with 6,718 children enrolled, supported by partner organisations.

- On 17 March, a working session was held with 12 key education specialists within the Ministry of Education during which a Teacher's Guide was validated by the Ministry of Education and adapted to the Haitian context.
- In late March, one working session was held in Jacmel and two in Port au Prince, bringing together approximately 20 inspectors and other education officials as well as 100 teachers and 23 representatives from 10 NOGs to introduce them to the UNICEF education kits and to orient them on how the kits should be used in the classroom.
- A core team of between 20 and 30 trainers will be identified in close collaboration with the government and be trained in

April on basic teaching theory for literacy, numeracy and life skills using the didactic materials and the use of teaching and learning materials. The core group of trained trainers will be sent to train principal inspectors, zone inspectors, school directors, head teachers and partners in the affected *departements* receiving the education kits.

### UNICEF challenges

- Retaining sufficient numbers of teachers within the system will remain a challenge, in particular those who were engaged within the private sector.
- To reduce the costs for families of children returning to schools, the issue of teacher compensation will have to be addressed, to ensure that the full costs of employing teachers does not fall on the shoulders of hard-pressed families.

### UNICEF priorities

- Upon the request of the Ministry of Education, UNICEF will support children to return or move into learning before the end of the current school year and support teachers and

## REPORTS FROM MOST AFFECTED DEPARTEMENTS

### West Departement

- **Number of affected schools:** According to the Education Department, there are a total of 316 schools, out of which 210 are destroyed, 92 damaged and 14 intact. In Petit Goave (and Grand Goave) there are a total of 244 schools, out of which 82 destroyed, 115 damaged and 47 intact. However, additional schools have been identified by the Main Inspector and partners, which are not included on the Education Department list.
- **Assessment:** The results of the Ministry-led school damage assessment in Leogane have been circulated and a team of structural engineers from Hands-On Disaster Response have conducted evaluations of intact schools in Leogane and Gressier (results yet to be released). Korean military forces (MINUSTAH) have received authorisation to remove rubble from 136 primary (public and non-public) school sites. Save the Children has assessed 100 schools in Leogane and is in the process of identifying 20-30 sites for teaching and learning activities.
- **Opening of schools:** Schools are gradually opening in Leogane, although rubble clearance is ongoing in some schools.

### South-East Departement

- **Number of affected schools:** According to the Education Department in South-East, there are between 1,000 to 1,300 schools in the area and a student population of 130,000. Figures provided by the Ministry of Education report that 27 schools have been destroyed (12 out of which in Jacmel town), 49 severely damaged, 118 damaged but can be repaired. The figures are likely an underestimation given the poor state of data before the earthquake. 405 tents are needed to set up temporary learning spaces. No figures are available yet regarding enrolment rates.
- **Opening of schools:** The Ministry of Education declared schools open in the South-East as of 08 March 2010 (with the exception of Jacmel town). According to informal reports 90 per cent (around 1,000 schools) of the schools in the *departement* are officially open to date. This figure is likely to be overestimated as only 14 schools have received tents, debris clearance has not begun and inspection directives remain unclear. Many parents fear to send their children to school for safety reasons.
- **School feeding:** WFP is ready to start school feeding for 65,000 children within the next three weeks in the South-East *Departement* and will soon increase that number to 85,000 children, covering around 70 per cent of the (public and non-public) schools in the area. Prior to the earthquake WFP served 180 schools equalling to 57,000 students. The distribution starts on the 05 April.

caregivers with psycho-social and material assistance.

- UNICEF has given priority to supporting the Ministry of Education to become operational following the destruction of most of its infrastructure and has procured seven prefabricated offices (each capable of housing ten people) and accompanying WASH facilities for use by the Ministry. The site has been cleared and at the time of going to print the offices were being established.
- UNICEF is also supporting the Ministry of Education in establishing working procedures for school reconstruction. A school construction sub-group formed under the Education Cluster has been reactivated under the leadership of the government, and its work is ongoing. Several structural assessments of the damaged schools are on-going and UNICEF is supporting the Ministry to apply earthquake-resistant norms to existing school construction standards and providing guidance on key standards and norms of child friendly schools.
- Another priority is to assist with the long-term expansion of the education system, including through strategies that address capacity development of teachers and education personnel.
- Teacher capacity to support the psycho-social and learning needs of children in a non-formal and child friendly environment needs to be strengthened. Basic teaching guidelines and related teaching supports, such as teacher guides are being developed in partnership with the Ministry of Education, to accompany the education kits in order to ensure their quality implementation. A planned teacher training system will follow a 'cascade approach,' in order to respond to the needs of approximately 15,000 Haitian primary school teachers.

## Education Cluster

### Cluster coordination

The Education Cluster is co-led by UNICEF and Save the Children with an increasing role played by the Ministry of Education and a growing number of Education Cluster members. To date the Education Cluster coordinates 175 members from more than 100 organisations who have asked to be included on the regular mailing list, and the National level Cluster counts a steady number of around 40-50 members at weekly coordination meetings in Port-au-Prince. About half of these members provide regular programmatic updates to the Cluster Coordinators.

Cluster coordination has been also established in Leogane and Jacmel as well as in Petit Goave, with meetings on a weekly basis. Full-time Sub-Cluster Coordinators are stationed in Leogane (which also covers Petit Goave) and Jacmel. Specific working groups have been created to provide detailed recommendations on the development of teacher training, psycho-social support,

curriculum, Early Childhood Development and infrastructure/reconstruction.

The Information Management (IM) capacity of the cluster has been reinforced through a dedicated Education Cluster Information Manager and an Education IM focal point within OCHA. Additional personnel will further reinforce this capacity over the coming weeks. A “4W” tool (what, where, when, who) exists and needs updating with improved reporting from Cluster members, to enable mapping of interventions and gaps to be addressed.

### **Cluster achievements**

- Overall, the Education Cluster is playing a key role in ensuring that Minimal Standards for Education in Emergencies are respected, including monitoring and evaluation activities.
- The Education Cluster is also actively involved in the planned relocation of IDPs currently living in flood-prone and/or congested sites by contributing to physical site planning with the local community in new sites, with regards to educational opportunities and facilities. Furthermore, the Education Cluster engages in the inter-cluster discussions on the development of a package of goods and services for families and communities who are willing to host IDPs.
- 2,410 educational authorities in Duverge, Pedernales, Loma de Gabrera and Dajabon were trained, together with the Dominican Ministry of Education, Save the Children and USAID, NNF, IDDI and ADMD in psycho-social recovery, and disaster risk reduction and emergency preparedness.

### **Cluster Challenges**

- Rubble clearance remains a challenge (see feature on Leogane).
- As schools open, it will be difficult to monitor enrolment rates due to the lack of an effective monitoring and reporting mechanism for the sector. This is complicated by the fact that around 20 per cent of primary schools pre-crisis were public ; private facilities did not consistently engage with the formal sector.

### **Cluster priorities**

In line with the overall Ministry of Education strategy, the Education Cluster is focusing on three key areas in the short-, mid- and long-term planning are made:

1) **Access:** Expanding educational learning opportunities to all children.

- In an initial phase, the Education Cluster is targeting close to 1.3 million children (aged 3-18 years) that were already in school already prior to the earthquake – however, this target will gradually be expanded to include the 55 per cent of children out of school (an additional 1.6 million).

- A phased approach for school re-opening has been agreed with the Ministry of Education to ensure a progressive return to school for all children: April to June, 600 priority schools will receive teaching and learning material from UNICEF for approximately 200,000 children; the second phase from June to September will see the scaling up of re-opening of schools; in the third phase in September all children will be supported to access education.
- In terms of learning spaces, three phases are foreseen (1) Distribution of temporary learning spaces in the form of tents at the beginning of April 2010, before the rains start; (2) Provision of hurricane resistant and seismic proof, transitional learning spaces, which would last for up to 2-3 years; (3) Permanent reconstruction over a longer-term period.

2) **Quality:** Equitable, free and effective access to quality education (quality learning outcomes). The Education Cluster in support of the Ministry of Education is aiming at quality education through:

- Identification of additional teaching personnel, accelerated and more in depth teacher training (psychosocial support, methodology, pedagogy, emergency preparedness and response, Disaster Risk Reduction (DRR), Early Childhood Development (ECD) etc.;
- Psychosocial support to teachers, children and parents;
- Catch-up classes for children in order for them not to lose out the school year;
- Provision of teaching and learning materials for children and teachers (School-in-a-box kits, recreation kits, ECD, kits, teacher kits, and student kits).

3) **Transformation:** Building of a national education system (enhancing the regulatory capacity of the Ministry of Education to manage standards in both public and non-public schools).

- This includes the reinforcement of the Ministry’s capacity in terms of human, financial and material resources. The Education Cluster will support both public and non-public schools.

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## YOU DONT KNOW WHAT YOU HAD, UNTIL ITS GONE

### Learning opportunities in Haiti

PORT-AU-PRINCE, Haiti – Like most young girls their age, Talitha, Rose-Laure, Bedelyne, Lovelie and Pranches take great care with their handwriting, they can sing any number of French or Haitian pop hits, and they always hang out together. Put otherwise, these five girls have formed a social clique, as girls the world over have the tendency to do.

A UNICEF delegation last month visited the girls and the almost 50 other children who live with them at a residential care centre in the capital's Bon Repos neighbourhood. Normally around the time, late in the morning, the children would have all been in school. Instead, the team found the children loitering in a half-asphalt, half-dirt parking lot, steps from the tents they sleep in. Less than twenty metres away, what once was their school lay as a pile of rubble.

Bedelyne Cador, 12, has spent most of her life in this centre, ever since her mother dropped her off at age 4 and never returned. Bedelyne said, "I think UNICEF has come here to help this shelter and to help the children because Haiti is in danger. All the houses have fallen down, and we don't have a school anymore."

With their sweat gluing their T-shirts to their skin, the children joined hands and played games like Duck, Duck, Goose! and Simon Sez. Afterwards, the children taught a popular Haitian game to the delegation, before expressing their thanks for the food, water and other supplies that UNICEF had been providing them.

Soon after, a shipment arrived at the centre. In support of the Haitian government's push to have all children learning and back in school, UNICEF distributed a school tent, school-in-a-box and recreational kits to the children. Bedelyne is back studying again. "If I stay in Haiti" she says, "I'll be happy because I am going to be a doctor".

## EARLY CHILDHOOD DEVELOPMENT (ECD)

### Situation

Prior to the 12 January earthquake, preschool enrolment of children under-5 years stood at 20 per cent - equivalent to a total of 590,000 young children out of some 2.95 million. Only 5.5 per cent of preschools were in the public sector, which served 4.7 per cent of preschool-aged children. The imbalance between the public and private sector induced educational inequalities at all levels. For example, the ratio of monitors per child could vary from 1:40 and 1:20 between the public and private, respectively. Usually, preschools lacked health and school cafeteria or canteen services. Most of the 20,000 preschool teachers were not trained for modern preschool teaching. Parenting programmes are almost inexistent: no regular parenting programme with support to young children existed in Haiti. Since the earthquake, the need for early childhood development and care has increased, especially in relation to the range of vulnerabilities facing young children and caregivers in displaced communities.

### UNICEF contribution and commitments

ECD integrates sectors, reflecting the integrated needs of the child. Shortly after the earthquake, UNICEF established an Early Childhood Development (ECD) Task Force in Port-au-Prince, with the participation of Ministry officials, civil society, international NGOs and UN agencies. The Task Force has been promoting a harmonized response addressing the holistic needs of young children both in the immediate survival and in the longer-term. It is comprised of a core working group divided into three sub-working groups including Education, Child Protection, and Health & Nutrition.

Providing evidence of the success in advocating for an elevated profile for ECD in the reconstruction agenda, the taskforce is now becoming an inter-ministerial commission, under the lead of the Ministry of Education (BUGEP -Bureau de Gestion de l'Education Prescolaire, a part of the Ministry of Education). The official launch of the commission will be held on the three month memorial of the earthquake.

### UNICEF achievements

- UNICEF has provided support to rural and mountainous areas around Jacmel and Leogane to offer quality models of early childhood development activities to young children through community-based ECD centres.
- To date, 1,546 ECD Kits have been distributed through different partners to cover the holistic needs of about 120,000 young children, including through baby nutrition tents, or-

phanages, child friendly spaces, preschools and paediatric clinics. In addition to ECD Kits, UNICEF has also distributed several tents as a substitute to preschool settings, and is currently working on a list of preschools, which are to be supported in the Ouest and Sud Est *Departements*, starting with those attached to primary schools.

- A two-week training programme for 25 Master Trainers on ECD and Psychosocial Support has recently started with UNICEF's partners to ensure quality and scaling up of ECD interventions across the country. At a later stage, UNICEF anticipates that all partners and caregivers using the ECD Kit will benefit from this training. UNICEF partners are also conducting a series of trainings for caregivers and UNICEF is facilitating sessions on the use of ECD kits and is developing a parenting programme aimed at improving family care practices.

## WATER, SANITATION AND HYGIENE (WASH)

### *Situation*

Many affected families in overcrowded camps do not yet have access to a sufficient number of water and sanitation facilities, posing serious health risks to children. The safe disposal of human excreta in camps remains a serious concern. While hand washing with soap is one of the most cost-effective measures in reducing the incidence of diarrhoea, hand washing stations and personal hygiene education is not sufficiently provided in Haiti and remains a significant cultural hurdle. Reportedly, rates of hand washing with soap at critical times are very low among the affected population.

The vulnerability of the host communities, often impoverished, has greatly increased as a result of the earthquake.

With the rains expected to start between April and May, environmental and living conditions can deteriorate quickly in camp sites resulting in increased threats to the health of children.

Prior to the earthquake, WASH services in Haiti were severely limited: total sanitation coverage was 17 per cent, with only 24 percent of urban dwellers and 10 percent of rural dwellers using improved sanitation facilities. Half of the rural population or 2.6 million people were practicing open defecation. The use of flying toilets (plastic bags) and open defecation was common. Little municipal capacity to manage solid waste existed. WASH facilities in both government and private schools were inadequate in quantity and quality. The total water coverage was 63 per cent. Water supply coverage was estimated at 71 per cent in urban

areas and 55 per cent in rural areas used improved water facilities. The vast majority of the population relied on bottled water, private vendors at kiosks or trucked supplies.

## UNICEF WASH

### *UNICEF contribution and commitments*

UNICEF has supported DINEPA to assess WASH needs in the main towns where the majority of people displaced by the earthquake arrived – Gonaive, Port-de-Paix, Jean Rabel, Cap-Haitien, Ouanaminthe, Hinche, Mirebalais, Les Cayes and Jeremie. DINEPA plans to increase WASH humanitarian action in these areas as well as governmental presence. UNICEF has also cooperated in the Dominican Republic with authorities and humanitarian partners to improve water and sanitation facilities in health centres, hospitals and camps that received Haitians in the border area, both in the Dominican side and in Haitian territory.

UNICEF Haiti has eight formal Partnership Cooperation Agreements with international and national NGOs (ACF, ACTED, CONCERN, SOLIDATES, CRF, SIF, Pompiers sans Frontiers, HAVEN) and is in the process of negotiating an additional three to support displaced families and host communities in areas not directly affected by the earthquake including the poor border area with Dominican Republic. In addition, UNICEF is also has a Memorandum of Understanding with DINEPA (valued at US\$11.5 million), to ensure financial support, supplies, equipment, recruitment of staff, as well as provision of technical assistance.

### *UNICEF achievements*

- **Preparedness:** UNICEF was able to quickly start relief operations through its existing stand-by agreements with NGOs and its contingency stocks.
- **Water provision:** UNICEF has provided support to DINEPA and partners ensuring distribution of potable water to some 55 per cent of the affected population through water trucking to camps and pre-existing water kiosks – around 70 per cent of the overall water trucking operation. Over 1.2 million people have been reached with average of 5.5 litre/person/day.
- **Sanitation:** UNICEF's contribution to the sanitation coverage achieved by the WASH Cluster is around 40 per cent. 2,307 latrines have been provided by UNICEF partners so far with the potential to reach 230,700 people. However, the figure is likely to be higher since UNICEF has so far distributed a total of 5,777, latrine slabs. The total number of portable toilets in use is 797.
- **Technical assistance:** Through its partnership with the Swedish Civil Contingencies Agency MSB, UNICEF has provided technical assistance to Direction Nationale de l'Eau

Potable (DINEPA) and Services Metropolitan de Collecte des Residus (SMCRS) in planning the extension of de-sludging and dumping sites.

- **Hygiene promotion:** UNICEF has provided support to DINEPA to develop hygiene messages and strategies. At the request of the WASH cluster, UNICEF has provided training for 59 hygiene coordinators of 20 cluster partners. UNICEF is supporting partner organisations to roll out the strategies, including community-based hygiene promotion and distribution of hygiene kits. This approach is complemented by a mass media campaign: hygiene messages on the radio, soundtracks, posters and leaflets.
- **Provision of water:** UNICEF has supported the cost of the provision of water to the affected population in camps and the subsidised distribution of water to kiosks through water tankering.
- **Distribution of supplies:** UNICEF has distributed hygiene kits to benefit 18,423 families, and large amounts of WASH items to cluster partners with low capacity to internationally procure such quantities.
- **Capacity building:** UNICEF has been strengthening national and local capacities of DINEPA and Municipal Authorities through technical assistance to coordinate and manage humanitarian action, provide emergency response and plan the reconstruction of the country.

### **UNICEF challenges**

- **Sustainable provision of water:** A challenge is sustaining minimum water quantities for about 1 million people. DINEPA with the Cluster is examining how water trucking operations can be replaced by sustainable medium term options such borehole drilling. The Cluster has also supported repair of the water network, but because its extensions reach primarily into more affluent neighbourhoods, extension of the network is also required.
- **Rainy season:** The rains will bring severe challenges, including: how to support affected families outside of camps; providing effective sanitation and hygiene services and ensuring hygiene practices to avert diarrheal and other diseases. Additional support is needed to ensure sufficient capacity within DINEPA. UNICEF and WASH Cluster partners are expanding their technical support and financial assistance.
- **Under-planning:** There appears to be a huge under-planning for hand washing and bathing areas. Vulnerable groups with special needs such as disabilities or elderly should be given greater consideration with regard to access to services.
- **Financial** commitments to support DINEPA's WASH strategy (requiring US\$52 million), have been slow to materialise.

- **Sanitation:** The construction of latrines is a challenge due to the: lack of availability of space, the shallow water table and lack of permission to dig by government and land owners. As an interim strategy, UNICEF is distributing and maintaining portable latrines – but this is also not sustainable.

### **UNICEF priorities**

- **Sanitation and hygiene:** Increasing hygiene promotion, drainage, waste management and environmental sanitation in camps will be critical in reducing the risk of outbreaks of WASH-related diseases during the approaching rainy season. To boost access to latrines, UNICEF, in cooperation with DINEPA and WASH Cluster partners, has started a large operation for the provision and maintenance of 4,500 portable latrines for 450,000 people. The Clinton Foundation is providing 4,500 latrines and the Office of Foreign Disaster Assistance (OFDA) 20 de-sludging trucks.
- **Sustainable provision of water:** A priority is to support local authorities in identifying sustainable solutions for water provision through the rehabilitation of existing water networks, drilling of boreholes and recovery of pre-existing local water market.
- **Preparedness:** UNICEF is procuring contingency supplies and reviewing stand-by agreements with partners to restore its rapid response capacity in all the Haitian territory in preparation for the hurricane season.
- **Scaling up:** UNICEF has been scaling up its technical assistance to partners, supporting training to build local capacities, and scaling up its distribution of water and sanitation items, hygiene kits and the provision of financial help to WASH cluster partners. UNICEF is boosting its own recruitment process and improving working conditions.
- **Border areas:** Support to displaced families and host communities in areas not directly affected by the earthquake, including the poor border area with the Dominican Republic, needs to be strengthened. For this, Partnership Cooperation Agreements (PCAs) with several partners are being finalized.

## **WASH Cluster**

### **Cluster coordination**

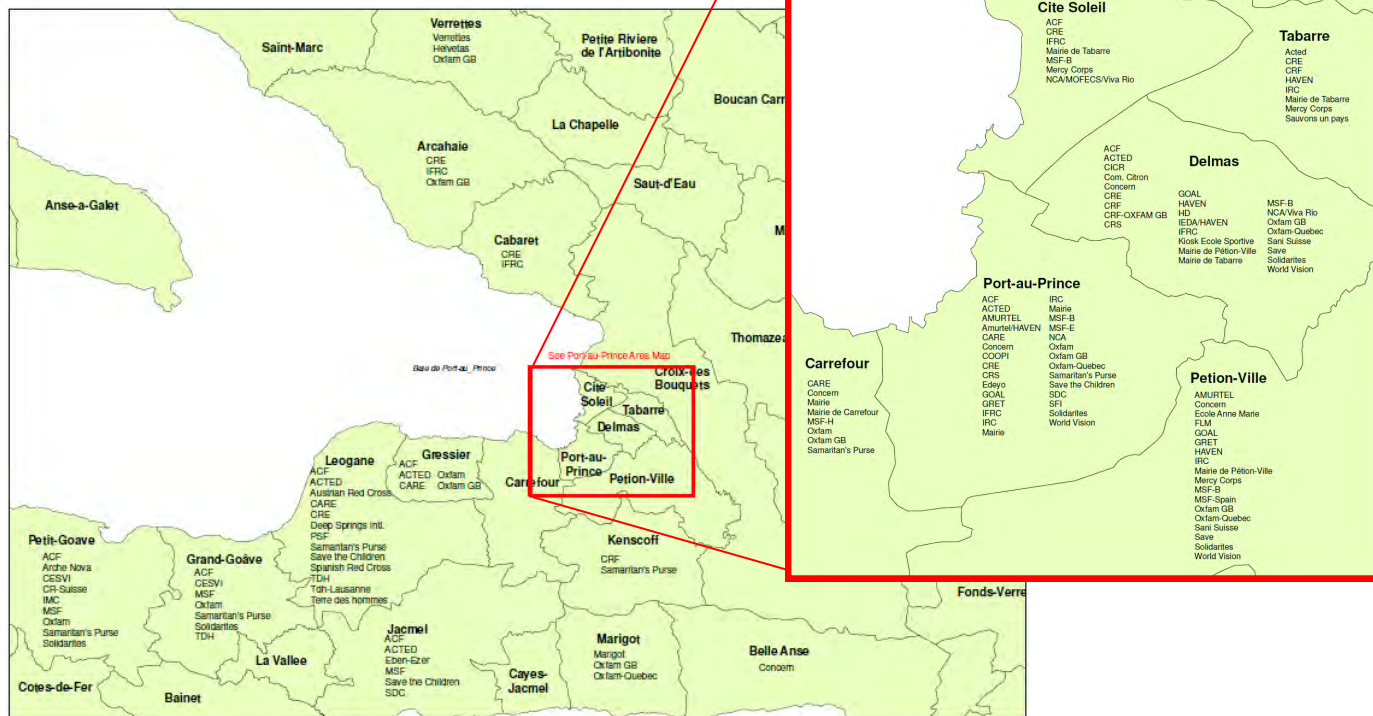
The overall WASH lead is DINEPA (Direction de l'Eau Potable et de l'Assainissement) within the Public Works Ministry) supported by UNICEF as the WASH Cluster Lead Agency. Some 50 organizations form part of the WASH Cluster. UNICEF's Cluster Coordination Team has been providing technical and financial support to reinforce the capacity of the municipalities in coordinating the response in their area. This has been key in ensuring that local authorities are implicated and in securing the provi-



# WASH Cluster 3W

Apr 7, 2010

Source: WASH Partners Activity Reports



sion of services to its population.

Areas covered by the Cluster include: Port au Prince, Jacmel, Gressier, Leogane, Grand Goave and Petit Goave. In Leogane, the WASH Cluster is coordinating with over 40 organisations. Given the number of affected population in the Port-au-Prince metropolitan area, there is a greater concentration of agencies and response in this region. Support continues in the five affected municipalities outside of Port-au-Prince.

WASH Cluster Coordination support has also been reinforced in the Dominican Republic for the response at the border areas and for Haitians crossing into Dominican Republic. This greatly supported UNICEF's ability to respond at the border area with partners. The team has also supported the response and contingency planning process in Haiti.

## Cluster achievements

- **Rapid WASH coverage:** DINEPA, supported by UNICEF, was among the first government bodies to respond to the emergency. Through Haitian institutions and Cluster partners, the WASH coverage in camps has steadily improved over the last three months - there has not been a reported increase in diarrhoeal disease. UNICEF and WASH Cluster

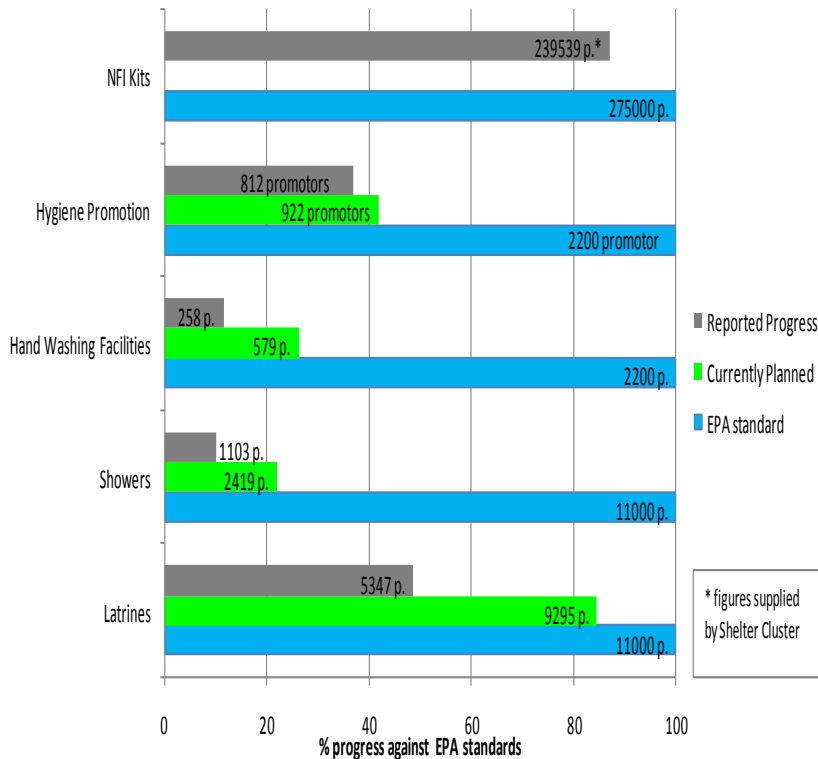
partners are supporting the provision of water through 451 water kiosks and over 300 sites through different organisations. Minimum quantities of water are delivered to approximately 1 million people.

- **Sanitation:** 239,539 Non-food item kits have been distributed; some 5,350 latrines have been distributed.

## Cluster priorities

- **Scaling up:** WASH Cluster agencies are scaling up services (primarily sanitation) to reduce public health risks and to respond immediately to any urgent WASH needs during the rainy season
- **Preparedness:** The aim is to improve the coverage of water, sanitation and hygiene prior to the start of the heavy rains, and to work with the community and others to ensure more effective drainage. The Hygiene Promotion Working Group is working together in coordination with the Health Cluster to put in place preparedness and response activities in the event of disease outbreak.
- **Relocation:** the Cluster coordination team is involved in the multi-actor planning including the assessment of sites for relocation and provision of immediate and medium-term services.

## WASH CLUSTER SANITATION AND HYGIENE DELIVERY AGAINST TARGETS AND STANDARDS AS OF 5th April 2010



A selected image from a flash card used in hygiene promotion trainings facilitated by UNICEF.

The EPA Eau Potable et Assainissement (EPA) standards represent targets for the end of Phase I (30<sup>th</sup> April). “Currently Planned” targets represent the targets of those partners reporting their activities in the camps. Out of the 46 registered partners in WASH, 39 have ever reported their activities to-date. There is still significant under-reporting..

## GENDER CONCERNS IN WASH

For women and children, especially adolescent girls, the absence of easy and safe access to toilets and having to defecate behind bushes, tents, in plastic bags, buckets, or roadside ditches is a human dignity issue.

Women, adolescent girls and children often endure uncomfortable circumstances, lack of privacy, and the risk of violence and abuse due to a number of aspects:

- Latrine doors cannot be locked;
- The lack of lighting in sites is an issue;
- There is a lack of safely located women-only-toilets;
- Long walking distances to latrines;
- Menstruation adds considerably to the need for sanitary facilities.

Sexual harassment is a risk in camps, where women and girls often seek privacy in the darkness. These realities absorb women’s and girls’ time and threaten their wellbeing.

## CHILD PROTECTION

### **Situation**

The January 12 earthquake has exacerbated the vulnerability and multidimensional protection risks for hundreds of thousands of children in Haiti, especially for those separated/or at risk of separation from family. A primary risk facing children immediately after the earthquake remains separation from family care. The already weak systems in place to protect children have been further depleted with the loss of social work personnel, logistics and office space. Whilst some children have found temporary care with families and institutions that are protective, many others are at risk of trafficking, abuse and exploitation. In addition, children currently with families living in extreme poverty are vulnerable to abandonment, raising the risk of a second phase of separation and increased vulnerability to sexual abuse and violence. The situation remains extremely dynamic both in the capital and outside; the flooding the rains will bring will cause further displacement and all the related risks.

Sexual violence reports are increasing from the spontaneous settlement areas in PaP and across the country. Reports of trafficking and illegal international adoption of minors have dominated the international press in the last months. The practice of children being separated from their families, either to be placed in institutional residential care within 'orphanages', *creche*, or to serve as *restavec*, is believed to have increased since the earthquake, especially in rural areas. Higher threats with regards to the involvement of adolescents and youth in gang activity, urban armed violence, and other risky behaviour such as substance abuse, are being reported. There is also an overwhelming need for psychosocial assistance for children affected by the earthquake.

Children in Haiti were vulnerable before the earthquake:

- Up to 200,000 children were reportedly exploited as domestic workers;
- 50,000 children were separated from their families in institutions,
- Up to 4,000 children were living on the streets;
- At least 2,000 children were trafficked annually through and to the Dominican Republic.

## UNICEF Child Protection

### **UNICEF contribution and commitments**

UNICEF's technical and coordination assistance in the sub-cluster has been essential to the scale-up of services. UNICEF has been building on its strong partnerships established prior to the earth-

quake with IBESR, BPM, the Ministries of Justice and Social Affairs. The agreements signed with both IBESR and BPM make provisions for scaling up their staff, deploying them to key locations, providing office space, communication and logistics and linking them with UNICEF directly and designated partners for technical staff. Since the earthquake, UNICEF has provided technical and financial assistance to the Government of Haiti and international and national NGOs through 10 partnerships and is currently negotiating a further 10 agreements.

The network of UNICEF's partnerships is expanding as the scope of the programme evolves from an immediate focus on separated children to prevention of trafficking, psychosocial support and gender-based violence. UNICEF has also been signing agreements with international NGOs like AVSI, Heartland Alliance, Save the Children, IRC, CISP and CRS as well as national NGOs like IDEJEN, Kay Fanm, SOFA and APROSIFA. Through the CP Cluster, partnerships have enhanced outreach beyond Port-au-Prince to Leogane, Jacmel, Petit Goave, Les Cayes and Cap Haitien.

UNICEF is increasing its field presence of protection staff, assessments and engagement with partners ready to work in these areas. Key locations affected by the earthquake (Port Au Prince, Leogane and Jacmel) will be covered, as well as strategic border points where children are most at risk from trafficking. An assessment mission to Gonaives, Hinche and Cap Hatien will clarify the scope and scale of needs in those areas and the potential partners.

### **UNICEF achievements**

- **Separated children registered:** Over 767 separated children have been registered in camps and residential facilities in all affected areas within Port-au-Prince, the cities of Leogane and Jacmel, in partnership with SCF, IRC, WV, CRS, CISP, TdH, and Heartland Alliance.
- **Training:** Over 150 caseworkers have been trained on registration and family tracing of separated children.
- **Joint assessments:** UNICEF significantly contributed to the joint assessment with IBESR and BPM on the quality of almost 400 residential child care centres hosting over 25,000 children.
- **GBV reference card:** As part of an effort with the Ministry of Women's Affairs and operational agencies, UNICEF has provided technical assistance to the GBV sub-cluster, supporting efforts to produce a reference card in French and Creole with reliable service providers for GBV survivors.
- **Institutional development and prevention of trafficking:** UNICEF has provided trainings to the IBESR team on family reunification and reintegration, and awareness-building activities on family reunification and reintegration for children and their families. UNICEF is funding the recruit-

ment of 40 social workers to conduct an investigation of child care institutions, as well as identify, register, accompany and reintegrate vulnerable children as needed.

- **Combating violence, exploitation and abuse:** With the Child Protection Brigades (BPM), UNICEF has provided technical support to implement an emergency response project to prevent and combat trafficking and other forms of violence against children.
- **Trafficking:** Child protection actors along the border with the Dominican Republic are carrying out preventive and response efforts to trafficking. Heartland Alliance is working in collaboration with the Child Protection Brigades and IBESR to monitor the border and prevent separated or unaccompanied children from being able to cross the border
- **Supplies:** UNICEF has distributed to partners: 648 Early Childhood Development (ECD) kits, each containing play and learning materials for up to 50 children up to the age of 6, basic hygiene items, and a guide for caregivers; 1,637 Child Protection kits, which contain items such as clothes, towels, toothpaste, soap, sheets, sleeping bags, and blankets, to children in residential care facilities and camps; 148 recreation kits have been provided; 1,689 — Protect Now kits (containing basic person dignity items and sleeping mats) have been distributed.
- UNICEF continues to provide financial, technical and supply assistance to the Sub-Cluster partners.

### **UNICEF challenges**

- The registration of separated children has moved much faster than the reunification of children with their families. There is a gap in the technical understanding of the process as many of the caseworkers are new to the work and require stronger supervision from the agencies which employ them.
- The insecurity of women and children in communities and displaced locations has led to increased reports of rape and other gender-based violence. There is currently a lack of safe spaces for GBV survivors to seek information and referral to appropriate services.

### **UNICEF priorities**

UNICEF will scale up the presence of child protection partners in locations where children are most vulnerable and strengthen the government system for response.

It is critical to close the gap between registering a separated child and tracing the family. The longer a child remains separated from his or her family, the more difficult it can be to trace the family.

Children in institutions require special attention. UNICEF will work with IBESR and child protection partners in the next three months to register every child as a preventive measure for trafficking and exploitation and to highlight priority cases for reunification and children exposed to abuse and exploitation.

Identifying children at risk and putting in place measures to strengthen the ability of families to care and protect their children is also a priority.

UNICEF will strengthen the proximity of its partners to the most vulnerable communities, linking a monitoring and reporting system to referrals in order to respond to children's psychosocial needs and protect them from sexual violence. Through the Protection Cluster, UNICEF is contributing to the strategy to strengthen security, prevent and respond to increased reports of GBV. UNICEF will assess the capacity of local partners, associations and networks to conduct recreational, psychosocial and protection activities at community level.

### **Safer shelter**

Managing the protection risks to children from the planned relocation exercises and preparedness for the rains is being addressed through advocacy with the U.S. military and the UN Mission in Haiti. In addition to the information campaign being developed for communities, supplies and partners are being pre-positioned to ensure that children and families are prepared for the move, that the exercise is conducted in a way that protects children and the camps being prepared to receive the children have specific services for children.

## **Child Protection Cluster**

### **Cluster coordination**

The Child Protection Sub-Cluster, led by UNICEF, brings together 57 national and international child protection actors and partners participating either in meetings, or remotely through the establishment of a Google group or other mechanism to provide humanitarian and other child protection assistance to those affected by the earthquake. The activities of 24 partners reaching a total of around 150,000 persons in 24 communes have been mapped.

The partners are: CRS, HA, HRC, CEMEAH, PADF, Food for the Hungry, JCICS, NCA, SC, MSF, NRC, MDM Canada, Parole Action, OCEDAH, AMURT, BB, CRCE, JCICS, IRC, SC, ADF, IRC, Mercy Core, Aide médicale, PLAN, Tear Fund, Tout nest pas Perdu, PADF, TDH, Food for the Hungry, Consortium for Rein-

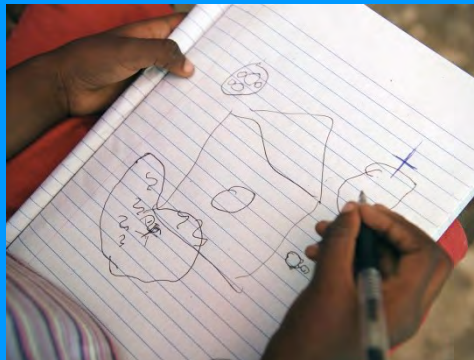
# SEPARATED CHILDREN IN HAITI

## One Child's Story of Family Reunification

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Eleven days after the quake, Sterling, pictured here, became separated from her father and was lost amidst the rubble and tents. A young man, found her and brought her to his mother, who took her in. UNICEF and a local volunteer facilitated the family tracing process.



Sterling was encouraged to “bring back the memories” and to draw what she used to see in her home life. Here she draws a cemetery and a church, both which provide clues to the location of her home in Carrefour.



Sterling walks with Pierre, the community volunteer, near the national football stadium in Port-au-Prince. When Sterling recognized familiar buildings, the adults followed her lead.



Sterling climbs over rubble left by the earthquake, increasingly confident of her way. As her surroundings become familiar Sterling begins to run, skip and sing, pulling the mystified adults behind her.



Sterling's memory serves her well, but she finds not her own home – but an Aunt's makeshift hut. With her aunt's help, UNICEF was able to call Sterling's father on the phone.



Sterling speaks briefly to her father on the phone but is not sure it is him. Later, her father confessed “I ran immediately to a motorcycle taxi. The driver asked for too much money, but I said, ‘I don't care, just take me to my daughter.’”



A half hour later, Sterling's father, Iste Mui, cries and opens his arms to greet his lost daughter..



Iste Mui holds his daughter Sterling and listens to an older man (with cap) from the host family. Although Sterling was happy to see her father, she spent one more night with her host family until her father provided necessary proof of paternity.



The next day, finally at home, Sterling pauses to smile, writing and drawing in her home in the Carrefour neighbourhood of Port-au-Prince, the capital.

forcement of Education. The main partners and counterparts for the sub-cluster within the Government are Institut du BienEtre Social et de Recherches (IBESR) and the BPM.

**Working groups:** The Sub-Cluster has working groups focusing on specific areas of child protection: 1) separated children; 2) mental health and psycho-social support (MHPSS); 3) child friendly spaces; 4) trafficking and abduction; and 5) communication for communities.

**Decentralisation of clusters:** The Sub-Cluster is working in 16 areas in Port-au-Prince as well as Leogane and Jacmel. The focus is on expanding in the field. There are designated child protection focal points based in Leogane, Jacmel, Les Cayes as well as Gonaives. The work includes coordination on child protection issues in IDP camps, as well as in the communities, on issues related to separated children, family tracing and reunification, assessing residential care centres, child friendly spaces in camps and communities, psychosocial support.

**Cluster in Dominican Republic:** A 12-month Child Protection Strategy has been developed to coordinate cross-border response activities in Haiti and the Dominican Republic, together with Government officials. Training on 'Separated Children Family Tracing and Reunification system has been carried out in Santo Domingo, targeting 45 participants from border provinces and Santo Domingo.

### Cluster Achievements:

- **Gender-Based Violence (GBV):** To address the rise in reports of GBV, the Child Protection and GBV Sub-Clusters, together with MINUSTAH, UNPOL and the Haitian National Police have joined forces to patrol, monitor and evaluate security issues related to child protection and GBV in six IDP camps (five are in Port-au-Prince, one in Leogane).
- **Residential child care centres:** The quality of 359 residential child care centres hosting around 25,339 children has been evaluated throughout the country. IBESR and UNICEF have been working in collaboration with the Child Protection Brigades (BPM) of the Haitian National Police (PNH) to evaluate the needs, conditions, and quality of care of orphanages, and to register children who have arrived in orphanages after the earthquake in order to promote family reunification. Emergency needs, such as food, nutrition, medical needs and shelter have been identified and provided.
- **Call centre:** This is now operational and taking calls from frontline workers reporting children separated from their parents. The call centre is staffed by IBESR, UNICEF and Save the Children colleagues.

- **Interim care:** Solutions for interim care and family-based foster care are being looked at urgently.
- **Community-based psychosocial support:** Over 55,000 children have been reached per week through the establishment of 78 child friendly spaces (CFS). Each CFS benefits around 50-100 children/day through several shifts.
- **Mental Health and Psychosocial Support (MHPSS):** The MHPSS Working Group has been formed; 34 organizations are providing MHPSS in 18 communes in the West (14 communes), South-East (1) and South (3) *departements*.
- **Awareness-raising for prevention of violence, abuse and exploitation:** Around 3 million people have been reached with child protection messages broadcast in Creole through 36 national radio broadcasts, printed on posters and leaflets. One million mobile phone users have already been reached through SMS .
- **Trafficking:** Child protection actors (IBERS, BPN, MINUSTAH, UNICEF), along the border with the DR are carrying out preventive and response efforts to trafficking. Heartland Alliance is working with the Child Protection Brigades to monitor the border and prevent separated or unaccompanied children from crossing the border. An agreement with the Child Protection Brigade of the police was signed to step up capacity for border surveillance and coordination from the capital, expecting to reach out to 50,000 children and their parents.

### Cluster challenges

- **Trafficking and GBV:** There are increased reports of cases of trafficking and of gender-based violence affecting mainly girls, but also women and boys. It is essential to increase overall capacity to prevent and respond.

### Cluster priorities

The cluster addresses specific protection needs and threats of children in the immediate phase, particularly the following:

- Separated and unaccompanied children, with particular attention to the youngest;
- Children vulnerable to violence, abuse and exploitation, including GBV;
- Children associated with gangs or otherwise taking part in violence.

Longer-term strategies on strengthening the national child protection system, at both institutional and community levels, will have all children in Haiti as indirect beneficiaries. Activities and programmes implemented by partners and members in the Child Protection Sub-Cluster aim to respond to the needs of 500,000 vulnerable children affected by the earthquake

## CROSS-CUTTING ISSUES

### Cross-cutting challenges

#### **Clusters and UNICEF programmes**

##### **Complexities and overstretched capacities:**

- The complexity of the emergency, including the profound needs, limited physical space in spontaneous settlements, the collapsed government infrastructure, lack of a decentralised system, and challenges in coordination has meant that capacities are overstretched. There is a need to scale up rapidly.

##### **High turnover:**

- A challenge facing UNICEF's programmatic response and Cluster coordination is the high turnover of staff which has had a detrimental impact on medium and longer-term planning and on the continuity of key activities, such as thematic working groups. Another repercussion has been a delay in the arrival and distribution of supplies.
- UNICEF is addressing the issue: technical capacity of cluster members is expected to be strengthened over time as the situation stabilises and longer-term experts can be recruited in country.

##### **Language:**

- There is a need for aid and development workers with strong French (and Creole) language skills. Coordination meetings are too often held in English, which constitutes a challenge to promote national ownership of the response, both through the government and national NGOs.

##### **Decentralization:**

- Human resources and financial systems in some *departements* are weak. Logistical challenges in some areas means that bringing in supplies to particular places can be difficult. Many partners are based in Port-au-Prince, and often lack the capacity necessary to support efforts.
- There is still a need to further expand the humanitarian response into regions not yet covered. UNICEF is encouraging expansion of partnerships in rural areas.

##### **Lack of capacity:**

- In some cases, operational NGOs have not had full capacity during the Haiti emergency response, creating unnecessary bottle necks, including the need for further capacity building. This is especially so due to limited decentralisation and availability of technical staff.
- National and local government structures have been affected by the earthquake and have limited capacity.

##### **Under-reporting:**

- Ensuring regular reporting from partners has been a major challenge, resulting in a lack of accurate picture of the gaps

and the needed responses.

##### **Shifting population:**

- The challenges in monitoring populations that are shifting and camps that are increasing in numbers have complicated planning efforts. Geographical mapping seems to be incomplete due to the lack of coordination in information management and the dynamism of population movements.
- Scaling up a response to a mobile population in a dynamic environment is a challenge to ensure the response is coordinated, gaps are covered and key needs are addressed.
- Advocacy on children's issues is needed.

##### **Landownership issues:**

- Requires government action and have slowed down the speed of the relocation of communities. With many sites on private land, negotiations are needed to enable provision of services.

##### **Rainy season:**

- The rains will bring severe challenges, including: how to support affected families outside of camps; providing effective sanitation and hygiene services and ensuring hygiene practices to avert diarrheal and other diseases.

### **Environment**

Haiti's extremely vulnerable environment forms the baseline for children's opportunities beyond the emergency and early recovery phase. The emergency response needs to break the trend of environmental degradation where possible.

It is crucial that immediate, short-term solutions do not contradict necessary environmental actions, but capture opportunities and moreover implement them to enhance improved health, security, economic opportunities and a more sustainable way ahead for the youngest generations of Haiti.

For example, the direct link between charcoal production / deforestation / soil erosion / flooding and diminished agricultural opportunities pose a direct threat to children's health and livelihood. Thus, there is a need to encourage actions for sustainable energy solutions. During the upcoming construction phase, there is a need for all stakeholders to consider the risks with stone quarries and soil erosion, as well as soil erosions (and waste) contribution to reoccurring flooding of channels, where at the end of the chain, children and children's health will pay the highest price.

The international community's commitment to support capacity building of the Haiti Government within waste-, excreta- and environmental management in support of development of agriculture and pollution reduction, will be a key success factor for the outcome of the mission in general and the children's health and opportunities in particular.



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On 27 January, Edeline Monastère, a shy, reed-thin 12-year-old, outside her family's makeshift shelter in an encampment on the golf course of the Pétionville Club in Port-au-Prince. She lost three fingers during the earthquake; they were crushed – “ecrasé net” is how she described it – when her house collapsed. She was treated at the city's Peace Hospital and returns there daily to have her dressing changed. Edeline claims it doesn't hurt anymore.

## Cross-cutting priorities

### ***Decentralisation: UNICEF presence and partnerships***

For UNICEF, the cross-cutting priorities in the third month of response (in comparison to the first) have been: decentralisation of presence, partnerships and support to local authorities. UNICEF is already present in Leogane and Jacmel, and its capacity continues to be strengthened. In March, UNICEF laid the ground work for additional bases in Gonaive, Jeremie, Hinches and Les Cayes, where a sizable number of displaced persons are located. These bases will be served by a rotating, mobile team (“mobile antennas”) of programme and operations specialists, who would cover all locations systematically. Storage space is also being made available throughout the six field locations in line with the strategy of pre-positioning supplies in terms of contingency response. UNICEF is providing a storage facility of 240m<sup>2</sup> in Jacmel for inter-agency use.

### ***Safer shelter: UNICEF role***

Other efforts have recently focussed on ensuring a protective safety

net for affected communities in advance of the rainy season. This included supporting larger efforts by government and partners in the humanitarian community to ensure safer shelter for populations. The Government has endorsed a strategy which has five basic options for the affected population:

- Return to a safe home, after evaluation by a trained assessor (UNOPS and the Ministry of Public Works have now assessed 12,000 homes of which 40 per cent have been deemed safe. In some cases therefore, a return to home structures may be possible);
- Return to a safe plot, after debris has been removed;
- Stay with a host family (the potential for increasing support to hosts is being explored by a technical working group for Host Families, under the leadership of the Humanitarian Country Team);
- Stay in a current spontaneous settlement, if conditions at the site can be made to meet minimum standards in the medium term;
- For those who do not have another option, move to a temporary relocation site planned by the Government (at least 9,000 persons in six settlement sites are assessed as being at risk of injury and death due to floods, landslides and other rain related hazards);



The international community is working with the Haitian Government to support Haitians, particularly those living in sites where conditions could become life-threatening during the rainy season, to find better shelter. Among the strategic activities supported by UNICEF are:

- Strengthening the capacity of basic services such as education, health care and nutrition, water and sanitation, in host communities, as well as enhancing protective services for children;
- Preparing sites identified by the Government for temporary relocation by ensuring availability of basic services;
- Working with partners, including Catholic Relief Services (CRS), Jenkins-Penn Haitian Relief Organization (JPHRO), the INGO Amurtel, International Rescue Committee (IRC), Save the Children, and the Haitian Scouts to raise community awareness on the five options - while helping prevent family separation during relocation.

### ***Contingency planning: ensuring preparedness***

Another important priority has been ensuring preparedness for additional shocks such as social unrest, the upcoming rainy and hurricane seasons (April to November) as well as another possible earthquake. For this purpose, UNICEF participated in the Inter-Agency Standing Committee (IASC) mission to Haiti between the 8 and 13 March 2010 to provide support to the UN Humanitarian Country Team for the development of a contingency plan for the next six months. It is estimated that in the worst case scenario, 1.8 million people would be at risk across the country, and up to 500,000 could be displaced. The regions deemed most at risk from flooding and landslides in the peak season of May/ June and August – October are: Artibonite (Gonaives, St-Marc), Sud-Est (Jacmel), Sud (Les Cayes), Grande Anse (Jeremy) and Ouest (Leogane, Port-au-Prince).

Shortly after the interagency exercise, the Civil Protection Directorate (DPC) of the Government led a workshop in Port-au-Prince from 19 to 20 March to update the national preparedness plan. Regional workshops will be convened to update the hazards in each of the ten *departements*, confirming populations at risk and defining *department*-specific preparedness plans and partnerships.

### ***Monitoring and evaluation: improved analysis, planning and accountability for results***

The internal capacity for monitoring and evaluation of UNICEF's responses to the emergency in Haiti has been reinforced this past month through surge support. A comprehensive annual plan, with specific action plans for each technical sector, was developed in February, followed by the development of specific

rolling three month workplans in March. Indicators in these plans have been harmonized with partnership cooperation agreements (PCAs) and a list of key outcome and output indicators confirmed. These processes will greatly improve the results-based planning and reporting of the Haiti office, and the feasibility of evaluating the overall programmatic response.

An integrated monitoring and evaluation framework/plan was established. The monitoring of the situation of children and women will be completed through: a) a monthly household based rolling rapid assessment targeting 900 households by each area starting 19 April in temporary settlement sites (first report available in May 2010); and b) a light Multiple Cluster Indicator Survey (MICS) to establish critical base-line information at the commune level. The destruction of households and the dynamic nature of population movements mean that master sampling plan from the 2003 Census must be updated, with the potential for oversampling groups of interest, such as the displaced. This revision will be completed by the National Institute for Statistics by October 2010.

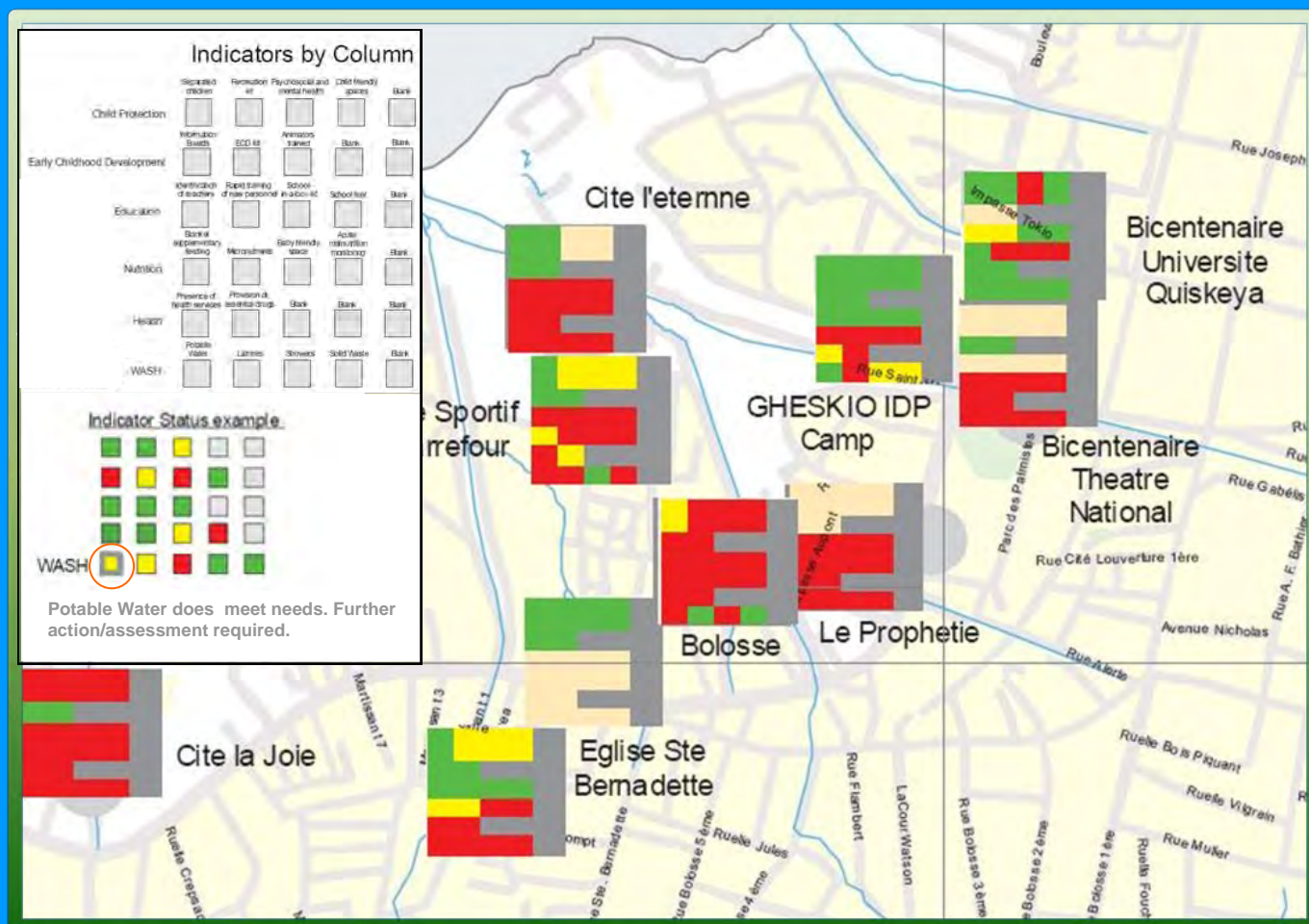
Monitoring of UNICEF and Cluster programme performance will be facilitated by: a) monthly reports from Project Cooperation Agreements (PCA), tracked by each section; b) a monthly Panel Survey will provide an indication of the results using SMS/Cell phone calls of key informants; and c) the qualitative, multi-indicator block cluster system of assessment (see special feature on facing page) which tracks availability and use of a range of services implemented by partners and UNICEF in the settlement sites in Port au Prince and in Jacmel and Leogane.

In partnership with UNFPA, UNDP, World Bank, UNICEF is contributing to the strengthening of the national capacity of the National Institute of Statistics for the implementation of the MICS and to recover and strengthen the Sector Information Systems for Education and Health.

An Inter-Agency Real-Time Evaluation (IA RTE) is being carried out in Haiti which will feed back findings for immediate use by the broader humanitarian community, including UNICEF and the Humanitarian Country Team. UNICEF, alongside OCHA and the IRC, is serving on the Evaluation Management Group that oversees the quality and independence of the evaluation. The IA RTE will focus on the effectiveness and efficiency of the current coordination and management systems, and will address both relief and recovery issues. The evaluation team will engage with staff from UN agencies, international NGOs, national NGOs, national stakeholders, government and donor organizations, as well as military actors.

# RAPID ASSESSMENT IN SPONTANEOUS SETTLEMENTS

## Multi-cluster indicator block mapping: one solution



### A very rapid qualitative (VRQ) approach to mapping the coverage of humanitarian interventions

As a Cluster and/or Sub-cluster lead in four sectors, UNICEF has a great interest in ensuring the rapid assessment of sites with a methodology that identifies a range of vulnerabilities of children. The “Very Rapid Qualitative Approach” (or VRQ approach for short) has been employed to conduct rapid, multi-sectoral indicator mapping of spontaneous settlement sites in Port-au-Prince. The VRQ approach relies on a team of Haitian enumerators to assess the needs and response in sites of concern. Provided with training to recognize adequate, inadequate and very inadequate response to different needs and situations, enumerators have become experts in ranking which settlements have the best or worst living conditions. There is no list of mandatory questions – the enumerators instead use tact and cultural traditions to gather information on living conditions. Enumerators are given a list of indicators they must rank, but only topics to consider when assessing the character of a settlement.

Two teams (comprised of both men and women) enter the same camp but walk-through independently, then meet to share results, compare tally sheets and decide on a final rank for each of the indicators. Rather than going through a list of pre-defined questions and ticking boxes during interviews, the teams wander the camp, tallying examples of good and bad living conditions and behaviours. They also listen to the needs of the occupants, individually, with key informants or in spontaneous groups, while noting their observations. They have freedom to ask questions appropriate to the situation.

After assessing several different settlements together, the enumerators tend towards consensus and can complete the work much faster. By encouraging similar judgments about living conditions through using sentinel camps assessed by UNICEF sector specialists, this process is helping UNICEF and partners to find response gap hotspots.

This kind of assessment has now covered some 300 of the larger camps (especially those with greater than 5,000 persons and those which UNICEF has agreements with partners). The results of the sheets are being entered into a geographic information system (GIS), which will greatly facilitate both operation and strategic planning at a glance. It will notably demonstrate where groups of camps are most in needs. The thematic mapping above gives an impression of the product used by technical clusters.

## Building consensus on a transformative agenda

### ***Action plan for National Recovery and Development***

In the midst of a complex political and constitutional context, it is important that the voices of previously peripheral or marginalised groups—such as children - are heard. Although the nation has experienced a devastating tragedy, a coalition of partners have noted a growing sense of solidarity, civic responsibility and high resilience – possibly inspired by the sense of shared experience. In “A Voice to the Voiceless”, a coalition of six partners (Help, Kozepep, ATD Quart Monde, Zanmi Lasante, the Office of the UN Special Envoy and MINUSTAH) summarize the responses of 1,750 Haitian citizens in Haiti’s ten *departements*. The findings confirm a strong demand for participation, an end to exclusion, and an insistence on decentralization of public services with increased ownership by local actors.

With an interest in channelling and capitalising on this energy, UNICEF has been working at the “upstream” level, contributing to Post Disaster Needs Assessment and shaping the growing consensus on the parameters of the “transformative agenda”.

Even before the earthquake, there was a divide between the executive and opposition parties, which is often the case in the run-up to elections- let alone elections for the president, legislature, municipal and local authorities. Now, with elections postponed and the mandate of the parliament due to end on 10 May, ongoing questions on constitutional affairs should not detract from the pressing need for consensus on reconstruction and recovery. Discussions to secure a temporary national assembly, (which will carry out a constitutional reform that would allow for voter registration and two rounds of elections – early next year), are positive. These processes represent opportunities not just to stabilise internal politics, but to influence and shape the agenda for children.

The overarching framework that will guide this agenda is the Action Plan for National Recovery and Development of Haiti, released at the end of March. The plan outlines a basic plan for territorial, economic, social and institutional rebuilding during three phases: an emergency period (which is used to address immediate needs for shelter, basic education and preparation for shocks); and an implementation period (18 months for projects to “kick-start” and establish a frameworks of incentives and supervision for private investment); and, a longer ten-year period, during which the reconstruction and recovery of Haiti will become a reality.

Within the “Social Re-building” agenda, there is a clear emphasis on Education and Health, with the promise to “prioritise a system of education guaranteeing access to education for all children, offering vocational and university education to meet the demands of economic modernisation, and a health system ensuring minimum coverage throughout the country and social protection for the most vulnerable workers.” The plan suggests a more balanced and equitable development of the country.

The total value of requirements is \$11.5 billion. There is also an appropriate allocation to the social sector – with 50 per cent of the requirements designated for rebuilding the social sector; 17 per cent for infrastructure, including housing, and 15 percent for environment and risk and disaster management.

### ***Aligning resources in support of change***

To mobilize and align financial resources to the National Plan, the 31 March International Donors Conference “Towards a New Future for Haiti” was opened by UN Secretary-General Ban Ki-moon. Co-hosting the conference was U.S. Secretary of State Hillary Clinton. By the end of the New York pledging session, some 59 pledges were made by different donors in support of the Government’s plan, for a total sum of \$5.266 billion for 2010-2011. Taking into account all figures, including funds already committed as part of the humanitarian response and commitments made for the longer-term into 2013, overall pledges totalled \$9.81 billion.

A Haiti Reconstruction Fund, administered by the World Bank, has been set-up to channel part of these funds, while an Interim Haiti Recovery Commission has been established to oversee the reconstruction effort, empower the Government, promote transparency and coordination and deliver concrete and sustainable results.

Education, social protection, basic social services as well as protecting and empowering the most vulnerable were high on the donor agenda, complementing the Action Plan.

Recognizing that the strategic role of MINUSTAH is evolving, a proposal to refine the mandate to better support the political process and state capacity building– as well as clarify the use of military assets to support humanitarian efforts as well as recovery and reconstruction is being developed. A revised Integrated Strategic Framework (ISF) will also be developed, and more specifically, the UN’s response to the Action Plan for National Reconstruction plan will be defined. A broad shared vision for Haiti has been endorsed at the UN Principal’s level in New York and will inform both these processes.

The latter will identify general and sector priorities where the UN has added value, set a division of roles and responsibilities



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Sofia feeds her five-month-old daughter a cup of ready-to-use infant formula, in a baby-friendly tent set up in the Champs-de-Mars Plaza in Port-au-Prince, the capital. Ready-to-use formula, for use by mothers who cannot breastfeed their babies, comes already mixed with safe water, to avoid the risks of contamination with unsafe water.

within a timeframe for implementation on the basis of agreed guiding principles and approaches. Benchmarks will be set for the monitoring of progress against the plan by the SRSG and his deputies. The linkages between the political process, security, humanitarian response and longer-term recovery interventions will be ensured through this framework. UNICEF is committed to playing an active part in these planning processes while continuing with the humanitarian response, recognizing that harmonised approaches will be the key to the success of a transformative agenda.

UNICEF Haiti is also reconfiguring and expanding its programme and commitments to adapt to the changed circumstances and vision. A Programme Budget Review (PBR) is currently being conducted - to confirm the appropriate office size and structure to match the proposed programme goals. The UNICEF Haiti Country Office will incorporate existing programmes, while increasing in size, scope, and content, with a significant number of additional posts. The PBR draws on a plan outlined in the Country Programme Management Plan, which draws from the Haiti Annual Plan – an internal document that outlines the organisational commitments in humanitarian action, early recovery – and the transformative agenda for children.

## UNICEF priorities in the Transformative Agenda

### ***Ensuring children are alive, strong, safe and learning***

UNICEF's 2010 annual plan outlines diverse programmes in five technical sectors and several cross-cutting areas – but three priorities stand out as both urgent in the short term (to fulfil the Core Commitments to Children in Emergencies) and essential to the progressive and full realisation of rights by children, as outlined in the transformative agenda. They should stand as markers of the success of UNICEF in leveraging its resources to support the government - and as markers of the achievement of not just recovery, but of transformational development. All have a strong focus on capacity development of national ministries and local authorities for improved planning, monitoring, coordination and overall regulation of sectors, which have a predominance of private sector and NGO actors (some of whom, remain un-registered).

**1. Keeping children alive and strong**: Arresting and reversing the trend of chronic malnutrition

According to recent studies, under-nutrition is an underlying cause of one third of mortality among children under the age of 5 years and is a predictor of reduced school achievement, equivalent to a loss of up to 2-3 years of learning. Unfortunately, once a young child becomes undernourished the related damage cannot be undone. Research from Latin America shows that under-nutrition in childhood also reduces the income earning capacity of adults by up to 45 per cent. There is therefore, a critical window of opportunity which exists to ensure that children have the nourishment they need to survive and build the capacity to reach their full potential. For a generation of Haitian children – this means rapid action now.

Before the earthquake over 30 per cent of Haitian children under the age of 5 years were chronically undernourished, far higher than the regional average of 14 per cent for Latin America and the Caribbean. Approximately 1.8 million were food insecure and the prevalence of global acute malnutrition (GAM) among 6-59 month olds was 4.5 per cent, out of which 0.8 per cent of the children were severely malnourished (according to a 2008/09 survey). Now, with the stress of the earthquake, the disruption of livelihoods and remittances, combined with the stress of displacement, acute malnutrition is expected to rise. The Nutrition Cluster is using a projected caseload of 30,000 children under-five affected by global acute malnutrition, of which 4,850 cases are estimated to be severe.

UNICEF, as the Nutrition Cluster coordinator, is focused not only on mobilising and supporting immediate life-saving intervention – but also on building the capacity of the government to sustain longer-term efforts to improve infant and young child feeding practices and the prevention of micro-nutrient deficiencies. Efforts in this area are focussed on reaching pregnant women and children up to the age of 24 months, with an integrated package of services and behaviour change messages. Evidence from various other countries has shown that this can be delivered effectively through a system of community-based workers. Such a system is currently not present in a nationwide, and coherent way, and UNICEF, as a part of its contribution to the transformative agenda, will support its establishment and expansion. For a more detailed overview of plans, see the Nutrition section below.

**2. Keeping children safe**: A protective environment with family at the core

The protection of children from violence, abuse and exploitation after the earthquake in Haiti is another pressing need and long-term challenge. The protection challenges directly created

by the earthquake, such as children separated from their parents or psychosocial distress, are well known and immense. In addition, the quake further undermined previously fragile mechanisms to protect children and exacerbated the widespread and diverse pre-existing forms of violence, abuse and exploitation against children.

UNICEF's second priority therefore, is to strengthen the protective environment to prevent and respond to child abuse and exploitation issues. This will require working with government, civil society, the UN and other child protection actors on a variety of issues including:

- Prevention and response to separated children and promotion of family based care. This includes community awareness raising, material, financial and social support to vulnerable families, family tracing and reunification, and improving the quality of care for separated children including those in residential care facilities.
- Strengthening government capacity on child protection. This includes financial, material and technical support to IBESR and the child protection units within the police; legal reform and policy related to alternative care, adoption, trafficking; strengthening the government capacity on assessment, data collection and management and monitoring/oversight of child protection issues; and development of capacity building plan for key government ministries on child protection.
- Provision of child protection services including services for victims of gender-based violence, trafficking, and other forms of violence exploitation such as hotlines, referral mechanisms and multi-sectoral services for victims.
- Mobilising civil society, communities and families to protect children. This includes supporting child friendly spaces; mobilising community members including youth to prevent and respond to child protection issues; messaging and information provision on child protection issues including through the media, arts and community mobilisation; provision of community-based psychosocial support and community-based gender-based violence prevention and response.

For additional details on strengthening the protective environment for children, please see the Child Protection section below.

**3. Ensuring children are learning**: Gaining momentum for a nationwide movement

The key to the overall transformation of Haiti is education. It is also the key to providing structure, stability and psycho-social support to crises-affected children. However, the challenges, in terms of access, quality and achievement that the Haitian education system faced even before the earthquake, and the complex interface between the public and non-public provision of educa-

A young boy shows his drawing of his former home during a psychosocial support activity in Daniel Fignole Camp, Port au Prince. Over 19,000 children are now reached each day with recreation, sports and psycho-social support activities and through 78 “child friendly spaces” managed by Cluster partners.



tion mean that an extraordinary response is required. Given the overwhelming demand for education however, this is not only a priority –but an obligation to Haiti’s children.

Oxfam America recently published findings of a survey carried out in Haiti prior to the Donors’ Conference. Out of 1,700 persons surveyed in Leogane and Port-au-Prince, schools were ranked the second most consistent priority, falling just behind jobs (26 per cent) and far outpacing homes (at 10 per cent). An additional study, with a focus-group discussion methodology in both affected and non-affected *departements*, revealed that youth are “acutely aware that education is the key to knowledge and employment – but also to social mobility they currently lack”.

These studies and others provide evidence of an overwhelming popular cry not just for resumption of schooling (at pre-quake levels)– but for a comprehensive “overhaul” of the system to expand, improve and standardize the curriculum and quality for all children. Fortunately, this groundswell is, for the

first time, coupled with strong and visible political will, as well as the potential to mobilize significant resources for the transformation. Reinforcing the priorities of the national plan, President Préval of Haiti, at the New York Donors Conference, said that education would be the radical pre-requisite for the reconstruction effort, adding that without education there could be no development.

With this in mind, a nationwide **movement for learning** will be launched in Haiti that will form the centrepiece of the education response. In line with the Ministry’s strategy for short-term emergency response and long term transformation, the For additional details, see the Education section.

**The official logo for the Government-led movement for learning “Metè men pou tout timoun ale lekòl”**



## FINANCIAL RESOURCES

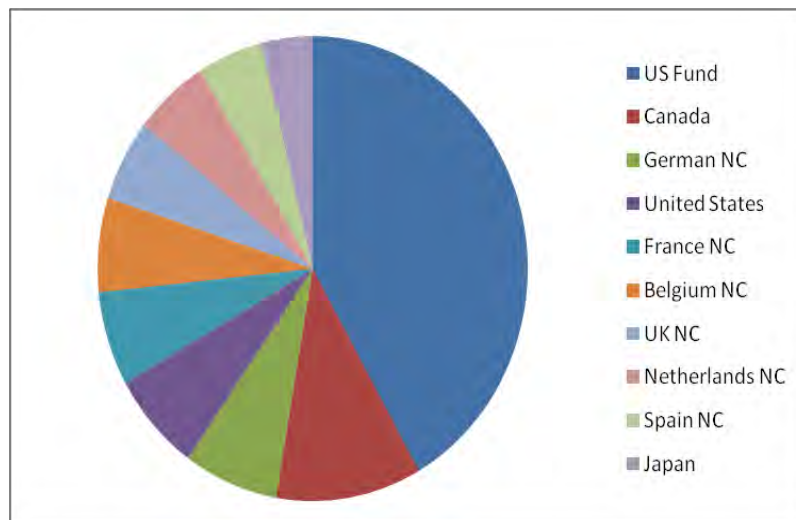
In the immediate aftermath of the earthquake, the UN and partners launched a Flash Appeal totalling US\$575,010,654. UNICEF's portion was US\$127,975,000, representing 22 per cent of the overall Flash Appeal (the second largest component next to WFP).

Since the launch of the appeal, UNICEF has revised its requirements based on more accurate assessments of immediate needs, the requirements currently stand at US\$222,752,000. UNICEF's response activities in the Flash Appeal have received strong support, with over US\$186.6 million received as of 31st March 2010.

UNICEF would like to acknowledge the generous contributions of its public and private sector donors. More than two-thirds of the contributions have been received from the private sector so far, with the public sector providing the remaining funds.

UNICEF is sincerely grateful for all contributions to help support women and children in Haiti during this time of urgent need. UNICEF would particularly like to acknowledge the donors who have provided funds into "thematic pools" - 70 per cent of the contributions (US\$ 131.4 million) has been received thematically enabling UNICEF to direct the flexible funding to meet the most urgent needs.

### TOP DONORS

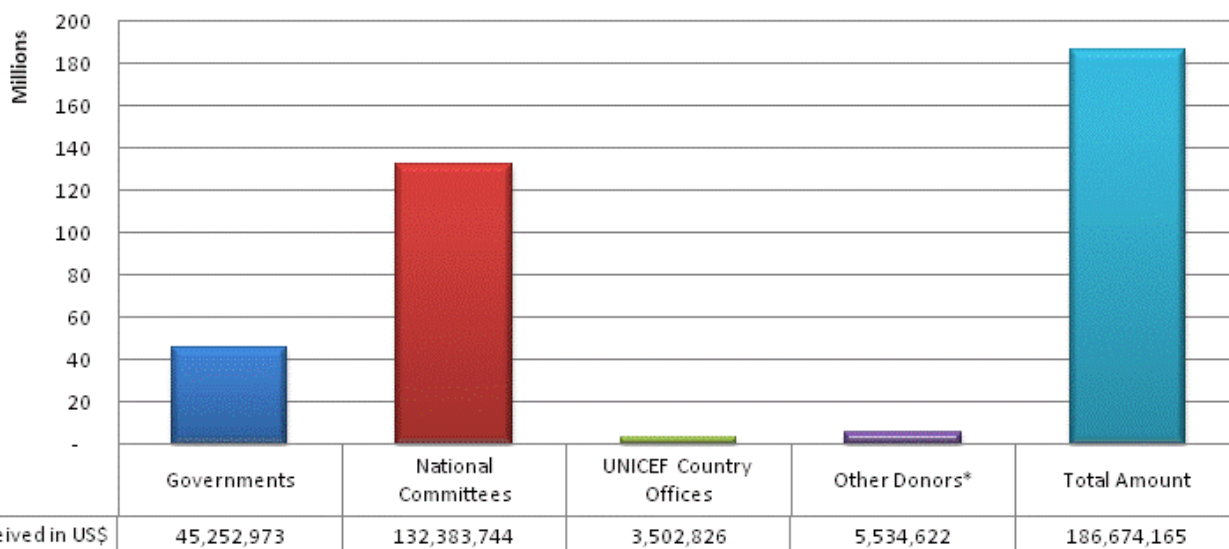


The top ten donors for UNICEF's humanitarian action in Haiti against the Flash Appeal include:

- U.S. Fund for UNICEF \$53.93 million;
- Government of Canada \$14.16 million;
- German National Committee for UNICEF \$9.2 million;
- Government of the United States at \$9 million;
- French National Committee for UNICEF \$8.48 million;
- Belgian National Committee for UNICEF at \$8.46 million;
- UK National Committee for UNICEF \$7.38 million;
- Dutch National Committee for UNICEF \$7.22 million;
- Spanish National Committee for UNICEF \$6.32 million;
- Government of Japan \$5 million

### Humanitarian Funds Received for Haiti

as of 31st March 2010







**FOR MORE INFORMATION ABOUT UNICEF PROGRAMMES IN HAITI:**

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