

Mid-Term Review of UNICEF Emergency Programmes 2001-2003

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Abstract:

This paper is a midterm evaluation of UNICEF's programmes in the emergency sector between January 2001 and July 2003. It provides a brief summary of the overall emergency situation in Vietnam, with an emphasis on natural disasters, in particular floods and storms. The summary also highlights the current state of disaster management work by both government and non-government actors in Vietnam. After reviewing the goals and objectives of UNICEF's emergency programming and the significant women's and children's rights addressed, the review methodology is outlined. The major findings of the review focus on the interventions in the sectors of Child Protection, Education, Health and Nutrition, and Water and Sanitation, while also highlighting the contributions of the Planning, Operations, and Communications sections. Recommendations are provided both on the sectors above as well as on the overall management of the Emergency Team and UNICEF's long-term strategy in the emergency field.

Key words: children, child protection, coordination, disaster, education, emergency, flood, health, Mekong delta, mitigation, preparedness, relief, response, sanitation, storm, Vietnam, water, women.

1. Introduction (Executive Summary)

UNICEF has implemented a wide range of emergency programming over many years, aiming to ensure that women and children's basic rights are ensured during emergency situations in Vietnam. As part of the current 5-year program planning cycle, a mid-term review (MTR) is being conducted to assess progress during the period 2001 – mid 2003 and to provide recommendations to strengthen programming through 2005. The MTR for UNICEF's emergency programming was conducted by an outside consultant, who reviewed existing documentation and had discussions with staff working directly with emergency programming.¹

In the context of increasing efforts in the area of emergencies by the Vietnamese government and other international organizations, UNICEF has been able to strategically position itself to implement a wide range of programs that not only address disaster-affected children and women's rights and immediate needs, but also complement other organizations' interventions and create links to ongoing development programming, which in turn help build capacity for more sustainable management of natural disasters in Vietnam. Over the past 2.5 years, a complete management structure for the planning, implementation, monitoring and evaluation of multi-sectoral emergency interventions has been introduced which has been successful in facilitating the delivery of timely and high quality interventions in the face of the flood and storm disasters which have struck central and southern Vietnam since 2001.

A wide range of activities in the areas of Child Protection, Education, Health and Nutrition, and Water and Sanitation, have been realized by the efforts of staff members in those sections as well as the contributions of the entire UNICEF team in both northern and southern Vietnam in areas such as Planning, Operations, and Communications. The breadth of UNICEF's interventions is difficult to summarize: support has been provided to childcare centres, schools, health centres, and households; to groups of women, local disaster management professionals, school children, and doctors; in the form of material contributions ranging from food to water purification equipment, and capacity building on topics ranging from child protection to intensive healthcare in emergency settings. UNICEF has provided immediate relief, contributions towards rehabilitation, and support for preparedness activities.

While the results to date have been impressive, UNICEF remains committed to continually improving programming. Areas for improvement identified by UNICEF staff range from macro strategic considerations on the relative emphasis on relief versus preparedness to micro-level comments on selecting more diverse and durable toys for recreation kits. While many of these recommendations are already being integrated into activities planned for 2003, a comprehensive review by an external consultant is helpful in consolidating the various recommendations and presenting them a format that facilitates tracking and implementation. It is anticipated that many of the recommendations contained in this MTR will be integrated into UNICEF's Emergency Preparedness Plan (EPP) for 2003-2005. This will help ensure that UNICEF continues to be a driving force for the sustainable attainment of women and children's rights both in emergencies and, by extension, in Vietnam's ongoing development process.

¹ Due to time constraints and the nature of emergency work, it was not possible to conduct field visits specifically for this MTR, although many of the facts and observations contained in this document come from field visits conducted by UNICEF staff.

2. Background – The Context of Emergency Programming in Vietnam²

Vietnam is a relatively disaster-prone country. While there are a wide range of natural disasters, the most important disasters in Vietnam over the past 10 years have been water-related disasters, in particular storms and floods. UNICEF regularly updates a profile of ongoing and potential disasters, in which the only emergencies with the top rating of 5 that are not water-related are not addressed under emergency programming.³ Due to the pre-eminence of water-related disasters, the vast majority of capacity and interventions focus on this area. There are however emerging threats of new types of disasters, many of them linked to increasing development and urbanization. These include amongst others forest fires, contamination of water sources, and droughts.

The actors operating in the emergency field in Vietnam are diverse, including government agencies and mass organizations, United Nations agencies, and INGOs. The period 2001-2003 has been marked by a dramatic increase in the type and number of disaster management interventions, moving from an initial focus on short-term response towards a more holistic approach encompassing mitigation, preparedness, response, and rehabilitation. The UN DMT of which UNICEF is an active member is one illustration of the increase in coordination between international agencies, although coordination on the government side remains weak. A number of recently completed and currently ongoing research projects by UNICEF and other agencies are helping inform more relevant and effective disaster programming. This is indicative of a wider trend of focusing on preparedness and the integration of emergency work into ongoing development programs. Perhaps single the most important of these measures has been the government's adoption of a policy of large-scale relocation of vulnerable communities to 'residential clusters' that are in protected areas. A small number of organizations including UNICEF has increasingly taken a rights-based approach to disaster programming.

Despite all these efforts, disasters continue to threaten the achievement of MDGs in Vietnam generally, and pose a particular risk to women and children. In this context, UNICEF has emerged as one of the major actors in the emergency field in Vietnam, with multi-sectoral programming that addresses the key threats to children and women's rights posed by disasters.

3. Goals and objectives

The overall goal of UNICEF's emergency programming in Vietnam is that "children and women's survival and well-being (fulfilment of their basic rights) is assured in emergency situations."⁴ In order to achieve this goal, UNICEF's conceptual framework for emergencies identifies 3 objectives:

1. High level of preparedness achieved for early warning and rapid response
2. First initial survival response provided to effected families in an effective / timely manner
3. Long-term recovery/rehabilitation supported under regular CP.⁵

While there are a number of different emergency situations in Vietnam, some 'on-going' emergencies such as UXOs or HIV are addressed through regular development programming. While efforts are made to mainstream all emergency efforts into development programming, the programs covered in this review aim to address anticipated but non-continuous emergencies such as natural disasters, with a particular emphasis on floods.

² The information in this section is taken from the "Literature Review of the Emergency Sector in Vietnam, 2001-2003", conducted by the author in preparation for this MTR. (see Appendix 1) Issues of relevance to particular sectors are addressed in the Major Findings section.

³ They are UXOs and HIV. "Vietnam: Emergency Profile – Year 2003." (see Appendix 2)

⁴ UNICEF. Emergency Response and Preparedness Plan for Flood Emergency Year 2001-2003. p. 3

⁵ UNICEF. Emergency Preparedness and Response – UNICEF Vietnam. (see Appendix 3)

In addition to the UNICEF's Vietnam emergency programming, there is the wider context of UNICEF's Core Corporate Commitments (CCCs) in emergencies, and the recent developments in June 2003 at second global consultation ('Martigny II').⁶ The CCCs for Emergencies contain a large number of items relating to children in armed conflicts which are less relevant in Vietnam. However they also contain commitments to employing a rights-based approach, advocating with governments, strong coordination with other agencies, and transitioning to community-based development programs. The recommendations contained in this MTR seek to highlight ways in which UNICEF Vietnam can strengthen implementation of these CCCs. Martigny II has just recently provided clarifications and further development of the original CCCs, which will be helpful to all sections (and in particular CP) in planning interventions for the 2003-2005 period.

4. Significant women's and children's rights addressed

The various emergency programs implemented by UNICEF aim to address a wide range of women's and children's rights, ranging from the right to survival and health to the rights to education and participation. As much as possible, UNICEF takes a rights-based approach to emergency planning, given that the fundamental rights contained in documents such as the Universal Declaration of Human Rights, the Convention on the Elimination of all forms of Discrimination Against Women, and the Convention on the Rights of the Child continue to be as valid during emergencies as during 'normal' periods. Specific details are noted in the relevant sections below as appropriate.

5. Methodology

UNICEF's emergency programming takes place primarily in central and southern Vietnam, and takes place primarily during the 'disaster season' which begins in September and ends in November/December. Because this MTR is being conducted in July, and due to time constraints, it was not possible to conduct field visits to directly evaluate the emergency programs. Rather, this review makes use of the various studies, evaluations, and over 30 trip reports filed by UNICEF staff over the past years to evaluate the results of the past 2.5 years. In addition to reviewing internal UNICEF documents, the programs are also evaluated in the overall context of emergency programming in Vietnam with which the author, an external consultant, is professionally familiar. One additional constraint to note is that due to delays in 2003, emergency activities for the year have only just begun and thus little information is available on activities in 2003.

6. Major findings

i. Overall management

Because UNICEF's emergency work is multi-sectoral and requires more rapid implementation than ongoing programming, a special management structure has been put into place. This consists of an Emergency team with 1-2 representatives per section, with the additional long-distance participation of Ho Chi Minh City-based staff, headed by a coordinator. The team meets approximately once a month outside of emergencies, and weekly (or more frequently if required) during emergencies. Overall, the management system has enabled UNICEF to effectively manage a wide range of effective emergency programs. Information sharing is adequate, as is coordination with other agencies in Vietnam through fora including the UNDMT and the DMWG, and with

⁶ UNICEF. UNICEF Core Corporate Commitments in Emergencies. (E/ICEF/2000/12).
UNICEF. Overarching Issues for Discussion at Martigny II. (draft 12/06/03)

UNICEF regional and headquarters offices. It was noted that communication and exchanges at the regional level could be strengthened and better institutionalised.

Staff development is an important aspect of effective overall management, and staff are provided opportunities to build their skills in management of emergency programs; various UNICEF staff have attended workshops both in the region and within Vietnam on topics ranging from general Emergency Preparedness to SPHERE standards and their application in Vietnam.

Perhaps the area of greatest concern in overall management is finance. While enough funding was available for programming in 2001, there have been shortfalls in 2002 and 2003. Although this is reflective of a wider trend, there may exist a potential for UNICEF to pursue more funding opportunities with various donors including AusAid and ECHO who have funded UNICEF in the past, as well as exploring new possibilities. Current plans are for sections to allocate a minimum amount of their 'regular' budget for emergency activities in order to cover at least 50% of the planned UNICEF-wide total for each year.

It should be noted that while this report covers the period 2001 – June 2003, very little information is available for activities in 2003. This is due to the fact that UNICEF's PPA for 2003 was approved in July, thereby delaying implementation of all activities. The various sections are making strenuous efforts to implement the maximum number of activities in the remaining 5 months while ensuring that minimum quality standards are met.

ii. Overall strategy

UNICEF's current goal, as stated, tends to emphasize response or relief activities given the focus on upholding rights and meeting needs in emergencies. This has to a large extent guided UNICEF's response since 2001, and has been appropriate given the weakness of local and national actors' response in the late 1990s and early 2000s. In addition to the overall goal, there are 2 additional key elements to the strategy: a focus on flood emergencies, and an attempt to 'mainstream emergency preparedness and response in PPA.'⁷

The decision made in 2000 to focus on floods has proven to be far-sighted. Since 2001, the most notable emergencies have all been floods in the Mekong Delta. Focusing resources on floods has enabled UNICEF to provide integrated support covering the sectors of Child Protection, Education, Health, and Water and Sanitation to a small number of severely affected provinces and districts, in particular An Giang, Dong Thap, Kien Giang, Long An, and Tien Giang. In addition to the much needed relief provided, this focus has enabled UNICEF to implement a number of preparedness initiatives, including a number of capacity building initiatives such as training courses for teachers on Disaster Preparedness and Response and training on Child Protection for key provincial actors. While the government's policy of relocation presents a number of challenges, it also represents an opportunity for focused investments that can reach a larger number of people.

While there have also been more localized emergencies including various storms affecting the central provinces, flash floods in Ha Tinh and Nghe An in the fall of 2002, and a drought affecting the central highlands in 2003, the impact of these have been far smaller than that of the Mekong Delta flooding. It should be noted that the focus on floods has not prevented UNICEF from providing significant support to the central provinces as well as Nghe An and Ha Tinh, particularly in the fields of water and sanitation and education. UNICEF also sent a team to analyse the drought situation, although the team did not recommend any emergency interventions.⁸ The

⁷ Ibid.

⁸ UNICEF trip report. 22-26 May, 2003. VTNB/2003/0000061

wisdom of UNICEF's decision to focus support on the Mekong Delta and several storm-prone central provinces has been borne out by events since 2001.

One point to note is that with the major floods experienced in 2000, 2001, and 2002 in the Mekong Delta, this type of emergency is beginning to be viewed by many as a more 'chronic' phenomenon. As both the government and other agencies have focused on floods for the past few years, capacity has been greatly increased and the impact of floods has been significantly mitigated. Perhaps one of the clearest indications of this is the rapidly declining number of child drowning cases recorded from close to 300 in 2001 to 148 in 2002. This has largely been attributed to the strategy of Emergency Day care Centres (EDCs), to which UNICEF has provided extensive support⁹. As immediate relief and protection needs are increasingly met, it may be more appropriate to focus more on longer-term preparedness and mitigation efforts. It may also make sense to begin to build capacity in other areas in anticipation of the increasing probability of new types of emergencies, as indicated in UNICEF's 'Ongoing and Potential Emergencies' document.

As previously noted, the mainstreaming of emergency work into ongoing development programs, this is a trend observed not only within UNICEF but within the disaster management community in Vietnam and worldwide. While initial efforts have been made in this direction, additional areas for potential mainstreaming exist and are highlighted in the sectoral sections below. There is also the potential for greater multi-sectoral collaboration.

A key issue which relates to both of these ideas is the government's policy of relocation clusters / resettlement areas. While these represent a long-term solution for some disaster-prone communities, concerns have been raised about the way in which resettlement has been conducted. While this can be viewed as a challenge, it also represents an opportunity for UNICEF to advocate with the government for increasing the voluntary participation of community members at all stages of the process, and improvement of the facilities provided in these locations. While UNICEF should take care not to lend support to government policies which may be coercive, it makes sense for UNICEF to engage with the government to improve the way in which this process is being carried out, which will have the additional impact of raising awareness and understanding of children and women's rights, and how they can be better upheld in reality.

Finally, UNICEF may also consider explicitly addressing in the strategy the implementation of projects targeting particularly vulnerable groups including disabled children, and mobile populations that are not on the communes' 'lists' through which aid is normally distributed.¹⁰

iii. Planning, Monitoring and Evaluation

UNICEF has adopted 3 principal means of monitoring and evaluation of emergency programs. The 1st is the regular field visits made by the Assistant Project Officer – Monitoring based in Ho Chi Minh city, as well as a number of sectoral staff from Hanoi. The 2nd method is internal evaluations of activities and materials based on field visits and observations of UNICEF staff members¹¹. The 3rd method has been the conducting of field studies / research into particular topics, for example the evaluation of UNICEF's support to EDCs through recreation kits. All 3 methods generally involve observation, meetings with authorities and beneficiaries, and clear sections on lessons learnt and recommendations. As a whole, the body of information contains a wealth of qualitative information which can be used both for monitoring and evaluation purposes.

⁹ See below for more details.

¹⁰ See the Literature Review of the Emergency Sector in Vietnam, 2001-2003. p. 4, 7.

¹¹ These have been summarized in an excel file: Internal Review 2.xls, which not only documents lessons learnt but also provides specific references for trip reports relating to each topic/intervention.

The regular field visits appear to be largely sufficient for monitoring program activities in the Mekong Delta: they provide information on the progress of interventions, note clearly when problems or irregularities occurs, and provide helpful recommendations. Because UNICEF does not have staff based in central Vietnam, less information is available about project activities in these provinces where UNICEF primarily relies on government partners for monitoring. Occasional monitoring trips have shown that projects in central Vietnam are generally implemented to the same standard as those in the south.

The process of evaluating emergency programs is challenging. There appear to have been several factors contributing to the difficulties in evaluation. The first is a lack of baseline data on the communities being targeted, and therefore baseline indicators in the key areas of UNICEF's interventions. This lack of data makes it difficult to provide a quantitative evaluation of the impact of UNICEF's interventions. While emergencies are often unpredictable, making baseline studies in disaster-prone areas such as the Mekong delta would be consistent with the CCCs. Another way to improve evaluation would be to more systematically use SPHERE indicators for relevant interventions. UNICEF staff's attending the SPHERE workshop in Hanoi in June 2003 is a good first step in this direction.

Another challenge to evaluation is that it is difficult to plan for emergencies, and changing situations mean that actual activities often cannot be easily compared with planned activities. UNICEF had an Emergency Preparedness Plan (EPP) for the period 2001-2003, however it lacked detail and not all sections were represented. While it was reported that each section updated the plan yearly, these updates were not clearly recorded, and it was unclear whether the sections coordinated with each other during the updating process. It also appears that there was little coordination with other UN agencies in planning. Many of these challenges have been recognized, and UNICEF is currently taking steps to address them in the planning process for 2003-2005. It has been decided to integrate plans for 'catastrophic' emergencies into the regular planning process as opposed to treating them separately as was initially envisioned, which should also help strengthen the planning process.

Annual reporting of emergency programmes has been consistent, with a section devoted to emergencies in the 2001 Annual Report, and a consolidated report entitled "Emergency Task Force Inputs for Annual Report 2002" in 2002, detailing UNICEF's interventions and lessons learnt during that year. It was unfortunate that the report did not report against activities planned in the 2001-2003 plan. Another weakness was that quantitative data on UNICEF's activities was not uniformly reported, resulting in some gaps in the data. While overall annual reports are readily available, many of the individual interventions do not have reports associated with them.

The issue of situation analyses, which may provide a valuable source of both quantitative and qualitative information of use in evaluations, has not been discussed. While some reports of situation analyses are available, they tend to be more qualitative than quantitative in nature. In addition, the information they contain does not appear to have been used in reporting on emergency interventions. UNICEF has provided the Disaster Management Working Group (DMWG) with rapid assessment forms that were used as input into the Joint Assessment checklists. UNICEF has recently signed a letter of intent to participate in these Joint Assessments, which should provide additional information on emergency situations.

iv. Program support / Operations

Program support and operations are often critical in the implementation of emergency programs where the logistics required are significant and the conditions very difficult. The various sections have evaluated the efforts of the Program support/ Operations team very positively. This support

begins with the administration and finance teams, which have taken steps including ensuring that funds are available in the relevant accounts, speeding up disbursements for rapid response activities, and assistance with various administrative work ranging from contracts to reports.

The supply section in particular has played a critical role in the procurement, storage, pre-positioning, packaging, and delivery of emergency materials in the north, centre, and south of the country. This section has also contributed to reducing costs by negotiating free warehousing in Da Nang and discounts on school textbooks for the Mekong Delta. Assistance was also provided to other sections in areas ranging from monitoring and evaluation to the development of specifications for water filters. The supply sections participated in the upgrading of the medical boats (see Health and Nutrition) as well as the production of child protection materials (see Child Protection).

Communications are also essential in emergency settings, and all of the sections have been equipped with mobile phones. Each section also has a laptop, although it was noted that the 1 laptop in the Ho Chi Minh City office may not be sufficient to meet all needs, particularly when extended field trips take place during emergencies. Although both Hanoi and Ho Chi Minh city offices have Satellite phones, many of the relevant staff have yet to be trained in their use.

In addition to the staff capacity building already discussed, UNICEF staff ranging from program officers to drivers have all received training on security in the field and during emergency situations. The supply section has also received training to improve warehouse management.

v. Child Protection

Despite the lack of clarity in UNICEF's CCCs regarding Child Protection in natural disasters and the lack of a long-term plan for 2001-2003, the Child Protection (CP) section was able to develop annual plans and implement a variety of activities in support of emergency work during this period. UNICEF has sought to better inform CP work through various means, including situation assessments, field visits, and workshops. A workshop in 2002 brought together 115 children, adults, and representatives from the 5 Mekong Delta provinces to explore issues of floods and child protection. The workshop encouraged child participation in order to give children the opportunity to voice their ideas and concerns on this topic to key policy makers. The workshop was followed up by a training for 24 master trainers from these provinces, who then went on to train 400 other CP actors to building their capacity to protect children from the impact of floods.

The CP section has also collaborated with the IFRC to develop IEC materials on 6 key flood child protection topics. 60,000 copies of these materials were distributed to schools to raise the awareness of teachers, students, and parents on this major threat to children. UNICEF and the Save the Children Alliance are both conducting further research on the specific risks that lead to child drowning which is expected to inform further efforts centred on building families' capacity to protect their children from drowning.

The CP section also conducted research on the previously unexplored issue of the psychosocial impact of child drowning on families and children in Dong Thap province in April 2002.¹² The study found that while there were isolated local attempts to address psychosocial stress, there remains a strong unmet need for support. The main recommendations were that UNICEF conducts trainings on psychosocial support for teachers and local agencies providing support to families, as well as the development/translation of materials that could be provided to families and children.

¹² UNICEF. Psychosocial Impact of Child Drowning Deaths in the Mekong River Province of Dong Thap.

Perhaps the most prominent activity consisted of providing recreation kits to EDCs in both 2001 and 2002, with a total of 1044 kits distributed to EDCs in An Giang, Dong Thap, and Long An provinces. UNICEF conducted an evaluation of the impact of these recreation kits in November 2002¹³, which found that the kits were positively received by both children and caregivers. The evaluation also collected feedback on a number of specific issues relating to the contents of the recreation kits, and recommended changes which would ensure that the kits better meet the different needs of the different age groups represented at the EDCs.

The evaluation also made recommendations on how other sections could support the EDCs and suggested possible materials from other sections that could be included in the kits. The point was made that these centres offer a unique opportunity to reach children, caregivers, and parents with messages relating to children in floods. The evaluation posited that support to EDCs could be mainstreamed into regular Early Childhood Development programming, a view echoed by documents of the Save the Children Alliance, which has implemented a pilot project supporting flood-proof kindergartens which act as EDCs during flood times.¹⁴

Perhaps the most innovative activity has been the provision of micro-credit loans to 800 women in An Giang and Dong Thap in order to help them recover from the impact of floods and to ensure that their children remain in school. This intervention seems particularly relevant given the widespread documentation of usurious lending during and immediately after floods which contributes to the vicious circle of debt and poverty.¹⁵ A preliminary report indicated that the loans had achieved the desired results with 95% of children returning or remaining in school and the women's self-esteem being greatly increased. A final report found that while the program had some weaknesses, it had largely been successful in decreasing school dropout rates.¹⁶

Generally, the interventions of the CP section appear to have made a significant contribution to ensuring that children's right to survival and development are upheld. As ongoing efforts by UNICEF and others continue to reduce the number of children losing their lives in floods, the CP section may intensify the process of addressing other child rights issues, which it has already begun to explore with the psychosocial study, the micro-credit project, and the proposed link between EDCs and ongoing education. The CP section may also continue the trend begun with the psychosocial impact study of investigating hitherto unknown areas by conducting research on other areas relating to child protection. Finally, there also appears to be a need for the evaluation of the effectiveness of life jackets, as there has been concern over their appropriateness and safety.

vi. Education

The Education section of UNICEF has provided support both to schools and directly to teachers and students affected by disasters in central and southern Vietnam. In 2001, support was provided to 40,000 students and 1,600 teachers including school bags, pens, pencils, notebooks, and other stationary items. While small problems with the school bags were recognized early on, this problem was quickly corrected and did not affect later distributions. Monitoring trips also revealed that Provincial Education services had not received appropriate instructions, and therefore not all students were receiving a complete 'set' as had been originally intended. Despite these difficulties, this support was widely appreciated by provincial officials, teachers, and the students themselves.

¹³ UNICEF. An Evaluation of UNICEF's Support to Emergency Day Care Centres through Emergency Recreation Kits.

¹⁴ See the Literature Review of the Emergency Sector in Vietnam, 2001-2003. p. 7.

¹⁵ See the Literature Review of the Emergency Sector in Vietnam, 2001-2003. p. 4.

¹⁶ UNICEF. Assessment of Credit and Savings Activities for Poor Women

In addition to providing emergency school supplies, the Education section also provided a Cash Assistance to the Government (CAG) to repair 1400 classrooms and replace 3314 sets of classroom furniture damaged in 5 Mekong Delta provinces. This intervention was generally successful, although the quality of work in 1 province was insufficient. It was decided to discontinue this type of support due to increased government investment in schools and concerns with the long-term sustainability of this approach.¹⁷

In May 2002, emergency education kits were provided to schools in Long An, An Giang, and Dong Thap in advance of the floods. However, given that schools changed the academic calendar in anticipation of closing during the flood season, it was decided that these types of materials would be better implemented through ongoing education programming. Support was also provided to Nghe An and Ha Tinh following a storm, and to Dong Thap and An Giang following the floods. This consisted of stationary and learning materials for teachers and students. The inclusion of child rights information on the inside covers of school notebooks was an innovative way to raise awareness of child rights in Vietnam. This support also included the materials on how to prepare for disasters developed by the IFRC for parents and children. This aid benefited a total 10,000 students and 400 teachers in the 4 provinces.

One new activity implemented in 2002 was training for 210 key teachers in 5 Mekong Delta provinces on disaster preparedness and response. The training successfully combined materials from the Vietnam Red Cross with the UNICEF/IFRC materials on children in floods. The training was judged a success, and it was noted that the trainees could provide training on the subject to other teachers in their provinces. It was recommended that these trainings be expanded in future years with more localized content.

Another recommendation which came out of these trainings was the need for additional community and school-based IEC materials, particularly those with simple messages and attractive illustrations. It may be appropriate for the Education section to coordinate with the CP section on developing some of these materials. There may also be significant possibilities for collaboration with the CP section on mainstreaming of EDCs with ECD programming.

While support to evacuation areas / resettlement clusters needs to be approached cautiously (see above), the right to recreation is often closely linked to education and is often cited by children as one of the things most lacking during emergencies. If the decision is made to provide support to these areas, the Education section might consider providing support to schools and supporting the creation of safe recreation areas for children.

In general, support to schools should remain one of the linchpins of UNICEF's emergency preparedness efforts just as EDCs have proven central to response. As previously noted, schools provide an ideal site to reach teachers, parents and children with prevention messages, and schools are increasingly being used as safe havens during disasters as the government continues to upgrade them.¹⁸ While there are indications that UNICEF's aid to students helps reduce drop-out and poor performance post-disaster, this impact needs to be more thoroughly documented. In addition to ongoing provision of IEC materials, the Education section may consider introducing additional interventions in schools which are more interactive and enable students to explore issues of disasters in their own localities more proactively.

The Education section has faced challenges ranging from changing government policies on the timing of the school year to slow distribution of assistance by provincial partners. Despite these difficulties, the assistance provided by this section has been among the most widely recognized

¹⁷ Internal Review 2.xls

¹⁸ See the Literature Review of the Emergency Sector in Vietnam, 2001-2003. p. 7.

assistance in the emergency field, and is fully consistent with UNICEF's CCCs. If the Education section can continue to develop new interventions, increase links with ongoing development programs, and integrate feedback on issues such as the contents of school aid and distribution mechanisms, it will continue to make important contributions to UNICEF's emergency work.

vii. Health and Nutrition

UNICEF's Health and Nutrition section has implemented a wide variety of health-related interventions over the past 2.5 years ranging from the provision of medicines and equipment to trainings to build the capacity of healthcare providers. While the record of assistance delivered is impressive and the team has been quick to implement recommendations on improving programming, more information on the impact of these interventions would be helpful. This section has also proven effective in prioritising key needs and adjusting plans based on the necessities of the situation on the ground.

The Health section has provided a total of 1550 drug kits to commune health stations (CHS) in both 2001 and 2002, with an additional 400 kits having been procured for use in 2003. These medicines were critical to enable local health providers to serve poor clients affected by floods free of charge. Research has shown that the poor greatly appreciate free medical care in disaster periods as this helps them avoid becoming even more destitute due to the costs of treatment.¹⁹ In all but one case the drugs were being freely used to treat poor patients, and the one exception was due to a misunderstanding that was immediately rectified. The majority of the drugs were reported to be quite useful, although it was recommended that Vitamin A and Chloroquine be removed as they are either available or not needed, and there were requests to add medicines for skin and eye diseases. These changes have been incorporated into the kits procured for 2003. In addition, feedback was received that clean delivery kits, 5,730 of which had been provided in 2001, would not be required in future years.

The Health section also procured intensive care equipment to District Health Centres and Hospitals in the 5 Mekong Delta provinces and to central provinces affected by typhoon Lingling in 2001. Additional equipment was provided to An Giang and Kien Giang in 2002, with a total of 18 sets being provided over the 2 year period. Field visits conducted to various provinces in 2001²⁰ found that most equipment was being frequently used and reported that health staff were very thankful for the equipment, given that many District Health Stations become cut off from Provincial Hospitals in disaster situations. In addition to widespread requests for an additional piece of equipment (Pulse Oxygen Meter), it was also reported that some of the equipment provided could not be used as the health staff had not been trained or had received insufficient training. Trip reports and the 2002 Annual report both recommended that additional training be organized in 2003 in order to ensure that equipment is put to full use, and these trainings are planned for 2003.

In 2001, UNICEF provided 100 motorized composite boats to CHSs in the 5 Mekong Delta provinces. While they were reportedly used very frequently to transport medicines and visit patients, one concern was that they were small, making transportation of seriously ill patients difficult. One of the key interventions of the Health section has been the provision of 7 medical boats to the Mekong Delta in 2001, and their subsequent upgrading and resupplying in 2002. The fact that other organizations such as CARE have also provided similar boats highlights their perceived efficacy in addressing both the normal health needs of inaccessible communities in the delta as well as providing health services during floods. Problems with the engines reported in 2001 were addressed by upgrades in 2002. 200 life jackets for the medical boats were also provided. Field visits during the flood season found that the boats were serving a large number of

¹⁹ See the Literature Review of the Emergency Sector in Vietnam, 2001-2003. p. 6.

²⁰ See for example VTNA/2001/00000683, VTNA/2001/00000491.

clients, although efforts are continuing to improve the overall management and operation of these boats in both emergency and normal periods.

The World Health Organization has recently positioned a disaster specialist in the Hanoi office, and it is anticipated that the WHO will be increasingly active in this field in upcoming years. This presents an opportunity for UNICEF to expand disaster management collaboration with yet another UN agency, and to further improve on the solid foundation of the past 2.5 years of health programming in disasters.

Unfortunately, UNICEF has yet to implement activities relating to emergency nutrition. While child malnutrition is a serious issue in Vietnam with over 30% of children under 5 reported as malnourished, nutritional status often deteriorates even further in disaster settings. While no research has been conducted on this issue in Vietnam, various field visits and documents point to worsened diet and nutritional status of children.²¹ Given that UNICEF has various nutrition interventions in normal programming, it is well positioned to take the lead in this area. Plans exist to begin exploring emergency nutrition in 2003.

viii. Water and Sanitation

Of all the sections, the Water and Sanitation section (WES) has perhaps the best quantitative records of the assistance they have provided. While there are no research studies or evaluations of WES activities, they have compiled an extensive internal review of the various different types of materials they have used since 2001, complete with full details of the number of units provided and a 5-point rating system.²² This document evaluates each of the supply items based the criteria of effectiveness, convenience, timely response, sustainability, user acceptability, and transportation.

Somewhat surprisingly, the intervention with the highest rating was the reparation and/or new construction of small piping systems for 148 households, which was conducted in 2001 but was not continued in 2002. A note recommends that this approach would be well suited for use in relocation areas, and this may be considered as a potential future intervention.

The second-highest ranking supply was 20-litre water filters for families in the Mekong delta, part of a large array of small scale water filters and water purification supplies supplied in 2001 and 2002 to health care centres, primary schools, EDCs, and households in central and southern Vietnam. In total, over 31,877 units of filters and 18,932 units of water purification chemicals have been supplied since 2001, a breakdown of which is in the above-cited document. These small scale supplies generally received medium to high scores on the evaluation scale, with the one exception being the 10 litre collapsible containers which were found to be too small for household use – their distribution was discontinued after 2001.

WES also provided larger water purification supplies in the form of 200 litre water filters to health centres and primary schools in the Mekong Delta (486 in 2002), and a total of 20 5-10m³ mobile water purification units to 8 Southern and 5 Central provinces in both 2001 and 2002. However these systems were reported to be less effective, for various reasons including dependence on hard-to-procure chemicals, a larger-than-needed production capacity, and limited mobility.

Regarding sanitation, a pilot of flush fish pond-connected latrines which can be used during floods was tested in 30 households in Long An in 2002. An evaluation of this pilot in collaboration with the Pasteur Institute is currently being completed, and initial results are promising. While there was a greater focus on water in 2001 and 2002, planned activities for June 2003 include the

²¹ See the Literature Review of the Emergency Sector in Vietnam, 2001-2003. p. 6.

²² UNICEF. Internal evaluation of WES emergency supplies.

construction of 650 pit latrine semi-septic tanks and 150 additional fish-pond connected latrines which are appropriate for use in resettlement areas. WES has also developed a design for child-friendly latrines, with feedback from the children themselves, which would be suitable for use in floods. The possibility of providing some of these latrines in relocation areas is being explored.

The ability to adapt to the situation on the ground is crucial in emergency work. While some additional activities were included in the 2001-2003 plan, they were not conducted because they were found to be unnecessary or were not prioritised by government partners. On the other hand, a number of the interventions described above were not contained in the plan but were devised to meet emerging needs. This flexibility is precisely what is often required in emergency settings.

The WES section has provided extremely significant emergency support in contexts where clean water and appropriate sanitation are rare even in non-disaster periods. While beneficiaries have appreciated this support, there is a lack of clear impact indicators. The lack of water and sanitation even during normal periods points to the need to mainstream these activities into ongoing development initiatives. The government's resettlement policy, as previously mentioned, does present the opportunity to make targeted and focused investments that can benefit a large number of people. Given that water and sanitation facilities are most frequently cited as being the greatest deficiencies of relocation areas, WES may consider targeting some of these areas if appropriate. WES may also consider mobilizing community contributions in some activities in order to increase sustainability and avoid the possible perception that the support provided is mostly 'handouts.'

ix. Communications

The communications section has actively carried out a variety of activities designed to bring community, media, and donor attention to the situation of children in emergencies in Vietnam, both nationally and internationally. These activities have included accompanying journalists and arranging media coverage of UNICEF's activities in the field, keeping donors and UNICEF New York/Geneva apprised of the situation in Vietnam, and various activities advocating for child rights. The resulting media coverage has raised the profile of UNICEF in Vietnam and has aided in mobilizing financial support to emergency work. The section also provided feedback to other sections on a number of IEC materials and kits, for example the 'Emergency School Kit' developed in 2002. The communications section also played a role in assessments and coordination with other disaster management actors.

x. Overall conclusion

The emergency programming implemented in the period 2001-2003 by UNICEF has reached thousands of children, women, and communities whose lives were overturned by floods, storms, and flash floods / mudslides. In addition to addressing their immediate needs, UNICEF has been able to build capacity for preparedness in order to reduce the impact of future disasters, as well as highlighting the continued relevance of rights in emergencies by adopting a rights-based approach. If UNICEF can build upon the foundation of the past 2.5 years' programming to strengthen and deepen interventions in the upcoming 2.5 year period, it will have made a great contribution towards the goal of ensuring that the basic rights of children and women in Vietnam are assured in emergency situations.

7. Recommendations

i. Overall Management

1. The management system put into place appears to be functioning well. The one area where there is clear room for improvement is in fundraising, where UNICEF should attempt to develop relationships with existing and new donors in order to mobilize greater funds for program implementation.
2. If time and capacity exists, it may be advisable to further institutionalise communications and exchanges at the regional level with EAPRO.

ii. Overall Strategy

1. UNICEF may wish to revise its overall goal in emergencies to include the aspect of reducing the risk of emergencies, with a particular focus on reducing vulnerability.²³ This is consistent with an increased focus on preparedness and mitigation, which fits into the overall pattern of mainstreaming emergency work into the PPA.
2. UNICEF should focus more on long-term preparedness and mitigation in flood emergencies. While there will be continuing needs for relief, these need are increasingly being met with local capacity. In contrast, the Mekong Delta continues to suffer from the long-term impact of the floods, the perpetuation of the cycle of poverty, poor health, low education levels, and lack of access to clean water. While UNICEF has implemented a number of preparedness initiatives, particularly with regards to Child Protection, a glance at UNICEF's conceptual framework reveals that the emphasis has been more on internal organizational preparedness rather than preparedness at the community level. An increased emphasis on preparedness would be consistent with the approach adopted by the government in the 2nd National Strategy and Plan for Disaster Mitigation and Management, as well as with the expressed needs of disaster-affected people in the Mekong Delta.²⁴
3. UNICEF should begin to build capacity and identify areas of concern for non-water related disasters focusing on women and children. While this will be of greater importance in the period 2005-2010, if UNICEF is able to begin examining this issue now, it will be well placed to address emerging threats in the long term.
4. UNICEF should increase efforts to mainstream emergency work into ongoing development programs, and to increase collaboration between sections. Specific recommendations are contained in the sectoral sections below, however it may be useful at an agency level to push for at least 1 or 2 components in each section which are multi-sectoral and/or take a developmental approach. This is consistent with the policies emerging from Martigny II.
5. UNICEF should use the difficulty surrounding the implementation of the government's policy on relocation / resettlement as an opportunity to engage with the government in order to improve understanding and implementation of rights-based approaches, thereby building the capacity of the primary duty-bearer in Vietnam. Assuming that concerns on these issues can be met, these areas represent a great potential for reaching a large number of people in a sustainable manner. Both advocacy and right-based approaches are key components UNICEF's emergency CCCs.

²³ In the disaster management field, it is understood that Risk = Hazard + Vulnerability. While it is unlikely that UNICEF will become involved in reducing hazards (in the UN system, this aspect is being addressed by UNDP), there have already been efforts to reduce vulnerability, primarily through non-structural interventions (preparedness).

²⁴ See the Literature Review of the Emergency Sector in Vietnam, 2001-2003. p. 3, 5.

6. UNICEF may wish to identify and implement appropriate strategies to reach particularly vulnerable groups including disabled children and mobile populations.

iii. Planning, Monitoring and Evaluation

1. While there have been no major problems to date, UNICEF should ensure that programmes in the central provinces are monitored and evaluated as thoroughly as those in the Mekong Delta in order to maintain quality and accountability.
2. UNICEF should ensure that in addition to annual reporting by the various sections, each major intervention is reported on individually. While some interventions have this type of report (for example the recreation kit support to EDCs), many do not. Ensuring reports are available will allow for clearer accountability and make it easier to determine the strengths and challenges of each intervention.
3. UNICEF may seek to gather baseline data in areas which frequently receive emergency assistance, including the 5 Mekong Delta provinces and certain central provinces.
4. UNICEF may seek to make the use of SPHERE indicators more systematic in planning, monitoring, and evaluation of many emergency interventions. Current documents contain few or no references to SPHERE, however the standards are particularly useful in situations where baseline data may not be available; they also contain standards on beneficiaries' rights which may serve as useful advocacy tools when working with the government. While the local context should always be considered, SPHERE represents a globally recognized target for minimum standards in emergencies.
5. UNICEF should attempt to strengthen its planning for the period 2003-2005. The planning should seek to coordinate with other UN agencies as appropriate. In addition, a clear mechanism for coordinating yearly sectoral updates of the plan should be established. It may also be advisable that the 2003-2005 plan begin to address selected non-water emergencies anticipated to have a significant impact on children.

iv. Program support / Operations

1. While the support provided by this section has been excellent, one area in which there may be room for further improvement is in communications. It would be helpful if staff received training in the use of the Satellite phones which are already available, while the Ho Chi Minh City office has noted that it lacks sufficient laptops for use during emergency periods.

v. Child Protection

1. The CP section should ensure that recommendations on improving the recreation kits for EDCs are followed-up. The section may also take the lead on encouraging other sections to contribute to the kits.
2. The CP section should make use of the upcoming results of the UNICEF and Save the Children Alliance studies on child drowning to design interventions at the community level aimed at continuing the reduction of child drowning deaths due to floods. If IEC materials are an option, collaboration with the Education section should be explored.
3. The CP section may consider further replication of the micro-credit program, on the condition that the problems raised during the assessment are resolved.

4. The CP section should make plans to follow up on the recommendations of the psychosocial impact study in the coming years. This is an area in which no other agencies are active and UNICEF is uniquely positioned to provide much needed assistance in this area.
5. The CP section should explore in collaboration with the Education section the possibility of mainstreaming support for EDCs into ongoing Early Childhood Development programs. This could be a model both of inter-sectoral collaboration and of UNICEF's commitment to 'mainstream emergency preparedness and response in PPA.'
6. The CP section may consider conducting research into other potential violations of children's rights in emergencies which have yet to be explored. Experience from issues of concern within the Southeast Asian region as well as from emergency situations around the world include domestic violence / corporal punishment, economic exploitation, drug abuse, and Sexual exploitation and abuse. These also correspond to non-emergency work currently being conducted by the CP section in Vietnam.
7. It may be of interest to conduct research into the safety and appropriateness of various different life-saving devices, including different types life jackets. This would help resolve questions previously raised about the provision of life jackets to children.

vi. Education

1. Support to teachers and students in the wake of disasters in the form of textbooks, notebooks, school bags, and other items has been greatly appreciated by beneficiaries. While some evidence exists that this support reduces drop-out rates and poor academic performance post-disaster, this impact should be more thoroughly evaluated and documented. Nevertheless, it seems clear that this type of support should be continued in future years as the need arises.
2. In addition to evaluating such support, the Education section should ensure that recommendations on changing some contents of the aid provided are taken into account, and that distribution of the aid happens in a timely manner.
3. As recommended in the internal review, more training for key teachers on disaster preparedness and response should be planned for upcoming years. Efforts should also be made to support those teachers to train their colleagues. It was noted that these trainings may be appropriate throughout the country, not only in the Mekong Delta.
4. The Education section may consider collaborating with the CP section on the further development of IEC materials focusing on children and floods.
5. The Education section should explore collaboration with the CP section on mainstreaming support to EDCs in ongoing early education programming (see CP section above).
6. Support to schools and for recreational facilities in relocation areas may be considered given that these child rights have yet to be realized in these areas.
7. Given the impressive range of IEC materials already available and/or in development, the Education section may consider exploring other, more fun and interactive school-based interventions. These might include contests, festivals, or other such events that encourage

students to more proactively explore and understand emergency-related issues in their community.

vii. Health and Nutrition

1. The Health and Nutrition may evaluate whether the additional equipment requested (Pulse Oxygen Meter) would be appropriate and if so to supply it to Hospitals and DHCs.
2. The requests by local health workers for additional training on the equipment provided by UNICEF should be followed up as planned in 2003, to ensure that equipment is being used and is being used correctly. In the future, when providing new equipment the Health and Nutrition section may further emphasize the assessment of the associated training needs.
3. The provision of 7 medical boats is a significant investment on UNICEF's part and is reported to have a great impact on the health of underserved communities in the Mekong Delta. The Health and Nutrition section should continue to work to improve the management and operation of these boats. It may also be advisable to conduct a thorough evaluation of these boats in order to clearly document their impact and to further feedback into the management improvement process.
4. In anticipation of WHO playing a more active role in the Health sector during emergencies, the Health and Nutrition section of UNICEF should coordinate closely with WHO both during planning and implementation stages in order to maximise program learning and take advantage of potential synergies in project implementation.
5. Although it has been suggested that issues of nutrition fall within the purvey of FAO, UNICEF appears ideally suited to assess the effect of disasters, in particular long-term flooding, on child nutrition, and to pilot appropriate interventions. It may be appropriate to coordinate with the FAO if this is an area in which they have experience. Plans to begin exploring potential nutrition interventions in 2003 should be carried through. Nutrition is specifically mentioned in points 3 and 4 of UNICEF's emergency CCCs.

viii. Water and Sanitation

1. The provision of small-scale water filters and purification materials on a large scale to households, education and health facilities is greatly appreciated. In the long term however, WES may consider measures to encourage community contributions to these efforts in order to improve sustainability and to prevent the potential development of a 'handout' mentality.
2. Past experience has shown that the larger water filtration units have been more problematic and have been less effective. Although they may be appropriate in certain specific circumstances, it appears that their use should be limited.
3. Given the strength of water projects, WES should continue efforts in 2003 to increase the number and scope of sanitation interventions. Sanitation remains a serious issue in disaster periods in both central and southern Vietnam, both at the household level and in locations such as EDCs.²⁵ Children and women in particular have specific sanitation needs which are often not met in normal circumstances, much less in disasters. There may be a potential for collaboration with the CP section in terms of providing sanitation support to EDCs.

²⁵ See the Literature Review of the Emergency Sector in Vietnam, 2001-2003. p. 5.

4. WES may attempt to develop indicators to measure the impact of interventions. Proxy indicators such as incidence of water-borne diseases, in particular diarrhoea, may help demonstrate the impact of both water and sanitation activities. SPHERE also has numerous indicators which may be appropriate. Studies of effectiveness such as the recently completed study on fish pond connected latrines help to determine how to improve projects and whether projects should be replicated on a larger scale.
5. Given the chronic lack of clean water and adequate sanitation in many of the areas where UNICEF provides emergency support, a link with long-term development of economically and environmentally sustainable water and sanitation solutions is key. Some of the existing emergency WES interventions, such as the small piping systems and flush latrine-fish pond model, may be a good start on this path, but this should be further developed. The possibility of investing in the government's relocation areas should continue to be further explored, given the potential for large impact, the clearly documented need, and WES' efforts to develop a number of models (e.g. child-friendly latrines) which would be suitable for use in these areas.

ix. Communications

1. Given the comprehensive and successful support provided by the communications section over the past 2 years, no specific recommendations exist beyond an encouragement to continue playing an active role in emergency work in coming years.

8. Acknowledgements

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10. Appendices

Appendix 1: Literature Review of the Emergency Sector in Vietnam, 2001- 2003

Appendix 2: Vietnam: Emergency Profile – Year 2003

Appendix 3: Emergency Preparedness and Response – UNICEF Vietnam. (conceptual framework)

Appendix 4: Map of UNICEF emergency program locations, 2001-2003.