

India

Consolidated Emergency Report 2018



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B. Table of Contents

Abbreviations and Acronyms	3
Executive Summary.....	4
Humanitarian Context	6
Humanitarian Results	8
Results Table	12
Results Achieved from Humanitarian Thematic Funding.....	26
Assessment, Monitoring and Evaluation.....	27
Financial Analysis.....	28
Future Workplan.....	31
Expression of Thanks	31

C. Abbreviations and Acronyms

ADSS: Alleppy Diocese of Social Service Society
AAP: Accountability to Affected Populations
AWC: Anganwadi Centres
CHASS: Changanacherry Social Service Society
CwC: Communicating with Communities'
CSI: Child Survival Intervention
C4D: Communication for Development
CFLG: Child Friendly Local Governance
CERF: Central Emergency Response Fund
CDPO: Child Development Project Officer
CSO: Civil Society Organisation
DRR: Disaster Risk Reduction
DDMP: District Development Management Plan
EPP: Emergency Preparedness for Response Procedure
EPF: Emergency Programme Fund
GPDP: Gram Panchayat Development Plan
HAC: Humanitarian Action for Children
HQ: Headquarters
IEC: Information, Education and Communication
IAG: Inter-agency group
ICDS: Integrated Child Development Services
IYCF: Infant and Young Child Feeding
JPPI: Janakiya Pankalithavum Punarnirmanavum Initiative
KWCD: Kerala Department of Women and Child Development
KILA: Kerala Institute of Local Administration
KSDMA: Kerala State Disaster Management Authority
KSCPCR: Kerala State Commission for Protection of Child Rights
LSGD: Local Self Government Department
MAM: Moderate Acute Malnutrition
MS-JDNA: Multi-Sector Joint Detailed Needs Assessment
MCP: Maternal and Child Protection cards
NIMHANS: National Institute of Mental Health & Neuro Sciences
PDNA: Post Disaster Needs Assessment
ROSA: Regional Office of South Asia
SOP: Standard operating procedures
SAM: Severe Acute Malnutrition
SHGs: Self-help Groups
SBCC: Social Behavior Change Communication
SCERT: State Council on Educational Research and Training
SSRP: Social Sector Recovery Plan
UNRCO: United Nations Resident Co-ordinator Office
UNDMT: United Nations Disaster Management Team
VCPC: Village Child Protection Committees
WASH: Water, Sanitation and Hygiene

D. Executive Summary

In 2018, the Southern Indian State of Kerala experienced exceptional rainfall leading to devastating floods and induced landslides affecting 13 of the State's 14 districts in what is nowadays referred to as a one in a hundred years event. Almost 10 million people, roughly one third of the State's population, were affected, 2.5 mn of which children. 1.4 mn people were displaced at the height of the crisis, which led to 433 fatalities. Given the size of the emergency – 234,233 houses destroyed or damaged, 20% of the population affected by disruption of piped water supply, 317,000 shallow wells damaged or contaminated, 1219 early child care centres damaged or destroyed alongside 1613 schools and 332 health facilities – Government of Kerala welcomed the support by UNICEF and other international partners present in India to provide support in the disaster response and henceforth recovery phase. This led to a large-scale UN intervention, which mainly focused on the longer-term response and recovery needs following initially rescue and life-sustaining support provided by India's National and State Disaster Response Forces and allied navy and army personnel.

Ahead of and parallel to the first ever Post Disaster Needs Assessment (PDNA) carried out in India by UN agencies and the EU in support to Government of Kerala, UNICEF fielded an assessment mission within two days from the worst flood situation in mid-August to assess the damage and overall needs later estimated at Rs 31,000 crore (US\$ 4.4 billion) by the PDNA. UNICEF was the first agency to compile its Response Plan, which in draft was available after one week and benefited from the gracious support through EPF to initiate first support on the ground. UN also supported the setting up of a "UN Hub" supporting Kerala Government to respond effectively to enable functioning and resumption of mainly delivery of services of social sector departments. UNICEF deployed 20-25 sectoral experts in DRR, WASH, Health, Child Protection, Nutrition and Education at state, district levels during August-September 2018 and has since been present with a smaller contingent of consultant and staff, including a Response and Recovery Coordinator. UNICEF intervention targeted State level, and seven most affected districts.

UNICEF's key interventions included restoration of safe drinking water and sanitation, developing Social Sector Recovery and Preparedness Plan, augmenting public health care services, providing psychosocial support to children, mainstreaming of DRR in school curriculum and initiating programme on Accountability to Affected Populations (AAP).

On *WASH*, UNICEF interventions focused in five districts of Alappuzha, Ernakulam, Thrissur, Pathanamthitta and Wayanad where seven consultants were deployed and among other things provided support for developing guidelines on WASH protocol on cholera, cleaning and disinfection of wells and mobile fecal sludge treatment. Initiated programmes enabled access to safe water for 550,000 people and sanitation facility for about 700,000 people in the state.

On *Education and Child Protection*, UNICEF partnered with various educational and child protection authorities and technical services to assist flood affected children to overcome their fear and trauma and designed a module with special components to address flood-affected students to support their educational, disaster preparedness and emotional needs. The psychosocial support was provided to about 930,000 students in 4,600 schools spread across 10 districts. UNICEF supported review of the school curriculum for integration of disaster risk reduction components in a longer-term effort to improve preparedness and mitigate risks.

On *Health* and among other actions, UNICEF supported the health department in setting up temporary health facilities in 330 flood affected Gram panchayats in 8 districts by engaging staff nurses at both existing and additional health facilities for five months to cater to the increased outpatient flow. This benefitted about 1.2 million outpatients in flood-affected districts, with women and children accounting for 55% and 22% respectively. UNICEF supported the health department in rolling out revised Maternal and Child Protection Cards (MCPs) in Malayalam, with content adaptation to local requirements. Over 500,000 MCP cards were printed and training of health functionaries in the use of the revised MCP card is to be completed by March 2019.

In *Nutrition*, UNICEF and the NGO Doctors For You team supported Child Survival Intervention (CSI) Project in Wayanad and Attapadi block of Palakkad district focusing on child health and nutrition during disasters. In addition, through the training of frontline workers and volunteers, the promotion of IYCF practices reached out to 6,644 pregnant women in Wayanad and Attapadi, and caregivers of 19,529 children. Distribution of IEC materials were undertaken in all 1049 AWCs in the area, along with briefing of Anganwadi workers. A six-month course of multivitamin tablets was distributed among 4000 pregnant and lactating mothers as well.

On *Coordination and DRR*, UNICEF supported the NGO Inter Agency Group (IAG) to undertake humanitarian co-ordination. Thanks to UNICEF support, ten district Inter-Agency Groups of NGOs were set up, first time. This resulted in improved co-ordination, collaboration in intervention and most importantly reduced the duplication among humanitarian groups and spurred Government/ NGO and NGO/UN cooperation. IAG provided tactical support to district administration in reaching out to the affected people, even in the last mile. UNICEF also rolled out Social Sector Recovery (SSRP) Plan in seven most affected districts. Along with SSRP, Risk Informed Programing by integration of DRR key actions into preparation of Gram Panchayat Development Planning was initiated in Ernakulum District.

On *Communication for Development*, based on the idea of the Grand Bargain, Accountability to Affected Population (AAP) was launched for the first time India. The initiative was based on a partnership with Kudumbashree, KSDMA and Local Self-Government covering 483 local self-governments, covering 20,000 households. AAP findings are expected to inform the on-going recovery process and support child-responsive “Building back better”.

Overall, UNICEF interventions allowed to pioneer work such as in development of Post Disaster Need Assessment (PDNA) by UN agencies; access to mainstream Risk Informed Programming at wider scale in various sectors thanks to access to integrate DRR in local planning; development of Social Sector Recovery and Preparedness Plan; and policy advocacy in sludge management. It also resulted in on-going revision of school curriculum to integrate Comprehensive School Safety; introduction of Accountability to Affected People (AAP) for the first time in India. UNICEF also provided critical support on coordination by supporting the setting up of district IAG in 10 districts, for the first time.

UNICEF’s response to the emergency repositioned the Fund firmly as one of the key UN agencies to support disaster response with the specific expertise of linking response to better preparedness and mitigation to minimize impact of future disaster events. This bodes well for replication of the approach in other disaster situations, which are likely in the Indian context, which remains one of the top five countries in terms of disaster proneness in the world. UNICEF multi-sectoral response at the tune of USD 2,9 mn now supplanted by recovery support has been recognized strongly by Government of Kerala and appreciated at national level.

E. Humanitarian Context

India continues to remain among the most disaster prone and impacted countries in the world, with the highest number of people affected (24 million) and second highest number of deaths (1,388) in 2018 according to [recent UNISDR/CRED data](#). In 2018, UNICEF ICO notified 13 significant disasters and responded to 12 of them, as they impacted children and social service delivery to them. In this regard, the Kerala flood response drew most human and financial resources (US\$ 2.9 mn), which warranted for the first time after five years, an ICO request for humanitarian funding through the EPF, CERF and donor funding. Other short-term interventions were carried out in Karnataka and Odisha following floods and landslides.. These interventions in humanitarian contexts in 2018 did not require requests for additional humanitarian funding for disaster response and regular resources were used. However, ROSA emergency funds were used in June-December 2018 to mainly improve existing disaster preparedness activities in non-programme States of Jammu & Kashmir, Sikkim and North-East States of India, as well as Bihar and Uttar Pradesh.

UNICEF ICO's support to the large scale disaster response followed by recovery action in Kerala was triggered by the truly exceptional nature of the floods and landslides (one in 100 years event) and on request from the Government of Kerala with support from local agencies and external partners.

Between 22 May and 18 August 2018, Kerala experienced the worst ever floods since 1924. During this period, the State received cumulative rainfall excess of 42% above the average. Heaviest rainfall was notified during 15-17 August in most part of the state. The torrential rains triggered several landslides and forced the release of excess water from 37 dams across the State, adding to the impact of floods. Nearly 341 landslides were reported from 10 districts.



Idukki, the worst hit district, was ravaged by 143 landslides. Low-lying areas were flooded requiring large-scale rescue operations by Indian navy, army and Disaster Response Forces with additional support by local administration and civil society (fishermen). According to the Government of Kerala, 1,259 out of 1,664 villages spread across its 14 districts were affected, with Alappuzha, Ernakulam, Idukki, Kottayam, Pathanamthitta, Thrissur and Wayanad worst hit.

The devastating floods and landslides affected the life of 5.4 million people (UNICEF estimate was that it affected 10 million, including 2.5 million children). The disaster displaced 1.4 million people and 433 people lost their life during 22 May – 29 August 2018 (Government of Kerala data). Besides, 147 deaths were reported post disaster, which occurred due to leptospirosis. 10 million people out of total population of 33 million were affected (UNICEF estimate; Government estimated 5.4 million people affected). The floods and landslides displaced 1.4 million people. The unprecedented rainfall coupled with ensuing floods and landslide brought Kerala to a

standstill in August 2018. The Post Disaster Needs Assessment (PDNA) estimates total recovery needs at Rs 31,000 crore (US\$ 4.4 billion) (the footnote provides detailed key flood impact data¹ and more specifically impact on WASH and initial government response).²

According to *UNICEF estimates*,

- about 2,500,000 children were affected, as basic services were disrupted.
- 1219 anganwadi centres (Early Child Care Centres) were affected.
- 332 health facilities were fully or partially destroyed.

- 1613 schools were damaged with additionally 1700 schools used as relief camps. Floods affected teaching and learning in almost all the districts with institutions being closed from a period spanning 2 to 23 days.

- Besides, families in Kerala have also suffered enormous non-quantifiable and non-monetary losses. This included emotional shocks, psychosocial damages, distress and trauma as well as the high insecurities experienced by children and their parents who have lost their valuable possessions or suffered grief due to loss of close ones. Interviews with people in relief camps and those affected by the floods are suffering from the enormous emotional loss of their homes that were built from hard-earned earnings and borrowed funds (Source: PDNA Kerala State 2018).



Given the Government of India's strong capacity for search and rescue and following its approach to rarely request for international assistance, the immediate life saving support post-disasters was

¹ Additional flood impact data gathered mainly from the Post Disaster Needs Assessment reveal that as per Kerala State Disaster Management Authority (KSMDA), 3.4 million people were provided shelter in about 12,300 relief camps. The damage assessment of housing done by the Local Self-Government Department (LSGD) shows that 234,233 houses were destroyed or damaged. The damage to houses and buildings potentially affected one million people. About 83,000 kilometers of roads were destroyed, 221 bridges were severely damaged, and 16,000 hectare of agriculture land was lost. Access to piped water was disrupted affecting nearly 20% of the State's population- around 6.7 million people - leading to drinking water crisis. About 317,000 shallow wells were damaged or contaminated in seven worst affected districts, directly affecting 1.4 million people. Over 95,000 household latrines were substantially damaged affecting nearly 400,000 people. About 200,000 houses were destroyed or damaged, affecting about one million people. 57,000 hectares of cropland was affected causing immense pressure on livelihood. Nearly 7.4 million workers, 2.3 million migrant workers, 34,800 persons working in MSMEs, and 35,000 plantation workers (most women) were displaced from employment.

² Kerala achieved Open Defecation Free (ODF) status in 2016, but faecal sludge is not yet safely managed with regard to most households. In addition, the majority of people (62%) use shallow wells for drinking water, and only 29% have access to piped water supply. Kerala has achieved its target in ensuring the access and usage of a functional toilet to all. However, access to safe drinking water, sewage treatment and door to door waste collection is a major challenge. In the disaster affected districts, toilets with septic tanks were flooded. A total of 95,146 toilets in 981 Gram Panchayats were completely dysfunctional due to floods. This increased the risk of reverting back to open defecation in flood affected areas. The water sources, which are traditionally shallow open dug wells, were also contaminated, highlighting the need for household water treatment. Local Self-Government Department and Suchitwa Mission conducted a comprehensive programme on sanitation and hygiene, leading to high awareness among the population with support of SHG Members and volunteers and local youth clubs. Toilets, open wells and houses surrounding were also cleaned. Key messaging on safe handling and disinfection of drinking water has been shared to the larger public through radio & video messaging and pamphlet distribution. Government issued a GO mentioning that all Flood Relief-Renovation and reconstruction activities were to be made a part of 2018-19 Annual Plan for LSGIs (GO no: 2313/2018/lsgd dated 23/08/2018).

provided in all emergencies occurring in India in 2018 by Government of India and State Governments through their various National and State Disaster Response Forces and related services. Additional support was provided by local chapters of INGOs and local NGOs.

However, beyond the immediate rescue operations, in the Kerala floods and Karnataka landslide context, contrary to situations in previous years, where State Government requests for support were only received weeks after onset of the emergency, Kerala Government proactively requested UN and UNICEF to expand its developmental support to provide humanitarian assistance for response and recovery, which was promptly responded to. UNICEF's response as part of a wider UN engagement in Kerala covered the habitual areas.

For lack of data, the disaggregation of impact between girls and boys in the Kerala flood situation is difficult to establish. Boys and girls living with disabilities can be assumed to have been impacted more in the disaster situations due to a lack of specific disaster preparedness provisions for people living with disabilities. As the Post Disaster Needs Assessment highlights: "The floods and landslides have highlighted the particular vulnerabilities that the poor, scheduled caste, scheduled tribe, fisherfolk, women, transgenders, migrant workers, people with disabilities, elderly (and elderly women) and households headed by females face in different stages of the disaster cycle across sectors such as health and nutrition, water and sanitation, housing, livelihoods and so on. While the relatively robust Panchayati Raj system and the Kudumbashree network offer spaces for participation, they have not been able to effectively address compounded vulnerabilities. Focusing on the particular vulnerabilities of the excluded and marginalised offers an opportunity to establish a human rights-based approach to recovery and rehabilitation." (page 51f).

No security concerns affecting UN staff were flagged during the 2018 emergencies (violence and related), apart from health advisories and warnings not specifically affecting UN staff alone (e.g. precaution which needed to be taken in light of cases of leptospirosis, especially in the northern Kerala districts of Kozhikode & Malappuram). These concerns did not impact programme implementation.

F. Humanitarian Results

In the immediate aftermath of the floods, UNICEF fielded a mission to assess the situation in the landslide and flood affected hill areas of Wayanad districts which revealed the destruction and humanitarian needs including coordination challenges. Subsequently, UNICEF, later a UN hub, was established to support the Kerala Government to respond effectively to enable functioning and resumption of mainly delivery of services of social sector departments. UNICEF deployed up to 25 sectoral experts in DRR, WASH, Health, Child Protection, Nutrition and Education at state and district levels during August-September 2018. UNICEF intervention targeted State level, and seven most affected districts.

The key interventions included support to restore safe drinking water and sanitation, develop Social Sector Recovery and Preparedness Plan, expand public health care services, provide psychosocial support to children, mainstream DRR in the school curriculum and initiating programme on Accountability to Affected Populations (AAP). UNICEF contributed in achieving the key results as summarized below:

- One million children provided with psychosocial care in schools and in the community;
- 509,000 people regained access to safe water
- 580,000 people benefitted from the provision of toilets and WASH facilities.

- 75,000 households were imparted messages on infant and young child feeding practices;
- 360 temporary health facilities became functional including through recruitment of 400 staff nurses;
- 489 Gram Panchayat Development Plans were developed by the Accountability to affected populations in partnership with the Government of Kerala.

These results were achieved through the following intervention strategies in and partnership with:

a) WASH

UNICEF interventions focused in five districts of Alappuzha, Ernakulam, Thrissur, Pathanamthitta and Wayanad and included restoration of safe drinking water and sanitation. Seven consultants were deployed (two at the state and five at the district level). UNICEF partnered with the government (Suchitwa Mission) and NGOs such as Alleppy Diocese of Social Service Society (ADSS), Changanacherry Social Service Society (CHASS), Anugraha Social Service Development Society, Wayanad Social Service Society, Water Sanitation and Hygiene Institute and Gramalaya.

UNICEF support (i) developing guidelines on WASH protocol on cholera, cleaning and disinfection of wells and mobile fecal sludge treatment and (ii) for initiating programmes for reducing water turbidity, chlorination of wells, drinking water sources, de-watering and rehabilitation of open wells through government and civil society organizations enabled access to safe water for 550, 000 people and sanitation facility for about 700, 000 people in the state.

b) School Education and Child Protection

UNICEF collaborated with Myrtle Social Welfare Network, State Council of Education Research and Training (SCERT) Kerala and National Institute of Mental Health & Neuro Sciences (NIMHANS) to assist flood affected children to overcome their fear and trauma. UNICEF, State Council of Educational Research and Training (SCERT), NIMHANS and MYRTLE designed a module with special components to address flood-affected students to support their educational, disaster preparedness and emotional needs. The psycho social support was provided to about 930,000 students in 4,600 schools spread across 10 districts

UNICEF supported the review of the school curriculum for integration of disaster risk reduction components. Curriculum review also involved development of learning material, teachers' handbooks, IEC material and training of trainers. The process of curriculum review involved the participation of 40 textbook writers, representatives of the KSCPCR (Kerala State Commission for Protection of Child Rights) and KSDMA. NIMHANS and the NGO SEEDS provided technical support to include DRR, psychosocial support and life-skills in the curriculum. The review of school curriculum (for classes 9 and 10 to begin with) were completed, with approved by the Curriculum Review Committee in October 2018. These changes will be reflected in the textbooks for the next academic year, commencing in June 2019.

c) Public Health

UNICEF supported the health department in setting up temporary health facilities in 330 flood affected Gram panchayats in 8 districts by engaging staff nurses at both existing and additional health facilities for five months to cater to the increased outpatient flow. This benefitted about 1.2 million outpatients in flood-affected districts, with women and children accounting for 55% and

22% respectively³. UNICEF also facilitated the procurement of 61 Ice Lined Refrigerators and Deep Freezers as well as non-electrical cold chain equipment from the Government of India.

UNICEF supplied diarrhea protocols in English, which were displayed in 7,500 government health facilities across the state and provided posters on 'Plan A' of the diarrhea management protocol in Malayalam. UNICEF supported the health department in rolling out revised Maternal and Child Protection Cards (MCPs) in Malayalam, with content adaptation to local requirements. Over 500,000 MCP cards were printed and training of health functionaries in the use of the revised MCP card is to be completed by March 2019.

d) Nutrition

UNICEF and the NGO Doctors For You team supported Child Survival Intervention (CSI) Project in Wayanad and Attapadi block of Palakkad district focusing on child health and nutrition during disasters. In addition, through the training of frontline workers and volunteers, the promotion of IYCF practices reached out to 6,644 pregnant women in Wayanad and Attapadi, and caregivers of 19,529 children. Distribution of IEC materials were undertaken in all 1049 AWCs in the area, along with briefing of Anganwadi workers. A six-month course of multivitamin tablets was distributed among 4000 pregnant and lactating mothers as well.

e) Disaster Risk Reduction

UNICEF supported the Inter Agency Group (IAG) to undertake humanitarian co-ordination in Kerala. With UNICEF support, ten district Inter-Agency Groups of NGOs were set up. This resulted in improved co-ordination, collaboration in intervention and most importantly reduced the duplication among humanitarian groups and spurred Government/ NGO and NGO/UN cooperation. IAG provided tactical support to district administration in reaching out to the affected people, even in the last mile. The support enabled in the preparation of a Joint Detailed Needs Assessment, compiled following assessments in the communities with UNICEF DRR, education and child protection staff support.

UNICEF rolled out a Social Sector Recovery (SSRP) Plan in seven most affected districts. Along with SSRP, Risk Informed Programing by integration of DRR key actions into preparation of Gram Panchayat Development Planning was initiated in Ernakulum District. The SSRP document was prepared after needs assessment at the ground and dialogue with various public and civil society stakeholders. The SSRP document covered the following key thematic areas – School Education, Nutrition, Child Protection, Disaster Risk Reduction, Health and WASH.

The Risk Informed Programming capacity development in Ernakulum reached 82 Gram Panchayat Secretaries and Presidents of Panchayats. The process enabled 30 GPs to integrate innovative programs based on Risk and Vulnerability of GPs.

f) Communication for Development

Based on the commitments of the Grand Bargain, India's approach to Accountability to Affected Population (AAP) through governance systems was for the first time operationalized in Kerala by C4D Section, with support from DRR Section and other sectors. It is integrated within the Local Self Government Department (LSGDs) and steered by Kudumbashree, the Self-Help Group network, drawing technical oversight from KSDMA and State Planning Board. It covers 489 local

³ Sources: Data from department of health, Government of Kerala, PDNA document- 2018.

self-governments across seven worst flood and landslides affected districts. Through this initiative, a system has been created to collect voices and feedback of the 19,689-affected people including nine marginalized groups on post disaster needs and eight sectors, with the support of 978 trained Kudumbashree workers. The first round of feedback collection has been completed and is being used for improved action on ongoing development as well as recovery planning and to enhance resilience Rebuilding Kerala Initiative. Interventions for Kerala Initiative are supported by Tata Institute of Social Sciences, Communicating with Disaster Affected Communities-Network, SPHERE, Envision Institute of Development and Riddhi Foundation.

Additionally, an Integrated-C4D-Flood-Response was also rolled-out with over 549 trained NGO partners that promoted Life Saving practices with a thrust on child survival and development, covering Health, Nutrition and WASH. A multi-audience and multi-channel response and recovery package was developed and implemented for improved knowledge among the affected communities and for promoting resilience.

g) UNICEF interventions led to pioneering work

UNICEF interventions paved the way for opportunities to pioneer work such as the development of the first ever Post Disaster Need Assessment (PDNA) carried out by UN agencies in India. Similarly, the UNICEF response provided an opportunity to mainstream Risk Informed Programming; develop a Social Sector Recovery and Preparedness Plan to facilitate “building back better” and to provide advocacy and technical advice in sludge management. It also resulted in on-going revision of school curriculum to integrate Comprehensive School Safety. India’s approach to Accountability to Affected People (AAP) through governance systems was conceptualized at national level and operationalized in Kerala at scale was for the first time ever to support people-led recovery process. UNICEF also provided critical support on coordination by supporting the first time in Kerala the setting up of district NGO umbrella group (“Inter-Agency Groups”) in 10 districts.

UNICEF supported the preparation of the Post Disaster Needs Assessment (PDNA) through deployment of 25 sectoral experts in DRR, WASH, Health, Child Protection, Nutrition and Education at state and district levels during August-September 2018, besides oversight support from UNICEF State Office for Kerala and Tamil Nadu in Chennai and Delhi India Country Office. UNICEF’s logistical and administrative support was also critical to facilitate the PDNA implementation “out of Trivandrum”, for which eleven UN agencies came together to prepare the first ever such assessment conducted in India.

Results Table

Summary Analysis of Programme Results (Status: 20 November 2018 – Source: SitRep)

Health

HPM Results	Sector Target	UNICEF Target	Achievement	MOV
'Number of population accessing primary health care services	4 million	1.5 million	1.25 million	Report from health facilities

Nutrition

HPM Results	Sector Target	UNICEF Target	Achievement	MOV
Number of children below five, pregnant women and lactating mothers receiving regular ICDS services	1 million	1 million	975,000	Monthly Progress Reports from ICDS
Number of caregivers of children 0-23 months receiving IYCF counselling for appropriate feeding (breastfeeding or preventing infant formula)	250,000	25,000	134,400	Monthly Progress Reports from ICDS
Number of boys and girls (3-5 years) who received early childhood education services in ICDS centres	200,000	15,000	317,500	Monthly Progress Reports from ICDS

WASH

HPM Results	Sector Target	UNICEF Target	Achievement	MOV
Number of people with access to sufficient water of appropriate quality and quantity for drinking, cooking and maintaining personal hygiene	10 million	1 million	About 509,050 people have access to safe water	Govt. Report, Kerala Water Authority, Partner reports
Number of people with access to toilets and washing facilities that are culturally appropriate, secure, and sanitary, and are user friendly and gender appropriate	10 million	1 million	About 580,300 people now have access to toilets and WASH facilities in affected areas	Govt. Report (Suchitwa Mission/Local Self Govt. Departments) and partner reports

Child Protection

HPM Results	Sector Target	UNICEF Target	Achievement	MOV
Number of Children enrolled in psycho-social activities in the community	4.6 million	1,74,000	120,796 children benefitted and as of date, about 45,200 children enrolled in the psycho-social activities	Weekly updates- for total number of children Monthly updates for gender disaggregated data

Education

HPM Results	Sector Target	UNICEF Target	Achievement	MOV
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Number of school-aged children/ adolescents accessing psychosocial support through schools	4.6 million	1 million	A total of 7647 teachers have been trained, and they have reached out to 929,498 children.	Weekly report and Government MIS
Number of school-aged children / adolescents reached by re-established school and/or alternate or flexible learning programmes	4.6 million	4.6 million	Consolidated figures on drop-out rates not yet available.	

Social Policy

HPM Results	Sector Target	UNICEF Target	Achievement	MOV
Transparent mechanism available to review improve cash assistance to most targeted and affected families and children		1 district	Programme to review the profiling of families and children under the Destitute Free Kerala Programme has been initiated.	
Local government plans are able to respond to specific needs of children affected by floods		50 local governments	Initiated partner support in one district (Thrissur).	

Communication For Development

HPM Results	Sector Target	UNICEF Target	Achievement	MOV
Percentage of caregivers of children (0-5) who received information on safe and hygienic child care and feeding practices	80%	1 million	Information on achievement is not available.	Household rapid assessment is yet to be conducted
Percentage of community network members from affected populations who provide feedback on the humanitarian aid delivered	60%		Feedback is provided by 19,757 affected people and marginalised group in the first round.	Feedback Survey

Aligning with other Reporting Requirements

- Countries appealing in the Humanitarian Action for Children (HAC) 2019 (www.unicef.org/appeals) who have provided results tables through 31 October 2018 should update these tables with their end-of-year figures. Note that end of year figures should be the same or greater than the results reported in the 2019 HACs since the reporting period for the HAC is only 10 months (Jan-Oct 2018), while the in the CER it is the full 12 months of 2018;
- Results reporting in the CER should be aligned to the 2018 Country Office Annual Reports (COARs), including key results achieved in humanitarian action and Humanitarian response SMQs. Where

indicators match, the same results should be used for reporting in the CER or footnoted to explain any higher results (e.g. additional partner reporting).

Narrative Reporting (applicable for each programmatic sector)

WASH

UNICEF supported Government of Kerala in the Post Disaster Needs Assessment (PDNA) exercise, which included a damage and loss assessment to the WASH infrastructure and services in the state and revealed the following impact:

Summary of Disaster Effects on Drinking Water, Sanitation and Hygiene (All figures in INR, crores)					
Sector	Damage	Loss	Total Effect	Total Needs	Recovery
Water	492	349	841	766	
Sanitation	147	48	195	289	
Solid Waste Management	251	74	325	276	
total	890	471	1361	1331	

The overall objectives of the UNICEF WASH emergency response were to:

- Provide technical support for cleaning and disinfection of hand dug wells, rehabilitation of wells, development of natural spring-based water supply systems (as safe alternatives to water supply) and toilets at households and institutions level.
- Provide water treatment units and small scale mobile and static sludge treatment units, including training on operation and maintenance.
- Develop and disseminate child survival messages on key WASH behaviors through community radio, inter personal communication, and other means
- Lead state and district wide WASH emergency response sector coordination (in 5 districts)
- Lead Post Disaster Need Assessment of Water, Sanitation & Hygiene facilities jointly with GoK

Since the onset of the floods and landslides in 2018, the UNICEF WASH team worked closely with the respective State Government Departments, namely State Sanitation Mission, Local Self Government Department (LSGD), Water Resource Dept., Kerala Water Authority and National Health Mission and also with 5 district administrations, to accomplish the above objectives. The WASH support focused at State level and 5 focus districts (Alappuzha, Pathanamthitta, Wayanad, Thrissur and Ernakulam) targeting 1 million people through 7 consultants and partnering with Suchitwa Mission, Doctors for you, ADSSS, CHASS, ANUGRAH, WSSS, WASH Institute, Gramalaya.

WASH results were achieved through various interventions in the state, including technical support to the government's recovery interventions, in coordination with NGOs/Inter Agency Group Partners. This included support at the state and district levels to develop WASH guidelines and protocols for diarrhea management, and cleaning and disinfection of wells. Other support was provided on sanitation and hygiene promotion, rehabilitation of wells, water treatment, water quality monitoring and faecal desludging and treatment activities. Efforts were recognized by the government manifest in demands for increased support from affected districts.

a) Safe Water Supply, Water Quality Treatment and Monitoring

UNICEF facilitated access for approximately 5,09,050 people to a sufficient quantity and quality of water for drinking, cooking and personal hygiene, through the following activities:

- 25 community spring-based drinking water sources and 10 community wells were rehabilitated to ensure safely managed water supply, benefitting 210 affected families in Wayanad. These rehabilitated springs and wells were used as models to showcase technologies for flood resilient rehabilitation opportunities in flood prone areas and expose LSGD officials and households to such opportunities.
- 13 flood affected dug wells across 5 districts were rehabilitated and used as models to showcase technologies for flood resilient rehabilitation opportunities in flood prone areas and to expose LSGD officials and households to such opportunities. Standard operating procedures (SOPs) for rehabilitation of dug wells were developed, and 350 PRI members were oriented on the same.
- 170 water treatment units were provided in five most affected districts, including hands-on training for 155 nodal persons/LSGD officials with operation and maintenance (O&M) plan for specified period and strategy to ensure optimal utilization (100 hand pump operated and 70 petrol operated water filter units). Units can be used on day to day basis to ensure safe drinking water for the community and can be quickly mobilized in any future disaster event.
- 500 water quality testing kits were provided in five most affected districts (100 units/district), including pool testers, turbidity tubes and 10,000 Phenol Red and DPD tablets (2000 tablets/district) to health inspectors/frontline workers of five districts who are responsible for water quality monitoring.
- Hands-on training was provided to 214 officials on basic parameters of water quality testing in emergency situations (PH, turbidity and chlorine levels) from key departments Health, LSGD, KWA, Kudumbshree and NGOs partners, and an operation plan for specified period developed to ensure optimal utilization. This was done in close coordination with RedR India and District Administration.
- The water quality monitoring mission facilitated to demonstrate testing of 150 wells for residual chlorine and 112 well for turbidity in most affected areas. In addition, programmes were initiated to reduce the turbidity of drinking water sources, the chlorination of wells, and to showcase dewatering and rehabilitation of open wells.



- Data analysis of water quality testing results was conducted, analyzing post-flood test results which were conducted with participation of LSGD, Haritha Keralam Mission, Remote Sensing Agency, Kerala Water Authority, Food Safety Agency and Pollution Control Board. The analysis showed that there is extensive bacteriological contamination of open wells. However, it is not clear if this is caused by floods, since pre-flood data was not available for analysis.



- Prepared concept note with recommendations to strengthen the water quality surveillance system, including feedback mechanisms and timely follow-up to improve drinking water safety
- Prepared concept note with recommendations for alternative drinking water supply options which are less likely to be affected during floods

b) Safe Sanitation & Hygiene Practices

UNICEF provided approximately 5,80,300 people with access to toilets and washing facilities that are culturally appropriate, secure, and sanitary, and are user friendly and gender appropriate, through the following activities:

- Information, education and communication (IEC) and social behavior change communication (SBCC) materials were developed and disseminated. This includes the broadcasting of 10 video clips on handling solid waste after the floods, including handling of e-waste, household level composting and waste segregation on video channels and social media. In addition, 12 audio programmes were aired on All India Radio for a period of 30 days related to waste management. A total estimated 7 million people were reached for sanitation and hygiene awareness messages.
- Developed guidelines for mobile faecal sludge treatment unit and trained 675 Local Self-Government officials, district administration and community leaders were oriented on the importance of desludging and sludge treatment protocols. Topics covered in the orientation included: fecal oral transmission (F-diagram), leach pit and septic tank toilet technologies, importance of fecal sludge and septage management, liquid and solid waste management, disaster management during the emergency, a brief explanation on mobile sludge treatment units and demonstration of the unit.
- Mobile fecal sludge treatment units were deployed and more than 9.18 lakhs litres of sludge was treated in Alleppey, Pathanamthitta, Ernakulum and Thrissur districts. 50,000 people benefitted directly, while an estimated 2,00,000 people benefitted indirectly from this support.
- 105 school sanitation facilities (septic tanks) were deslugged in schools which served as temporary camps for flood affected people. In addition, cleaning campaign and minor repairs in 3,291 flood affected schools coordinated and supported, to ensure functionality of WASH facilities.
- 2 Faecal sludge treatment plants are being constructed in 2 districts (Wayanad and Pathanamthitta). Suitable land was identified for installation of Faecal Sludge Treatment Plant and related site development activities are going on to start the construction work.

Orientation and planning meetings with districts and municipal authorities to which the FSTPs will be handed over have been conducted. Business models and operational guidelines are being developed to facilitate day to day operation and maintenance of the FSTPs.

- State level workshop for 70 officials from expert agencies and government nodal departments on appropriate toilet technologies coordinated and facilitated. As a follow up, Suchitwa mission developed a note based on the outcomes of the workshop, focusing on appropriate toilet technologies for waterlogged areas, requesting feedback and support from the State government to take the recommendations forward.
- 13 septic tanks across 5 districts rehabilitated and used as models to showcase technologies for flood resilient rehabilitation opportunities in flood prone areas and expose LSMD officials and households to such opportunities. Standard operating procedures (SOPs) for rehabilitation septic tanks developed, and 350 PRI members oriented on the same.
- Prepared summary document on the current status of household fecal sludge and solid waste disposal situation (post flood) and recommendations on the way forward

c) Social and Behavior Change Communication

10,82,821 people (including 3,25,000 children) reached with interpersonal communication (IPC) activities on child survival messages, including hand-washing with soap, toilet use, household water treatment, household level cleanliness, water chlorination, hygiene promotion, exclusive breastfeeding, and complementary feeding.

- Supported the state and district administrations with provision of WASH guidelines.
- IEC materials on key health behaviours such as banners, disseminated to anganwadis, and Mothers' Meetings conducted at the anganwadi centres.

d) WASH Sector Coordination

An estimated 850,000 people were reached by the WASH sector through provision of safe water, cleaning and disinfection of wells, provision of water filters, septic tank cleaning/ desludging, distribution of hygiene kits and hygiene awareness, and provision of water pump/ motor supplies as part of post flood water supply system rehabilitation.

- Humanitarian agencies involved in the WASH emergency response in Kerala were mapped in 5 districts. A total of 33 agencies were actively engaged in the 5 districts on various aspects of WASH recovery.
- WASH sector coordination was supported and facilitated to streamline information sharing between government, UN and NGOs. This also includes linkage to inter agency group coordination, covering multiple sectors (beyond WASH), and coordination to integrate WASH and DRR in government planning.

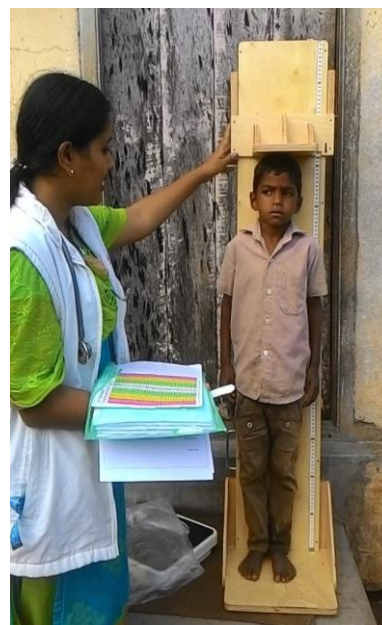
Nutrition

UNICEF support contributed to strengthening capacity of the Health and ICDS systems to deliver Nutrition services.

- *3329 community-based workers had enhanced knowledge and skills for counselling and demonstrating an integrated package of interventions – consisting of diarrhea protocol, hand washing, household water treatment, hygiene promotion, exclusive breast feeding, and complementary feeding.*

- 52 Government Officials had improved capacity for IYCF counseling and caring for children with Acute Malnutrition.
- 49,237 children under-five were screened at Anganwadi Centers and through home visits – identified 513 cases of Severe Acute Malnutrition (SAM), 1393 cases of Moderate Acute Malnutrition (MAM). They were provided referral services when indicated, counselling support, local foods and linked to existing government provisions.
- 6644 Pregnant Women reached out with specific IYCF counseling messages
- Caregivers of 19,529 children were reached out with messages on optimal IYCF practices
- 1049 Anganwadi Workers were briefed on IYCF practices during emergencies

- **Activity 1. Promotion of IYCF practices during emergencies:** UNICEF supported teams reached out to 6644 pregnant women in Wayanad district and Attapadi block in Palakkad district with special counselling sessions on IYCF practices. The teams counseled caregivers of 19,529 children on IYCF practices. Anganwadi workers were also briefed on IYCF practices during emergencies. Hand wash training was provided to all 1049 AWCs. Six-month course of multivitamin tablets for 4,000 pregnant and lactating mothers were distributed through camps conducted in government hospitals.



- **Activity 2. Nutritional assessment of children below 5 years:** The teams screened 49,236 under-5 children in the project area through Anganwadi centers and house to house visits. Identified 513 cases of Severe Acute Malnutrition (SAM), 1393 cases of Moderate Acute Malnutrition (MAM), referred 14 cases of SAM with complications to the district NRC. The cases of SAM who could not be referred were provided counselling support, some local foods and linked to existing government provisions.

- **Activity 3. Capacity-building of District Health & WCD department on integrated child survival program:** The teams trained 3,329 community-based workers (ASHA, JPHN, AWW or NGO Outreach worker) on knowledge and skills for counselling and demonstrating an integrated package of interventions – consisting of diarrhoea protocol, hand washing, household water treatment, hygiene promotion, exclusive breast feeding, and complementary feeding. Conducted 2 days



training program on IYCF practices and on attending to SAM children for officials from ICDS and Health department. 52 officials including Doctors, Supervisors, CDPOs, and Nurses attended the program. Through the visits to Anganwadi's our team found that all the 1049 Anganwadi's are equipped with functional mechanism to track the nutritional status of children aged 6-59 months. Assessment done of 15 hospitals including 4 NRCs to understand the functioning. Team reached out to 30 selected medical staff from health facilities with capacity building activities on identifying and treating SAM following standard protocol. Sessions were conducted to refresh prior learnings and to provide handholding support to 90 selected AWC workers on tracking the nutritional status of children age 6-59 months.

Health

To intensify the primary health care and cover additional needs arising from the post-flood context, 349 additional health facilities were made operational by posting nurses in the 8 flood affected districts in September 2018.



As there was no disease outbreak, the support was scaled down to 201 nurses in subsequent months until March 2019. Till January 2019, 5.6 million patients have been attended by these nurses, out of which 67 percent are women and children. The health staff were already trained in May 2018 on diarrhea treatment during the intensified diarrhea control fortnight. To reinforce adherence to protocols, 10,000 diarrhea treatment protocols were printed and distributed to public and private health care facilities. In order to restore the health and nutrition records with mothers and families, the revised Mother and Child Protection (MCP) card was translated in

Malayalam language and 500,000 cards were printed for distribution. As of January 2019, 84 master trainers and 7,508 female frontline workers were trained on using MCP card.

Education

Until December 2018, 929,498 students from over 4600 schools were covered under this intervention and over 7647 teachers were trained on providing psycho social support and use of puppets (SCERT training report 2018). Overall, nearly 3 million children and adolescents benefitted across the state from this intervention.

UNICEF in co-ordination with the Department of Education, Government of Kerala provided technical assistance to on school safety and psycho-social support to children and adolescents across all districts affected by the Kerala flood 2018. UNICEF also forged partnership with non-governmental organizations to accelerate the support mechanism for psycho-social support with recreational activities to both teachers and students and reopening of schools. To ensure that efforts are sustained and the state „builds back better“, the state's school curriculum was reviewed and revised to include elements of disaster risk reduction along with life skills integrated

in regular textbooks to enrich students with necessary knowledge and skills. UNICEF also co-led the Post Disaster Needs Assessments (PDNA) result group for education.

Key Results:

UNICEF support contributed to strengthening the systemic capacity of teacher education institutions from state level to cluster level to provide psycho-social care with recreational activities including play-way methods like puppetry and art integrated learning.

UNICEF interventions also helped in sensitizing teachers about child rights governance in disaster situations, providing 21st century skills such as communication, problem-solving and confidence among adolescents to deal with disasters and vulnerabilities, and especially including the special needs of excluded communities, transgender, children with disabilities, Scheduled Castes and Scheduled Tribes.

The innovative project 'Restoring lives' that taught about disaster preparedness and response to teachers, using puppetry, helped in preparing 800 master trainers / teachers within the system, who could respond to the needs of students in case of emotional disturbances, loss in health and hygiene, and overall risks that occur for children during disasters. A sustainability plan to systematically use the training inputs and puppetry material is being finalized with SCERT and Samagra Shiksha Abhiyan .

UNICEF advocated and supported SCERT to review and revise the curriculum and integrated the elements of life skills, psycho social support and care and disaster risk reduction including school safety in the curricular subjects and language textbooks of class 8, 9, and 10. Further work is ongoing for progressive inclusion of content and at different classes, also using ICT tools that can reach out through the IT enabled smart classrooms in almost every school of the state. Convergence between different departments of education is being promoted from the state to the field level to support teachers and students on school-safety and emotional preparedness.

Way forward:

- Strengthen the Educational Management Information System (EMIS) to include indicators on DRR and school safety
- Support in preparation of risk informed Samagra Shiksha, integrated school education plan.
- Strengthen the existing and develop new disaster preparedness strategies, including higher education and adult education sub-sectors, which would be included in the teacher/educator training and school curriculum.
- Follow up and design strategies to internalize the psycho-social training extended to teachers as a co-curricular component that could be sustained on a regular basis in the schools and CCIs

Child Protection

UNICEF response in Child Protection interventions benefitted 120,796 children. Key partnerships include Childline India Foundation, the National Institute of Mental Health and Neuroscience (NIMHANS) and related partners and the police through project „Hope“. Specifically, the followign activities were carried out:

a) Partnership with Childline India Foundation (CIF)

To safeguard children through increased protection mechanism, UNICEF partnered with CHILDLINE India Foundation (CIF) and their CSO partners in Kerala and developed a holistic strategy to increase Protection through the stages of relief, rehabilitation and reconstruction. A

significant feature of the intervention was to ensure that the people around them were sensitized on protection aspects and ensured the safety of children. During this period, 353 children were referred to psychosocial support, about 25 children who discontinued their education were referred to schools and enrolled, and 39 children suffering from health related issues were referred to hospitals. The programme spanned across 8 districts with eight different activities benefitting 120,796 children. More than 3000 grassroots level functionaries were sensitized and strengthened to protect children in the long run.

b) National Institute of Mental Health and Neuroscience (NIMHANS)

To provide psycho-social care for women and children, UNICEF collaborated with the National Institute of Mental Health and Neuroscience (NIMHANS), and the Kerala Department of Women and Child Development (WCD), as well as the State Council on Educational Research and Training (SCERT). The program aimed to develop a holistic intervention model for women and children affected by the flood. The project had two levels of program, the community level and school level program. Community level work was carried out in 6 worst flood effected districts and school based work was in all 11 flood effected districts of Kerala. Through the school level program, the team was able to reach out to 25,806 (25,391 children & 417 parents) and through community level intervention the team was able to position 3420 ToTs (ICDS, CDPOs, SHG s etc.). 3453 women were reached by the ToTs. Around 900 children were identified and referred for psychosocial / mental health support through this intervention.

c) POLICE – Hope

Projet “Hope - Resurgence of Kerala through investing in young minds” was extended to the flood affected areas as a complementary attempt to the existing interventions, to provide psycho-social support to children by enabling the volunteers, local self-government functionaries and other agencies. 4,342 volunteers equipped with knowledge and skills to provide support to the programme and also 1922 ward members were oriented, sensitized and strengthened to protect children in 100 most affected panchayats.

Social Policy

Kerala has well established social protection systems, and the 2018 floods was evidence to its capacity to reach out to the vulnerable with humanitarian transfers in cash and kind. Given the advanced systems backed by a welfare state government, UNICEF support was to use this as opportunity to further advance its attention to details for the poor and last mile pockets, as a build back better support.

UNICEF focused on two pillars to strengthen Kerala’s social policy scenario, namely social protection and governance mechanisms, both of which had scope for innovative intervention. Two HPM indicators were explored: Can the state vouch on its transparent mechanism for assistance to most targeted and affected families and children? Would the local government plans post-floods be able to respond to specific needs of children affected by floods?

In support of the first question, UNICEF finalized partnership work with Kudumbashree (the largest womens’ self-help network in the state) to review the profiling of families and children under ‘Ashraya’ (The Destitute Free Kerala Mission programme), a social protection programme targeting the abject poor. It aimed to generate field-based evidence from a backward district (Wayanad) on issues related to the scheme’s beneficiary inclusion and benefit expansion (considering the possibility of families slipping into poverty due to the disaster), especially in the aftermath of the disaster. Government’s own structures, namely neighborhood groups of women in the self-help groups, were motivated to discuss and bring up the new challenges faced by poor families, along with their suggestions for needed inclusion and expansion. Effort is being made to

also prepare a costed plan for this district, so that state government can make policy decisions regarding the steps that may be needed to make Kerala destitute free - even if a disaster of similar size were to strike again, God forbidding.

Secondly, given the deep decentralization of the state, and a rich body of UNICEF supported work in child friendly local governance (CFLG), a partnership was initiated with the District Collectorate at Thrissur for reviewing the impact of floods on child focused institutions, viz Anganwadis (AWC)/ Early Childhood Centres, schools and public spaces used by children, in view of proposing doable action through the Gram Panchayat Plans. This was to further strengthen the District Planning Committee to support the local self-governments in preparing response plans with the CFLG approach. Young architects put their creativity to design child friendly spaces, be it the AWCs and Schools, big or small. Proposed ideas were also costed in itemized manner, thus allowing scope for the local governments to pick and choose as per their preference and affordability of public funds for children at their disposal. The costed suggestions have created practical scope for the panchayats in Thrissur district (about 100 rural and urban bodies) to generate and leverage new funds to raise the standards for children and build back better. The lessons with examples from the local governments in Thrissur district to prepare an informed plan for children at the centre, will soon be disseminated to the benefit of all 14 the districts across the state.

Communication for Development

Since August 2018, an Integrated C4D Flood Response was implemented with a focus on Child Survival and Development, covering Health, Nutrition and WASH response in line with the C4D-EPP national approach. Capacity building of the Alleppey Diocese of Social Service (ADSS),



A poster on Leptospirosis displayed at community level.

Chegnaserry Social Service Society (CHASS), Doctors for you, ANUGRAH, were undertaken by Envision Institute of Development on social and behaviour change during response and strengthening early recovery.

Over 549 trained NGO partners promoted life-saving and survival practices and distributed 25,000 Standardized Package) for visibility at community level. To date 38,031 families against the target of 9000 in the affected areas have been reached and were engaged through 36,519 community meetings and 462 folk shows. Training resources for civil society organization on flood response and

recovery has been developed and could be used for flood response in other states.

Under the principles of Building Back Kerala Better and commitment to Grand Bargain, India's Approach to "Accountability to Affected Populations through governance systems" referred here as Janakiya Pankalithavum Punarnirmanavum Initiative (JPPI) was operationalized in Kerala in September 2018. It is an effort of the Government to build a more resilient state with the participation and feedback from people affected by floods and landslides in 489 Local Self Governments across seven worst affected districts.

JPPI has been institutionalized within Kudumbashree, the Self-Help Group network of the Local Self Government Department (LSGDs), enabling a connection between ongoing development planning processes and humanitarian response and recovery. This initiative has established a system to collect information regularly at pre-agreed intervals with Government of Kerala on the post-disaster needs and feedback of the affected communities taking into account gender and diversity of the communities, with a comprehensive set of common



Feedback collected from Elderlies in District-Alappuzha, October, 2018

tools and protocols (mapping the sectoral needs) through 989 trained Kudumbashree workers on a real time basis. The feedback on eight (Health, WASH, Nutrition, Education, Child Protection, Shelter, Food Security and Livelihood) and other sectors are analyzed on real time basis and is being used by the Government of Kerala, State Disaster Management Authority and Inter-Agency Groups to inform on-going development plans of the government departments as well as of civil society organizations and recovery process under Rebuilding Kerala Initiative. An Advisory Committee with the Senior Technical Officials of Government of Kerala and external Experts from national and global organizations have been constituted to guide the JPPI programme and integration of the feedback in the sectoral and recovery plans. This effort by UNICEF (C4D with DRR programmes) is supported by Kerala State Disaster Management Authority, State Planning Board, Kerala Institute of Local Administration, Tata Institute of Social Sciences, Sphere India, Riddhi Foundation and Envision Institute of Development. Furthermore, dialogue with the Government of Kerala has been initiated in Dec 2018 to support 70 grama panchayats as models demonstrate results of AAP and risk informed programming.

A partnership was formalized with All India Radio and Community Radio stations and BBC Media



Radio Saving Lives Meeting-2-3 November 2018

Action to strengthen capacities of 40 radio producers for promoting resilience. In a unique initiative, half-a-dozen community radio stations in Kerala have joined hands to co-produce and broadcast a radio series (Radio Mangalam, Radio Mattoli, Radio Neythal, Radio Hello, Radio Janvani and Radio Media Village) of 24 episodes under JPPI of Kerala Government. The initiative focuses on residents of seven worst affected districts where these radio programmes focus on key issues around housing and shelter, livelihood and income generation activities, access to

safe drinking water, health and nutrition. Entitled Puthunambukal, the radio series is being aired

and produced in partnership with Kerala State Disaster Management Authority, Local Self Governance Department of Kerala, UNICEF and BBC Media Action and part of the 'Communicating with Communities' (CwC) intervention. The radio series include interactive component with administration and serve as a platform for the affected community to flag their concerns. Close to 1100 episodes are being narrowcasted in the hard to reach areas.

Coordination/ DRR

a) Coordination

UNICEF's partnership with Sphere India contributed to improve overall Government-NGO coordination and UNICEF-NGO coordination. The UNICEF DRR partnership with Sphere led to the following results:

- A Multi-Sector Joint Detailed Needs Assessment (MS-JDNA) report on the Kerala floods 2018 was published and made available at the 'Sphere India Blog' (10 districts, 22 national agencies and 18 local partners actively participated in the launch event).
- 10 District NGO Inter-Agency Groups (IAGs) were initiated in the state to strengthen coordination
- 2 State IAG meetings, 1 National Seminar on Disaster Resilience and Youth, and 25 district meetings were organized.
- Six district IAG Coordinators were deployed, each covering one additional district.
- A database of 150 CBOs and local NGOs working in nine districts developed. An IAG Steering Committees with local leadership being put in place.
- 81 Humanitarian Agencies were included in the Unified Response System Matrix reaching out to approximately 271,000 households in Kerala

b) Social Sector Recovery Programme & Planning

District consultants have been working in close coordination with the district administration in facilitating the Social Sector Recovery Programme and Planning (SSRRP), facilitating inter-departmental coordination meetings convened by the District Collector, assisting with the assessment of sector-wise damages and sectoral recovery plans (both immediate and long term). The consultants have also facilitated resource mobilization (both technical and financial), in collaboration with NGO partners.

This facilitation is assisting immediate recovery related to water supply through rehabilitation of dug wells, water quality testing and monitoring, installation of water filters, sludge treatment, identification and recovery plans for high-risk anganwadis and schools, shelter recovery, identification and treatment of SAM and MAM children, and strengthening Village Child Protection Committees (VCPC).

c) Disaster Risk Reduction (DRR)

Kerala has a robust local planning and governance system, with 40% of the total annual plan budget being devolved to local bodies (both urban and rural). Twelve subject wise Working Groups assist the local bodies in formulation of annual plans that respond to local requirements.

The absence of the disaster lens and risk informed planning was evident after the floods. In response, the government has mandated that all local bodies constitute a 13th Working Group on Disaster Risk Reduction, Climate Change, Environmental Protection and Biodiversity management, which will guide the local body in formulating risk-informed plans and recovery processes.

UNICEF is facilitating this process by bringing in their expertise in DRR and SSRP. Meetings have been held at the state level with IMG (Institute of Management in Government), ILDM (Institute of Land and Disaster Management), the State Planning Board, the Kerala State Disaster Management Authority as well as Kerala Institute for Local Administration, KILA, which is the nodal agency for capacity building of elected local body representatives. District level consultations have been held in Pathanamthitta and Ernakulam, to orient local body representatives to DRR.

The Accountability to Affected People (AAP) initiative is also complementing this process. The needs and feedback of affected people will support the local bodies in identifying gaps and making suitable modifications. The State Planning Board is keen to draw upon UNICEF support in enriching existing training modules with state-of-the art knowledge and global best practices.

The Risk Informed Programming capacity development in Ernakulam reached 82 Grama Panchayat Secretaries and Presidents of Panchayats. The process enabled 30 Gram Panchayat to integrate innovative programs based on Risk and Vulnerability of Gram Panchayats.

Communication, Advocacy & Partnership (CAP) interventions during Kerala floods

During the Kerala floods, the Communication, Advocacy and Partnership (CAP) sector played an important role in supporting the flood response and recovery programmes of core sectors – Health, Nutrition, WASH, Education and Child Protection with the photo documentation, drafting of human interest stories and framing of key messages for the media, civil society organization and private sector.

Timely communication products and information were prepared for NatComs and for potential corporate donors and resources were activated to provide the required content.

Information was disseminated to national committees for engagement with international media and interviews were facilitated.

A bank of photos and stories from the field were distributed to public and national committees raising awareness on the needs of children and UNICEF's response. Stories from the field focusing on children were shared on social media.

For the first time UNICEF India engaged in active fundraising linked to an emergency and CAP oversaw the communication around this in close collaboration with the Representative and Chief of RMP, and with the RC's Office.

We also engaged with a high net worth individual based in Dubai and a YouTube blogger – Mo Vlogs with six million followers and average video views of 10 million. They had a specific request to learn more about the situation around the floods in Kerala and how it is impacting on children, and they wanted to do a fundraising ask linked to UNICEF India since most of their YouTube subscribers are Indian. They made a short vlog mentioning they visited UNICEF and sharing some key C4D WASH messages on how people can stay safe when it comes to water borne diseases. They added a link on their YouTube to the donate to UNICEF India page. The video received more than 160,000 views in the first hour and almost three million views total. The capacity development of radio journalists and programmers of the All India Radio station in Thiruvananthapuram and its seven transmitting stations across Kerala, ensured dissemination of key messages on child survival and leptospirosis through special programmes and special

bulletins. The radio programmes were broadcasted over a period of 4-6 weeks reaching over 10 million people in 11 flood and landslide affected districts.

State level senior journalists were oriented on the core commitment for children during emergencies. The key messages developed were shared for strengthening their knowledge base and dissemination of messages on building resilience, saving lives, psycho social support and protective environment for children. Advocacy with media ensured positive positioning of UN in response, recovery and reconstruction of humanitarian action in the state. The PDNA exercise conducted jointly by the Kerala government and 10 UN agencies extensively covered.

The CAP team partnered with the National Service Schemes (NSS) for mobilization of about 1000 adolescents and young people on disaster risk reduction in the three most affected districts – Alappuzha, Pathanamthitta and Wayanad. About 500 volunteers who were orientated participated in the rehabilitation and recovery programme initiated by the district administration.

No humanitarian cash transfers was provided during the Kerala floods.

In the absence of a cluster system in India, UNICEF assumed leadership for PDNA thematic groups on WASH, Education/ Child Protection and contributed to Health (led by WHO) and DRR/ coordination (led by UNDP), as well as other groups with support on nutrition, gender and social policy.

G. Results Achieved from Humanitarian Thematic Funding

Thematic funding through EPF was critical to swiftly mobilize additional resources needed in the immediate aftermath of the Kerala floods. The flexible resources allowed UNICEF India Country Office to respond quickly to the needs of children in the State, where UNICEF's presence was hitherto limited. The EPF funds, complemented by other resources at later stage (CERF, Netcom funding), allowed the conclusion of new agreements to upscale local presence through partners and consultant, and internal SURGE missions of staff, beyond the UNICEF Kerala flood coordination core team placed in Trivandrum. Additional funding made available allowed the piloting of new global initiatives including „Accountability to Affected Populations“ and helped significantly to support the first ever Post Disaster Needs Assessment in India, as well as critical coordination support and support for long-term risk informed programming through DRR and its inclusion in local level/ Gram Panachayat Development Plans.

The rapid availability of flexible EPF funds was also instrumental to showcase the swiftness of UNICEF's response in disaster situations in India, which is likely to facilitate similar engagement in support to State Governments in other humanitarian contexts; it provided evidence of UNICEF's capacities for emergency management in the Indian context and contributed to the good standing of UNICEF in the country. Similarly, the UNICEF response in Kerala served as a Learning lab for UNICEF's enhanced focus on how to operationalize the new Emergency Preparedness for Response (EPP) procedure including response. India Country Office capitalized on the opportunity to do an “After Action Review”, implemented through a survey and presented to its CMT in December 2018. The findings are being used in the on-going updating of the EPP plans for India (16 States and one national plan).

H. Assessment, Monitoring and Evaluation

In the early phases of the response, UNICEF set up a dashboard to monitor progress in implementing its response. <http://kerala.socialmobilisation.net/>. The dashboard has been helpful to identify whether programmes are on track or delayed requiring further attention.

Similarly, regular Emergency Management Team meetings were held at the UN hub in Trivandrum, initially twice a day, later daily and later once a week. These meetings in Kerala were complemented by the Delhi based EMT meetings, connecting the State response team, with Delhi based UNICEF Sections for further guidance and overall planning and technical and administrative support, including SURGE planning and resource mobilization.

In addition, UNICEF India Country Office's Chief Management Team (CMT), a quarterly management meeting, revisited the Kerala response in an "After Action Review session" to draw lessons from the Kerala response, following a survey completed by 28 staff members and consultants.

Some key findings from the AAR were requests to:

- Recirculate the UNICEF Emergency Preparedness for Response tools ("EPP") and related training modules for those staff not yet trained to take the training
- Recognition of the importance of Accountability to Affected Population (AAP), which needs to come to its conclusion to make findings available to inform improved policy and sustainable recovery.
- Suggestions to improve HR planning, including the understanding of staff to serve once you are on the internal roster ("if you are on roster, you are mobilizable and staff should be released"). This point was made due the fact that competing priorities (and commitments vis-à-vis Governments) in a Country Office as India with 16 programme States often are challenging to be deployable for the time needed for one State's emergency situation.
- Calls for further involvement of State Governments in preparation, which is key to reduce disaster impact. Other discussions focused on the preparation of Situation Reports, as well as practical considerations to update existing EPP plans for various States to improve preparation for new disaster risk including updating of the EPR Risk Analysis and implementation of the EPP Minimum Preparedness Actions (review where we stand and "walk the talk" (quality check of implementation)

I. Financial Analysis

Table 1: 2018 Funding Status against the Appeal by Sector (Revenue in USD):

Sector	Requirements	Funds Available Against Appeal as of 31 December 2018*	% Funding Gap
		Funds Received in 2018	
Health	697,500	639,904	8%
Nutrition	149,219	126,933	15%
Water and Environmental Sanitation	937,000	1,023,392	-9%
Child Protection	150,000	150,589	0%

Education	260,000	213,190	18%
Communication for Development	407,932	420,427	-3%
Coordination, Planning, Monitoring and Reporting (includes DRR, PPE and CAP activities and cross cutting assessment etc.)	230,000	284,470	-24%
Operation	6,000	15,960	-166%
Total	2,837,651	2,874,865	-1%

Note:

- Requirements are taken from the Budget based on Recovery plan (16 Sept 2018) and revised mail dated 28 Sept 2018.
- Funds available are from CERF, BMGF, ROSA thematic, RR, Global thematic and EPF

Table 2 - Funding Received and Available by 31 December 2018 by Donor and Funding type (in USD)

Donor Name/ Type of funding	Programme Budget/ Allotment reference	Overall amount*
1. Humanitarian funds received in 2018		
a) Thematic Humanitarian Funds		
French Committee	SM1899100314	97,844
United States Fund	SM1899100315	16,020
UNICEF-India	SM1899100333	16,545
UNICEF-Mexico	SM1899100453	66,375
Total –Thematic Humanitarian		196,794
b) Non-Thematic Humanitarian Funds		
UNOCHA	SM180386	1,047,108
UNOCHA	SM180402	627,340
United States Fund for UNICEF	SM180381	555,556
Total – Non-thematic Humanitarian		2,230,004
c) Pooled Funding		
NA		
d) Other types of humanitarian funds		
Total –Humanitarian funds received in 2018 (a+b+c+d)		2,426,798
2. Carry-over of humanitarian funds available in 2018		
e) Carry over Thematic Humanitarian Funds		
NA		
Carry over non-Thematic Humanitarian Funds		
NA		
f) Other sources		
Regular Resources	Non-grant GC	67,168
EPF (balance funds not returned)	GE180022	273,904
Total other resources		341,072

*Programmable amount excluding recovery cost

Table 3: Thematic Humanitarian Contributions Received in 2018 (in USD):

Donor	Grant Number ⁴	Programmable Amount (in USD)	Total Contribution Amount (in USD)
French Committee	SM1899100314	97,844	102,736
United States Fund	SM1899100315	16,020	16,821
UNICEF-India	SM1899100333	16,545	17,372
UNICEF-Mexico	SM1899100453	66,375	69,694
Total		196,794	206,623

J. Future Work Plan

Active coordination and communication with UNRCO, UNDMT, HQ, ROSA etc. during the response phase of Kerala flood led to one UN response particularly to implement the first ever PDNA in India. This collaboration has now been shifted towards joint UN response for Recovery.

Emerging partnerships around AAP, risk informed GPDP, DDMP reviews and other programming with district administration and line-departments of aspirational districts has also started emerging as a readily accessible strategic space for advancing risk informed programming, which has been utilised consistently to improve programme effectiveness and will be expanded in Kerala following signing of an Annual Work Plan for Kerala to contribute to the recovery.

K. Expression of Thanks

UNICEF interventions UNICEF's work in the area of Emergency moved in tandem with the state government's attempts at recovery and rebuilding. The organization's work is carried out in partnership with the Government- State and Central, NGOs, the private sector, and other UN agencies and with people in communities. UNICEF India sincerely thanks all donors who supported the emergency work and the recovery process. Efforts have also been initiated to build capacity at the panchayat level, that facilitates the integration of DRR elements into local planning. Thematic funding is a reflection of a donor's understanding that increased flexibility and less earmarking allow UNICEF to take action and prioritize fund allocations according to where they are needed the most. In return, UNICEF India is committed to ensuring implementation and results.

⁴ International Aid Transparency Initiative (IATI) requires all grants to be listed in reporting. <http://iatistandard.org/>

Annex: Human Interest Stories

Water quality Surveillance of Dug Wells

Following the floods in Thrissur district, UNICEF supplied 100 pool testers, 100 Turbidity testing tube kit and 2000 reagent tablets to be used in pool testers to the health department. These were given to the various centres and put to use by the Health inspectors and health supervisors. The technical officer of the health department briefed the surveillance team on the use of the kits. The utility of these kits was revealed in the case of the community well in Ward 11 of Amballur panchayat of Thrissur district. A series of capacity development programme was organized for the health officials to carry out the testing in field. At the state level UNICEF provided technical support in framing the state plan for water quality monitoring & surveillance.



This community well at Amballur with a diameter of 6 metres and depth of 12 metres is adjacent to the road and a storm water drain. Slippers, bottles and other waste were often dumped into the well. About five families depend on this well for drinking water. The well was chlorinated twice after the floods. The surveillance team of the District Health Dept identified that 4 children from these 5 households had contracted jaundice, presumably after drinking water from the well in November 2018. It was also found that these households were not boiling the water before drinking. The Health inspectors and Health Supervisors arrived at the venue along with the other health staff. They tested, dewatered, cleaned and chlorinated the well. They conducted the pH, turbidity and chlorine tests before and after cleaning and chlorination. The availability of the pool testers and turbidity kits was much appreciated. The bacteriological tests are yet to be done. Now the water is clear and clean, and the health department finds the testers very useful for regular testing of wells in the region. It was also decided to look deeper into the cause of contamination, the nearby house was requested to relocate their septic tank or completely seal it to prevent any possible contamination. The well will be continuously monitored for a month for any possibility of chemical and biological contamination.

It is important that the government look at the issue of contamination from latrines to wells and its prevention, outlining clearly how individual wells can be protected as they are the major sources of drinking water for about 50 percent of the population

The Tribal Woman of Kanjiramkadu

Lakshmi is a Kuruchiya tribal women aged about 50 years living in Kanjiramkadu tribal hamlet of Edamunda in Thondarnad panchayat of Mananthavady Block in Wayanad. Since her daughter's

marriage, she has been living with two sons, aged 21 and 23. They live in a small house made of brick and mud plastered walls and a roof consisting of asbestos sheets.

They were caught completely unawares by the heavy downpour on the night of August 8 2018. They were terrified by the gushing water flowing down the hills. There were a number of landslides in the area. Being cut off from other houses, they were clueless about what was happening. They feared for their lives and fled from their home when the rain gave them a breather. They ran to the nearest relief camp set up by the government in a School in Thondarnad. The rain waters took away all the belongings they possessed. Luckily some portion of the walls of the mud plastered house is still holding on. The washed away walls of the kitchen have been replaced by tarpaulin sheets provided by local NGO's and the government.

Lakshmi collects water for drinking and domestic use from a natural spring. The sources are unprotected and get contaminated by runoff water, animals and poor sanitation methods. Lakshmi is excited now as UNICEF is supporting the rehabilitation of the spring water sources in partnership with the local NGO Wayanad Social Services Society based in Mananthavady. The gravity based drinking water supply schemes will ensure safe drinking water to the host community. These schemes will be operated and managed by the committees which would have member beneficiaries like Lakshmi. Lakshmi and her fellow members in the community will be part of the planning and managing of these water supply schemes. Lakshmi believes that the community would have a greater sense of water safety and security and equitable distribution after the spring rehabilitation and associated evolution of a community agreed protocol is set for managing and maintaining the spring water source.

In a similar fashion, 25 natural springs are being rehabilitated and protected through the UNICEF initiative – in partnership with Wayanad Social Service Society (WSSS). As part of the partnership, UNICEF supported the local NGO in installation of the bio-san filtration at each natural springs. The filtered water was stored and distributed through pipelines to individual households. Thus, through this initiative about 400 tribal households received safe drinking water.

This is expected to create precedence and a way forward to the PRIs and government to set up a system and protocol for rehabilitation of affected springs and institutionalize a community owned process of ensuring spring water safety and security and equitable distribution of water

Moving back to Normalcy- Schools in Kuttanad

It is heartening to see almost full attendance in schools, just within two months of the one of the most devastating floods that Kerala has witnessed in a hundred years. Many schools in Kuttanad were inundated for two weeks and more as the floodwaters took long to recede. As the Principal of Chaturthiakari Upper Primary (UP) School recalls- "The school was inundated for at least ten days. When the flood waters receded, we realised that we had lost everything. I could not even find a small piece of white paper to write on. Looking back on those days, I wonder how we overcame the crisis". A range of careful measures taken under the leadership of the district administration supported by people's representatives (MLAs and MPs), the surge in humanitarian support that poured in from different parts of the state and the country, effectively channelized through social media campaigns like the I am for Alleppey campaign, have all played a role in this process of recovery.

Soon after the schools re-opened, efforts at student rehabilitation were focused on both physical recovery of losses and psychological rehabilitation of children. First of all, each school was asked to forward to the AEO (Assistant Education Officer), the list of students who had lost their textbooks and measures were taken to provide a new set. In addition, children were given note

books, instrument boxes, pen sets, and school bags. The learning aids that were distributed through the education department were done so in a phased manner, as it would act as an impetus for students to come back to school. Fresh sets of uniform are also now being distributed to children who had lost them in the floods. With most libraries being damaged, a new set of books is also being provided.

In addition, a number of non-governmental organisations, voluntary networks, school and colleges from other districts provided learning aids, along with utensils for the school kitchen, footwear for children and so on. Notable amongst these initiatives has been the I Am for Alleppey campaign, which is a Facebook campaign that was initiated by the Sub Collector of Alapuzha, Mr Krishna Teja, IAS. This campaign has mobilised resources from different parts of the country and the state, and support has reached in the form of water filters for all schools and Anganwadis in Kuttanad, gas stoves for about 200 Anganwadis, purchase of educational aids for children, and scholarships for children from economically vulnerable families. This campaign has provided a platform for organisations like Save the Children, Ramakrishna Math and many others to extend their support to the rehabilitation of Alapuzha. A number of educational institutions from other parts of the state have also reached out to the schools of Kuttanad. In Chaturthiakari UP school, for instance, students and staff from the TKM Engineering College in Kollam district, first came and assessed the needs of the students and then returned with a set of school bags, instrument boxes, note books, umbrellas and so on.

The pro-active efforts made by the district administration and the civil society network in providing immediate relief and thereby compensating some of the losses they had suffered, helped to restore the overall mood in the schools and the morale of the students. As teachers of the Thottuvathala UP school remarked “Had we not received this support in the form of books and other learning aids, we, as teachers would have to purchase the same at least for students who lost all their belongings. Most of our students come from economically vulnerable backgrounds, their parents going for daily wage work’. As a result, within a week of school re-opening, schools had a 99% attendance. The only exceptions were children who had had to relocate from the area as their homes had been completely damaged, and they had moved to their relatives’ homes far away.

Many schools have suffered infrastructure damage of a serious order. As a first step, the I am for Alleppey campaign renovated the damaged computer lab and provided four new laptops to the ED Lower Primary (LP) School in Alappuzha Municipality. The campaign proposes to construct 15 more of such labs in affected schools. The attractive paintings on the freshly painted walls of the computer lab send out a message of hope that more of such efforts will be made to restore damaged infrastructure in schools. Some other examples of infrastructural damages include the broken cement flooring in the KG section of the same school that generates a lot of dust. The old block in Chaturthiakari UP School has been certified as ‘unfit’ by the Panchayat Engineer; as a result of which all 8 classes are now being conducted in a single block. Mobile wooden partitions divide the existing classrooms, resulting in congestion. Toilets and the electric motor-pump have been damaged in the Thottuvathala UP school, while the tank to store rain water has been damaged in the Little Flower Girls High School in Pulinkunnu. All of these require long term interventions with significant financial investment. Concerted efforts made by the district administration, civil society groups and campaigns like I am for Alleppey make us hopeful that all schools in Alappuzha will travel the path of complete recovery quickly, smoothly and successfully.

UNICEF advocated with the State Council for Education, Research and Training (SCERT) for the inclusion of DRR, life skills education and school safety in the existing school syllabus. A series of psycho-social support programme in convergence with the child protection sector was carried out for the distressed and vulnerable children in the affected districts.