# **CHINA**

# Consolidated Emergency Report 2017 January - December 2016



Community mobilization and survey conducted to assess families' knowledge on immunizations for children in Meng La County, Yunnan province.

©UNICEF China 2016

PBAs: *SM080214*, *SM129906*, *SM140130*, *SM149910* 

Prepared by UNICEF China March 2017



# **Table of Contents**

Executive Summary	4
Humanitarian Context	5
Results	6
Financial Analysis	13
Future Work Plan	14
Expression of Thanks	15
Annex 2. Donor Report Feedback Form	16

### Abbreviations and Acronyms

C4D	
CAST	
CFS	
<b>CDC</b>	
ECD	
EPI	Expanded Programme on Immunization
<b>HFPCs</b>	
IYCF	
MCA	
MCH	
MOE	Ministry of Education
NWCCW	National Working Committee on Children and Women
WASH	Water, Sanitation and Hygiene
YYB	Ying Yang Bao

#### **Executive Summary**

Given the frequent and wide-ranging disasters that occur in China, the Government has invested considerable human and financial resources that can be quickly mobilized in the event of an emergency. Three key national laws (Emergency Response Law, Flood Control Law and the Law on Protecting Against and Mitigating Earthquake Disasters) allow the Government to immediately mobilize resources and implement contingency plans. An early warning system is in place.

UNICEF China's role in this context is to, when required, work with the Government to provide humanitarian relief and response, primarily through partnerships with local governments in regions where UNICEF-supported projects exist. Moving beyond support provided during the recovery phase of large-scale disasters, UNICEF is also working with government to increasingly supporting disaster preparedness and risk reduction programmes.

In 2016, UNICEF continued the support provided during several prior emergencies. This included the 2015 armed conflict in Myanmar's Shan State (adjacent with Yunnan province of China) that caused an influx of displaced Myanmar residents into China; the 2014 Jinggu earthquake in Yunnan province; and the 2013 Dingxi earthquake in Gansu province. UNICEF's support transitioned from what started as humanitarian assistance, to longer term development programmes that strengthen the delivery of quality of services whilst building national and local capacities on preparedness and disaster risk reduction.

Key interventions supported by UNICEF included building capacities of local health staff in the Expanded Programme on Immunization (EPI) surveillance and emergency preparedness, leveraging government investment to restore basic infrastructure (e.g., latrines) through community-based total sanitation, piloting models to provide integrated WASH and nutrition services, and providing safe spaces and psychosocial support for children through Child Friendly Spaces.

In response to the influx of unvaccinated children into Yunnan, UNICEF provided technical assistance in building capacities on immunization by enhancing local immunization surveillance, training local health providers to conduct emergency vaccination campaigns for high-risk children and improving local health providers' communication for development (C4D) skills to identify high-risk populations and advocate for vaccination amongst these groups. In November, after the conflict worsened, Yunnan Centre for Disease Control and Prevention (CDC) and Dehong CDC immediately conducted risk assessments on infectious and vaccine preventable diseases and developed a preparedness plan for vaccination.

UNICEF's continued support to three emergency Child Friendly Spaces (CFS) helped deliver psychosocial support, non-formal education including self-protection, sports activities, early childhood development services and knowledge on parenting skills to families and their children in areas affected by the Jinggu earthquake. In 2016, 1,001 children and 931 caregivers benefited from these services, and in 2017 - these CFSs will become permanent Child Friendly Spaces with UNICEF support. To ensure quality of service and sustainability of CFS, capacities of staff from these spaces and officials from the Working Committee on Children and Women/Women's Federation from all the townships of Jinggu were strengthened. Notable also was UNICEF's continued work with the Ministry of Civils Affairs (MCA) in setting up the National Social Work Team for Disaster Response, which will eventually increase the capacity in delivering social work services, especially for children, and contribute to better and quicker resource mobilisation when a disaster occurs.

In Gansu province, UNICEF supported a joint WASH and nutrition intervention in areas affected by the Dingxi earthquake. This promoted infant and young child feeding and provided micronutrient supplements - Ying Yang Bao (YYB) to vulnerable children aged 6–23 months in affected areas, and built capacities of 300 village doctors and 27 maternal and child health (MCH) service providers in Min County on integrated nutrition interventions. To eliminate open defecation, UNICEF helped trigger community-based total sanitation 42 project villages and by the end of 2016 - 456 sanitary latrines were constructed and more than 1,000 households constructed sanitary latrines or modified

their pit latrine with slab to reduce the health risk of exposure of excrement. Efforts were also invested in increasing public awareness on the benefits of YYB, complementary feeding and breastfeeding and the benefits of WASH on health outcomes through various communication and advocacy efforts.

UNICEF's long-term cooperation with key government ministries, including the National Health and Family Planning Commission, Ministry of Education, National Working Committee on Children and Women (NWCCW), Ministry of Civil Affairs and China Centre of Disease Control and Prevention has contributed to emergency readiness in education, maternal and child health, immunization, nutrition, water, sanitation and hygiene and child protection.

#### **Humanitarian Context**

China's extensive and varied geography is prone to recurrent and major natural disasters. Globally, China ranks among the top ten countries suffering the greatest toll from disasters, in terms of both the total number of fatalities and economic costs of damages. In 2016, the natural disasters China experienced ranged from floods, typhoons, hail and geological disasters, to droughts, blizzards, freezing and forest fires. These resulted in 190 million people affected, 1,432 fatalities, 274 people missing, 1,608 people hospitalized, around 9.1 million people resettled, 521,000 houses collapsed, 26.22 million hectares of crops damaged. The total of direct economic loss reached approximately RMB 503.3 billion<sup>1</sup>.

Except in the most extreme cases, the Government of China has strong capacity to provide immediate emergency relief and response to the vast majority of the emergencies and natural disasters. Three key national laws (*Emergency Response Law, Flood Control Law* and *the Law on Protecting Against and Mitigating Earthquake Disasters*) allow the Government to mobilize resources and implement contingency plans, and an early warning system is in place.

In 2016, UNICEF's support comprised of an extension of support provided during prior emergencies: the influx of displaced Myanmar residents into Yunnan due to the 2015 armed conflict in Myanmar's Shan State; the 6.6-magnitude Jinggu earthquake in Yunnan in 2014; and the 6.6-magnitude Dingxi earthquake in Gansu province in 2013. In moving from response and early recovery where UNICEF provided emergency supplies, UNICEF transitioned also to supporting preparedness — leveraging government investment to restore basic WASH infrastructure (latrines), strengthening the Expanded Programme on Immunization; and piloting models to provide integrated services, safe spaces and psychosocial support for children.

Complementing this, UNICEF also engages in policy dialogue and high-level partnerships with government counterparts on emergency preparedness and Disaster Risk Reduction (DRR). Efforts focused on strengthening cooperation with MCA, the central coordinating body for emergency response and DRR, and the National Disaster Reduction Centre of China (NDRCC), to improve national DRR policy and standards; and establishing an integrated provincial technical centre in Sichuan to help strengthen capacities of local emergency responders and provide technical support for emergency preparedness and relief. UNICEF China is also working with NWCCW to conduct an impact evaluation to examine the effectiveness and efficiency and inform the scale-up of the Child Friendly Spaces project.

UNICEF continues to chair the United Nations Disaster Management Team (UNDMT) in China. The UNDMT continued to provide updated information on domestic disasters to the Office for the Coordination of Humanitarian Affairs, and helped coordinate a workshop to improve the capacities of Chinese NGOs on emergency response. Over 25 Chinese Civil Society Organizations and International Non-Governmental Organizations participated in this and gained knowledge and skills that will enable them to respond rapidly and effectively to disasters.

<sup>&</sup>lt;sup>1</sup> Statistics on Natural Disasters in China in 2016, released by Ministry of Civil Affairs on 13 January, 2017, Accessed on March 20, 2017 via <a href="http://www.mca.gov.cn/article/zwgk/mzvw/201701/20170100002965.shtml">http://www.mca.gov.cn/article/zwgk/mzvw/201701/20170100002965.shtml</a>.

#### Results

In 2016, the funding support received by UNICEF China was put towards achieving significant results in the areas of nutrition, immunization, water, sanitation and hygiene, child protection and social work for vulnerable and disadvantaged children, their families and communities in disaster-affected areas. The key results achieved for all of sectoral programmes are summarized below.

#### 1. Child Immunization

At the request of government, UNICEF's efforts focused on building capacities on child immunization related emergency response in the border areas of Yunnan province in 2016. With the increased incidents of armed conflicts in northeast Myanmar, and the influx of people into China that resulted from this, as well as those that travel to China for other purposes; there has been an inflow of unvaccinated children from neighbouring countries into Yunnan. In 2016, the Yunnan CDC reported that migrant people comprise about 46 per cent of the population in its counties on the border with Myanmar, Laos and Vietnam. More than 5,000 children mainly from Myanmar have come to China to receive vaccinations, and with this, came an increase in the risk of an outbreak of vaccine-preventable infectious diseases.

To address and mitigate this risk, the local Health and Family Planning Commissions and CDCs are eager for UNICEF to continue assisting their capacity development on emergency response. UNICEF worked with China's national CDC and Yunnan's provincial CDC to develop strategies to improve the capacities of local CDC and EPI staff. This included improving the surveillance and monitoring system for migrant children who cross the border from other countries; building an information sharing mechanism on vaccinations as well as infectious disease epidemics and outbreaks; and developing communication strategies and skills of local EPI staff when providing vaccination service information to local ethnic minorities and people from neighbouring countries. In terms of geographical scope, these efforts focused on five counties: Menglian, Mengla, Ruili, Zhenkang, and Tenchong, which share a border with Myanmar and/or Lao PDR.

#### Training and community communication activities

In July 2016, the UNICEF EPI Emergency Project was launched and a training workshop organized in Tengchong, Yunnan. The capacities of more than 100 officials, EPI managers and health staff from eight cities (prefectures) and 25 counties were strengthened on how to address challenges and improve the national Expanded Programme on Immunization. Led by national and local experts, the training sessions included strategic C4D to enable information sharing on immunization with migrant populations in a culturally sensitive manner, analysis of public perceptions and vaccine confidence amongst families, and UNICEF's EPI project management methodology.

The workshop proved to be useful platform to identify a range of problems faced by EPI managers and officials. First, there is a difference in national policies and vaccination schedules for China, Myanmar, Laos and Vietnam. Second, there is no policy support to allocate funding to vaccinate foreign children from border regions in China. Third, it is challenging for the local Yunnan CDC to



Community assessment on KAP conducted in a Miao ethnic community



Vaccination for children from Myanmar

provide vaccinations for these children due to funding, logistics and liability issues.

Since the project launch after the workshop, all five project counties have conducted community assessments and communication activities in the border villages and many ethnic minority communities. These activities included visiting households to provide information on vaccinations and services, educating caregivers as to which vaccines children should receive at what age, and communicating with local EPI staff on proper immunization programme strategies and implementation.

Through this workshop, the Yunnan Health and Family Planning Commission also highlighted the issues of polio infection rates and VPD circulation in Yunnan being significantly affected due to the substantial influx of migrants. Following this and in discussion with local health departments and CDCs, five counties were selected to conduct a baseline survey to assess the immunization coverage and families' knowledge on immunization. These were: Tengchong (Baoshan City), Zhengkang (Lincang City), Menglian (Puer City), Ruili (Dehong Prefecture), and Mengla (Xishuangbanna Prefecture).

#### Baseline survey

The baseline survey conducted in all five project counties will help better understand the scale, and dimensions of the issues facing migrant children from outside of China. A total of 254 children have been surveyed in Ruili (50 children), Tenchong (53 children), Menglian (51 children), Mengla (50 children), and Zhenkang (50 children).

Preliminary analysis of the results of the survey indicate that a majority of these children are from Myanmar (202 children), with the remaining (52 children) mainly from Lao PDR. More than 50 per cent of these children have been found to be seeking vaccination services from clinics in China because they trust the vaccination and services offered by China's health facilities. Most of these children (63.3 per cent) are holding EPI certificates issued from China, and only 21.3 per cent of them have a vaccination record issued from their own country. About 74.8 per cent of caretakers covered by the survey confirmed that they obtained vaccination information from local health staff in China.



The survey is being conducted for the children from outside of China

#### Rapid risk assessment

On 20 November 2016, civil conflict erupted again in Northeastern Myanmar, close to Ruili county of Yunnan province. Large numbers of people from Myanmar, estimated to be 7,000-8,000 people, crossed the border into Wanding township of Ruili and Manhai of Manshi County. This included about 3,000 children under the age of 15 years. In response, the Yunnan and local CDCs conducted a rapid risk assessment on immunization, food security, water and sanitation. Considering the risk of Vaccine-Derived Poliovirus and measles from lower polio vaccination coverage of the children from Myanmar, emergency vaccination campaigns for polio, measles and Hepatitis A were planned.

These campaigns were accompanied by a communication activities targeted at both locals and people from Myanmar, and provided information on the vaccines. In addition, additional vaccine supplies were requested to meet these needs. In light of the fact that this conflict was short-lived, with most people from Myanmar returning back, the vaccination campaign did not need to be fully implemented. Only the infectious disease assessment and logistics of vaccine supplies in these areas were implemented in the end, although the planning exercise did still build valuable capacity.

#### 2. Nutrition

Integrated nutrition with WASH interventions were provided in Min county of Dingxi prefecture, which included the provision of complementary food supplementation through the Ying Yang Bao (YYB) food supplement, promotion of complementary feeding and breastfeeding, together with the promotion of good WASH practices. Since the 2015 baseline survey results showed a low coverage of YYB food supplement and low compliance among households receiving YYB as well as poor hygiene practices; meetings were organized to focus on C4D strategies that would help increase infant and young child feeding and improve hygiene practices and WASH improvements in villages. These meetings included participation from UNICEF, the Capital Institute of Paediatrics and implementation teams at the county level.

In June 2016, the capacities of 300 village doctors and 27 maternal and child health (MCH) service providers in Min County were built on integrated nutrition interventions through two training workshops conducted by country level experts. A WeChat Group was established to communicate the progress and difficulties met during the implementation, in real time, so as to find provide timely advice and solutions.



Situation of children in Min County, ©UNICEF China 2015



Training workshop and survey in Min county,  $@UNICEF China\ 2015$ 

Awareness on the benefits of YYB was raised in Min county through a variety of communication tools. Communication materials tailored to the local context, were designed and disseminated, such as 300 advertising handbags, 10,000 IYCF booklets, 36 outdoor banners (two banners for each of the 18 townships), 2,060 posters (one for each village group) and 718 bulletin boards (two boards for each village). This was complemented by 18 seminars on infant and young child feeding that were convened in each township, and in which a total of 1,500 township hospital leaders, village leaders and caregivers participated. Six knowledge sharing lectures were provided in villages with low YYB compliance in which a total of 300 community leaders and caregivers participated. In addition, staff at the county level bureaus of health and MCH monitored and supervised township and village-level YYB management.





YYB management training in Min County (left). Local communication materials developed (right). © UNICEF China 2016



#### 3. WASH

As mentioned above, the integrated nutrition and WASH pilot project was continuously implemented in Min County, Gansu province. The Community Approach Total Sanitation (CATS) training was organized in all 42 project villages, as reported by the local health authority. More than 1,000 households constructed sanitary latrines or modified their pit latrine with slab to reduce the health risk of exposure of excrement. In order for more children to benefit from the WASH project, the county level education authority also joined the project in 2016 to organize a health campaign on Global Handwashing Day and World Toilet Day. More than 2,000 school children participated in and directly benefited from this by way of information and awareness.





CATS training in Qinxu Township, Min County (left), showcasing the community action plan on sanitation improvement in Qinxu Township (right). © UNICEF China 2015





Global Handwashing Day and World Toilet Day campaigns in Min County, Gansu province.



Old household pit latrine (left) and newly constructed sanitary latrine with water flush ability (Right)

#### 4. Child Protection

UNICEF continued to support the provision of community-based support to children affected by earthquakes through the Child Friendly Spaces in Yunnan province, and to support the National Social Work Team for Disaster Response across China.

#### **Child Friendly Spaces**

1,031 children and 931 caregivers benefited from the services of the 3 CFSs in Jinggu County of Pu'er Prefecture, Yunnan Province which were set up shortly after the earthquake. These CFSs have provided community-based, child-friendly protection and welfare services to children and families in the earthquake-affected zones. The CFSs addressed the psychological needs of children by offering them a safe, well-organized and child-friendly space to recover and regain a sense of normalcy, and to access psychosocial support from trained professionals.

The child friendly spaces were open over 40 hours a week. Apart from the daily operation, the CFS staff organized 34 CFS-based thematic activities and 12 community-based events, which have promoted the life-skills of children, parenting skills of caregivers, and community awareness of children's needs and rights. The local child protection committees were in full operation and identified and followed up eight children with special needs.



Children playing in Qiannuo CFS during the Mid-autumn Festival



Children celebrating ethnic holidays with parents and staff in Yizhi CFS.



The staff of Qiannuo CFS conducting follow-up visit to the child's home.

Two training workshops were organized for the staff of the three CFSs and officials from the Working Committee on Children and Women (WCCW)/Women's Federation from all the townships of Jinggu to ensure the quality of service and sustainability of CFS. The CFS experience of UNICEF-supported project sites was shared and UNICEF's contributions to provincial scale up of CFSs in non-emergency settings were duly recognized. One national monitoring visit and twelve county level monitoring visits were conducted by NWCCW and WCCW to provide supervision and technical guidance to the CFSs.

In addition, 8,000 copies of four booklets on prevention of child injury and sexual abuse were reprinted and disseminated nationwide, including to the three CFSs in Jinggu as well as other CFS through provincial WCCW offices, to provide adults and children with knowledge on child protection issues. Sports kits were also purchased and disseminated upon the requests of the three CFS in Jinggu for organizing recreational and group activities for children.

An external evaluation has been planned to review the



Training for CFS staff in Jinggu.

# THE PARTY OF THE P

Children's drawing and writing of selfprotection in Weiyuan CFS

#### **CFS** evaluation

NWCCW-UNICEF CFS project from 2008 – 2015, including in emergency and development settings. The evaluation team has been selected, and contracted for this piece of work, although some delays are being experienced in moving forward, given a change in leadership in NWCCW. But further delays are being experienced in moving forward, with ongoing discussions on the research team having access to the Child Friendly Spaces that UNICEF supported in the past, but are now run by

government, and the extra workload an evaluation would bring to the local officials.

#### **National Social Work Team for Disaster Response**

Building on the experience and lessons learnt from the establishment of the local social work platform in emergencies in Lushan in the last programme cycle with MCA, UNICEF continued working with MCA in 2016 to set up the National Social Work Team for Disaster Response. The current 60 team members, most of whom are experienced social workers, or managers of social work agencies, including those specialized in working with children and families, shall be seconded

to high-level disaster response throughout the country. They will provide technical guidance to local social work service design and provision, ensure children's needs are prioritized, and assist in information sharing and resource integration. Two training workshops were held for the team members to prepare them for the secondment and further develop their capacity in working in emergency settings. Procedures and management policies were also developed to regulate the team. The set-up of the team will eventually increase the capacity in delivering social work services, especially for children, and contribute to better and quicker resource mobilisation when a disaster occurs. A few sub-national teams were also set up following the same mechanism to respond to level one and two disasters within the provinces.

#### Resilience

The Government of China is moving towards adopting a more preventative approach to disaster risk management. To support Government in this endeavor, UNICEF is collaborating with government partners on risk-informed programming and establishing good practices in preparedness, Disaster Risk Reduction (DRR) and resilience. An integrated community-based DRR model is being built with government counterparts in civil affairs, health, WASH, child protection and education; and efforts are underway to generate evidence for the improvement of DRR policies and standards at the national level, while establishing a provincial technical center to provide technical support to frontline emergency responders.

#### **Monitoring and Evaluation**

UNICEF undertook periodic field monitoring visits, focused on obtaining quantitative and qualitative information related to intervention coverage and service quality, with continued emphasis on improving equitable service access and achieving results for disadvantaged children and communities. For instance, UNICEF and its counterparts at the national and sub-national levels carried out monitoring visits together with expert groups to provide technical support to local provincial, prefecture, and county CDCs on baseline survey plan development, training, and implementation as well as community mobilization to vaccinate migrant children. In 2016, UNICEF visited Tengchong and Mengla counties in Yunnan province to conduct immunization monitoring and technical support for local CDCs in response to an emergency that arose. Another visit to Min county, helped improve understanding of the local difficulties and constraints on YYB management and led to the creation of a plan on how to improve this, together with local counterparts.

Project monitoring is one of the key strategies to identify bottlenecks in implementation and to address the issues and challenges identified. For the integrated Nutrition and WASH project, a Wechat group consisting of all key stakeholders at all levels was established to promote daily communication on the progress of the programme, where members can pose questions to the group and share photos from the project sites. This has proved to be a very efficient platform and channel for UNICEF to monitor the project.

The collected monitoring data has also contributed to a repository of data and evidence needed for advocacy and policy engagement. The integrated nutrition and WASH project began with carrying out quality baseline surveys, which yielded key data on the current nutritional status of children in the communities, providing an important base for evaluating the impact of integrated interventions on children's growth development.

# Financial Analysis

#### Table 1: Funding status against the appeal by sector (NOT APPLICABLE)

Table 2: Funding received and available in 2016 by donor and funding type (in USD):

Donor Name/Type of funding	Programme Budget Allotment reference	Programmable Amount*	
I. Humanitarian funds received in 2015			
a) Thematic Humanitarian Funds			
NA – No new ORE received in 2016			
<b>b) Non-Thematic Humanitarian Funds</b> (List individually all non-thematic emergency funding received in 2016 per donor in descending order)			
NA	NA	-	
NA	NA	-	
Total Non-Thematic Humanitarian Fur	nds		
c) Pooled Funding			
CERF	NA	-	
Humanitarian Response Fund	NA	-	
d) Other types of humanitarian funds			
In-kind assistance (include both PBAs for supplies & cash)	NA	-	
Total humanitarian funds received in 2	2016 (a+b+c+d)		
II. Carry-over of humanitarian funds available in 2016			
e) Carry over Thematic Humanitarian	Funds		
Thematic Humanitarian Funds	SM/12/9906	306,369	
Thematic Humanitarian Funds	SM/14/9910	505,233	
f) Carry-over of non-thematic humanitarian funds (List by donor, PBA and programmable amount being carried forward from prior year(s) if applicable			
UNICEF China	SM/08/0214	397,463	
Total carry-over humanitarian funds (	e + f)	1,209,065	
III. Other sources (Regular Resources	set -aside, diversion of RR	- if applicable)	
Regular resources diverted to emergency	NA	-	
Regular resources set-aside or RR for unfunded OR used for emergency	NA	-	
EPF	NA	-	
Total other resources			

Table 3: Thematic Humanitarian Contributions Received in 2016 (in USD):

Donor	Programmable Amount	Total Contribution Amount
NA – No new ORE received in 2016	N.A	N.A

#### **Future Work Plan**

In 2017, UNICEF will continue to advocate for risk-informed and child-friendly programming in disaster-prone areas by working with counterparts to strengthen relevant policies and increase knowledge sharing at the central and local levels. Outlined below are the key areas of planned activities.

**Nutrition:** In 2017, the following key activities are planned in Min County:

- Organize training workshops on the sustainable implementation of integrated nutrition and WASH intervention in Min County;
- Carry out C4D activities to improve the integrated nutrition and WASH interventions;
- Support the development of a complementary feeding recipe to further improve nutritional status of infant and young children;

**Immunization:** Based on the baseline survey results and agreed priorities of local Health and Family Planning Commissions and counterparts, continued monitoring and ready for response measures will be conducted to provide greater access to immunization and lower the risk of an infectious disease outbreak from children migrating to China. UNICEF will work with local counterparts in 2017 to:

- Develop a strategy and project implementation plan in the Yunnan border areas for the 2016-2020 programme cycle, and conduct training activities for local EPI staff at county, township and village levels on monitoring, reporting and communicating with migrants.
- Increase capacity development for local Health and Family Planning Commissions and CDCs on emergency response preparedness during an emergency situation, such as if large amounts of migrants cross the border to Yunnan due to civil conflict, natural disaster or infectious diseases epidemics and outbreaks amongst children.
- Develop a communication strategy on sharing EPI information between countries (Yunnan
  with neighboring countries) including vaccination status of children, occurrence of vaccinepreventable epidemics through UNICEF, WHO and local HFPCs; and a C4D plan for during the
  emergency.

#### WASH:

The UNICEF WASH programme will continue to conduct the CATS projects in Min County of Gansu province to improve the WASH situation in local communities, schools and township hospitals. In addition to this, plans are underway on two new initiatives: drafting a climate change/disaster risk reduction strategy as part of the Healthy City/Child Friendly City Initiative, and supporting the Ministry of Environmental Protection to develop an education manual for children on environmental health, climate change and disaster risk reduction.

#### **Child Protection:**

Upon the request of NWCCW, UNICEF will continue supporting the three CFSs in Yunnan province so that they continue to provide relevant and effective recovery and support services for earthquake-affected children and families, and are fully prepared to transit to CFS in a development setting. Apart from providing capacity building to CFS staff, UNICEF will in particular support the local WCCW to fully take over the CFS work at the end of 2017.

UNICEF, together with NWCCW, will support the evaluation of CFS in 2017 to identify good practices, lessons learned and bottlenecks to help strengthen CFS as a model for a) a child protection

programme response during emergencies, and b) a community-based child protection and welfare service delivery mechanism that can be scaled up with quality in China.

UNICEF will work with MCA to improve the social work services provided during and after an emergency situation, with the focus on the support to the National Social Work Team for Disaster Response and selected Sub-national Social Work Team(s) for Disaster Response, in particular on capacity building and setting up a sub-team specialized in working with children. At the policy level, UNICEF will aim to develop the function and competency framework for social work for children in emergency settings, and further explore how to facilitate the synergies between communities, social workers, social organisations and volunteers.

#### **Expression of Thanks**

On behalf of women and children affected by the devastating earthquakes, UNICEF would like to express its sincere gratitude for the generous support provided by donors. With this support, UNICEF was able to continue to support activities and interventions originating from prior emergencies, and through this transition from the recovery phase to longer term sustainable development. With your generous contribution, UNICEF has made significant progress in providing quality MCH, immunization, WASH, nutrition, education and child protection services, making a significant difference in the lives of thousands of vulnerable children and their families.

# Annex 2. Donor Report Feedback Form

UNICEF is working to improve the quality of our reports and would highly appreciate your feedback. Kindly answer the questions below for the above-mentioned report. Thank you!

Name of Report: UNICEF China 2016 Consolidated Emergency Report

**PBA reference number:** SC/2008/0214, SC/2012/9906, SM/2014/0130, SM/2014/9910

SCORING: 5 indicates "highest level of satisfaction" while
0 indicates "complete dissatisfaction"
<ol> <li>To what extent did the narrative content of the report conform to your reporting expectations? (For example, the overall analysis and identification of challenges and solutions)</li> </ol>
5
If you have not been fully satisfied, could you please tell us what we missed or what we could do better next time?
2. To what extent did the fund utilization part of the report meet your reporting expectations?
5     4       3     2       1     0
If you have not been fully satisfied, could you please tell us what we missed or what we could do better next time?
3. To what extent does the report meet your expectations in regard to the analysis provided, including identification of difficulties and shortcomings as well as remedies to these?
5
If you have not been fully satisfied, could you please tell us what we could do better next time?

4.	To what extent does the report meet your expectations with regard to reporting on results?				
	5 4 3 2 1				
	If you have not been fully satisfied, could you please tell us what we missed or what we could do better next time?				
5.	Please provide us with your suggestions on how this report could be improved to meet your expectations.				
6.	Are there any other comments that you would like to share with us?				

Thank you for filling this form!