

ECUADOR

Consolidated Emergency Report - 2016



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Abbreviations and Acronyms

ACH – Acción Contra el Hambre (NGO)
ADRA -Adventist Development and Relief Agency (NGO)
AIEPI - Integrated Management of Childhood Illness
C4D - Communication for Development
CFS – Child Friendly Spaces
CMT - Country Management Team
CO - Country Office
CRS - Catholic Relief Services
DCT - Direct cash transfer
DRR - Disaster Risk Reduction
DyA - Development and Self-Management (NGO)
ECD – Early Childhood Development
ECO - Ecuador Country Office
EPMAPAS - Municipal water companies
ERC – Ecuador Red Cross
ETEPs - Temporary education and protection spaces
FEPP - Fondo Ecuatoriano Populorum Progressio (NGO)
GAD - Decentralized Autonomous Government
HAC - Humanitarian Action for Children
HACT - Harmonized Approach to Cash Transfers
HCT – Humanitarian Country Team
HIAS (NGO)
IDP – Internally displaced Persons
IYCF - Infant and Young Child Feeding in Emergencies
IOM – International Organization for Migration
LACRO - UNICEF Latin America and the Caribbean Regional Office
MCDS - Ministry of Social Development Coordination
ME - Ministry of Education
MIES - Ministry of Economic and Social Inclusion
MINEDUC - Ministry of Education
MoH - Ministry of Health
M&E - Monitoring and Evaluation
NGO - Non-Governmental Organization
OR - Other Resources
PAHO - Pan American Health Organization
PLAN – (NGO)
RO - Regional Office
RR - Regular Resources
RUD - Registry of Affected Population
SENAGUA - Secretariat of Water de Agua
SGBV – Sexual and Gender-Based Violence
UN - United Nations
UNHCR - United Nations High Commissioner for Refugees
UNDP - United Nations Development Programme
WHO - World Health Organization

education and protection spaces were installed, with the capacity to work with approximately 3,500 children and adolescents. Early psychosocial attention for children and adolescents began in the very first days.

With the aim of responding quickly and efficiently to the emergency, UNICEF established two temporary field offices (in Pedernales and Esmeraldas) in order to reinforce its presence and assistance in the two most affected provinces, Manabí and Esmeraldas. It also proceeded to reorganize its structure, strengthening its technical response capacity. Progressively, more than 20 emergency staff have been deployed to the field. UNICEF activated "Level 2" fast track procedures for the emergency response to the earthquake and received a loan from UNICEF of \$2 million USD in "emergency programme funding" to facilitate rapid response. Under the coordination of the HCT, UNICEF led together with the national institutions, the clusters of WASH, Education, Nutrition and the sub-cluster of Child Protection.

Protection, Health and Nutrition, Education, areas of work of CO Regular Program, quickly developed strategies to uphold the UNICEF Core Commitment for Children in Emergency. The Health Sector established that the priorities of intervention were to restore immediate access to health services. As for Child Protection, Key priority was the protection of children and adolescents from violence, abuse and exploitation.

Furthermore, the CO and national counterparts identified that the provision of safe water, access to adequate sanitation and the promotion of hygiene in the wider affected population were extremely urgent issues to reduce the risk of waterborne diseases. A new Water, Sanitization and Hygiene Output was created into the existent CO structure. Thus, UNICEF focused its immediate response on the most pressing needs of the population, principally in urban settlements. The CO focused on the immediate provision of safe water and sanitation to the affected people and rehabilitation of WASH damaged infrastructures; provided support to health and nutrition services through the provision of critical health supplies, early identification of children at risk of malnutrition and the care of children suffering from severe acute malnutrition; supported a national Safe Return to School plan, through the provision of supplies and materials, rehabilitation of schools and establishment of temporary schools safe from hazards; Child Protection sector focused on providing psychosocial assistance to affected children, through the establishment of safe environments for child-friendly centres and activities enabling children to play and have recreational activities. UNICEF also supported WASH, Education, Nutrition and Child Protection sectors coordination at both national and sub-national level.

Within the framework of the HAC appeal (and a certain amount of regular resources), the above-mentioned multi-sectorial strategy enabled UNICEF Ecuador to achieve the following results as of 31 December 2016:

- Establishment of temporary spaces for education and protection (with a capacity for 13,290 children), and provision of educational/recreational materials (more than 34,000 children beneficiaries), in support of MINEDUC safe return to school activities.
- Provision of safe drinking water (64,000 beneficiaries), sanitation infrastructure (32,000 beneficiaries), hygiene promotion (64,000 beneficiaries) and the distribution of hygiene kits (30,000 beneficiaries).
- Strengthening of health and nutrition services through the provision of medical supplies (250,000 children under 5 years of age and 26.800 pregnant women and breast feeders with access to micronutrients and dosages of vitamin A), early identification of children in risk of malnutrition and the distribution of micronutrients.
- Psychosocial support provided to approximately 20,000 children and adolescents and their families, as well as family follow-up activities, family regrouping and individual care for children without a family.

Additionally, in 2016 Ecuador CO responded to two emergencies: the flooding in Esmeraldas province in January 2016 and the Zika virus emergency³, the worst affected provinces coincided with the earthquake affected zone. This outbreak could potentially worsen the situation of children affected by the earthquake:

To tackle this additional issue, UNICEF Ecuador in coordination with the MoH, and PAHO/WHO launched a Zika Virus prevention campaign (more than 1 million people reached) and launched with its partners an education and communication program for Zika prevention and vector control in alliance with MoH and MoE: 30,400 people (including 1,130 pregnant women) received Zika prevention kits supported by a C4D community strategy, while 321 teachers and 10,704 students were involved in Zika prevention



education programs. In order to complement these activities, UNICEF WASH sector also included within its strategy promotion of hygiene/control of vectors at the community level.

As for funding, in 2016 UNICEF Ecuador received 65% of the US\$ 15,300,000 appealed for its humanitarian work in Ecuador, amounting to a total of US\$ 9,930,544. In addition, UNICEF Ecuador also mobilized US\$ 2 million of its own regular resources, as well as its regular staff who were entirely committed to the CO humanitarian activities during the most acute phase of the emergency.

Much recovery work remains to be done in 2017. Some 3,000 aftershocks have been experienced in all since the 16th April earthquake causing further damage and setbacks with the response and recovery programmes, the last significant cycle of which was another earthquake of 5.8 magnitude hit the northwest part of Ecuador in Esmeraldas province with epicentre in Atacames on 19 December 2016. Subsequently, 144 aftershocks took place in the area. Upwards of 4,000 people have been affected (including 3 people dead), while 145 buildings were damaged or destroyed. One new official IDP camp was settled, and 15 additional informal shelters set up. Within the context mentioned above, the earthquakes revealed important gaps in national emergency preparedness and response capacity, particularly for some sectors, and opportunities to improve disaster risk reduction programs.

UNICEF Ecuador is currently focusing on the local/central institutional capacity building and sector coordination. However, in WASH sector, provision of safe water and sanitation continues in official and

³ It should be highlighted that thematic funding was critical in carrying out this programme.

⁴ Maria Zambrano (18) lives in Portoviejo, one of the most affected areas by ZIKV. As a daily practice to protect her family, she covers her water tank with safety lids in order to prevent mosquito breeding.

informal shelters when requested. UNICEF will keep conducting hygiene promotion campaigns, solid waste activities and vector control activities. Whereas UNICEF initially focused on psychosocial assistance to children, their families and first line responders at the outset of the emergency, UNICEF Ecuador in 2017 will give priority to supporting families with protective environments and strengthening institutional and community capacity on violence prevention and response. At this stage of emergency, UNICEF will keep applying its methodology for tracing children out-of-school, adopted by the Government, to assure inclusion of all children in schools in the affected areas. Almost one year after the earthquake, the response and recovery will be focused mainly on rural areas which have received less humanitarian assistance. Meanwhile, new transition strategies are also being identified in each sector to support the phases of rehabilitation, reconstruction, resilience and disaster risk reduction.

In responding to the earthquake, UNICEF worked very closely with the Government and other humanitarian partners (various NGOs that helped UNICEF implement its planned activities; see more details in “Humanitarian Results”) to help save lives of children and women. Throughout the emergency, UNICEF Ecuador regular/development programme supported a better response and results⁵ and enabled these results to be more sustainable. UNICEF focused on building resilient systems across the sectors with longer term development results, including strengthening capacities and systems for national and local resilience in the face of future shocks. Hence in 2017 UNICEF will ensure that all relevant policies, programmes and interventions contribute to increase national capacity.



Humanitarian Context

Considered the largest disaster in the region since Haiti in 2010, April 16's earthquake directly affected 720,000 people, of whom 350,000 were in need of urgent assistance. The affected areas were the provinces of Manabí, Esmeraldas, Santa Elena, Guayas, Santo Domingo and Los Ríos, for which the government declared a “State of Emergency”. In Manabí and Esmeraldas provinces, where UNICEF concentrated most of its humanitarian activities, the state of exception has been extended several times and is still effective.

The earthquake caused significant damage to housing and infrastructure leaving thousands of people without safe shelter, water, food, health services. Many roads and bridges, have been damaged, which resulted in logistics and communications challenges in some areas, which hindered the delivery of assistance. A total of

⁵ November 30, 2016, children and students of the temporary school of Tabuga send a greeting for UNICEF who has had an active support in this community helping the children to recover their classes after the earthquake of 16 of April (Jama - Manabí, Ecuador).

38 health centers and 15 hospitals were damaged and six hospitals were non-operational. At least 30,000 people could not have access to services such as surgery, intensive care and other specialized services. In addition, heavy rainfall exacerbated the damage, causing floods and stagnant water, greatly increasing the number of breeding sites for mosquitoes, and consequently the risk of mosquito-borne disease such as Zika, Chikungunya, and Dengue fever, posing an immediate public health threat. The province of Manabí registered the highest incidence of vector-borne related to infestation by *Aedes Aegypti* diseases (dengue, chikungunya and Zika) nationwide. In mid-December 2016, according to MoH reports, there were 2,756 cases of ZIKV reported, (of which 2,337 in Manabí), including 221 pregnant women.



The earthquake damaged over 28,000 houses, more than 560 schools and 51 health facilities at an estimated cost of some 3.34 billion dollars⁶. More than 387,000 affected persons were included in the State's Sole Registry of Affected Population (RUD) from which a total, 52 % were women (including 2,899 pregnant), 40,000 were children younger than five years old, 29,429 older than 65 years of age, and 15,715 were persons with disabilities. Around 36,000 houses have been assessed as unsafe by the Ministry of Urban Development and Housing. The earthquake had a significant impact on the situation of children and women, particularly given that the two most affected provinces were historically one of the poorest and neglected areas of Ecuador, with limited social services and higher levels of vulnerability prior to the earthquake. Access to safe water, proper sanitation and hygiene was one of the main concerns in the affected areas. According to a census carried out by the government in 2010, in order to access drinking water, Ecuadorians usually boil it (40%), treat it with chlorine (3%), filter it before drinking it (1.3%), or drink purified water sold in plastic bottles (22%). About 49% of rural residents consume water the way it arrives in the home. According to figures from the same census, three of the main municipalities of Manabí and Esmeraldas provinces (namely Muisne, Pedernales and Jama) had poverty rates that reached 98.3%, 93.7% and 90.3% respectively, while the national rate was at 60.1%. Likewise, while the national net enrolment rate for upper secondary education for children between 15 and 17 years was 53.9%, within these three locations it reached 33.7% (Muisne), 30.8% (Pedernales) and 45.2% (Jama).

⁶ Destroyed buildings in Pedernales and Nuevo Pedernales, Manabi, Ecuador.

In Ecuador, surveys outline that violence against children persists at home, in schools and in public spaces while chronic malnutrition of children under 5 years remains amongst the higher levels in the region, with overweight and obesity as a rapidly growing problem. Also, there were fears this year that the current economic crisis could risk losing some of the advances made for children and adolescents over the last decade in this upper-middle income country. For instance, in June 2015 extreme income poverty reached 14.9% while for the same month in 2016 it was 18.6% for the rural area.

The Government of Ecuador, in close coordination with the International Community, has responded a large part of the most urgent needs of the affected population, especially in urban settings. However, there were gaps in the response to protect children, women, men and people with special needs, there was a risk increase of gender-based violence, sexual abuse, trafficking, family separation and deteriorating conditions emotional and emotional health. Children demonstrated signs of psychosocial distress after being confronted with great adversity and hardship after the earthquake. Access to safe water had been significantly reduced while the continued and permanent distribution of water to the people hosted in official shelters was a serious concern. With reduced access to safe water and low monitoring of water quality, risk of water contamination and outbreaks of waterborne diseases were high.

In the wake of the earthquake, significant displacement took place towards official shelters and spontaneous sites: in April, there were more than 30,000 people in formal official shelter and an unknown number of people living with host families or in precarious situations in spontaneous sites, mainly in rural areas (the second DTM assessment conducted by IOM from 17 to 22 May reported approximately 20,400 displaced people located in 146 spontaneous sites). Conditions at displacement sites varied greatly with some sites having access to basic services ranging to other sites with very limited services, especially in rural areas. The main concern in the camps and spontaneous sites were related to safety and security of the hosted population, especially children and women. A particular concern has been raised also for children and teenagers living in informal settlements that spend most of their time in inappropriate contexts and locations. Consequently risky activities, such as filling the water reservoirs by the water trucks, were being conducted by teenagers and older children.



Building on its longstanding partnership with the Ministries of Health, Education, and Social Protection, UNICEF provided substantive support to needs assessments, coordination and first response in WASH, Education and Child protection. UNICEF also supported the data collection on the needs of children and adolescents with disabilities to enable the response and recovery efforts.

Humanitarian Results

WASH

In Ecuador, UNICEF started its activities of WASH as a consequence of the emergency caused by the earthquake of April 16. UNICEF CO WASH response in the two most earthquake affected provinces focused on provision of water, sanitation and basic hygiene support including hygiene promotion to the severely affected population with the objective of preventing water and hygiene related illnesses such as severe diarrhea and the Zika virus among children and vulnerable groups. UNICEF led the WASH Cluster, maintaining the structure for WASH coordination at the national and local levels in the affected zones.

In line with the Core Commitments for Children in humanitarian action (CCC), UNICEF had defined various WASH targets as outlined in the HAC Flash Appeal:

- 170,000 people affected people with access to hygiene support
- 90,000 people affected have access to safe water
- 40,000 people affected have access to basic sanitation facilities

⁷ July 1st 2016, a girl runs along the tents at the Divino Niño official shelter. Tents in official shelters were provided by the Government of the People's Republic of China (Pedernales. Manabi, Ecuador).

To fulfil its commitments, UNICEF Ecuador worked in close collaboration with SENAGUA and Cluster partners to set up a strategy with the aim of achieving the previously defined humanitarian results HAC. At the institutional level, UNICEF supported the National Secretary of Water (SENAGUA) with technical assistance, especially on safe water supply and sanitation solutions, while CO also strengthened the responsiveness of local water supply and sewage public companies (EPMAPAs).

UNICEF consequently facilitated access to the services of WASH to the affected people in government supported shelters, where facilities had been given for the provision of water, sanitation and hygiene (that have met the global minimum standards in emergency situations).

UNICEF has provided response through WASH partners, as well as by means of a direct implementation that has provided assistance to 14,000 persons with water and 5,000 with sanitation. Indeed, UNICEF provided emergency water through trucking of water to Internally Displaced Persons (IDPs) camps, provision of drinking water treatment options and chlorination of water systems. A significant part of our direct implementation, consisted in supporting local water authorities with supplies and equipment (pumps, tanks, pipes).



WASH established a close collaboration with other sectors, such as:

- Education: 13,290 students were provided with safe water supply and sanitation facilities in 13 temporary education and protection spaces established by UNICEF and its partners. Also, UNICEF collaborated with the MINEDUC identifying 142 schools that were affected by the earthquake. By year end, the WASH infrastructure has been rehabilitated⁸ in a total of 113 schools. In order to address the needs of girls and boys in the learning spaces, UNICEF advocated for a gender-sensitive approach, including provision of separate latrines and WASH facilities for boys and girls, as lack of separate WASH facilities for boys and girls is one of the primary constraints in girls' returning to education in emergency scenarios. Likewise, activities for the promotion of hygiene and vector control have been carried out.
- Health: There has been cooperation in the establishment and monitoring of the water chlorination system. This has been integrated with the activities of the campaign against Zika virus in the promotion of hygiene/control of vectors at the community level.

⁸ Rehabilitated bathrooms in the school Mercedes Mendoza Briones of the Estero Seco Community.

- Shelter: More than 500 sanitary units have been built to assure access to sanitation services in temporary housing areas. Likewise, support has been provided to the efforts for reconstruction, so that the new homes be supplied with WASH services.

As of 31 December 2016, all activities included, UNICEF WASH Ecuador achieved the following results:

- 64,000 persons provided with access to safe water, including the donation of inputs and the rehabilitation of hydraulic infrastructure in communities and educational centers (out of which 31.800 women, including 12.900 girls).
- 64,000 persons provided with hygiene support, including hygiene items and activities for the promotion of correct hygiene practices (out of which 31.800 women, including 12.900 girls).
- 32,000 persons assisted with access to sanitation (out of which 15.800 women, including 6.450 girls) by means of the installation, construction and rehabilitation of latrines⁹.



Noteworthy, through several assessments, UNICEF CO became progressively aware that there were strong and underestimated WASH needs in the rural areas (in line with government authorities, humanitarian actors who initially concentrated their efforts in urban areas). Therefore UNICEF decided to re-strategize some of its activities and allocate part of its funds towards rehabilitation of WASH infrastructures in the rural areas. However, carrying out the same activities in remote rural areas entailed potential logistics issues (accessibility of roads, time and distance).

The lack of local technical capacity compelled UNICEF to extend support activities and technical assistance, to finance supplies and other unplanned activities, and to carry out direct interventions by UNICEF WASH teams. For all the above reason, an exercise of reprogramming was done to include the changes in the definition of some targets. The main reason for underachievement, notably concerning hygiene support objectives, can be explained because the targets were set in early May 2016, when needs assessments had not been comprehensively completed, and also because Health cluster jointly contributed to the same goals, so that targets had to be adjusted in October 2016. However, all changes have not undermined the outcome and output of the intervention, and the overall achievement of WASH results have been good. At the epidemiologic level, there has been no official report of the appearance of water borne diseases, a matter that constitutes the main indicator of a correct response. It should also be mentioned that consultations have been a key issue to design the WASH response: to this end, UNICEF's implementing partners set up mechanisms of accountability, to take into account the understanding of activities by the community and avoid the creation of expectations beyond the assistance provided.

⁹ Fatima Hernandez and her family benefitted from sanitation facilities set up through UNICEF implementing partner CRS (Bigua, Manabí province).

Overall, progress is on track, especially in hygiene support and promotion, for which good results have been achieved during the past few months. At present, the WASH strategy has integrated new activities to cover the needs of areas where assistance has been limited, such as in spontaneous shelters, rural zones and institutions, principally in schools.

All activities have been undertaken according to the Core Commitments for Children in Humanitarian Action (CCCs), the WASH Cluster strategy and priorities, and with engagement with the national water authorities. Activities have been undertaken via partnership agreements with several national and international partners who have strong presence in the affected areas and who have been strong cluster partners: various NGOs, namely ACH (water, hygiene and sanitation, particularly in official shelters), OXFAM (rehabilitation of water infrastructures and hygiene promotion, including the WASH in schools component), CARE (all three actions, including WASH in schools), CRS (hygiene and sanitation), and FEPP (WASH in schools) played a key role in implementing this emergency strategy defined by UNICEF. UNICEF CO also directly implemented part of its strategy, as mentioned above.

As for funding, humanitarian funds (ORE), including pooled funds (CERF), allowed UNICEF to quickly procure supplies, quick cash transfers to partners for implementation of activities and consequently to provide immediate provision of safe water, sanitation facilities and hygiene support for affected children and their families. Despite the amount request expressed in the Flash Appeal, only 49% have been received so far.

Indicators	Cluster/sector 2016 Target	Cluster/sector total results	UNICEF 2016 Target	UNICEF Total results
Number of affected people with access to safe water.	180,000	224,690	90,000	64,000
Number of affected people with access to basic sanitation facilities.	80,000	43,267	40,000	32,000
Number of affected people with access to hygiene support.	350,000	141,447	90,000*	64,000

* Adjustment made throughout the year:

EDUCATION

Following the earthquake, around 560 schools were completely collapsed or damaged¹⁰. In addition to the impact on facilities and buildings, children and their caregivers in affected areas were in dire need of psychosocial support and the protective environment that education can provide. UNICEF Education section in collaboration with the Government and the Education Cluster, considered a priority for emergency response the set-up of temporary education and protection spaces (ETEPs) for children aged three to eighteen years, to provide them with a safe and quality learning environment through the provision of education supplies. UNICEF coordinated the Education Cluster and provided to all stakeholders support for education in emergency.

UNICEF had defined various programme targets regarding Education at the beginning of the emergency response, clearly outlined in the HAC Flash Appeal as follows:

- 60,000 children and adolescents have access to essential educational materials
- 20,000 children and adolescents have access to temporary education, recreational and protective spaces.
- 60,000 children and adolescents who benefit from psychosocial support, stress relieving activities and key life-saving messages.

To reach these humanitarian goals, UNICEF Ecuador built a five pillar emergency strategy:

- The first pillar was the establishment of 13 temporary education and protection spaces¹¹ for children and adolescent students. Starting from the third week of emergency, UNICEF Education Section, in collaboration with the Government and implementing partners, has set up ETEPs in all the earthquake affected areas, benefitting 13,290 children and adolescents aged three to eighteen years, to provide them with a safe and quality learning environment. For 3 months, these children and adolescents benefitted from psychosocial support, stress relieving activities and key life-saving messages.



¹⁰ It is important to note that when the earthquake occurred on April 16th, the students in the coastal area affected by it were on vacation and classes were scheduled to start on May 2nd.

¹¹ Tabuga ETEP (Manabí), where approximately 285 children attend school.

- The second pillar was the provision of essential educational material and rapid training in the use of it. In total, 34,000 children and adolescents benefited from either school in the box material¹², early childhood material or recreation and educational material or all of them (ECD material was distributed in the zone affected by the earthquake and service providers trained in their use in emergency situation).



- The third pillar was the adaptation of the curriculum to an emergency situation, and training and accompanying of teachers in its implementation. During the first three months of the emergency, UNICEF Ecuador reached and accompanied 762 teachers in the most affected municipalities: Jama, Pedernales and Muisne.
- The fourth pillar was a strategic support to educational inclusion and monitoring of the rights to education in an emergency situation. The toolbox for educational inclusion was adapted to emergency situation and an information system for humanitarian response was used for tracking out-of-school children in the affected area. 1,700 children and adolescents were identified and inclusion processes initiated. The five main reasons for these children, being excluded from school are lack of education opportunities, lack of transportation¹³; lack of motivation, lack of documentation and child labor. Flexible Education modalities were designed and implemented. A levelling programme for 2,400 vulnerable children and adolescents, between 8 and 15 years ran for more than 10 months.



¹² Children and teachers discovering tool in the box materials in the Tabuga ETEP.

¹³ In many cases, lack of transportation is one of the main issues resulting in educational exclusion in emergency. Children from La Manuca community on a sixty minutes' walk from school to home (Pedernales, Manabí, Ecuador).

- The fifth pillar was educational communication to promote educational inclusion in an emergency situation, hygiene and wellbeing of students, teachers and other education sector workers in the affected area. In addition to these actions, UNICEF participated actively in the national Post Disaster Needs Assessment.

All activities have been undertaken according to the Core Commitments for Children in Humanitarian Action (CCCs), the International Norms for Education in Emergencies, the Education Cluster strategy and priorities, and with engagement with the national and district level government focal points. Activities have been undertaken via partnership agreements with several national and international partners who have strong presence in the affected districts and who have been strong cluster partners: various NGOs, namely FEPP (installing ETEPs & educational inclusion), DYA (educational inclusion and psychosocial support), PLAN (educational material, ETEPs and psychosocial support), The RET (educational material), and VAE (ETEPs and psychosocial support), played a key role in implementing this emergency strategy defined by UNICEF and agreed with the cluster partners. UNICEF CO also directly implemented part of its strategy, notably by providing children and adolescents with access to essential educational materials.

As for funding, UNICEF was compelled to use regular resources in order to quickly procure supplies, cash transfers to partners for implementation of activities and to provide immediate safe learning spaces for children to access quality education and psychosocial support, and enabling swift return to normalcy for children. Besides, it should be highlighted that thematic funding was largely responsible for results for the flexible education programme. Despite the amount request expressed in the Flash Appeal, only 43% have been received so far.

Indicators	Cluster/sector 2016 Target	Cluster/sector total results	UNICEF 2016 Target	UNICEF Total results
Number of children and adolescents affected by the earthquake with access to essential educational materials. *	120,000	41,279	60,000	34,479
Number of children and adolescents affected by the earthquake with access to safe temporary educational, recreational and protective spaces. *	20,000	14,970	20,000	13,290
Number of children and adolescents who benefit from psychosocial support, stress relieving activities and key life-saving messages.	120,000	15,440	60,000	11,440

*Finalized activity. Results are achieved through contributions against appeals, as well as resources from UNICEF's regular programmes where necessary.

CHILD PROTECTION

From the immediate aftermath of the earthquake, UNICEF Ecuador has played a key role coordinating the Child protection earthquake response; ensuring that key child protection actors are involved and respond in a cooperative and coordinated manner. UNICEF has advocated for and contributed to the protection of children and adolescents from violence, abuse and exploitation in the provinces of Manabí and Esmeraldas. UNICEF continues providing technical support to government and implementing partners to enhance the capacities, develop tools and guidance for emergency response in the area of child protection.

After a crisis, children must be found, fed, kept alive and safe, and provided emotional support. UNICEF have implemented key interventions to provide psychosocial support for children and their, while promoting a culture of “care for the caregivers” for first line responders. Moreover, UNICEF has worked with implementing partners to prevent separation of children from their families and prevent violence, abuse and exploitation of children in earthquake affected areas.

Initially and based on available and official government information, UNICEF defined the following programme targets, as outlined in the HAC Flash Appeal:

- 40,000 children and adolescents and 20,000 adults affected by the earthquake are reached with psychosocial support services in Child Friendly Spaces.
- 6,000 families supported to provide adequate care and protection and prevent family separation.
- 20,000 people in priority affected areas are reached by community groups to prevent and address violence, abuse, exploitation and neglect.



In the very first days, UNICEF approach consisted in providing technical and financial assistance to Child protection stakeholders and implementing partners to ensure that systems are in place to prevent family separation, promptly identify and reunify unaccompanied and separated children, provide psychosocial support to children and families and essential government staff affected by the earthquake, as well to prevent violence, abuse and exploitation of children in earthquake affected areas.

In line with UNICEF Core Commitments for Children in Emergencies, UNICEF Ecuador focused the Child Protection strategy in 3 main areas.

As of 31 December 2016, all activities included, UNICEF Ecuador achieved the following results:

1) Psychosocial support:

- Within the first 6 months, 20,000 children and adolescents received psychosocial support. UNICEF trained and equipped 70 professionals from government and NGOs staff to implement the psychosocial methodology “Return to Happiness”¹⁴; 228 young psychosocial volunteers in Esmeraldas and 567 in Manabí were also trained to implement this methodology.
- UNICEF supported the establishment of 68 Child Friendly Spaces (CFS), located in official IDP and spontaneous sites, reaching over 7,464 children and adolescents.
- UNICEF and partners provided psychological first aid to 5,915 individuals, 960 girls, 2824 women, 900 boys, and 1231 men. This includes both communities affected as well as first line responders.
- Promoted the participation of adolescents affected by the disaster on local advocacy activities by using digital mapping technology to highlight realities of young people on a digital map. 40 youth and adolescents have conducted digital risk mapping¹⁵ in the affected areas, developing their skills to prevent, detect risks and vulnerabilities in their schools and communities, and proposing mitigation actions to duty bearers.
- Reaching over 4000 children and adolescents through the “Caravana del Deporte y el Arte”, mobile brigades of sports and arts.



2. Prevention of family separation/ family support:

- Time after the earthquake it was observed that family separation was not a great concern as the majority of separated children due to the earthquake were reunited and orphans were mostly placed with extended families. Thus, the emergency response regarding UCSC was modified to respond to the needs of the affected families including prevention of family separation.
- UNICEF and partners developed a family support model aimed to prevent family separation and prevent violence and abuse against children. A total of 2861 families in earthquake affected areas received family support from UNICEF and partners.
- Building a strategy, jointly with UNHCR and the Civil Registry Office to ensure that affected families would have access to documents through mobile brigades, targeting children with no birth



¹⁴ Kids dance during a recreational session at the school "31 de Marzo", which is being used as a shelter for families affected by the earthquake. Nuevo Pedernales, Manabí, Ecuador.

¹⁵ Liver Valoy (15) is one of the teenage volunteers who participated in Digital Mapping activities within his community in Chamanga, Esmeraldas.

registration. 2,258 people (940 children and adolescents) have been reached through brigades for identification and registration.

3. Prevention of Violence:

- In close collaboration with GBV sub cluster, UNICEF and partners provided training to first line¹⁶ responders, including armed forces, on violence prevention and protection issues in humanitarian situations.
- Contributing to the preparation of protection protocols for GBV in emergency;
- Advocating for the provision of services and care for children and adolescents survivors of violence, abuse and exploration in earthquake affected areas.
- 4,500 families have been accompanied to provide adequate care and protection of their children and have been reached with information about access to rights and violence prevention.
- 4,000 children and adolescents have raised their awareness about prevention of violence and sexual abuse, and 30 psychologists were trained to detect sexual abuse in shelters and to address cases, using a very innovative, and age appropriate methodology.



All activities have been undertaken according to the Core Commitments for Children in Humanitarian Action (CCCs) and International standards; and in consultation and engagement with national authorities. All implemented activities were coordinated and supported by implementing partners and other UN agencies, as follow: Psychosocial Support (HIAS, World Vision, Plan international, PUCESE; FUDELA, DyA); Family support (Aldeas SOS and Relaf, Asylum Access), Prevention of Violence (Aldeas SOS; PUCESE; Plan International; DyA), Asylum Access (Birth registration).

Overall, UNICEF and partners have achieved targets ensuring and advocating for the protection of children and adolescents in earthquake affected areas. However, it is important to notice that initially UNICEF based their beneficiary estimates using the available and official government information. The initial estimations of people affected by the earthquake were overestimated and that's the reason why some of the initial target beneficiaries where not reached at 100%.

As for funding, ORE funds (notably thematic), as well as pooled funds (CERF), allowed UNICEF to quickly procure supplies, quick cash transfers to partners for the implementation of activities and consequently to provide immediate support to affected children, adolescents and their families. Thematic funding was particularly

¹⁶ A UNICEF consultant, imparts a lecture about violence prevention in the Muisne 3 Shelter as part as the support provided to the national government. In this event, Military and Police staff are trained on how to avoid violent situations in the shelters and to potentially upgrade the living conditions in them.

critical in ensuring timely psychosocial first aid interventions. UNICEF was also compelled to use regular resources in order to respond quickly to the emergency. As of 31 December 2016, 100% of the amount initially requested in the Flash Appeal have been received.

Indicators	Cluster/sector 2016 Target	Cluster/sector total results	UNICEF 2016 Target	UNICEF Total results
Number of children and adolescents affected by the earthquake are reached with psychosocial support services in CFS ¹⁷ .	100,000	48,202	22,000*	20,000
Number of affected families supported to provide adequate care and protection and prevent family separation.*	6,000	5,500	10,000	4,500
Number of affected people in priority areas are reached by community groups to prevent and address violence, abuse, exploitation and neglect.	30,000	15,000	20,000**	15,000

*Finalized activity. Results are achieved through contributions against appeals, as well as resources from UNICEF's regular programmes where necessary. **Adjustment made throughout the year.

HEALTH AND NUTRITION

Ecuador April's earthquake created a massive disruption of health services in Manabí and Esmeraldas provinces, which threatened to worsen already high malnutrition rates and food insecurity among the most affected populations. As a consequence, a serious concern was raised that it could have a critical impact on the nutritional status of children under-five years of age and of pregnant and lactating women. Additionally, there was a maximum health alert with great concern about health and water, hygiene and sanitation in the affected areas that were already considered hotspots for the spread of Zika, dengue, chikungunya.

Therefore, in line with the Core Commitments for Children in humanitarian action (CCC), UNICEF defined various programme targets regarding Health and Nutrition at the beginning of the emergency response:

- 42,000 children under 5 years receive support for adequate protection, promotion and support of appropriate infant and young child feeding in emergencies (IYCF)

¹⁷ CFS were established only in areas where there was no TLC or access to education, mostly in rural areas.

- 8,000 pregnant and lactating women have access to micronutrients, receive psychosocial support and are reached with relevant information about nutrition
- 50,000 people receive access to immediate vector control and individual protection through prevention tools to stop the spread of mosquito borne diseases (Zika, Dengue and Chikungunya).
- 2,500 children under 5 years affected by diarrhoea have access to treatment that includes Oral Rehydration Salts and Zinc.
- 250 000 children under 5 years have received Vitamin A, and micronutrients in powder

In order to reach these humanitarian goals, the following initiatives were supported:

- Restore and provide support to local health facilities for the management of an increase in cases of acute malnutrition, and to ensure adequate protection, promotion and support of appropriate infant and young child feeding in emergencies (IYCF) through the dissemination of information, counselling of mothers and provision of safe IYCF locations and promotion of lifesaving practices (e.g., breastfeeding, health-seeking behaviour, safe motherhood, hands washing, hygiene and sanitation). In addition, monitoring of unsolicited donations that were needed.
- Provision of life-saving supplies¹⁸ such as high-dose vitamin A supplements, Micronutrients¹⁹, Ready to use therapeutic foods, Oral rehydration salts (ORS) in combination with Zinc, to diminish the severity and shorten the duration of diarrheal episodes for all children 6-59 months old, in collaboration with health sector workers, and provisional health and nutrition temporary facilities (tents).



- Provision to the most vulnerably affected population (especially to pregnant women) of key supplies and information for the prevention of epidemics, such as water borne diseases. Indeed, in 2016, UNICEF Ecuador CO responded to two emergencies: the earthquake emergency which began on April 2016, affecting mainly the Pacific coast region and the Zika virus emergency. The latter particularly worsened the situation of children affected by the earthquake.

To tackle this additional issue, an integrated project has been implemented for the prevention and control of the zika virus that focuses on sectors or groups of greater vulnerability, such as children and pregnant women, with

¹⁸ August 8, 2016: Dr. Lester Loo provides micronutrients to Angela Salvatierra during his visit to the primary School "17 de Julio", in the community of Miguicho Adentro, Santa Ana, Manabí, Ecuador." These micronutrients were donated by UNICEF to the Ministry of Public Health within the framework of the Emergency Response.

¹⁹ August 8, 2016, Dr. Jorge Villacreses indicates how to correctly perform dental brushing for students.

actions directed to families and the community. The strategy included the implementation of an educational programme for vector control in schools, home visits that include the delivery of kits for the prevention of Zika for pregnant women and neighbouring families and the strengthening of alliances with other institutions and community and grass roots organizations to promote community-based vector control around pregnant women, and personal care and vector control by pregnant women. This strategy was launched with a communication campaign in collaboration with the Ministry of Health and PAHO/WHO (“So that your baby can be born healthy, avoid getting bitten by the mosquito”) that has reached more than 1 million persons through television and public radio and social networks.

As of 31 December 2016, all activities included, UNICEF Ecuador achieved the following results:

- 250,000 children under 5 and 26,800 pregnant and lactating women with access to Micronutrients and Vitamin A doses to prevent anemia and other diseases.
- 220 health professionals trained in AIEPI protocols along with the distribution of more than 30,000 zinc and ORS treatment to address acute diarrhea of children under 5.
- 15,900 doses of ready-to-use therapeutic foods (RUTF) along with its guidelines distributed (can potentially benefit upwards of 1,000 children who suffer from acute malnutrition).
- 1,875 children under 5 and 942 pregnant and lactating women received Infant and Young Child Feeding, growth development support and monitoring in Baby and Mother Friendly Spaces.
- 28,000 children and adolescents have participated in Health and Nutrition promotion activities.
- 30,400 people (including 1,130 pregnant women) received Zika prevention kits supported by a C4D community strategy, while 321 teachers and 10,704 students have been involved in Zika prevention education programs

All activities have been undertaken according to the Core Commitments for Children in Humanitarian Action (CCCs), and with engagement with the national authorities. Activities have been undertaken via agreements with the MoH (access to micronutrients for pregnant and lactating women; Vitamin A and micronutrients in powder for children under 5 years; Oral Rehydration Salts and Zinc for children under 5 years) and international partners who have strong presence in the affected areas and who have been strong cluster partners: various NGOs, namely ACH (infant and young child feeding in emergencies), PLAN (health and nutrition promotion) and DyA (vector control), played a key role in implementing the emergency strategy defined by UNICEF.

The overall achievement of Health and Nutrition results has been good. At the epidemiologic level, there has been no official report of the appearance of severe diarrhea, severe acute malnutrition or water borne diseases outbreaks, a fact that constitutes the main indicator of an efficient response. The main reason for underachievement, notably concerning the indicator of “Number of pregnant and lactating women with access to psychosocial support and reached with relevant information about nutrition”, can be explained because the initial rapid assessment was done in the urban area, and that there was movement of people during the weeks following the emergency. This indicator counts the number of woman who received individualized support, not the total number of woman who participated in psychosocial activities.

As for funding, ORE funds (thematic and non-thematic), as well as pooled funds (CERF), allowed UNICEF to quickly procure supplies, quick cash transfers to partners for implementation of activities and consequently to

provide immediate support for adequate protection, promotion and support of appropriate infant and young child feeding in emergencies (IYCF), provision of micronutrients, Vitamin A, treatments for children under 5 years, and vector control for affected children and their families. Thematic funds were particularly critical in carrying out the Zika prevention programme. Despite the amount request expressed in the Flash Appeal, only 46% have been received so far.

Indicators (NUTRITION)	Cluster/sector 2016 Target	Cluster/sector total results	UNICEF 2016 Target	UNICEF Total results
Number of children under 5 years receive support for adequate protection, promotion and support of appropriate infant and young child feeding in emergencies (IYCF). *	N/A	N/A	42,000	5,000
Number of pregnant and lactating women have access to micronutrients. *	N/A	N/A	8,000	26,750
Number of, pregnant and lactating women have access to psychosocial support and are reached with relevant information about nutrition. *	N/A	N/A	8,000	1,067
Number of children under 5 years have received Vitamin A and micronutrients in powder ²⁰ . *	N/A	N/A	250,000	250,000
Number of children under 5 years affected by diarrhoea have access to treatment that includes Oral Rehydration Salts, and Zinc. *	N/A	N/A	12,500	30,000

* Finalized activity.

Indicators (HEALTH)	Cluster/sector 2016 Target	Cluster/sector total results	UNICEF 2016 Target	UNICEF Total results
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²⁰ Dosis of Vitamin A distributed.

Number of people receive access to immediate vector control and individual protection through prevention tools to stop the spread of mosquito borne diseases (Zika, dengue and chikungunya). *	100,000	100,000	50,000	50,000
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* Finalized activity.

Cluster/sector leadership

Under the coordination of HCT, UNICEF CO led, together with the corresponding Government institutions, the clusters of WASH, Education, Nutrition and the sub-cluster of Child Protection.

Education: UNICEF led the Education Cluster at national level as well as at regional level, notably in Pedernales sub-cluster, with the support of a Coordinator and an Information Manager. Two other sub-clusters have been functional in Atacames - Muisne and Portoviejo with the support of UNICEF and other cluster member organizations (RET and Save the Children respectively). The Education Cluster has supported the coordination of the education response to the earthquake through technical support to education partners, needs assessment, gap analysis and advocacy. The Cluster has provided information management services to the Government and education actors, through regular production of 5Ws²¹ maps and graphs that show response progress and remaining needs, particularly through the IM mandated by UNICEF.

WASH: UNICEF led the WASH cluster, in accordance to its global mandate for WASH Cluster Coordination, with dedicated WASH coordinators in the four coordination hubs: Quito, Portoviejo, Pedernales and Esmeraldas. Since the beginning of the emergency, key priority for UNICEF has been the strengthening of coordination with Government counterparts and municipal Water and Sanitation companies with the aim of ensuring a coordinated response. A WASH Information Management Officer was mandated by the Global WASH Cluster to support all the coordination hubs: tasks included technical assistance, guidance for specific areas of work, information management (production of weekly then monthly 5Ws) and joint assessments. The WASH Cluster has actively engaged with relevant sectors such as health, nutrition and education (e.g. WASH in schools) in ensuring a coordinated and collective response.

Health & Nutrition: The Health Cluster, led by PAHO/WHO, has been supported by UNICEF. UNICEF led the Nutrition Cluster and facilitated the Nutrition in emergency coordination group as a part of the Health Cluster, with mechanisms active in Quito and Pedernales through regular meetings.

Protection: Following the ISAC established Areas of responsibility (AoR), the Cluster of Protection was led by UNHCR, while the sub groups of Child Protection and GBV were led by UNICEF and UNFPA respectively. The

²¹ The 5Ws tool is a data collection tool used by different clusters to collect information about who is undertaking what activities and where. Cluster partner agencies submit their input on a regular basis to the Cluster information management focal point who compiles comprehensive data and information, which helps the cluster and the Government understand achievements against set targets, gaps, needs, etc.

Protection Cluster helped to bring a common understanding among the cluster members for better coordination and effective response. The Child Protection sub-cluster has been instrumental in strengthening inter-institutional coordination and improving care service based on population needs.

Resilience

UNICEF is focusing on building resilient systems across the sectors to reduce the impacts of potential future disasters in Ecuador:

UNICEF efforts has been thoughtfully planned to make that all relevant policies, programmes and interventions contribute to increase national capacity to prevent and respond to child protection concerns in emergencies. Moving ahead, UNICEF will be focusing on the integration and mainstreaming of the ongoing earthquake response and interventions within the regular programme to further strengthen the existing child protection system. Likewise, during the emergency response period, UNICEF provided strong support to the Education cluster and the Government to strengthen systems and provide opportunities for capacity development within the Government at national and district levels.

As for WASH, UNICEF is collaborating with SENAGUA and humanitarian partners to build capacities of government counterparts on WASH emergency response and Disaster Risk Reduction (DRR). For instance, as shown in the picture below, UNICEF and SENAGUA recently signed an agreement²² to appoint two SENAGUA WASH Specialists for Emergency context, who will integrate WASH UNICEF team to be trained in the processes of humanitarian assistance.



²² UNICEF and SENAGUA signed a cooperation agreement on WASH in emergencies in Ecuador earthquake affected areas (Alexis Sánchez Miño, Secretary of SENAGUA, and Grant Leaity, UNICEF Representative). Besides this agreement, within the framework of the event, a water treatment plant and collapsible tanks were also given to SENAGUA as part of the support to the national government.

Another example could be illustrated by Health and Nutrition trainings:²³ during the reporting period, through UNICEF capacity-building activities, around 220 MoH staff have been trained in Integrated Management of Childhood Illness protocols, as we can see below.



Lessons learned

Although important results were achieved with the emergency response, it is suggested that a better coordination between national and local authorities and actors would have benefited the emergency response. For potential future emergencies, considering that Ecuador is at risk of earthquakes, volcanic eruptions, regular flooding and epidemics, contingency plans between Ecuador and the Humanitarian Country Team should include prior agreements on information sharing and coordination mechanisms at national and local levels. The immediate mobilization of international cooperation both resident agencies and from outside of Ecuador, along with disaster management teams from countries in the region presented a sudden amount of actors which needed to be efficiently coordinated and aligned with national and local coordination structures. Although there were coordination challenges, UNICEF strengthened its advocacy efforts with national governmental institutions and with subnational authorities to support information exchange and inter-institutional consultation. These efforts allowed UNICEF Ecuador to implement its emergency response and keep an open dialogue with national authorities on situation analysis, information sharing, and emerging issues that demanded new actions. This emergency also allowed Ecuadorian authorities as well as other humanitarian partners to learn more about UNICEF's primary role in the WASH sector, revealing an area of future collaboration in Ecuador in which the Organization will be involved should without any doubt.

It should be also mentioned that all humanitarian funds did not arrive immediately to UNICEF Ecuador CO: on various occasions, there were delays in the actual receipt of funds for reasons beyond UNICEF Ecuador's responsibility. Additionally, some grants had a not very long period of execution, a fact that generated additional challenges for this office regarding commitments and execution of funds. As of today, the needs of children and families affected by the earthquake living in urban areas and especially in rural areas, continue to be strong and in some cases put their lives at risk. This is why UNICEF CO activities must continue. For instance, as mentioned above in the report, 5,544 people are still living in 24 official camps managed by the government (out of which 2,846 children and adolescents), as well as 4,030 people in 63 informal shelters,

²³ MoH staff trained on AIEPI protocols by UNICEF in a workshop that took place in Portoviejo, Manabí province.

and therefore there are still acute needs in WASH, Education, and Child Protection. Furthermore, the winter (characterized by heavy rain falls) started in January, hampering the humanitarian response and worsening the vulnerability of the sheltered population: significant cases of diarrhoea and water-borne diseases are anticipated as a general concern.

Monitoring and Evaluation

Partners reporting and information management

Monitoring activities were carried out by UNICEF in line with the Humanitarian Performance Monitoring mechanism, the latter being itself aligned with the ‘Humanitarian Action for Children’ targets. To this end, UNICEF Ecuador created a mechanism for continuous review of partner’s performance that included partner reporting (regular reports and 5Ws) and monitoring field visits²⁴ to enable monitoring progress since the start of the response interventions. At the onset of the emergency, and with the objective of responding to M&E tasks related to the emergency, UNICEF HR contracted an additional monitoring and evaluation staff member based in Quito (while another staff member permanently based in Pedernales, Manabí province was appointed as M&E focal point in the field). In addition, two Information Managers were contracted and specifically assigned to the support of the WASH and Education clusters during the first six months of the emergency.

Humanitarian Performance Monitoring tailored tools were developed to keep track of partner’s progress and a flow of information between implementing partners, field offices and in Quito was quickly established in order to monitor effectively high frequency indicators progress. With its physical presence in affected areas through its field officers, UNICEF has been monitoring and verifying progress reports through field visits and observations. The monitoring field visits allowed UNICEF to verify progress reports submitted by UNICEF’s implementing partners, and to assess the quality of services as per the agreed standards. Along with direct monitoring by UNICEF staff and meeting the implementing partners, it also entailed talking to key informants and meeting with the affected populations.

The information generated was used by UNICEF to ensure programme sections were working correctly and to address any issues and gaps regarding access to and quality of services and supplies. Information was subsequently used in public documents like weekly (then monthly) Situation Reports, advocacy documents and press releases, as well as in order to influence UNICEF leadership decision making processes and improve future programming and performance. Information from various monitoring activities, lessons learnt exercises, assessments and surveys played a key role in providing accurate information that was, among other things, used to develop recommendations for UNICEF Ecuador recovery phase and 2017 action plan.

Field assessments

With the objective of generating information for the decision-making process and making visible the damages of the earthquake that affected the Ecuadorian coast in April, UNICEF Ecuador and its personnel carried out a field assessment of some rural communities affected by the earthquake and examined their situation in the areas of health, education, protection and social inclusion. In an inter-sectorial exercise, information was

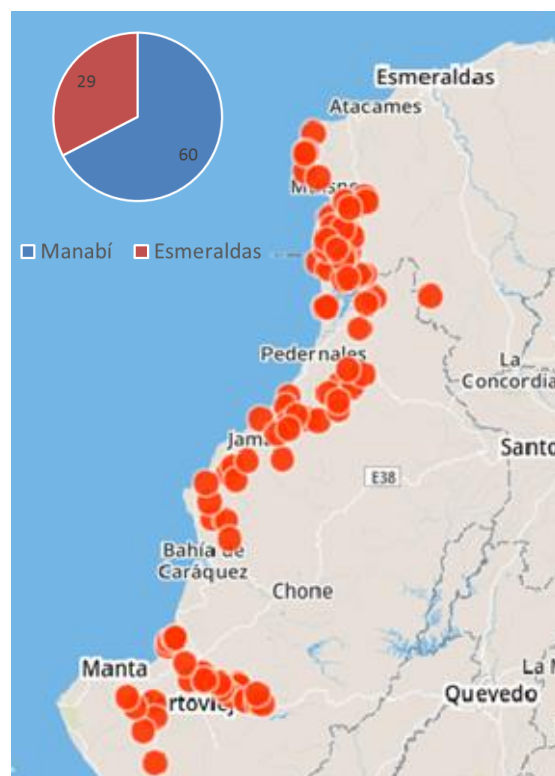
²⁴ Including HACT field visits and regular monitoring field visits.

gathered in 89 rural communities of the cantons affected by the earthquake²⁵ and where UNICEF carries out its actions. The results have served as an instrument for dialogue with the Ministry of Education, Ministry of Economic and Social Inclusion, among other entities.

Moreover, following a MINEDUC requested, UNICEF also monitored the implementation of the Government response to education in emergency, namely the establishment of 26 large provisional schools for 56,000 students. This was undertaken in collaboration with UNESCO, RET and DyA. Information on the 26 provisional schools was gathered²⁶ in October and presented to the Ministry of Education in early December in order to show some of the challenges those newly built school were still facing.

Systematization of UNICEF Ecuador Earthquake Response

A systematization of UNICEF's Response to April 2016 Earthquake in Ecuador will initiate in April 2017 with the objective of providing country office with solid evidence on the pertinence, effectiveness, efficiency, sustainability, reach, coherence and coordination of UNICEF Ecuador's response to the emergency. Given that Ecuador, as many other countries in the region, face risks due to volcanos, earthquakes, floods, among others, it is important to learn from the experiences and to improve UNICEF Ecuador's preparedness for future emergencies in the country. This systematization will focus on UNICEF Ecuador's response in Manabí and Esmeraldas, including the coordination from national level in Quito and the time frame for this systematization will be from April 16th 2016 to December 2016. It will have a prospective analysis so that the systematization provides a guide to improve UNICEF's response to the emergency in Ecuador, and draws lessons learned for other future emergencies in similar countries (upper middle income countries and highly political contexts).



Financial Analysis

In May 2016, UNICEF Ecuador estimated that US\$ 15,300,000 was needed for its humanitarian work in Ecuador. As of December 2016, a total of 65% of the goal was reached as detailed in table 1 per sector. As table 1 shows, the distribution of funding was uneven. For example, the generous response of donors to Child Protection activities allowed the programme to scale up in the face of deteriorating situation following the earthquakes, adding beneficiaries and reaching out to the vulnerable. Other sector sectors, such as Education remained underfunded, which compromised UNICEF's ability to treat a significant caseload of children in need (for more details, see Humanitarian Results). In order to offset this lack of humanitarian funds, approximately US\$ 2,100,000 from regular and other regular resources have been used for the emergency response. It should also be noticed that an EPF loan of US\$ 2 million helped the initial rapid response.

²⁵ Map of the 89 rural communities where the field assessment was carried out.

²⁶ These two field assessments exercises have been undertaken through the use of Kobo information management system developed by the Harvard Humanitarian Initiative.

Table 1: Funding status against the appeal by sector

Sector	Requirements	Funds Available Against Appeal as of 31 December 2016*	% Funded
WASH	8,200,000.00	4,047,114.93	49.4%
Education	3,850,000.00	1,655,023.43	43.0%
Health & Nutrition	2,000,000.00	920,712.83	46.0%
Child Protection	1,000,000.00	1,445,690.14	144.6%
Cross sectoral and Cluster Coordination	250,000.00	1,862,003.16	744.8%
Total	15,300,000.00	9,930,544	64.9%

* Funds available includes funds received against current appeal and carry-forward from previous year (overall amounts including cost recovery).

Prior to the earthquake that took place on April 16th UNICEF Ecuador was exclusively dedicated to development issues, the regular program had no physical presence in the most affected areas by the earthquake (provinces of Manabí and Esmeraldas. In order to cope with this new situation, UNICEF Ecuador had to set up two sub-offices in Pedernales and Esmeraldas, and to contract approximately 20 additional staff members permanently based in the field to implement the response activities related to WASH, Protection, Education and Health & Nutrition. Even though at the beginning of the emergency UNICEF Ecuador planned allocating an amount of US\$ 250,000 for coordination / cross-sectoral issues, setting up an operative structure of such magnitude able to respond to the needs of the population exceeded what was initially foreseen. Given these circumstances (additional operational and technical assistance costs: security, logistics, specialists, missions, equipment), the amount needed for this output turned out to be higher than expected.

Table 2: Funding received and available by donor and funding type

This table includes all resource partners and all types of funding received and available for emergency activities in the 2016 humanitarian appeal.

Table 2 - Funding Received and Available by 31 December 2016 by Donor and Funding type (in USD)

Donor Name/Type of funding	Programme Budget Allotment reference	Overall Amount*
I. Humanitarian funds received in 2016		
a) Thematic Humanitarian Funds (Paste Programmable Amount from Table 3)		
Global Thematic Humanitarian Response	SM/14/9910	4,404,347
b) Non-Thematic Humanitarian Funds (List individually all non-thematic emergency funding received in 2016 per donor in descending order)		
ECHO	SM/16/0405	1,131,938
Japan	SM/16/0318	509,259
Spanish Committee for UNICEF	SM/16/0355	396,434
Switzerland	SM/16/0258	334,441
Canada	SM/16/0246	235,904
Iceland	SM/16/0216	92,592
Bulgaria	SM/16/0415	31,036
Slovenia	SM/16/0241	30,967
Total Non-Thematic Humanitarian Funds		2,762,571
c) Pooled Funding		
(i) CERF Grants (Put one figure representing total CERF contributions received in 2016 through OCHA and list the grants below)		
(ii) Other Pooled funds - including Common Humanitarian Fund (CHF), Humanitarian Response Funds, Emergency Response Funds, UN Trust Fund for Human Security etc. (Put the figure representing total contributions received in 2016 through these various pooled funding mechanisms.		
UNOCHA (CERF)	SM/16/0253	280,384
	SM/16/0254	150,000
	SM/16/0256	1,636,414
Total Pooled funds		2,066,799
d) Other types of humanitarian funds		
United States Fund for UNICEF	KM160065	103,000
Total humanitarian funds received in 2016 (a+b+c+d)		9,336,718
II. Carry-over of humanitarian funds available in 2016		
e) Carry over Thematic Humanitarian Funds		
Thematic Humanitarian Funds	SM/14/9910	
f) Carry-over of non-thematic humanitarian funds (List by donor, grant and programmable amount being carried forward from prior year(s) if applicable)		
Malta	SM/16/0640	25,610
Total carry-over non-thematic humanitarian funds		
Total carry-over humanitarian funds (e + f)		25,610
III. Other sources (Regular Resources set -aside, diversion of RR - if applicable)		

Regular resources and ORR diverted to emergency	SC and NON GRANT	2,098,892
EPF (not reimbursed by 31 Dec 2016**)	GE/16/0014	999,999
Zika response	GE/16/0011	48,622
Total other resources		3,147,513

* Programmable amounts of donor contributions, excluding recovery cost.

** 2016 loans have not been waived; COs are liable to reimburse in 2017 as donor funds become available.

Table 3: Thematic humanitarian contributions received in 2016

Thematic Humanitarian Contributions Received in 2016 (in USD): Donor	Grant Number²⁷	Programmable Amount (in USD)	Total Contribution Amount (in USD)
Allocation from global thematic humanitarian*	SM149910	4,404,347.98	4,627,692.48
(details)			
Andorran National Comm for UNICEF	SM1499101215	3,497.93	3,675.31
Canadian UNICEF Committee	SM1499101193	154,531.32	162,367.60
French Committee for UNICEF	SM1499101223	73,696.48	77,433.63
German Committee for UNICEF	SM1499101221	179,794.97	188,912.37
Japan Committee for UNICEF	SM1499101231	48,742.98	51,214.74
Norwegian Committee for UNICEF	SM1499101216	85,329.37	89,656.42
Slovak Committee for UNICEF	SM1499101239	10,563.12	11,098.78
Spanish Committee for UNICEF	SM1499101172	107,298.46	112,739.57
Spanish Committee for UNICEF	SM1499101179	458,666.99	481,925.99
Spanish Committee for UNICEF	SM1499101234	157,921.02	165,929.20
UNICEF-Argentina	SM1499101214	79,601.15	83,637.72
UNICEF-China	SM1499101263	14,591.75	15,331.70
UNICEF-Colombia	SM1499101188	57,937.01	60,875.00
UNICEF-Mexico	SM1499101178	53,647.80	56,368.28
UNICEF-Peru	SM1499101218	11,690.69	12,283.52
UNICEF-THAILAND	SM1499101176	299,007.59	314,170.27
United Kingdom Committee for UNICEF	SM1499101207	105,063.75	110,391.53
United Kingdom Committee for UNICEF	SM1499101212	258,621.43	271,736.12
United States Fund for UNICEF	SM1499101171	1,824,194.92	1,916,699.85
Belgian Committee for UNICEF	SM1499101304	52,009.12	54,646.50
Italian National Committee	SM1499101307	19,540.04	20,530.92

²⁷ International Aid Transparency Initiative (IATI) requires all grants to be listed in reporting. <http://iatistandard.org/>
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UNICEF-Brazil	SM1499101302	1,671.10	1,755.84
UNICEF-Ecuador	SM1499101319	331,463.49	348,272.00
UNICEF-Venezuela	SM1499101360	6,478.30	6,806.81
International On-line Donations	SM1499101356	8,787.21	9,232.81
Total		4,404,347.98	4,627,692.48

Future Work Plan

Much work remains to be done in 2017. No additional formal appeal is envisaged since the 2016 HAC was extended to end of April 2017. Main strategies/actions planned in 2017 are summarized hereafter (to note, Health and Nutrition activities are not considered anymore part of the emergency plan, neither the ZIKV prevention activities):

WASH: maintain coordination mechanisms; restore and improve the final WASH infrastructure solutions in schools; provide technical support to national counterparts; strengthen WASH sector capacities in response to emergencies (RO); early recovery / reconstruction projects.

EDUCATION: provision of educational material to rural schools, Flexible Emergency Education Program; Child Friendly Spaces; recreational and recreational activities to strengthen resilience and management of emotions; Implementation of the inclusion strategy; disaster risk management program implementation.

CHILD PROTECTION: coordination mechanisms among key actors in the child protection sector strengthened; local child protection authorities and existing community structures strengthen their capacities and knowledge of principles and best practices about child protection in emergencies; children and adolescents have access to spaces / activities that promote psychosocial well-being; disaster risk management strategy; systematization of lessons learned.

Title of Report/Project: UNICEF ECUADOR Consolidated Emergency Report 2016

UNICEF Office: Ecuador

Donor Partner:

Date:

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!

Please return the completed form back to UNICEF ECUADOR by email to:

Name: Mr. Herbert Schembri (Emergency Specialist)

Email: hschembri@unicef.org

SCORING: 5 indicates “highest level of satisfaction” while
0 indicates “complete dissatisfaction”

1. 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)

5	4	3	2	1	0
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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?

SCORING: 5 indicates “highest level of satisfaction” while
0 indicates “complete dissatisfaction”

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	4	3	2	1	0

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	0

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!

Expression of Thanks



Figure 1 © UNICEF/ECU/2016/Castellanos

UNICEF would like to take this opportunity to express its sincere appreciation to Government donors, National Committees, private donors and UN partners for their generous financial contribution in support of children in the earthquake affected areas of Ecuador. On behalf of the entire UNICEF Ecuador team, we thank you for helping to advance our shared commitments to protecting the rights and improving the well-being of children in Ecuador.

On behalf of Ecuador's children, UNICEF is deeply grateful for the strong show of support and for the tremendously generous contributions received from its different donors.

Humbled by this support – which testifies to the strong confidence UNICEF inspires through its mission for children – we also recognize the duty we have in ensuring these resources are directed towards those children and women that need it most. UNICEF is thus deeply thankful of its donors who also chose to contribute their funds flexibly and thematically. We are in debt for this incredible and global wave of solidarity which came to help us help the children and women of Ecuador in the face of the largest disaster in the region since Haiti in 2010.