I. Executive Summary

On 12 May a major earthquake measuring 8.0 on the Richter scale struck the Sichuan Province of China. Over 15 million houses were damaged including 3 million which collapsed and the Government of China states that more than 5.2 million people were left homeless.

The UN Development Programme (UNDP) utilized a CERF grant to provide emergency shelter materials (3,200 tents, 62,000 quilts, and 65,000 blankets) to 40,000 earthquake-affected people in southwest China. Working with the Ministry of Commerce, UNDP purchased shelters and boosted the Government’s capacity to provide emergency aid in affected areas.

Through CERF funds, the World Food Programme (WFP) supplied ready-to-eat food and emergency rations to displaced people in Mianyang City and neighbouring counties. Partnering with the Red Cross Society of China, WFP worked to provide partial emergency food rations for approx. 100,000 people in three weeks.

The UN Population Fund (UNFPA) provided supplies including Safe Delivery Assistance for approx. 200,000 women in reproductive health, treatment of sexually transmitted infections (STIs), HIV/AIDS prevention and blood transfusions.

The UN Refugee Agency (UNHCR) provided shelter to 75,000 people in need after the earthquake using CERF funds and delivered family tents to the Chinese government to distribute to affected people to reduce exposure to cold and heavy rains.

A CERF-funded project by the UN Children’s Fund (UNICEF) provided safe drinking water as most of the drinking water systems were destroyed by the earthquake. UNICEF provided potable water for 3 million people. One hundred mobile toilets were supplied to reduce the risk of faecal-borne diseases and water purification tablets were distributed to 240,000 people.

The World Health Organization (WHO) supplemented the availability of essential medicines, health supplies, and surgical kits to increase the Government’s ability to provide emergency medical services to the injured. Through these supplements, WHO re-established the capacity of prevention of communicable diseases in centres for disease control while also re-activated frontline health and medical facilities. Over 200 local hospitals and community health centres benefited from the distribution of life-saving medical equipment.
On 12 May 2008, a devastating earthquake measuring 8.0 on the Richter scale struck Wenchuan County, Aba Prefecture, some 92km northwest of Chengdu City, the capital of Sichuan Province, China. The earthquake left 69,000 people dead, 18,000 missing, 374,000 injured and five million people homeless. Ten provinces, including 417 counties were affected, covering an area of 500,000 square km. The earthquake caused extensive damage to key public sector infrastructure, including health, education, water and sanitation facilities. According to the Chinese Government, an additional 10 million people fell below the poverty line as a result of the natural disaster. The total economic loss has been estimated by the Government at over US$ 86 billion. For just the second time in 30 years, the Government of China officially requested international assistance to respond to the emergency, underlining the magnitude of the disaster.

Provision of tents quickly emerged as the top priority as an estimated five million buildings collapsed in the earthquake and over 21 million buildings were damaged. Approximately 5.7 million of an estimated 15 million people evacuated did not have access to shelter. Many people were too frightened to sleep in structures still standing due to continued waves of aftershocks in the affected areas.

As millions of people were living in temporary settlements, ready-to-eat food and emergency rations were a key priority as were blankets and clothing. The need for water and sanitation supplies was desperate as the earthquake hit mostly rural mountain communities, destroying many of the local drinking water systems. The Government reported the condition of water supply systems as extremely serious throughout Sichuan province and unoperational in 20 cities and counties.

The quake disrupted emergency medical and essential public health services related to the prevention and control of communicable diseases at a time when demand for them was very high. Additional surgical kits and basic medicines were needed to help local clinics and hospitals save lives and treat the injured.
CERF funding was needed to respond to the Government’s urgent request for specific goods including tents, medicines and health supplies, first aid kits, ready-to-eat food, tarpaulins, blankets and quilts, clothing, and emergency lights. Local supplies of these goods were depleted and the UN’s ability to procure and deliver humanitarian supplies in a short period was critical. The UN agencies based in China, through their strong relationships with Government counterparts at national and local levels, were in continuous contact with their partners to determine the highest priority of supplies.

### III. Implementation and Results

#### 1. Coordination and Implementation arrangements

(a) Decision-making process to decide allocation

In the immediate aftermath of the Wenchuan earthquake, under the leadership of the Resident Coordinator, members of the UN Country Team (UNCT) and UN Disaster Management Team (UNDMT) attended briefings and consultative meetings with the Ministries of Foreign Affairs, Civil Affairs and Commerce to better understand the impact of the disaster and role of the international community. UN agencies, the International Federation of the Red Cross and their counterparts were able to verify the general assessment and needs reports shared by the local Government ministries.

By 15 May, the Government of China publicly stated for the first time since 1998 that it would welcome disaster relief assistance from the international community. Given the sheer scale of the disaster and the added value the UN could play in procuring, transporting and distributing life-saving material assistance, the Under-Secretary-General for Humanitarian Affairs and Emergency Relief Coordinator and the Resident Coordinator agreed that a proposal for CERF assistance was justified and the UN’s intention to assist China through CERF was announced by the UN Secretary-General on 16 May.

1 The approximate number of beneficiaries is based on estimates per sector, in some cases challenging to quantify as in the case of material support to hospitals and clinics. The desegregation by sex estimates are based on local population statistics.
(b) Coordination amongst the humanitarian country team

The UN Country Team met twice within the first week of the crisis to clarify coordination roles. UNDMT, which had been reinvigorated in China in 2006 under the leadership of the UNICEF Representative as Chair and the Director of WFP as Vice-Chair, focused on coordination and information sharing tasks. UNDMT coordinated between the UN system in China and the Ministries of Foreign Affairs, Civil Affairs and Commerce through participation in meetings and issuing official correspondences; coordinated between the UN system in China and the larger international community by holding three briefing sessions in May and June, issuing 12 Situation Reports, more than 20 press releases and sending over 20 email updates tracking requests from the Government and assistance provided from the international community; and within the UN system in China by convening over 10 meetings with UNDMT focal points including IOM. UNDMT’s capacities were reinforced by two one-week missions from and the Head of OCHA Regional Office for Asia and the Pacific (ROAP) and an experienced Emergency Response Advisor.

Following the CERF application, UNDMT continued to coordinate the UN system in China’s relief and early recovery response including the launching of the “UN China Appeal for Wenchuan Earthquake Early Recovery Support” and the subsequent fundraising.

(c) Prioritization process

Government counterparts shared lists of needed materials and supplies with the UN agencies. First and foremost, was a request for tents. The Ministry of Foreign Affairs in Beijing expressed a need for 3.3 million tents which was echoed by the Chinese Permanent Missions in New York and Geneva. These requests along with others from Ministries including Health, Commerce, Civil Affairs and Environmental Protection were compiled by UNDMT and shared with all UN agencies.

UNDMT then compared the requests against information which was coming from the locally affected areas and, in particular, the CERF life-saving criteria and sectoral activities. OCHA ROAP also provided advice on prioritization by consulting on the Fund’s parameters as well as specific cases. There was broad consensus within UNDMT on which areas were most relevant for CERF support including tents, water and sanitation supplies, ready-to-eat food, blankets, clothes and heath and reproductive health supplies.

The final stage of prioritization was to determine which agencies were best able to procure, transport, distribute and monitor material assistance to the affected people based upon their capacities and partnerships. Proposals were submitted by the UNDMT focal points to the UNDMT leadership who made specific recommendations which were approved by the RC.

2. Project activities and results

CERF funding provided critically needed relief assistance. CERF-funded supplies helped narrow existing gaps for basic shelter, water and sanitation, health and food supplies. Following procurement systems for allocation and delivery, the UN’s efforts were integrated into the ongoing relief work without creating additional coordination burdens for the Government.

Shelter

CERF-funded shelter provisions helped meet a huge need for shelter and were considered timely supplements to the local relief efforts which were greatly appreciated by the Government.
The CERF allocation of $2,000,000 allowed UNHCR to deliver 15,000 family tents to the Chinese Government, enough to shelter approximately 75,000 people affected by the earthquake (with a focus on vulnerable groups including children, elderly, women and the disabled). The first 11,000 tents were sent to Sichuan province and the second contribution of 4,000 tents was distributed to the affected population in Gansu province.

The UNDP CERF-funded allocation of $2,058,830 was used to provide 3,200 tents, 62,000 quilts, 65,000 blankets and 10,000 emergency lights to approximately 40,000 people in affected areas in Sichuan province. On the ground, the tunnel-style tents were welcomed by the beneficiaries for their good quality and design.

Water and Sanitation

Rivers and shallow water sources became contaminated in the aftermath of the earthquake, as increased quantities of sediment, factory pollutants, human and medical waste, and heavy metals from destroyed buildings entered the water supply. While water quality was being monitored in many locations, serious gaps existed throughout the earthquake zone. CERF funding enabled UNICEF to respond promptly to the water and sanitation needs of earthquake-affected children and their families.

Water purification tablets were critical to meeting basic needs after the earthquake struck and before damaged water systems were rehabilitated. UNICEF field monitoring missions to selected sites indicated that the tablets provided at least 360,000 people with clean drinking water.

Water treatment units, which were strategically installed in the vicinities of schools and in temporary settlement camps, provided another 8,400 earthquake-affected children and their families with clean drinking water.

CERF funding was also critical to disinfecting community-based health clinics, temporary schools, kitchen facilities, and sanitation facilities.

Finally, CERF funding helped to reduce the risk of transmission of faecal-born diseases by providing 100 mobile toilets for 10,000 people.

Health

Immediately after the earthquake, WHO mobilized resources to help address emergency health sector needs at the local level. With CERF funding, WHO and country partners were able to procure and distribute life-saving medical equipment, including echocardiogram machines, portable ventilators, respirators, suction machines, x-ray equipment, ultrasound machines and blood chemistry analyzers. This equipment was provided to over 200 local hospitals and community health centres, assisting the restoration of essential medical functions in the significantly earthquake-affected provinces of Sichuan, Gansu and Shaanxi.

CERF funds also helped train 120 nurses in emergency nursing care, and over 140 teachers and student volunteers in psychosocial support (PSS) in a country where mental health is not presently a highly developed field. This training enabled the timely provision of psychosocial support and emergency care for nearly 1,700 people affected by the earthquake, and provided a foundation for further capacity development in PSS. Through the provision of international technical advice and translation of WHO and other international technical guidelines, essential emergency-related health knowledge was transferred to national partners in a timely manner, at a critical time of need. This included technical advice and analysis on communicable disease prevention and surveillance, healthcare of children in emergencies, environmental health, food
and drinking water safety, psychosocial support in emergency settings, and the reconstruction of safe hospitals and disaster mitigation.

No outbreaks of epidemics of communicable diseases were detected in quake-affected areas. WHO technical assistance helped to support communicable disease prevention and post-quake surveillance and provide rapid assessments and information on disease occurrence and other public health indicators in affected areas. A schistosomiasis prevalence study helped to clarify the situation regarding this disease in two previously endemic areas.

The CERF allocation of $114,490 enabled UNFPA to purchase 212 Reproductive Health (RH) kits (including 142 kits of STI treatment and condoms for HIV/STI prevention, 40 kits of clinical delivery assistance, 20 kits of referral level for RH and 10 kits of blood transfusion) to ensure safe and clean clinical delivery assistance and avoid increases in maternal morbidity and mortality through sustained safe delivery services of the basic level. In addition, the UNFPA donated 20 sets of medical refrigerators and 20 portable refrigerators to ensure the essential medicines included were kept cool during transport and storage.

The provided supplies covered approximately 200,000 women of reproductive health age in addition to safe deliveries and addressed the treatment of STIs including HIV prevention and blood transfusion.

Food

In the three weeks that followed the earthquake, the CERF allocation of $490,888 enabled WFP to purchase 634 metric tonnes of commodities (including 41.5mt of instant noodles, 103mt of vegetable oil, 280mt of rice and 210mt of wheat flour) to save and sustain more than 138,000 lives by meeting their basic nutritional needs.

The coordination of food aid among different government departments in the field was very effective. The food distribution plan was transparent. The plans were available on internet, so counties and townships could check the allocation plans.

The WFP emergency food relief project was welcomed by beneficiaries, the local and the central government, especially for its timely and efficient delivery.

3. Partnerships

As stated in the coordination section above, the RC and UNCT benefited from a UNDMT which was functioning in China before the earthquake. Many of the key partnerships and inter-agency arrangements were in place. One key lesson learned was the utility of an expanded UNDMT incorporating key disaster management players of the international and CSO community, in particular IFRC.

In terms of implementation, the UN agencies benefited from long-lasting partnerships with national and local government counterparts in the affected areas. In several cases, resources from ongoing development projects were able to be quickly reprogrammed to provide relief assistance. These established and strong management and monitoring arrangements made implementation of CERF funded relief activities relatively straightforward.

4. Monitoring and Evaluation

As is customary in China, UN agencies operated in close collaboration with their respective line Ministries for programme implementation. These standing arrangements were also used for delivery of CERF assistance. For instance, the Ministry of Commerce serves as the international
coordination partner for UNDP, UNICEF and UNFPA; the Ministry of Health serving the same function with WHO. WFP worked through the IFRC and informed the Ministry of Agriculture of the arrangement.

UN agencies in China had active programmes in the affected areas and strong relationships with a diversity of executing Government departments. As per normal programme relations in China, monitoring was taken up by Government departments with oversight from each UN agency. In addition, UN agencies conducted monitoring missions and in many cases based staff in the field during the implementation.

Examples of agency specific monitoring actions included:

- UNDP maintained close partnership with implementing agencies during the whole process of procurement. UNDP, the China International Centre for Economic and Technical Exchanges (CICETE) and Sichuan Bureau of Commerce undertook a joint field mission to understand how UNDP assistance had been used. After completion of the relief activities in September, UNDP and CICETE held a joint workshop to review implementation. An audit has also been carried out by independent auditors.

- UNFPA and its partner Ministry of Health (MoH) have established mechanisms for jointly monitoring implementation of activities. UNFPA monitored the procurement process as well as the distribution of UNFPA supplies to the affected population. UNFPA personnel undertook monitoring missions to the affected areas to oversee use of equipment and supplies made available. UNFPA was in regular contact with MoH and received regular updates on the situation.

- UNHCR’s commissioned photographer and UNHCR Public Information Assistant witnessed the distribution of tents in Xiang-e County.

- UNICEF undertook regular field missions to assess the evolving situation and monitor the use of its supplies.

- WHO undertook periodic field missions to assess the conditions and recruited two liaison officers at the Ministry of Health in Beijing and at the Sichuan Centre for Disease Control in Chengdu to support monitoring of project activities.

- WFP conducted food distribution monitoring missions in Mianyang City, Anxian and Jiangyou Counties to monitor the food distribution process and interview officials of the relevant government departments and beneficiaries.

CERF-funded projects’ complementarity with other initiatives

The CERF projects were crucial to earlier initiatives, mainly assessments, in that they provided significant supplies that met basic needs on the ground and enhanced UN credibility. Other relief initiatives funded from non-CERF sources built on the CERF projects by providing training and capacity building related to the use of these supplies and equipment provided.
## IV. Results

<table>
<thead>
<tr>
<th>Sector/Cluster</th>
<th>CERF projects per sector</th>
<th>Amount disbursed (US$)</th>
<th>Number of Beneficiaries (by sex/age)</th>
<th>Implementing Partners</th>
<th>Expected Results/Outcomes</th>
<th>Actual results and improvements for the target beneficiaries</th>
</tr>
</thead>
<tbody>
<tr>
<td>Food</td>
<td>08-WFP-052 “Emergency Response to Sichuan Earthquake”</td>
<td>$490,888</td>
<td>• 138,551 people benefited</td>
<td>Red Cross Society of China (Mianyang Branch) (Receiving and distribution food for WFP)</td>
<td>▪ Provide partial emergency food rations required for approx. 100,000 people for three weeks to save lives and prevent hunger;</td>
<td>▪ Number of people assisted exceeded 138,000 thanks to savings on commodity costs, storage and transport; ▪ 634 metric tons of noodles, wheat flour, rice and vegetable oil purchased and delivered in less than three weeks; ▪ Food delivered on time, filling the gap until the government’s own ration system was operational;</td>
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<tr>
<td>Water and Sanitation</td>
<td>08-CEF-041 “Emergency Assistance to Persons Affected by the Wenchuan Earthquake”</td>
<td>$2,076,078</td>
<td>• At least 360,000 people provided with clean drinking water that had been treated with water purification tablets • 8,400 students, teachers, displaced persons, and town/village residents benefited from water purification units</td>
<td>Ministry of Water Resources, Sichuan Provincial Water Resources Bureau, Sichuan Patriotic Health Campaign Committee Office, Ministry of Health’s National Centre for Rural Water Supply and Sanitation, Centre for Disease Control</td>
<td>▪ 3 million persons have access to water purification tablets and are provided with clean drinking water for 10 days. ▪ Provision of water purification units to ensure that 240,000 displaced persons have access to safe water ▪ Disinfect 200 community-based health clinics, temporary schools, kitchen facilities, and sanitation facilitates for a 3-month period ▪ Reduce the risk of transmission of faecal-</td>
<td>▪ Water purification tablets were distributed to 240,000 people in 27 counties, districts, and towns, providing them with clean drinking water. As of late August 08, the last batch of water purification tablets was being targeted at 120,000 camp dwellers to bridge the period until they could return to their homes. ▪ UNICEF procured five water purification units and 20 water tanks. Water treatment units were installed in Beichuan County’s Leigu Township Primary School (benefiting 1,020 students and teachers), Pengzhou Prefecture’s Guihua Township Water Supply Plant (benefiting 2,300 township residents and the 1,200 students of a nearby middle school), Mianzhu City’s Qingdao Primary and Middle School (benefiting 1,300 students), and temporary settlement camps in Beichuan County’s Chaquan Village (benefiting 1,080 displaced people) and Mao’ershi Village (benefiting 1,500 displaced people). Throughout the emergency response, UNICEF has been training local technicians on the installation, operation, and</td>
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<tr>
<td>Clinics and schools throughout the earthquake zone were able to provide medical and educational services in a hygienic setting.</td>
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<tr>
<td>10,000 displaced people in temporary settlement camps benefited from mobile toilets procured with CERF funds.</td>
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<td>70 tonnes of calcium hypochlorite were sent to the Sichuan Water Resources Bureau and 130 tonnes were sent to the Sichuan Patriotic Health Campaign Committee Office, who then distributed it to health clinics associated with shelters, Early Childhood Development Centres, kindergartens, and schools.</td>
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<td>A total of 100 mobile toilets were provided. 50 mobile toilets were set up in temporary shelters in Mianyang and Deyang. An additional 50 mobile toilets were set up in Qingchuan, Jianyou, and Anxian by the Sichuan Patriotic Health Campaign Committee Office. UNICEF provided training to counterpart staff and other local officials on the maintenance and use of the toilets.</td>
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<th>Health</th>
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<tr>
<td>Over 200 local hospitals and community health centres benefited from the distribution of life-saving medical equipment, helping to restore essential medical functions.</td>
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<tr>
<td>Nearly 1,700 people affected by the earthquake were provided with mental health and psychosocial support (MHPSS) and emergency care after over 120 senior nurses were trained in emergency nursing care, and over 140 teachers and student volunteers received training in PSS.</td>
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<tr>
<th>Ministry of Health, Provincial Health Bureaus, National Centre for Disease Control (CDC), provincial CDCs and local medical and health providers, School of Nursing at Shandong University and Huaxi University</th>
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<tr>
<td>Emergency surgical kits, essential medicines and health supplies procured, locally distributed and used in affected areas;</td>
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<tr>
<td>Risk of epidemics of communicable diseases in the affected areas controlled and reduced;</td>
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<tr>
<td>Epidemics of communicable diseases, if occur, immediately identified and reported and containment measures initiated promptly;</td>
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<tr>
<td>The township hospitals in the affected areas have sufficient essential medicines and health supplies for basic</td>
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<tr>
<td>Over 200 local hospitals and community health centres benefited from the distribution of life-saving medical equipment, helping to restore essential medical functions.</td>
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<tr>
<td>No outbreaks of epidemics of communicable diseases were detected in quake-affected areas. WHO technical assistance helped to support communicable disease prevention and surveillance post-quake and provide rapid assessments and information on disease occurrence and other public health indicators in affected areas; a schistosomiasis prevalence study helped provide information on the situation for this disease in two previously endemic areas.</td>
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<td>Nearly 1,700 people affected by the earthquake were provided with mental health and psychosocial support (MHPSS) and emergency care after over 120 senior nurses were trained in emergency nursing care, and over 140 teachers and student volunteers received training in PSS.</td>
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| 08-WHO-031 |
| "Saving Lives and Reducing Suffering for the Affected Population in the Sichuan Earthquake" |
| $1,305,445 |
support (PSS) and emergency care after over 120 senior nurses were trained in emergency nursing care, and over 140 teachers and student volunteers received training in PSS primary health care, and supplies and equipment for immunization services;
- Local psychosocial experts trained on emergency mental health care to organize psychosocial support for the affected populations and emergency relief responders.
- International technical advice on safe hospitals and disaster mitigation provided the foundation and set the planning framework for hospitals as they initiated their recovery efforts. Similarly, international technical advice on healthcare of children in emergencies, environmental health, food and drinking water safety, psychosocial support in emergency settings provided timely emergency-related health knowledge to national partners.

<table>
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<tr>
<th>Health (Reproductive Health)</th>
<th>08-FPA-022 “Distribution of Reproductive Health Kits”</th>
<th>$114,490</th>
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<tr>
<td>• Approximately 200,000 women in reproductive health age</td>
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<tr>
<td>• In addition to RH kits, refrigerators for maintaining cold chain were delivered. UNFPA also distributed supplies such as 4,400 blankets, 13,200 women’s hygiene kits for physical and psychological support.</td>
<td>• Ensure safe and clean clinical delivery assistance.</td>
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<tr>
<td>Ministry of Health, Ministry of Commerce, Government of China Disaster Relief mechanism</td>
<td>• Avoid increases in maternal morbidity and mortality increases through sustained safe delivery services at the basic level until detailed assessments were undertaken and further support was provided.</td>
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<tr>
<td>The provided supplies include Safe Delivery Assistance for approximately 200,000 women in reproductive health age, treatment of STIs, HIV prevention and blood transfusions.</td>
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</tbody>
</table>
| Shelter | 08-HCR-023  
“Shelter Support to People Affected by Earthquake in Southwest China” | $2,000,000 | 75,000 people with emphasis on vulnerable people such as elderly, children, women and disabled people | Ministry of Civil Affairs, Local Civil Affairs Bureaus, Ministry of Foreign Affairs, Jade Air cargo Airliner | 75,000 people receive adequate and immediate shelter assistance through the effective deployment of humanitarian relief family tents |
| Shelter and relief | 08-UDP-015  
“Sheltering and Living Support to People Affected by Earthquake in Southwest China” | $2,058,830 | Approximately 40,000 affected people and households who had not yet received such assistance from the government or other sources | Ministry of Commerce, Ministry of Civil Affairs, China International Centre for Economic and Technical Exchange | provide basic security and personal safety to about 40,000 people in affected areas  
strengthen capacity to survive and recovery from the disaster  
strengthen Government efforts to provide emergency aids to affected areas |

- 15,000 tents were distributed to 75,000 beneficiaries in Sichuan and Gansu provinces providing emergency shelter and reducing the risk of exposure to cold weather and heavy rain and to sexual and gender-based violence.  
- Among the 11,000 tents that were distributed in Sichuan province: 2,000 tents distributed to Mianyang; 1,250 tents distributed to Du Jiangyan; 2,000 tents distributed to Aba; 2,855 tents distributed to Guangyuan; 2,895 tents distributed to Deyang.  
- The 4,000 tents were allocated in Gansu Province as follows: 2,000 tents in Long Nan, 500 tents in Qing Yang, 1,000 tents in Gan Nan and 500 tents in Tian Shui  
- 3,200 tents, 62,000 quilts, 65,000 blankets and 10,016 emergency lights were delivered to approximately 40,000 people in affected areas in Sichuan province
CERF IN ACTION

Food

The CERF allocation of $490,888 enabled WFP to purchase 634 metric tonnes of commodities to save and sustain more than 138,000 lives by meeting their basic nutritional needs. The first shipment of 62mt of vegetable oil arrived 27 May and was distributed the same day. Sangzao tent camp, which hosted more than 2,000 displaced people, had just 50kg of vegetable oil left when the WFP trucks arrived that day with 2.4mt of cooking oil. The camp manager and residents were visibly relieved to know that their camp kitchen, which fed all of the residents, would be able to keep cooking for the next few weeks. Despite the turmoil caused by the constant aftershocks, the quake lakes which threatened to burst and flood affected areas, food aid deliveries were well coordinated by WFP’s implementing partners and local authorities.

Emergency shelter

Despite the fact that most of the attention focused on Sichuan province where UNHCR delivered 11,000 tents, within three weeks after the earthquake struck, Gansu province also benefited from 4,000 UNHCR tents in the emergency phase. Upon confirming CERF allocation, UNDP and its partners acted promptly in procuring the first consignment of 358 relief tents. As more people were being rescued and evacuated, the needs for shelter increased sharply. Given the urgency, UNDP and partners successfully mobilized the Army to dispatch a military aircraft transporting the tents to Chengdu airport on 23 May. The tents were soon delivered to Mianyang through local relief channels and provided basic sheltering to more than 3,500 people in the affected communities.
Water and Sanitation

Using CERF funds, UNICEF procured five water purification units and 20 water tanks. One of the water purification units was installed at the Qingdao Primary and Middle School in Mianzhu City. It provided clean drinking water to the 1,300 students attending the school. The drinking facility, situated in a relatively spacious area, featured 12 taps, making it easy for students and teachers to access clean drinking water during class breaks.

UNICEF made a field visit on 19 August 2008 and found that both the water treatment unit and the water tank were functioning properly. School officials praised the water quality delivered by the water treatment unit and expressed their gratitude to UNICEF.

During the field visit, UNICEF noted the importance of maintaining the water treatment unit and suggested that a person be specially assigned for the task.

Throughout the emergency response, UNICEF has been training local technicians on the installation, operation, and maintenance of the water treatment units.
Health

UNFPA

Arrival of the Reproductive Health Kits in Chengdu airport, Sichuan on 5 June 2008