

RESIDENT / HUMANITARIAN COORDINATOR REPORT ON THE USE OF CERF FUNDS BANGLADESH RAPID RESPONSE FLOOD 2016

RESIDENT/HUMANITARIAN COORDINATOR

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	REPORTING PROCESS AND CONSULTATION SUMMARY
a.	Please indicate when the After Action Review (AAR) was conducted and who participated. An After Action Review (AAR) led by the Resident Coordinator's Office (RCO) was conducted on January 29 th 2016. Representatives of all UN Agencies concerned by the CERF allocation participated.
b.	Please confirm that the Resident Coordinator and/or Humanitarian Coordinator (RC/HC) Report was discussed in the Humanitarian and/or UN Country Team and by cluster/sector coordinators as outlined in the guidelines. YES NO
C.	Was the final version of the RC/HC Report shared for review with in-country stakeholders as recommended in the guidelines (i.e. the CERF recipient agencies and their implementing partners, cluster/sector coordinators and members and relevant government counterparts)? YES NO The Report will be shared with in-country stakeholders as recommended in the guidelines.

I. HUMANITARIAN CONTEXT

TABLE 1: EMERGENCY ALLOCATION OVERVIEW (US\$)							
Total amount required for the h	umanitarian response: 12,104,808						
	Source	Amount					
	CERF	1,799,769					
Breakdown of total response funding received by source	COUNTRY-BASED POOL FUND (if applicable)	NA					
,	OTHER (bilateral/multilateral)	5,800,231					
	TOTAL	7,599,400					

TABLE 2: CERF EMERGENCY FUNDING BY ALLOCATION AND PROJECT (US\$)							
Allocation 1 – date of o	fficial submission: 27/06/2	2016					
Agency	Project code	Cluster/Sector	Amount				
UNDP	16-RR-UDP-006	Shelter	610,800				
UNFPA	16-RR-FPA-028	Sexual and/or Gender-Based Violence	110,104				
UNFPA	16-RR-FPA-029	Health	115,165				
UNICEF	16-RR-CEF-076	Water, Sanitation and Hygiene	315,400				
WFP	16-RR-WFP-039	Food Aid	648,300				
TOTAL	1,799,769						

TABLE 3: BREAKDOWN OF CERF FUNDS BY TYPE OF IMPLEMENTATION MODALITY (US\$)						
Type of implementation modality	Amount					
Direct UN agencies/IOM implementation	950,271					
Funds forwarded to NGOs and Red Cross / Red Crescent for implementation	791,368					
Funds forwarded to government partners	58,130					
TOTAL						

HUMANITARIAN NEEDS

Tropical storm Roanu made landfall in the southern coastal region of Bangladesh on the 21st May at midday. The storm brought heavy rain, winds of over 100km/h, and storm surges peaking at 2.7 meters. Eighteen (18) coastal districts were affected and among them, seven (7) severely: Chittagong, Cox's Bazar, Bhola, Barguna, Lakshmipur, Noakhali and Patuakhali. Considering the low socioeconomic indicators in the most affected districts, the over-stretched resilience capacity of highly vulnerable persons living in precarious conditions along the coastal areas due to recurrent small scale disasters, Tropical storm Roanu had a devastating impact. Those were aggravated by the high tide prevailing at that time and the rain it brought with it. The cyclone destroyed houses, and uprooted trees. The cyclone characterized itself by its magnitude (18 districts) and its heavy death toll (27) compared to the last 5 years for similar types of natural disasters (2013 Tropical Storm Mahasen killed 17 persons, 2014 Monsoon Flooding took the life of 21 persons, 2015 Cyclone Komen had a death toll of 7 persons). The cyclone combined with the rain and high tide caused 29 breaches of embankments in numerous locations. At least 75,533 houses were damaged or destroyed as a result of the wind, rain and embankment branches. According to the Joint Needs Assessment (JNA) 1.3 million people were affected in these 7 districts. Early warning systems were activated and a total of 513,363 people took shelter in 3,494 cyclone shelters. Roanu provoked devastating consequences as several key infrastructures were hit such as the embankments and dykes. Villages were already flooded and some areas waterlogged when the monsoon started. The destroyed embankments caused floods that swept away fisheries and interrupted power supply. More than 100 primary schools and Madrassas were damaged due to waterlogging, strong winds and falling trees.

CERF funds were sought to save and to protect the life of 166,362 individuals in the seven most affected districts in five priority sectors: Food Security, Shelter, Wash, Health, Sexual and Gender-Based Violence (SGBV). Vulnerable prior the cyclone, these people were highly vulnerable as the monsoon had just started and they had no shelters. People targeted were those who lost their house, female headed households, disabled persons and elderly, landless/daily laborer and small & marginal farmers, children who had to stop going to school and persons at high risk of becoming victims of SGBV. With the monsoon season just starting, these vulnerable people were already living in flooded areas without shelters and adequate livelihoods. As the situation was about to deteriorate further, immediate life-saving assistance aimed to allow these persons in life-threatening situation to survive the monsoon season with safety and dignity. The context characterized by the devastation of houses, schools, fisheries, as well as reduced limited or inexistent access to food and water, was putting an extreme burden on all members of all targeted families. Considering the prevailing situation prior to the cyclone, tensions and discriminatory practices against women were likely to increase further if adequate urgent assistance was not provided. It was also urgent to provide life-saving assistance to avoid women and men to put their lives in danger to bring home food or water, or for pregnant women to give birth without adequate assistance.

II. FOCUS AREAS AND PRIORITIZATION

Following the outcomes of the Joint Needs Assessment (JNA), the Humanitarian Coordination Task Team (HCTT) had developed a Joint Response Plan (JRP) targeting 432,162 persons out of the 1.3 million persons affected by Roanu. The JRP had three (3) strategic objectives: (1) To meet immediate needs of the vulnerable population in the severely cyclone-affected areas; (2) To ensure that the common and standard assistance package is respected (3) To coordinate joint sectoral response to support affected people including those living in hard-to-reach locations. The JRP took into consideration the immediate response provided by the national authorities to the people affected by the cyclone. It had nine sectors of intervention: Shelter, Water, Sanitation and Hygiene (WASH), Food Security, Health, SGBV, Child Protection, Education, Nutrition and Early Recovery. In addition, the HCTT decided to promote Communication with Communities and Community Engagement in order to involve affected communities in the design, planning, management, implementation of the humanitarian actions as well as to seek feedback from the communities on the implementation of the HCTT Joint Response Plan.

In addition, and based on the above, UN Agencies, members of the HCTT, contributed actively to the CERF Rapid Response prioritization process. The prioritized activities emerged from a process of identification of life-saving needs, identification of activities eligible for CERF Rapid Response and funding gaps and, agencies' capacities to deliver in a timely manner. As a result of the prioritization process, it was agreed that the CERF funding will focus on the first strategic objective of the JRP and, on five (5) out of the nine (9) sectors of the broader humanitarian response: Shelter, WASH, Food Security, Health, SGBV. It was also decided that the urgent needs to be addressed through the CERF request were:

- 1. To provide 19,800 persons (3,960 households) with unconditional cash transfer for food security in two (2) instalments;
- 2. To provide 18.640 individuals with shelter assistance:
- 3. To provide 60,000 persons (12,000 households) with comprehensive WASH packages that include: 1,000 disaster resilient emergency latrines for safe excreta disposal and management, 600 sessions to disseminate key life-saving hygiene

- messages, distribution of 1,000 hygiene kits and rehabilitation of 100 dysfunctional water points and deployment of water treatment plants to provide safe drinking water;
- 4. To support 10 health facilities to be able to respond 24/7 to emergency obstetric and neonatal care services, to distribute emergency life-saving reproductive health kits to 13 health facilities, clean delivery kits and phone-credit and/or transport vouchers to 1,000 visibly pregnant women and, to establish 12 registration hub for pregnant women;
- 5. To provide dignity kits (that includes clothing and other NFIs) to 5,000 women and girls through community-based outreach and women friendly spaces (including 2 to be established), to provide 20 health facilities with life-saving rape treatment kits for survivors of sexual violence including rape together with orientation and follow-up services support.

III. CERF PROCESS

The overall CERF strategy was developed based on needs assessment undertaken between May 22^{nd} and May 31^{st} . The HCTT met in emergency a few hours after the cyclone made landfall in the South coastal areas of the country. Considering the preliminary information received on the cyclone and the risks associated for the highly vulnerable persons recently affected by cyclone Komen, the HCTT decided to activate a JNA Phase 1. HCTT's Needs Assessment Working Group undertook the JNA with UN Agencies, INGOs and NGOs in close collaboration with national authorities. The JNA benefited from a gender analysis undertaken by UNWOMEN as well as satellite imagery from the European Commission. The results of the JNA were shared with the HCTT on May 26^{th} . Inter-cluster meetings took place on May 27^{th} and 28^{th} during which complementary information was shared by the clusters/sectors leads and co-leads, and the overall humanitarian priorities and response were designed. The draft HCTT Response Plan for Roanu was shared, commented and reviewed by all HCTT members including cluster leads and co-leads and the HCTT Response Plan for Roanu was finalized on June 1^{st} .

Considering the results of the assessments and the urgent need to respond immediately to the most life-saving needs, the HCTT developed a concept note for a CERF Rapid Response application. During that process, the priorities outlined in this application were defined. All clusters/sectors were consulted to inform the life-saving needs identified in their respective clusters/sectors' assessments. In line with the results of the JNA and the following inter-cluster meetings, prioritized life-saving interventions were identified in the priority sectors of Food Security, Shelter and WASH as well as maternal health and SGBV. The strategic focus of the CERF request took into consideration the following factors: priority humanitarian areas identified through the JNA and complementary clusters/sectors' assessments, the funding needs and funding levels, the gaps identified in previous responses to similar type of disasters (e.g. SGBV), Agencies' ability to implement in a timely manner. The level and scope of the current response by the Government of Bangladesh were additional factors taken into consideration. It is important to note that affected people were not involved in the JNA process as JNA Phase 1 was triggered (rapid overview of the impact of the disaster) and therefore, the information was collected from local authorities. However, concerned clusters/sectors complementary assessments in the field provided opportunities to meet directly with affected persons and their concerns corroborated and/or complemented the results of the JNA.

Due to the meteorological conditions, Agencies were aware that some areas might have been still inundated and, that the situation of waterlogged areas could worsen. Therefore, during the CERF process they implemented mitigating measure such as identifying the fastest and most cost-effective way to deliver assistance, notably through the use of boats that would be sufficiently loaded to avoid repeated transportation in the same areas. During the CERF process, an innovative coordination structure at local level in the seven (7) targeted districts was established. Some partner organizations volunteered to take on the district coordination role on behalf the HCTT. The presence of HCTT-designated district coordination focal points was of paramount importance to ensure proper coordination in the field and to ensure an efficient and effective response. It allowed having a privileged working relationship with the District Commissioners and, a direct line of support from the HCTT.

IV. CERF RESULTS AND ADDED VALUE

TABLE 4: AFFECTED INDIVIDUALS AND REACHED DIRECT BENEFICIARIES BY SECTOR¹

Total number of individuals affected by the crisis: 1,300,000

	Female			Male			Total		
Cluster/Sector	Girls (< 18)	Women (≥ 18)	Total	Boys (< 18)	Men (≥ 18)	Total	Children (< 18)	Adults (≥ 18)	Total
Food Aid	5,438	4,653	10,091	5,019	4,330	9,349	10,457	8,983	19,440
Health	7,021	9,750	16,771	1,990	472	2,462	9,011	10,222	19,233
Sexual and/or Gender- Based Violence	12,200	73,500	85,700	0	550	550	12,200	74,050	86,250
Shelter	6,400	4,252	10,652	5,333	3,555	8,888	11,733	7,807	19,540
Water, Sanitation and Hygiene	12,575	17,365	29,940	13,266	16,794	30,060	25,841	34,159	60,000

¹ Best estimate of the number of individuals (girls, women, boys, and men) directly supported through CERF funding by cluster/sector.

BENEFICIARY ESTIMATION

The overall CERF funded intervention aimed at reaching 166,362 individuals. Based on an analysis of reached beneficiaries per project and, following inter-cluster discussions, the overall number of beneficiaries is estimated to be 168,152 persons. This figure is a realistic estimate of the overall number of beneficiaries that avoids overlaps and double counting between the sectors of the response. The slight increase is partly explained by the fact that a larger number of women and girls benefited from the newly established women friendly spaces as part of the Health project. In addition, 200 extra households were reached by the emergency shelter assistance than initially planned through the Shelter project. The sex and age disaggregated number of beneficiaries is presented in the table below.

TABLE 5: TOTAL DIRECT BENEFICIARIES REACHED THROUGH CERF FUNDING ²							
Children (< 18)							
Female	30,213	95,518	125,731				
Male	20,275	22,146	42,421				
Total individuals (Female and male)	50,488	117,664	168,152				

Best estimate of the total number of individuals (girls, women, boys, and men) directly supported through CERF funding This should, as best possible, exclude significant overlaps and double counting between the sectors.

CERF RESULTS

Food Aid

The targeted 3,960 households received timely cash grants by WFP. This contributed significantly to improving targeted households' food security. WFP post distribution monitoring reveals that 57% of the households achieved an acceptable food consumption score and 34% were on the borderline.

Health

A total of 20 recently graduated and licensed diploma midwives were oriented and deployed to 10 health facilities to provide 24x7 Emergency Obstetric and New-born Care (EMmONC). In six months, they performed 465 normal vaginal deliveries and, they attended 3,678 ante-natal visits and 620 post-natal visits. These activities benefited a total of 19,233 persons. Moreover, 13 health facilities were provided with reproductive health kits that benefited 1,185 persons. 13 registration hubs for pregnant women were established and 1,000 visibly pregnant women received phone-credit and / or transport vouchers to help reach health facilities. They also received individual clean delivery kits.

SGBV

A total of 13 health facilities were provided with life-saving rape treatment kits for survivors of sexual violence. 3,000 women and girls received dignity kits in addition to the 2,000 who had already received theirs from other sources of funds, bringing the total to 5,000. 2 Women Friendly Spaces were established which benefited 35,350 women.

Shelter

4,860 households received emergency shelter and NFI assistance. 100 response team staff including volunteers and members of local disaster management committees were trained on the provision of psychosocial support.

WASH

1,000 emergency latrines were constructed for 30,000 people. 100 existing dysfunctional water points were rehabilitated to provide safe drinking water for 10,000 people. 60,000 persons were reached with key hygiene messages through a total of 600 hygiene promotion sessions. In addition, 1,000 sets of handwashing devices were distributed to 1,000 poor and vulnerable households in the project areas. 2,200 Hygiene kits were procured and distributed to 2,200 households.

CERF's ADDED VALUE

a)	Did CER	F funds lead to	a fast delivery	y of assistance to	beneficiaries?
	YES 🖂	PARTIALLY [NO		

CERF funds led to a fast delivery of assistance to beneficiaries, except for Shelter related intervention because of the need to ensure a transparent and political influence-free selection process (ref. section on lessons learnt). In the immediate aftermath of the Cyclone Roanu, UNFPA quickly procured and distributed 3,000 Dignity Kits to women and adolescent girls in the hardest hit areas. WFP which had already completed one food distribution in coordination with the Government of Bangladesh could organize rapidly a much needed second round of distribution. UNICEF-led WASH assistance was delivered and completed within 3 months. The fast delivery of assistance was achieved despite challenging unfavourable weather conditions (rain), the remoteness of the targeted areas, the need to make use of multiple means of transportation and, temporary strikes in certain areas targeted for assistance that needed to be taken into account in the delivery plan. Another constraint was related to the lack of liquidity in some of the local banks that had to be factored in when planning for cash assistance.

	Did CERF funds help respond to time critical needs¹? YES ☑ PARTIALLY ☐ NO ☐
mons lives	F funds helped respond to time-critical needs for all concerned projects, in particular considering the severe and prolonged soon season that followed the passage of Cyclone Roanu. CERF funds were of paramount importance to prevent further loss of by providing life-saving assistance to an extremely vulnerable population in the following sectors: Food Aid, Health, SGBV, Shelter WASH.
,	Did CERF funds help improve resource mobilization from other sources? YES ☑ PARTIALLY ☐ NO ☐
Fund mobi mobi mato funds US\$	F funds helped to improve resource mobilization from other sources. Some Agencies mobilized funds from their own Emergency also or were able to utilize part of existing contributions to bring immediate emergency assistance. CERF funding supported the dization of UNDP TRAC funding to construct 50 Cyclone Resilient Core Houses in Chittagong. Similarly, UNICEF WASH Section dized internally an additional 70,000 USD and, the Department of Public Health Engineering provided 2,000 Water Container thing with the related CERF funded intervention. Beside funds mobilized for the sectors/projects concerned by this report, CERF is supported the overall resource mobilization process against the HCTT Response Plan for Roanu. In addition to the CERF funding, 5,800,231 was mobilized during the 3-month response from the Canadian Humanitarian Assistance Fund (CHAF), the United dom's Department for International Development Start Network, Irish Aid and, Jersey Overseas Aid Commission.
	Did CERF improve coordination amongst the humanitarian community? ☑ PARTIALLY ☐ NO ☐
instit common in Ba addit response	F funded projects improved the coordination among the humanitarian community (UN agencies, local administration, local utions, national and local NGOs, and civil society) through regular coordination meetings, project events and formal and non-formal munications that took place during all the project phases. The establishment of a Humanitarian Coordination Group at divisional level arishal and Chittagong for instance helped to strengthen the WASH cluster coordination at sub national level in Cox's Bazar. In tion, CERF funds enabled UNFPA to step up its coordination function for GBV and Sexual and Reproductive Health (SRH) ectively. UNFPA's strong advocacy efforts resulted in establishing the GBV Cluster for the first time under the country's humanitarian ework, co-led by the Ministry of Women and Children Affairs and UNFPA. Also UNFPA revenued the Reproductive Health Working

e) If applicable, please highlight other ways in which CERF has added value to the humanitarian response

Group under the Health Cluster led by WHO.

One of the priority needs in the health sector in the aftermath of Cyclone Roanu was to ensure that cyclone-affected women of reproductive age (15-49 years of age) would have access to critical health care including the life-saving maternal and newborn cares and also the facilities would be able to provide necessary services to GBV survivors. CERF further added value to the humanitarian response by creating these synergies on reproductive health related interventions and by developing capacities of the health sector response to GBV in emergencies. UNFPA collaborated with key Government stakeholders such as Ministry of Health and Family Welfare, Ministry of Women and Children Affairs as well as with other UN agencies and I/NGOs, to ensure that life-saving reproductive health care and GBV services are provided to all those affected women and girls who were in need. The Shelter project helped to transfer new techniques for building safer shelters by the introduction of alternative ways to use traditional building material in the targeted communities. It strengthened communities' skills and capabilities to build safer shelters.

¹ Time-critical response refers to necessary, rapid and time-limited actions and resources required to minimize additional loss of lives and damage to social and economic assets (e.g. emergency vaccination campaigns, locust control, etc.).

V. LESSONS LEARNED

TABLE 6: OBSERVATIONS FOR THE <u>CERF SECRETARIAT</u>						
Lessons learned Suggestion for follow-up/improvement Responsible entity						
NA	NA	NA				

TABLE 7: OBSERVATIONS FOR COUNTRY TEAMS							
Lessons learned	Suggestion for follow-up/improvement	Responsible entity					
The existing Joint Needs Assessment questionnaire does not contain relevant questions to collect specific data on Sexual and Reproductive Health, and Gender-Based Violence	Inclusion of SRH and GBV questions into the first phase of JNA questionnaire	HCTT and Needs Assessment Working Group; Technical assistance from UNFPA					
Divisional and district administration and Local Government officials, development actors, civil society's involvement in the process of identifying and selecting the beneficiaries are nesseary for a transparent and political influence-free selection process.	Divisional and Local Government officials (i.e the District Commissioner, DC, the Disaster Relief and Rehabilitation Officer, the Upazila Nirbhahi Officer, Union Parishad Chair and stakeholders need to be brought at the same forum. This may ease the selection process.	Local Government, Partners NGO					
Psycho-social training for local government staff, people enged in response and local leaders in support to the traumatised victims during the response phase of a disaster is found much effective and more training should be arranged.	More training should be arranged at government and local level.	Local Government, Partners NGO, UNDP					
Swift cash trasfer through Mobile Money Transfer (MMT) can be used where applicable as one of the modalities to hand over cash to the benificieries.	Use of MMT to be explored.	Partners NGO ,UNDP					
Rapid WASH interventions in the affected communities assisted in restoring access to improved water and sanitation facilities and hygienic behaviour.	Establish linkages between emergency response with development projects and strong component of Disaster, Relief and Rehabilitation in the development phase.	Government and humanitarian actors.					

VI. PROJECT RESULTS

	TOOLOT NEODETO									
TAB	LE 8: PROJEC	CT RESULT	S							
CERF project information										
1. Aç	1. Agency: WFP					5. CER	F grant period:	11/07/20	16 - 10/01/2017	
2. CE	ERF project	16-RR-WFP-039			ÿ .		ping			
3. Clus	ter/Sector:	Food Aid				6. Statu	us of CERF grant	:	uded	
4. Pr	oject title:	Emergenc	y Food As	ssistanc	e for the	most affe	ected households	affected by cy	clone Roanu.	
	a. Total fund requirements		US\$ 2,	248,000		d. CER	F funds forwarded	I to implement	ng partners:	
	b. Total fund received ³ :	ing	US\$ 83	88,300			■ NGO partne	ers :	US\$ 105,09	2
7.Funding	c. Amount re from CERF:	eceived	US\$ 64	18,300	8,300 • Government Partners:					
Bene	eficiaries									
8a. T	otal number	planned an	d actuall	y reach	ed) of in	dividual	s (girls, boys, wo	men and mer	n) directly throug	h CERF funding
(prov	vide a breakd	own by sex	and age).						
Direc	ct Beneficiarie	es	Planne	d				Reached		
			Female)	Male		Total	Female	Male	Total
Chila	dren (< 18)			5,200		5,000	10,200	5,43	8 5,019	10,457
Adult	ts (≥ 18)			4,900		4,700	9,600	4,65	3 4,330	8,983
Tota	I		1	10,100		9,700	19,800	10,09	1 9,349	19,440
8b. E	Beneficiary Pr	ofile							_	
Cate	gory			Number of people (Planned)			Number o	Number of people (Reached)		
Refu	gees									
IDPs	IDPs									
Host population										
	Other affected people			19,800 19,440						
Total (same as in 8a)						19,800			19,440	
In case of significant discrepancy between planned and reached beneficiaries, either the total numbers or the age, sex or category distribution, please describe reasons:			During the preparation of the project proposal, beneficiary estimation was made considering the average of five members in a targeted household. During implementation, the actual number of beneficiaries was lower than the planning figure (average 4.9 members in a household). However, the total number of assisted households (3,960) remained the same as planned.							

² This refers to the funding requirements of the requesting agency (agencies in case of joint projects) in the prioritized sector for this specific emergency.

This should include both funding received from CERF and from other donors.

CERF Result Framework								
9. Project objective	Provision of food assistance to the most vulnerable households (HH) for immediate protection from hunger							
10. Outcome statement	Eighty percent of targeted households reach an acceptable food consumption score by the end of the intervention							
11. Outputs								
Output 1	3,960 HHs received cash grants on tim	ne						
Output 1 Indicators	Description	Target	Reached					
Indicator 1.1	Number of HHs/beneficiaries receiving assistance as % of planned	100% (3,960 HHs/19,800 beneficiaries)	100% (3,960 HHs/19,440 beneficiaries) received assistance as planned					
Indicator 1.2	Total amount of cash transferred to beneficiaries as % of planned (disaggregated by women, men, girls, boys) – Total 404,468 USD	100% (BDT 8,000 = USD 102.139 per HH divided into two equal instalments)	100% (each HH received BDT 8,000 = USD 102.139 divided into two equal instalments) A total of USD 404,468 was transferred to 3,960 HHs					
Output 1 Activities	Description	Implemented by (Planned)	Implemented by (Actual)					
Activity 1.1	Targeting of unions in consultation	WFP	In consultation with the Food Security Cluster and based on the severity of the damage caused by cyclone Roanu (as revealed through a Joint Needs Assessment and WFP monitoring), the project areas (upazilas/unions) were selected. Within the targeted upazilas, the most affected					
Activity 1.1	with the Food Security Cluster	Wil	unions were identified based on discussions with the Upazila Disaster Management Committees. Once the unions were identified, they were shared with the Food Security Cluster for wider circulation and better coordination.					
			Implemented by: WFP					
Activity 1.2	Prepare and sign Field Level Agreements with Implementing partners	WFP	Implementing partners were selected from WFP's existing/ stand-by NGO partners. Muslim Aid, an international NGO, was selected for Bhola and Patuakhali districts; Shushilan, a national NGO, was selected for Barguna district; and Mukti, another national NGO, was selected for Cox's Bazar district.					
			Field level agreements with these NGOs were completed and signed by 12 July 2016.					

Activity 1.3 Activity 1.3 Activity 1.4 Activity 1.4 Activity 1.5 Activity 1.5 Activity 1.5 Activity 1.5 Activity 1.6 Activity 1.6 Activity 1.7 Activity 1.7 Activity 1.8 Activity 1.8 Activity 1.8 Activity 1.8 Activity 1.9 Ac		T	1	
Activity 1.4 Orient cooperating partners on project expectations Orient cooperating partners on project expectations WFP my project expectations including its objective implementation modalities, roles and responsibility through inception workshop and consultate meeting. WFP and its NGO implementing partners (Mus Aid, Shushilan, Mukti) conducted a seriest community consultation meetings, followed household visits and group meetings. In all it meetings, communities and individuals were brief adequately about the project, its objectives a beneficiary entitlements. Basic information on project was also displayed on project signboards a banne. After the community mobilization and sensitizate about the project, Muslim Aid, Shushilan, and Mustaff conducted household visits in the affected are to select eligible beneficiaries based on the select criteria. Information of the households was analysis.	Activity 1.3	communicate them to cooperating	WFP	The beneficiary selection criteria outlined in the CERF proposal was followed. Following the finalization of Field Level Agreements, beneficiary selection criteria was communicated by WFP to the cooperating partners. WFP organised orientation workshops for the staff of the cooperating partner NGOs and relevant WFP staff and briefed them on the prescribed selection criteria and procedures to be followed. Implemented by: WFP
Activity 1.5 Ac	Activity 1.4		WFP	WFP oriented cooperating partner field staff about project expectations including its objectives, implementation modalities, roles and responsibilities through inception workshop and consultative meetings.
about the project, Muslim Aid, Shushilan, and Mustaff conducted household visits in the affected are to select eligible beneficiaries based on the select criteria. Information of the households was analyse	Activity 1.5	about the project and the selection	Shushilan,	WFP and its NGO implementing partners (Muslim Aid, Shushilan, Mukti) conducted a series of community consultation meetings, followed by household visits and group meetings. In all the meetings, communities and individuals were briefed adequately about the project, its objectives and beneficiary entitlements. Basic information on the project was also displayed on project signboards and banners.
Activity 1.6 Beneficiaries selection, verification and registration Muslim Aid, Shushilan, Mukti Muslim Aid, Shushilan, Mukti To make the process more transparent, a list of a selected participants were displayed in the un parishad and other popular places for suggestic and feedback from the commun After making the necessary amendments in a f cases, the beneficiary lists were finalized. The fill lists were then reviewed and certified by the respective Union Disaster Management Committee followed by final review and approval by the Upaz Disaster Management Committee. Based on the final list, each targeted household we have a supple of household for the process, including discussions with the communities and visits to a sample of househol from the tentative list. To make the process more transparent, a list of the process more transparent, and the process more	Activity 1.6		Shushilan,	After the community mobilization and sensitization about the project, Muslim Aid, Shushilan, and Mukti staff conducted household visits in the affected areas to select eligible beneficiaries based on the selection criteria. Information of the households was analysed, and based on this analysis the tentative/preliminary lists of beneficiaries were prepared. In parallel, WFP staff conducted physical verification of the process, including discussions with the communities and visits to a sample of households from the tentative lists. To make the process more transparent, a list of the selected participants were displayed in the union parishad and other popular places for suggestions and feedback from the community. After making the necessary amendments in a few cases, the beneficiary lists were finalized. The final lists were then reviewed and certified by their respective Union Disaster Management Committees, followed by final review and approval by the Upazila Disaster Management Committees. Based on the final list, each targeted household was registered and provided with a beneficiary card.

Activity 1.7	Transfer funds to NGOs for first distribution	WFP	Following the finalization of the Field Level Agreements, NGOs requested WFP and provided necessary supporting documents for fund transfer to the designated bank accounts for this project. After quick verification of the requests, WFP transferred funds for the first round of cash distribution to NGOs' designated bank accounts.
Activity 1.8	Conduct unconditional cash transfer distributions (4,000 BDT/HH)	Muslim Aid, Shushilan, Mukti	The first round of unconditional cash transfer was completed 2-11 August 2016. Each of the targeted households (3,960 HHs) received BDT 4,000. Senior female members of the households received the cash.
Activity 1.9	Attend unconditional cash transfer distributions	WFP	Implemented by: Muslim Aid, Shushilan, Mukti WFP staff were present at all cash distribution points. Cash distributions were organized in the presence of government officials and local government representatives to ensure better organization and safety. Implemented by: WFP
Activity 1.10	Conduct household visits for verification	WFP, Muslim Aid, Shushilan, Mukti	After successful completion of the first round of cash transfer, NGO field staff conducted household visits to verify the correct receipt and utilization of the cash. In parallel, WFP sub-offices also carried out post distribution monitoring using prescribed checklists for verification.
Activity 1.11	Transfer funds to NGOs for second distribution	WFP	Implemented by: WFP, Muslim Aid, Shushilan, Mukti Following the completion of the first round of cash distribution and subsequent household verifications, NGOs placed another request to WFP for necessary documents (including bank statements, reconciliation, and the first round distribution master roll) for fund transfer to the designated bank accounts. After quick verification of the requests, WFP transferred funds for the second round of cash distribution to NGOs' designated bank accounts.
Activity 1.12	Conduct unconditional cash transfer distributions (4,000 BDT/HH)	Muslim Aid, Shushilan, Mukti	The second and final round of unconditional cash transfer was completed 1-8 September 2016. Each of the targeted households (3,960 HHs) received BDT 4,000. Senior female members of the households received the cash.
Activity 1.13	Attend unconditional cash transfer distributions	WFP	All cash distributions for the second round were also made in presence of government officials, and local government representatives. WFP staff were present at all distribution points. Implementation by: WFP
Activity 1.14	Conduct household visits for verification	WFP, Muslim Aid, Shushilan,	After successful completion of the second round of cash transfers, NGO field staff conducted household visits to verify the correct receipt and utilization of the

		Mukti	cash. In parallel, WFP sub-offices also carried out post distribution monitoring using prescribed checklists for verification.
			Implemented by: WFP, Muslim Aid, Shushilan, Mukthi
Activity 1.15	Monitoring	WFP	WFP conducted monitoring at different stages - during selection of beneficiaries, cash transfer/distribution, and post-distribution at field level. WFP Barisal and Cox's Bazar sub-offices staff carried out intensive process monitoring for the activities using prescribed checklists during the distributions as well as post distribution monitoring. WFP staff made regular visits to ongoing implementation of the activities, and discussed the findings of the monitoring visits with the NGO partners and upazila government administrations for corrective actions, as identified. Additional staff were also mobilized by WFP for monitoring.
Activity 1.16	Coordination of activities with Area Coordinator	WFP	WFP sub-offices established effective coordination with district and upazila administrations, UN agencies and other I/NGOs working in the project areas and maintained liaison with the Food Security Cluster and the Humanitarian Coordination Task Team both at country office and field level. To avoid duplication and ensure good collaboration, WFP-assisted beneficiaries' lists were maintained in the office of the upazila administrations and was also shared with other stakeholders (e.g., I/NGOs) working in the same project locations.
Activity 1.17	Report to the Humanitarian Coordinator	WFP	WFP provided progress updates and reports on a regular basis.
Activity 1.18	Report to the donor	WFP	WFP provided inputs and reports to the UN Resident Coordinator's office for report to donor.

12. Please provide here additional information on project's outcomes and in case of any significant discrepancy between planned and actual outcomes, outputs and activities, please describe reasons:

The cash transfers contributed significantly to improving targeted households' food security. WFP post distribution monitoring reveals 57% of the households achieved acceptable food consumption score and 34% were on the borderline. Post distribution monitoring also revealed that all of the targeted households primarily used their cash entitlements for food though many also spent a portion of the money for other essential needs such as house repairs, medical treatment and for investments for livelihoods (e.g., seeds, fertilizer, chickens and goats)

13. Please describe how accountability to affected populations (AAP) has been ensured during project design, implementation and monitoring:

Accountability to the affected populations was ensured through the following measures during project design, implementation and monitoring:

- During selection of beneficiaries, community consultations were organized during which the presence of affected populations was ensured.
- WFP established a complaint response mechanism with dedicated hotlines. The hotlines were displayed at different strategic locations of project areas. All calls received in the hotline were attended to, taking corrective actions as deemed necessary.
- Cash distribution points were selected considering security, protection and convenience of the targeted households.
- Cash distributions were organized in early hours of the day ensuring beneficiaries' ability to return home before dark.
- Beneficiary selection criteria and entitlements were shared with the community, including affected populations, widely.
- List of selected beneficiaries were shared with the local administrations, local government institutions and community. It was displayed in union and upazila parishad notice boards.
- WFP staff was present at all cash distribution points to ensure organization and transfer of correct entitlements to the beneficiaries.
- Post distribution monitoring was conducted after each cash transfers. Beneficiaries' feedback received and used to strengthen implementation.
- Coordination with local administration and other stakeholders (I/NGOs) ensured: share the beneficiaries lists with relevant stakeholders, facilitating increased coverage, no-duplication and synergy.

14. Evaluation: Has this project been evaluated or is an evaluation pending?	EVALUATION CARRIED OUT
Considering the short duration of the project (quick actions project), no independent/external evaluation has been planned as such. However, WFP carried out	EVALUATION PENDING
post distribution monitoring, ensuring visits to a significant number of households after they had received the cash transfer to understand the use and benefit of the cash. Monitoring findings and anecdotal evidence suggest that the cash transfers improved the targeted households' food security and also helped overall in mitigating their vulnerability after Cyclone Roanu with some freedom to plan for their recovery.	NO EVALUATION PLANNED ⊠

TARI	TABLE 8: PROJECT RESULTS									
CER	F project info	rmation				C OFFI				
1. Ag	jency:	UNFPA				5. CERF grant period:	13/07/2016 - 1	2/01/2017		
2. CE	RF project	16-RR-FP	A-028	6. Status of CERF			Ongoing			
3. Sexual and/or Gen		d/or Gend	der-Based Vi	olence	grant:	⊠ Conclude	d			
4. Pr	4. Project title: Saving lives, health			and dignity	of cyclon	e-affected women and	d girls through multi	-sectoral GBV res	ponse	
a. Total funding requirements ⁴ : US\$ 59			94,000		d. CERF funds forw	arded to implement	ing partners:			
	h Total funding		US\$ 1	10,104			partners and Red Crescent:			
7.Funding	c. Amount re from CERF:	eceived	US\$ 1 ⁻	10,104		■ Gover	nment Partners:	ent Partners:		
	Beneficiaries									
					of indivi	duals (girls, boys, w	omen and men) <u>di</u>	rectly through C	ERF	
	ing (provide a et Beneficiari		n by sex	and age). Planned				Reached		
			F	emale	Ma	nle Total	Female	Male	Total	
Child	ren (< 18)			11,000		11,000	12,200		12,200	
	s (≥ 18)		-	73,000	5	00 73,500	73,500	550	74,050	
Total	!			84,000	5	00 84,500	85,700	550	86,250	
8b. B	Seneficiary Pr	ofile								
Cate	Category		Number of people (Planned)			Number of peo	Number of people (Reached)			
Refu	Refugees									
IDPs	IDPs									
Host	Host population									
Other affected people				84,500)	86,250				
Total	Total (same as in 8a)					84,50)		86,250	
In case of significant discrepancy between planned and reached beneficiaries, either the total numbers or the age, sex or category							NA			

⁴ This refers to the funding requirements of the requesting agency (agencies in case of joint projects) in the prioritized sector for this specific emergency.

This should include both funding received from CERF and from other donors.

CERF Result Fra	amework							
9. Project objective	Ensuring the safety, health and dignity of women and girls in the seven cyclone-affected districts							
10. Outcome statement	Increased access to multi-sectoral life-saving GBV response services for 84,000 of the most vulnerable women and girls							
11. Outputs								
Output 1	3,000 women and girls provided with Dignity Kits to restore their	sense of dignity						
Output 1 Indicators	Description	Target	Reached					
Indicator 1.1	No. of women and girls receiving Dignity Kits	5,000	5,000					
Output 1 Activities	Description	Implemented by (Planned)	Implemented by (Actual)					
Activity 1.1	Procure 3,000 Dignity Kits	UNFPA	3,000					
Activity 1.2	Distribute Dignity Kits through community-based outreach and Women Friendly Spaces	UNFPA, Ministry of Women and Children Affairs (MoWCA), local authorities, NGO	UNFPA, MoWCA, local authorities, Research Training and Management International (RTMI)					
Activity 1.3	Monitoring and Evaluation	UNFPA	UNFPA					
Output 2	13 Upazilla-level health facilities equipped with life-saving Rape cyclone-affected communities of up to 130,000 persons	Treatment Kits to cover	the needs of the					
Output 2 Indicators	Description	Target	Reached					
Indicator 2.1	No. of Upazilla-level health facilities in the cyclone-affected areas provided with life-saving Rape Treatment Kits for survivors of sexual violence	13	13					
Indicator 2.2	No. of persons whose communities are to be covered by the provision of the new life-saving Rape Treatment Kits	130,000	130,000					
Output 2 Activities	Description	Implemented by (Planned)	Implemented by (Actual)					
Activity 2.1	Procurement of 13 life-saving Rape Treatment Kits	UNFPA, Ministry of Health and Family Welfare (MoHFW), NGO	UNFPA, MoHFW, RTMI					
Activity 2.2	Orientation of health service providers on the use of the new Rape Treatment Kits	UNFPA, MoHFW, NGO	UNFPA, MoHFW, RTMI					
Activity 2.3	Provision of life saving follow-up services for survivors of sexual violence including rape	UNFPA, MoHFW, NGO	UNFPA, MoHFW, RTMI					

Activity 2.4	Monitoring and Evaluation	UNFPA	UNFPA
Output 3	Two Women Friendly Spaces are established to ensure shelter, saving referral for GBV survivors	psycho-social counselli	ng service and life-
Output 3 Indicators	Description	Target	Reached
Indicator 3.1	No. of Women Friendly Space established	2	2
Indicator 3.2	No. of cyclone-affected women and girls of reproductive age whose needs will be covered by the newly established Women Friendly Spaces	34,000	35,350
Output 3 Activities	Description	Implemented by (Planned)	Implemented by (Actual)
Activity 3.1	Identify locations/facilities in Patuakhali and Cox's Bazar districts for establishing Women Friendly Spaces	UNFPA, MoWCA, District and local authorities, NGO	UNFPA, MoWCA, District and local authorities, RTMI
Activity 3.2	Set up functional Women Friendly Spaces	UNFPA, MoWCA, NGO	UNFPA, MoWCA, RTMI
Activity 3.3	Provide transportation for referral of GBV survivors	UNFPA, NGO	Total 178 referral cases were supported by UNFPA and RTMI
Activity 3.4	Monitoring and Evaluation	UNFPA	UNFPA

12. Please provide here additional information on project's outcomes and in case of an between planned and actual outcomes, outputs and activities, please describe reasons				
NA				
13. Please describe how accountability to affected populations (AAP) has been ensure implementation and monitoring:	d during project design,			
MoWCA, the district and local government authorities were closely involved for accountability of the service provided. The project maintained good rapport and coordination with other partnering agencies including UN agencies, local NGOs. The district and local government authorities, MoWCA and local social protection groups were consulted during project design and implementation and monitoring. Reporting was done on a monthly basis and shared with the local stakeholders and received feedback on progress, challenges and follow up actions.				
14. Evaluation: Has this project been evaluated or is an evaluation pending?	EVALUATION CARRIED OUT			
UNFPA is providing financial and technical assistance to implement the project activities of ensuring GBV prevention and response in Cox's Bazar and Pautuakali since 2012. In 2016				
an evaluation of the whole country program was conducted which includes the interventions in Cox's Bazar and Pautuakali. Therefore, a separate evaluation was not carried out.	NO EVALUATION PLANNED 🛛			

TAB	LE 8: PROJE	CT RESULT	ΓS							
CER	F project info	rmation								
1. A	gency:	UNFPA				5. CER	F grant period:	08/07/201	6 - 07/01/2017	
2. Cl	ERF project e:	16-RR-FP	A-029	6. Status of CERF		☐ Ongoi	ng			
3. Clus	3. Health					grant:		⊠ Concl	uded	
4. Pr	oject title:	Saving ma	aternal ar	nd newb	orn lives	s in Cyclo	one Roanu affect	ed areas of Ban	gladesh	
a. Total funding requirements ⁶ :			23,500		d. CER	RF funds forwarde	ed to implement	ing partners:		
_	b. Total fund received ⁷ :	ding	US\$ 1	15,165			 NGO parti Cross/Cre 	ners and Red scent:	US\$ 69,470	
7.Funding	c. Amount received US\$ 1			15,165 • Government Partners:						
Ben	eficiaries		•							
fund	ling (provide	a breakdow		x and a	•		(3	Reached	en) <u>directly</u> thro	. •
			Female	е	Male		Total	Female	Male	Total
Chile	dren (< 18)			7,500		2,500	10,000	7,021	1,990	9,011
	ts (≥ 18)		,	10,000		2,000	10,000	9,750	472	10,222
Tota	· ,			17,500		2,500	20,000	16,771	2,462	19,233
	Beneficiary P	rofile		,		_,	,	,		,
Cate	egory			Numb	er of pe	eople (Pl	anned)	Number of	people (Reache	d)
Refu	gees									
IDPs										
Host	population									
Other affected people		20,000			0	19,233				
Total (same as in 8a)				20,00	0		19,233			
In case of significant discrepancy between planned and reached beneficiaries, either the total			NA							

⁶ This refers to the funding requirements of the requesting agency (agencies in case of joint projects) in the prioritized sector for this specific emergency.

This should include both funding received from CERF and from other donors.

numbers or the age, sex or category
distribution, please describe reasons:

CERF Result Framework			
9. Project objective	15,000 pregnant and lactating women and 5,000 new health services in the five most affected districts.	-born have access to ma	aternal and new-born
10. Outcome statement	To prevent excess maternal and new born mortality at	nd morbidity in cyclone a	affected areas
11. Outputs			
Output 1	Health facilities in most affected areas adequately sta 24x7 emergency obstetric and neonatal care (EmONO		gencies by providing
Output 1 Indicators	Description	Target	Reached
Indicator 1.1	Number of Union level health facilities in the affected areas of 5 affected districts providing 24X7 EmONC services	10	10
Indicator 1.2	Number of midwives deployed	20	20
Indicator 1.3	Number of beneficiaries	19,700	19,233
Output 1 Activities	Description	Implemented by (Planned)	Implemented by (Actual)
Activity 1.1	Recruitment and deployment of midwives	UNFPA, NGO and Ministry of Health and Family Welfare	UNFPA, RTMI and Ministry of Health and Family Welfare
Activity 1.2	Midwifery practice kits procured and provided to midwives to conduct both facility and community births	UNFPA, NGO	UNFPA, RTMI
Activity 1.3	Basic security measures provided to enable 24x7 services by midwives	UNFPA, NGO and Ministry of Health and Family Welfare	UNFPA, RTMI and Ministry of Health and Family Welfare
Output 2	Procure and distribute emergency life-saving reproduct maternal and child welfare centres, Upazilas, and Uni		ed district hospitals,
Output 2 Indicators	Description	Target	Reached
Indicator 2.1	Number of health facilities provided with reproductive health kits	13	13
Indicator 2.2	% of health facilities in the affected areas which possess at least 3 basic life-saving EmONC drugs and supplies (oxytocin, Misoprostol and Magnesium sulphate)	50%	48%
Indicator 2.3	Number of health workers oriented on the RH kits	30	29

Indicator 2.4	Number of beneficiaries of the RH kits supplies	1150	1185
Output 2 Activities	Description	Implemented by (Planned)	Implemented by (Actual)
Activity 2.1	Procurement and distribution of inter-agency RH kits	UNFPA, NGO and Ministry of Health and Family Welfare	UNFPA, RTMI and Ministry of Health and Family Welfare
Activity 2.2	Orientation on the use of RH kits at the facility	UNFPA, NGO	UNFPA, RTMI
Output 3	Procure and distribute clean delivery kits to visibly pre those who live in remote locations with no access to h		e shelters and in
Output 3 Indicators	Description	Target	Reached
Indicator 3.1	Number of visibly pregnant women who have received individual clean delivery kits	1,000	1,000
Output 3 Activities	Description	Implemented by (Planned)	Implemented by (Actual)
Activity 3.1	Procurement of clean delivery kits	UNFPA	UNFPA
Activity 3.2	Distribution of clean delivery kits	NGO	RTMI
Output 4	Support emergency transport and communication mea	asures for pregnant and	lactating women
Output 4 Indicators	Description	Target	Reached
Indicator 4.1	Number of registration hubs for pregnant women established	12	13
Indicator 4.2	Number of visibly pregnant women receiving phone- credit and / or transport vouchers to help reach health facilities	1,000	1000
Output 4 Activities	Description	Implemented by (Planned)	Implemented by (Actual)
Activity 4.1	Designation of hubs and orientation of staff	UNFPA, NGO	UNFPA, RTMI
Activity 4.2	Distribution of vouchers	NGO	RTMI
Output 5	Monitoring of all UNFPA supported activities	l	l
Output 5 Indicators	Description	Target	Reached
Indicator 5.1	Number of CERF/UNFPA supported facilities visited/ monitored at least once during the project by UNFPA staff	13	12
Indicator 5.2	Number of follow up visits to locations identified with challenges	6	5

Output 5 Activities	Description	Implemented by (Planned)	Implemented by (Actual)
Activity 5.1	monitoring visits by Field Officers and deputed UNFPA staff from the Country Office in Dhaka	UNFPA	UNFPA
Activity 5.2	Distribution of check sheet for monitoring visits distributed to all field visitors	RTMI	RTMI

12. Please provide here additional information on project's outcomes and in case of ar planned and actual outcomes, outputs and activities, please describe reasons:	ny significant discrepancy between
NA	
13. Please describe how accountability to affected populations (AAP) has been ensure implementation and monitoring:	d during project design,
UNFPA collaborated with the Government Implementing Partners such as the Directorate Directorate General of Family Planning as well as local partners and UN agencies working ir life-saving reproductive health services were provided to women and girls in the aftermath of	cyclone affected areas to ensure that
14. Evaluation: Has this project been evaluated or is an evaluation pending?	EVALUATION CARRIED OUT
UNFPA is providing financial and technical assistance to implement the project activities of ensuring GBV prevention and response in Cox's Bazar and Pautuakali since 2012.In 2016	EVALUATION PENDING
an evaluation of the whole country program was conducted which includes the interventions in Cox's Bazar and Pautuakali. Therefore, a separate evaluation was not carried.	NO EVALUATION PLANNED ⊠

TAB									
	LE 8: PROJE	CT RESULTS							
CER	F project info	rmation							
1. Aç	gency:	UNDP		5	5. CERF	grant period:	19/06/2016	- 18/12/2016	
2. CI	ERF project e:	16-RR-UDP-000	1	6. Status of CERF grant:		. Ongoin	g		
3. Cluster/Sector: Shelter					. otatu	S OF OLIVE Grain	. 🛛 🖾 Conclu	ded	
4. Project title: Emergency shelter assistant for the most vulnerable households affected by cyclone Roanu in Bang					angladesh.				
	a. Total fund requirement	TIS.	5 2,161,000) d	d. CERI	funds forwarded	to implementing	g partners:	
<u>g</u>	b. Total fund received ⁹ :	ling US	\$ 975,990			 NGO partner Cross/Cres 		US\$ 522,493	
7.Funding	c. Amount re from CERF:	eceived US	610,800			■ Governmen	t Partners:		
_	eficiaries	·						•	
fund	ling (provide a	(planned and act a breakdown by	sex and ag	•	lividual	s (girls, boys, w		directly throug	h CERF
Dire	ct Beneficiari	es Pla	nnad						
					-		Reached	ı	
		Fer		Male		Total	Reached Female	Male	Total
Chilo	dren (< 18)	Fer			5,033	Total 11,183		Male 5,333	Total 11,733
	dren (< 18) ts (≥ 18)	Fer	ıale	5	5,033 3,355		Female		
	ts (≥ 18)	Fer	6,150	5		11,183	Female 6,400	5,333	11,733
Adul Tota	ts (≥ 18)		6,150 4,102	5	3,355	11,183 7,457	Female 6,400 4,252	5,333 3,555	11,733
Adul	ts (≥ 18)		6,150 4,102 10,252	5	3,355 8,388	11,183 7,457 18,640	6,400 4,252 10,652	5,333 3,555	11,733 7,807 19,540
Adul Tota 8b. E	ts (≥ 18) nI Beneficiary Pr		6,150 4,102 10,252	3	3,355 8,388	11,183 7,457 18,640	6,400 4,252 10,652	5,333 3,555 8,888	11,733 7,807 19,540
Adul Tota 8b. E	ts (≥ 18) Beneficiary Pregory gees		6,150 4,102 10,252	3	3,355 8,388	11,183 7,457 18,640	6,400 4,252 10,652	5,333 3,555 8,888	11,733 7,807 19,540
Adul Tota 8b. E Cate Refu	ts (≥ 18) Beneficiary Pregory gees		6,150 4,102 10,252	3	3,355 8,388	11,183 7,457 18,640	6,400 4,252 10,652	5,333 3,555 8,888	11,733 7,807 19,540
Adul Tota 8b. E Cate Refu IDPs Host	ts (≥ 18) Beneficiary Pr egory gees	ofile	6,150 4,102 10,252	3	3,355 8,388	11,183 7,457 18,640	6,400 4,252 10,652 Number of p	5,333 3,555 8,888	11,733 7,807 19,540

⁸ This refers to the funding requirements of the requesting agency (agencies in case of joint projects) in the prioritized sector for this specific emergency.

This should include both funding received from CERF and from other donors.

In case of significant discrepancy between planned and reached beneficiaries, either the total numbers or the age, sex or category distribution, please describe reasons: Initially, UNDP planned to support 18,640 beneficiaries. However, UNDP could reach an additional 200 households by utilizing UNDP country office contribution and savings from UNDP's Budget line expenditure of "Staff and Other personal cost" as well as other operational expenditures. The additional beneficiaries were selected with the endorsement of local administration, local government and other development actors. As such, amongst the population hard-hit, a number of 19,540 (10,652 F and 8,888 M) individuals for 4,860 emergency shelter support inclusive NFI were reached (see para 8a).

CERF Result Framewo	rk						
9. Project objective	Protect most vulnerable population affected by Cyclone Roanu from weather events by providing emergency shelter.						
10. Outcome Most vulnerable men, women and children are protected from 2016 monsoon and weather events with a sense of dignity.							
11. Outputs							
Output 1	4,660 households will have safe, secured and dignified she	elter in affected areas	S				
Output 1 Indicators	Description	Target	Reached				
Indicator 1.1	10,252 female (adult and girls) individual will be covered with shelter support	100% (6150 <18 yrs., 4102>18yrs female)	104% (6400 <18 yrs., 4252>18yrs female)				
Indicator 1.2	8,388 male (adult and boys) individual will be covered with shelter support 100% (5033< 18 yrs., 3355>18 yrs. Male)		106% (5333< 18 yrs., 3555>18 yrs. Male)				
Indicator 1.3	4,660 households will receive BDT 8,000 (US \$ 102.14) for temporary shelter and NFI	100%	104%				
Output 1 Activities	Description	Implemented by (Planned)	Implemented by (Actual)				
Activity 1.1	Selection of NGO (from UNDP NGO Roster) for implementation.	UNDP	UNDP				
Activity 1.2	Beneficiary selection for shelter and NFI support	Partner NGO, UNDP, Government of Bangladesh	Eco Social Development Organization (ESDO), Samaj Kalyan O Unnayan Shangstha (SKUS), Hitaishi Bangladesh, Early Recovery Facility (ERF) UNDP, Bangladesh Scout				
Activity 1.3	Facilitate vendor selection and agreement for quality	Partner NGO,	ESDO, SKUS, Hitaishi Bangladesh, ERF				

	materials	UNDP	UNDP
Activity 1.4	Cash transfer to identified beneficiary for shelter and NFI support	Partner NGO	ESDO, SKUS, Hitaishi Bangladesh
Activity 1.5	Guide beneficiary for quality material and technical support for shelter construction	Partner NGO, UNDP	ESDO, SKUS, Hitaishi Bangladesh, ERF UNDP
Output 2	5 trainings for response team staff in providing psychosocia	al support	
Output 2 Indicators	Description	Target	Reached
Indicator 2.1	100 individual including ground staff, volunteer and or member of local disaster management committee	100% (55 F, 45 M)	100%(55 F,45 M)
Output 2 Activities	Description	Implemented by (Planned)	Implemented by (Actual)
Activity 2.1	Selection of consultant with relevant expertise	UNDP	UNDP
Activity 2.2	Selection training participants and training conduction	Partner NGO, Govt & UNDP	ESDO, SKUS, Hitaishi Bangladesh , Local Government of Bangladesh, UNDP

12. Please provide here additional information on project's outcomes and in case of any significant discrepancy between planned and actual outcomes, outputs and activities, please describe reasons:

Initially, UNDP planned to support 18,640 beneficiaries. However, UNDP could reach an additional 200 households by utilizing UNDP country office contribution and savings from UNDP Budget line expenditure of "Staff and Other personal cost" as well as other operational expenditures. The additional beneficiaries were selected with the endorsement of local administration, local government and other development actors. As such, amongst the hard-hit population, a number of 19,540 (10,652 female and 8,888 male) individuals were reached with 4,860 emergency shelter support inclusive NFI (see para 8a).

13. Please describe how accountability to affected populations (AAP) has been ensured during project design, implementation and monitoring:

The ERF UNDP sub-contracted the NGOs for implementation of activities from the validated NGO Roster. Eco Social Development Organization (ESDO), Samaj Kalyan O Unnayan Shangstha (SKUS) and Hitoishi Bangladesh were selected as the most suitable partners to implement the project. Partner NGOs, along with UNDP and the Government of Bangladesh, most importantly, the Deputy Commissioner Office of respective Upazila, Upazila Nirbahi Officer (UNO), Local Union Parishad Chair have been responsible at different tiers of hierarchy in beneficiary selection and cash transfer to beneficiaries of shelter support. All proposed beneficiaries were selected and finalized though coordination and validation meetings under the leadership of local government and local administration. To ensure transparency and fairness in beneficiary selection, Bangladesh Scout was deployed to validate the list of beneficiaries. Moreover, the entire process was monitored by UNDP field personnel. The selection of beneficiaries' were endorsed by issuance of individual ID cards with photograph, payment made to such beneficiaries were recorded in Master Roll with a receipt sign/finger prints by the respective beneficiaries, all such documentation have been further verified by the Union Parishad (UP) Chairman and the Upazila Nirbahi Officer (UNO). Relevant personnel from UNDP, i.e. Technical Officers frequently monitored the progress. Financial and admin staff ensured the disbursement of installments to our NGO partners as the work progressed.

14. Evaluation: Has this project been evaluated or is an evaluation pending?	EVALUATION CARRIED OUT
An evaluation will be conducted on CERF intervention. The formulation of Evaluation team is ongoing and the evaluation is planned to be completed in April 2017. UNDP will	EVALUATION PENDING 🖂
undertake the evaluation, through field visits and data collection from targeted areas.	NO EVALUATION PLANNED

		AT DEAL!!!								
	LE 8: PROJE		S							
	F project info									
	gency:	UNICEF			5. C	5. CERF grant period:		11/07/2016	6 - 10/01/2017	
	2. CERF project code: 16-RR-CEF-076			6. Status of CERF		☐ Ongoi	ng			
3. Cluster/Sector: Water, Sanitation a		ınd Hygi	ene gra	nt:		⊠ Conclu	uded			
4. Pı	roject title:	Improved	WASH S	ervices i	n 4 Cyclone	Roanu	affected Dist	ricts of Banglade	esh	
	a. Total fund requirement	-	US\$ 1,	050,000	d. 0	CERF fo	unds forwarde	ed to implementi	ng partners:	
Вu	b. Total fund received ¹¹ :	ding	US\$ 44	47,400		•	NGO parti Cross/Cre	ners and Red scent:	US\$ 78,263	
7.Funding	c. Amount re from CERF:		US\$ 3	15,400		•	Governme	ent Partners:	US\$ 58,130	
_	eficiaries		•						•	
fund	lotal number ling (provide ct Beneficiari	a breakdow		k and ag	•	riduais	(giris, boys,	Reached	en) <u>directly</u> thro	ugn CERF
Dire	CI Denencian	62		-	14.1	1 -	. (.1			T. (.)
			Female	9	Male	'	otal	Female	Male	Total
Chile	dren (< 18)		,	12,575	13,26	66	25,841	12,575	13,266	25,841
Adul	ts (≥ 18)		,	17,365	16,79	94	34,159	17,365	16,794	34,159
Tota	nl		:	29,940	30,00	60	60,000	29,940	30,060	60,000
8b. I	Beneficiary P	rofile								
Cate	egory			Numb	er of people	(Planr	ned)	Number of	people (Reache	d)
Refu	ıgees									
IDPs	<u> </u>									
	t population									
Other affected people		60,000								
Total (same as in 8a) 60,000					60,000					
In case of significant discrepancy between planned and reached beneficiaries, either the total numbers or the age, sex or category distribution, please describe reasons:		N/A								

This refers to the funding requirements of the requesting agency (agencies in case of joint projects) in the prioritized sector for this specific emergency.
 This should include both funding received from CERF and from other donors.

CERF Result Framework						
9. Project objective	Improved WASH Services in 4 Cyclone Roanu affect	ted Districts of Banglades	sh			
10. Outcome statement	60,000 people in the Cyclone affected population of 4 districts protected against water and sanitation related diseases through provision of water and sanitation materials and supplies.					
11. Outputs						
Output 1	1000 Emergency latrines constructed for 30,000 pec	pple in four cyclone affecte	ed districts			
Output 1 Indicators	Description Target Reached					
Indicator 1.1	# of contracts procured for construction of latrines and bathing cubicles in 4 districts	4	4			
Indicator 1.2	# of emergency latrines constructed.	1000	1000			
Indicator 1.3	# of bathing cubicle constructed.	100	100			
Indicator 1.4	# of Project Monitoring Visit conducted	5	5			
Output 1 Activities	Description	Implemented by (Planned)	Implemented by (Actual)			
Activity 1.1	Agreement and procurement of contracts for construction of latrines and bathing cubicles in 4 districts	Department of Public Health Engineering (DPHE) / UNICEF	UNICEF			
Activity 1.2	Construction of Emergency Latrines	DPHE/NGO/UNICEF	NGO Forum for Public Health			
Activity 1.3	Construction of private cubicles for women	DPHE/NGO/UNICEF	NGO Forum for Public Health			
Activity 1.4	Conduct monthly project monitoring visit and prepare monthly/final report	DPHE/UNICEF	DPHE/UNICEF			
Output 2	100 existing dysfunctional water points rehabilitated people in 4 cyclone affected districts	to provide safe drinking w	vater for 10,000			
Output 2 Indicators	Description	Target	Reached			
Indicator 2.1	# of proposal submitted for rehabilitation of tube wells	1	1			
Indicator 2.2	# of existing dysfunctional tube wells rehabilitated	100	100			
Indicator 2.3	# of water quality test conducted.	100	100			
Indicator 2.4	# of Project Monitoring Visit conducted	5	5			
Output 2 Activities	Description	Implemented by (Planned)	Implemented by (Actual)			
Activity 2.1	Submission and processing of proposal for rehabilitation of tube wells	DPHE/UNICEF	DPHE			
Activity 2.2	Rehabilitation of 100 dysfunctional tube wells	DPHE/NGO/UNICEF	DPHE			
Activity 2.3	Conduct water quality tests	DPHE	DPHE			

Activity 2.4	Conduct monthly project monitoring visit and prepare monthly/final report DPHE/UNICEF DPHE/UNICEF		DPHE/UNICEF
Output 3	60,000 affected population reached with key hygiene	messages in 4 cyclone a	affected districts
Output 3 Indicators	Description	Target	Reached
Indicator 3.1	# of Hygiene kits procured	2,200	2,200
Indicator 3.2	# of proposal submitted by DPHE for hygiene promotion	1	1
Indicator 3.3	# of hygiene promotion sessions carried out.	600	600
Indicator 3.4	# of hygiene kits distributed among targeted households	2,200	2,200
Indicator 3.5	# of household Hand washing devices installed	1000	1,000
Indicator 3.6	# of people reached with hygiene promotion messages	60,000	60,000
Indicator 3.7	# of Project Monitoring Visit conducted	5	5
Output 3 Activities	Description	Implemented by (Planned)	Implemented by (Actual)
Activity 3.1	Procurement of Hygiene Kits	UNICEF	UNICEF
Activity 3.2	Submission and processing of request from DPHE for Hygiene promotion	DPHE/UNICEF	DPHE
Activity 3.3	Conduct hygiene promotion (including menstrual hygiene) activities	DPHE/NGO/UNICEF	NGO Forum for Public Health
Activity 3.4	Distribution of Hygiene kits to 2,200 households	DPHE/NGO/UNICEF	DPHE/NGO
Activity 3.5	Procurement and installation of handwashing devices near the latrines	DPHE/NGO/UNICEF	NGO Forum for Public Health
Activity 3.6	Conduct monthly project monitoring visit and prepare monthly/final report	DPHE/UNICEF	DPHE/UNICEF

12. Please provide here additional information on project's outcomes and in case of an between planned and actual outcomes, outputs and activities, please describe reasons			
Not applicable.			
13. Please describe how accountability to affected populations (AAP) has been ensured implementation and monitoring:	d during project design,		
Informal community consultations were carried out by WASH cluster members in Cox's Bazar the needs. Community mobilization activities were conducted to sensitize the affected popul roles on operation and maintenance of WASH facilities during the planning phase. Member selection of sites for construction of WASH facilities. Beneficiaries for hand washing devict through rigorous consultation with communities and local union parishad representatives to in people. Joint monitoring visits with community members were conducted to the project sit WASH facilities and their views were taken into consideration in execution of the project.	lation on the project as well as their ers of communities were involved in the ers and hygiene kits were selected dentify the most vulnerable and poor		
14. Evaluation: Has this project been evaluated or is an evaluation pending?	EVALUATION CARRIED OUT		
The CERF funded WASH project was implemented under the Development Project Proforma (DPP) between the Government of Bangladesh and UNICEF. The evaluation of the CERF funded WASH interventions will be covered under the evaluation planned in DPP. The evaluation of Government of Bangladesh-UNICEF WASH Programme under the current DPP is planned for early 2019 when all the project components including those funded by CERF will be evaluated.			

ANNEX 1: CERF FUNDS DISBURSED TO IMPLEMENTING PARTNERS

CERF Project Code	Cluster/Sector	Agency	Partner Type	Total CERF Funds Transferred to Partner US\$
16-RR-CEF-076	Water, Sanitation and Hygiene	UNICEF	GOV	\$58,130
16-RR-CEF-076	Water, Sanitation and Hygiene	UNICEF	NNGO	\$78,263
16-RR-UDP-006	Shelter & NFI	UNDP	NNGO	\$522,493
16-RR-WFP-039	Food Assistance	WFP	NNGO	\$38,052
16-RR-WFP-039	Food Assistance	WFP	NNGO	\$40,165
16-RR-WFP-039	Food Assistance	WFP	INGO	\$26,875
16-RR-FPA-028	Gender-Based Violence	UNFPA	NNGO	\$16,050
16-RR-FPA-029	Health	UNFPA	NNGO	\$69,470

ANNEX 2: ACRONYMS AND ABBREVIATIONS (Alphabetical)

Acronym	Extended name
BDT	Bangladeshi Taka
CERF	Central Emergency Response Fund
DC	District Commissioner
DGFP	Directorate General of Family Planning
DGHS	Directorate General of Health Services
DPHE	Department of Public Health Engineering
DRRO	Disaster Relief and Rehabilitation Officer
EMmONC	Emergency Obstetric and New-born Care
ERF	Early Recovery Facility
ESDO	Eco Social Development Organization
GBV	Gender Based Violence
GBV	Gender Based Violence
HCTT	Humanitarian Coordination Task Team
HH	Household
I/NGO	International/Non Governemental Organization
JNA	Joint Needs Assessment
JRP	Joint Response Plan
MMT	Mobile Money Transfer
MoHFW	Ministry of Health and Family Welfare
MoWCA	Ministry of Women and Children Affairs
NFI	Non Food Item
NGO	Non Government Organization
RR	Rapid Response
RTMI	Research Training and Management International
SGBV	Sexual and Gender Based Violence
SKUS	Samaj Kalyan O Unnayan Shangstha
SRH	Sexual and Reproductive Health
SRH	Sexual and Reproductive Health
SRHR	Sexual and Reproductive Health and Rights
TRAC	target for resource assignment from the core
TW	Tube Well
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
UNO	Upazila Nirbhahi Officer
WASH	Water Sanitation and Hygiene
WFP	World Food Programme
WHO	World Health Organization