CERF ALLOCATION REPORT ON THE

USE OF FUNDS AND ACHIEVED RESULTS

Final report

20-RR-GLB-46341

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PART I – ALLOCATION OVERVIEW

1. STRATEGIC PRIORITIZATION

Statement by the Resident/Humanitarian Coordinator: common statement here

N/A given that this was a global allocation

Please indicate when the After-Action Review (AAR) was conducted and who participated.	N/A

UNFPA and UN Women, with the support of Samuel Hall- an external consultancy firm, undertook the final evaluation of the CERF Global Grant. The evaluation employed a qualitative approach to address the evaluation questions, falling under the three OECD DAC criteria of efficiency, effectiveness, and sustainability, while further considering the important cross-cutting themes of humanitarian principles, inclusivity, accountability to affected people, and PSEA. The evaluation used a participatory, cultural- and gender-sensitive approach, to ensure that all critical stakeholders were included and that the results captured context-specific aspects of GBV. The data was collected through an online survey, key informant interviews, focus group discussions, conducted both in person and remotely, in the11 countries where both UNFPA and UN Women implemented activities. This data was triangulated with an in-depth analysis of project documentation. The evaluation report was shared with the CERF secretariat.

The objective of the evaluation is to assess whether the project met its stated objectives, as well as identifying learnings of wider relevance to advancing GBV prevention and response programming, and enhancing Women Led Organizations' participation in humanitarian action. Aligned with this purpose, the evaluation was designed to achieve three specific objectives, as outlined in the TOR:

1. Assess the achievements of the project against four outcomes developed by the participating agencies and how the dedicated funding facilitated their efforts to address GBV.
2. Identify the project's promising practices, and lessons learned in addressing GBV prevention, mitigation, and response in humanitarian settings.
3. Examine the benefits of targeted funding to improve WLOs' capacities for increased involvement in GBV prevention and response and associated promising practices and challenges.

Please confirm that the report on the use of CERF funds was discussed with the Humanitarian and/or UN Country Team (HCT/UNCT).NA	Yes ☐	No X

Please confirm that the final version of this report was shared for review with in-country stakeholders (i.e. the CERF recipient agencies and their implementing partners, cluster/sector coordinators and members and relevant government counterparts)? NA	Yes ☐	No X

CERF's Added Value: please refer to programming in the targeted countries here, not the regular CERF added value

CERF funds had a positive contribution to GBV prevention and response in the targeted areas. The funds allowed scaling up, setting up and maintaining GBV response services where needed, including in very remote underserved areas (e.g., in Colombia, Palestine and Bangladesh's disaster-prone areas where access was otherwise limited). UNFPA's role as lead agency of the GBV sub-cluster/sectors globally, and UN Women's lead of Gender in Humanitarian Action enabled use of funds to fill critical gaps in GBV prevention and response programming and service delivery, capitalising on their comparative advantage and their knowledge of the GBV related risks and available services and referral pathways in the targeted areas while building on existing interventions and coordination mechanisms. In addition, CERF funds allowed local organisations, notably Women Led Organisations, to access needed resources to ensure the continuity of GBV services.

id CERF funds lead to a fast delivery of assistance to people in need?

Yes ☑	Partially ☐	No ☐

The CERF Global Grant provided multi-sectoral integrated services to GBV survivors and populations at risk. The beneficiaries benefitted from clinical services, legal aid and livelihood assistance including cash voucher assistance and cash-for-work opportunities

Did CERF funds help respond to time-critical needs?

Yes ☑	Partially ☐	No ☐

During the sudden escalation of the conflict in Ethiopia, the allocation allowed for the provision of Psychosocial support services, case management, dignity kits and clinical management of rape (CMR) service provision to GBV survivors., The conflict had worsened the GBV situation and increased incidence of different forms of violence. This was also true in Myanmar, where the CERF funds were allocated shortly after the military coup destabilising the country in February 2021. Similarly, service provision for survivors of violence was scaled up during the May 2021 escalation of hostilities in Gaza, Palestine.

Did CERF improve coordination amongst the humanitarian community?

Yes ☑	Partially ☐	No ☐

The CERF Global Grant enabled UNFPA and UN Women to strengthen coordination of GBV response and prevention in six emergency settings. The two agencies were able to cover larger geographical areas by mobilizing their respective networks of local women's rights and women-led organizations (WROs/WLOs); and to ensure complementarity of services provided to survivors of violence and displaced/crisis affected women and girls. In addition, WROs and WLOs benefitted from joint capacity assessment and capacity strengthening. The Global Grant also offered direct funding and technical support to WLOs/WROs, which resulted in increase of the number of WLOs/WROs participating and contributing to humanitarian coordination and response planning.

Did CERF funds help improve resource mobilization from other sources?

Yes ☑	Partially ☐	No ☐

The CERF Global Grant supported strengthening capacities of WLOs/WROs to provide humanitarian services and participate in humanitarian coordination mechanisms, improving their capacity and knowledge of eligibility criteria for accessing humanitarian funding. . Through the post project evaluation, thirteen partners reported that the CERF partnership introduced them to new funding opportunities.

Considerations of the ERC's Underfunded Priority Areas[1]:

This project specifically targeted one of the ERC's underfunded priority areas, namely support for women and girls, including response to gender-based violence (GBV), strengthened reproductive health, and women's empowerment and access to cash as well as livelihood opportunities. UNFPA and UN Women targeted women and girls with programmes and services that were survivor centred and accessible including legal advice/assistance, psychosocial support, case management, referrals, medical care, and provision of information on GBV services and referral pathways in close partnership with UN partners, local actors, including local women led organizations, national and local government authorities. Furthermore, women and girls were able to access in the targeted areas CVA, vocational training, and cash-for-work. CERF also facilitated the implementation of interventions to address harmful social norms and gender discrimination that perpetuate GBV in conflict and crisis affected communities across the 11 targeted countries by UNFPA and 6 targeted countries by both agencies.

The program enabled awareness raising and community mobilization to address norms that perpetuate GBV and gender inequalities, with active participation, not only of women and girls, but also men and boys, community leaders and faith leaders to promote gender-equitable norms for women's empowerment at community level. Thus, the programme supported women and girls both prevention and response of GBV in targeted communities.

The grant addressed another ERC's priority area, namely: targeting people with disability (PwD), and women with disability. UNFPA and UN Women had special considerations for the inclusion of PwD through all phases of project design and implementation. CERF enabled both agencies to provide PwD friendly services, protection, and livelihood to PwD.

[1] In January 2019, the Emergency Relief Coordinator identified four priority areas as often underfunded and lacking appropriate consideration and visibility when funding is allocated to humanitarian action. The ERC therefore recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and HCTs/UNCTs when prioritizing life-saving needs for inclusion in CERF requests. These areas are: (1) support for women and girls, including tackling gender-based violence, reproductive health and empowerment; (2) programmes targeting disabled people; (3) education in protracted crises; and (4) other aspects of protection. While CERF remains needs based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the questions and answers on the ERC four priority areas here.

Table 1: Allocation Overview (US$)

Total amount required for the humanitarian response	**218,134,542**
CERF	25,004,109
Country-Based Pooled Fund (if applicable)	
Other (bilateral/multilateral)	
Total funding received for the humanitarian response (by source above)	

Table 2: CERF Emergency Funding by Project and Sector/Cluster (US$)

Agency	**Project Code**	**Sector/Cluster**	**Amount**
UN Women	20-RR-WOM-006	Protection - Gender-Based Violence	7,840,001
UN Women	20-RR-WOM-006	Food Security - Food Assistance	80,000
UN Women	20-RR-WOM-006	Multi-Purpose Cash	80,000
UNFPA	20-RR-FPA-042	Protection - Gender-Based Violence	16,153,903
UNFPA	20-RR-FPA-042	Health	850,205

Total	**25,004,109**

Table 3: Breakdown of CERF Funds by Type of Implementation Modality (US$)

Total funds implemented directly by UN agencies including procurement of relief goods	**8,534,373.01**
Funds sub-granted to government partners*	543,393.00
Funds sub-granted to international NGO partners*	3,205,340.00
Funds sub-granted to national NGO partners*	11,496,468.00
Funds sub-granted to Red Cross/Red Crescent partners*	112,115.00
Total funds transferred to implementing partners (IP)*	**15,357,316**
Total	**25,004,109**

* Figures reported in table 3 are based on the project reports (part II, sections 1) and should be consistent with the sub-grants overview in the annex.

2. OPERATIONAL PRIORITIZATION:

Overview of the Humanitarian Situation:

The 11 countries included in this allocation were already experiencing long standing humanitarian crises, which the global pandemic had further aggravated. The pandemic exacerbated already existing gender inequalities and brought about a marked increase in incidents of gender-based violence (GBV) affecting primarily women and girls. This was the primary trigger for this allocation. During the implementation of the two-year project, other crises aggravated the COVID-related impacts, UNFPA, UN Women and their partners responded to sudden-onset crises resulting from political unrest and armed conflicts, food insecurity and climate related disasters that had severe compound impacts on already vulnerable communities. These often-simultaneous crises resulted in shifts and challenges in the operational environment that the agencies were able to overcome thanks to the longer timeline of the allocation. The military coup in Myanmar on February 1, 2021, followed by a surge of COVID-19 cases in July 2021, along with ongoing limitations and hurdles in humanitarian access. CERF funds have enabled planned expansion into Chin State, notwithstanding the region's heavy clashes and conflict post-coup. The global impact of COVID-19 on procurement and shipping was exacerbated in Sudan by the 2021 coup, resulting in challenges in clearing supplies in Port Sudan worsened by inflation and price fluctuations. The Tigray conflict further deteriorated Ethiopia's humanitarian situation in 2021, leading to displacement and heightened incidents of sexual violence compounded by food insecurity due to the blockade, and required capacity strengthening of new partners who had access to the targeted areas. In Palestine in 2022, the conflict strained service capacity, necessitating the recruitment of additional staff to address emerging needs. The COVID-19 pandemic and associated measures exacerbated poverty and inequality in Colombia, with almost half-a-million people falling into poverty in 2020, according to the government's multidimensional poverty index, disproportionately impacting indigenous people who were targeted through the CERF allocation. Between January and October 2021, Bangladesh faced significant challenges due to the pandemic, with strained healthcare facilities exacerbating vulnerabilities, including in the Cox's Bazar refugee settlements that saw huge gaps with services that the CERF funds addressed. In Mali, the political crisis worsened after the military coup during the COVID-19 crisis, and further enhanced the relevance of GBV one-stop-centres. In Cameroon, humanitarian access was severely restricted with increasing security challenges in the north and south-west while the Far North Region witnessed more attacks and raids by Boko Haram but projects continued thanks to improved outreach with the CERF allocation. In Somalia, drought, flooding, and desert locusts exacerbated the humanitarian situation requiring a scale up enabled through CERF funded services.

Operational Use of the CERF Allocation and Results:

The United Nations Population Fund (UNFPA) and UN Women were allocated USD 25 million -under the CERF Global Block Grant modality- to prevent violence against women and girls and enable victims and survivors access multi-sectoral GBV services including medical care and family planning, psychosocial support, safe spaces, legal aid, and counselling.

In line with Grand Bargain commitments, a specific focus of the allocation was on direct funding to local Women Led Organizations (WLOs), specifically on enhancing their GBV operational/programmatic capacity. Over 30% of the funding received by the two agencies was allocated to over 20 WLOs through direct partnership agreements exceeding the target that was set during the project design. As a result of interventions supported by the two agencies, over 200 WLOs and community-based organisations and networks strengthened capacities to lead GBV interventions at community level; and engage in humanitarian decision-making processes at HCT, cluster and sub-cluster level.

Under the CERF Global Block Grant, over 1,588 million beneficiaries, mainly survivors of violence and crisis affected women and girls, accessed lifesaving services and information in acute humanitarian crises. UNFPA and UN Women focused on protection/GBV outcomes, both common and agency-specific, with a view to responding to cases of GBV, as well as challenging harmful social norms and behaviours that perpetuate gender-based violence and gender inequalities in crisis contexts. The focus was on life-saving service provision for survivors of violence crisis affected and displaced women and girls. Activities included: Quality multisectoral GBV response services that are accessible to women and girls and delivered through a survivor centred approach; Strengthening capacities of women-led organizations in planning and implementation of GBV mitigation, prevention and response interventions. The CERF Global Grant allocation also facilitated access by GBV survivors and crisis affected women and girls to emergency care, livelihood opportunities and cash transfers

People Directly Reached:

UN Women and its partners reached 233,783 people (141,848 women, 33,815 men, 44,014 girls, and 14,106 boys) through this project, including 4,042 people with disabilities. The largest population group reached was refugees (142,231), followed by IDPs (42,644), host community members (31,861), other affected people (12,367) and IDP returnees (4,680). Double counting of beneficiaries was avoided due to verification of beneficiary lists by partners at country levels.

UN Women exceeded its set beneficiary target of 178,774 by 30.7%. This was due UN Women and partners responding to increased humanitarian and protection needs because of deteriorating humanitarian crises, effective outreach efforts within targeted communities through partnerships with WLOs/WROs and other local actors, exchange rate savings, and signing of agreements with additional implementing partners. Community awareness interventions resulted in reaching out to a higher number of community members. Technical support has been provided to implementing partners throughout the project implementation to ensure accurate data collection and calculation of beneficiaries avoiding double counting. On site missions took place -when possible- to ensure verification of reports and data provided by the partners.

UNFPA: The number of people directly reached is drawn from 1) data collected at the service delivery points supported by the CERF fund, including Women and Girls Safe Spaces, Health Facilities, Mobile Teams and One-Stop Centers, 2) number of people reached with in-person awareness raising activities in targeted communities. This data represents people who received GBV and SRH services, including Prenatal and Postnatal Care, STI prevention and treatment, Clinical Management of Rape, Family Planning Services, Psychosocial Support, livelihood services and CASH. To avoid double counting of beneficiaries, a few monitoring strategies were designed, including having clear Metadata/ description of project indicators, developing IPs reporting tools in line with the project results framework, as well as data management tools. Furthermore, UNFPA worked closely with Implementing Partners and provided technical support and mentoring to IPs' M&E staff and services providers on data collection and reporting, in addition to carrying out regular revision and verification of reports on beneficiaries at different levels. Data on the people directly reached is included in the dedicated section of the report.

People Indirectly Reached:

UN Women

UN Women reached 710,976 people indirectly through CERF interventions across the six countries where the project was implemented. Most of the indirect beneficiaries benefitted from protection-related activities, including awareness raising, community engagement and mobilisation on GBV, PSEA, and gender equality messaging. 7,175 people indirectly benefited from livelihood and cash-based interventions. The number of indirect beneficiaries has been calculated in each country based on the number of direct beneficiaries reached with activities related to awareness raising, community engagement, capacity building, service delivery and livelihood interventions and multiplying this by the average household size.

UNFPA

A total of 1,419,687 people were indirectly reached by this CERF project. Indirect beneficiaries are counted through:

1. The project's interventions aimed at improving access to services and strengthening GBV/ SRH integrated services and multi sectoral response, including renovation of service delivery points, provision of necessary equipment and RH kits, in addition to updating the services mapping and referral pathways. This project is considered to have a "spillover effect", through benefiting family members of the project's direct beneficiaries. Therefore, families of individuals who received direct services and participated in the project activities like case management and DK distribution as well as survivors who have received referral services are considered indirect beneficiaries and are calculated based on the average Household size in each country. Additionally, refresher training of service providers and volunteers have contributed to enhancing the capacity of and readiness of partners to deliver quality services and reduce GBV risks, enabling reaching more beneficiaries both directly and indirectly.

2. Family members of dignity kits recipients, that includes items that benefit both targeted women and girls as well as their family members, in addition to flash cards with awareness raising information.

3. Indirect beneficiaries are people who were reached with Mass Awareness Raising activities on GBV risks and services, such as miking, radio spots, social media posts, text/SMS messages, various media outlets, in addition to campaigns organised during the occasion of International Women's Day and 16 days campaign. Additionally, people were reached through the distribution of PSEA leaflets, copies of the updated GBV referral pathway disseminated by community-based organisations. Additionally, people were reached through outreach activities through awareness raising campaigns and mobile clinics. Direct beneficiaries will disseminate the lesson learnt to their respective family members, as well as community members. Using a community-based approach, community volunteers engaged in different activities are counted as indirect beneficiaries of the project and many of them will be engaged as community change makers who would be able to reach more indirect beneficiaries.

Table 4: Number of People Directly Assisted with CERF Funding by Sector/Cluster*

	Planned					Reached				
Sector/Cluster	**Women**	**Men**	**Girls**	**Boys**	**Total**	**Women**	**Men**	**Girls**	**Boys**	**Total**
Food Security - Food Assistance	3,790	0	1,774	120	5,684	7,553	0	1,443	0	**8,996**
Health	2,558	594	1,002	428	4,582	2,256	715	435	257	**3,663**
Multi-Purpose Cash	732	0	0	0	732	2,439	0	0	0	**2,439**
Protection - Gender-Based Violence	354,473	128,201	207,311	76,942	766,927	843,348	267,972	325,325	136,482	**1,573,127**

Table 5: Total Number of People Directly Assisted with CERF Funding by Category*

Category	Planned	Reached
Refugees	103,530	411,597
Returnees	127,198	102,835
Internally displaced people	279,991	448,882
Host communities	176,692	402,487
Other affected people	79,516	211,721
Total	**766,927**	**1,577,522**

Table 6: Total Number of People Directly Assisted with CERF Funding*			**Number of people with disabilities (PwD) out of the total**	
Sex & Age	**Planned**	**Reached**	**Planned**	**Reached**
Women	354,473	846,336	15,056	14,476
Men	128,201	268,687	7,440	3,128
Girls	207,311	325,760	8,503	5,209
Boys	76,942	136,739	3,329	1,031
Total	**766,927**	**1,577,522**	**34,328**	**23,844**

PART II – PROJECT OVERVIEW

3. PROJECT REPORTS

3.1 Project Report 20-RR-WOM-006

1. Project Information			
Agency:	UN Women	**Country:**	Global
Sector/cluster:	Protection - Gender-Based Violence Food Security - Food Assistance Multi-Purpose Cash	**CERF project code:**	20-RR-WOM-006
Project title:	Women and girls who have experienced/are experiencing GBV or are at risk of GBV benefit from provision of and access to quality services and empowered to increasingly engage in decision making and leadership in GBV response, mitigation and prevention.		
Start date:	17/02/2021	**End date:**	16/05/2023
Project revisions:	No-cost extension ☒ Redeployment of funds ☐	Reprogramming ☐	

Funding		
	Total requirement for agency's sector response to current emergency: **GUIDANCE**: Figure prepopulated from application document.	**US$ 29,210,000**
	Total funding received for agency's sector response to current emergency: **GUIDANCE**: Indicate the total amount received to date against the total indicated above. Should be identical to what is recorded on the Financial Tracking Service (FTS). This should include funding from all donors, including CERF.	**US$ 11,952,357**
	Amount received from CERF:	**US$ 8,000,001**
	Total CERF funds sub-granted to implementing partners: **GUIDANCE**: Please make sure that the figures reported here are consistent with the ones reported in the annex.	**US$ 5,804,823**
	Government Partners	US$ 261,143
	International NGOs	US$ 1,970,728
	National NGOs	US$ 3,572,952
	Red Cross/Crescent Organisation	US$ 0

2. Project Results Summary/Overall Performance

Through UN Women support, 233,783 crisis affected women, men, girls and boys (141,848 women, 33,815 men, 44,014 girls, and 14,106 boys), including survivors of violence, accessed humanitarian services and information across the six countries where the CERF Global Block Grant was implemented: Bangladesh (Cox's Bazar), Cameroon (Belo, Batibo, Idenau, Nguti, Kolofta, and Mogodé), Colombia (Nariño and Chocó), Ethiopia (Amhara, Afar, and Tigray), Myanmar (Rakhine and Kachin States), and Palestine (Gaza and the West Bank) between February 2021 and May 2023. 90,582 women, men, girls and boys who increased their awareness on GBV prevention and associated risks linked to harmful social norms which perpetuate GBV and gender inequalities and on the promotion of non-violent, non-discriminatory and gender equitable norms. 54,421 women and girls who experienced or were at risk of GBV accessed comprehensive GBV services and information; 11,243 GBV survivors and women at risk accessed livelihood opportunities, including cash for work.

As a result of UN Women's programming, 161 local WLOs/WROs reported strengthened capacities to implement GBV risk mitigation, prevention, and response interventions; and 154 local WLOs/WROs reported increasing their involvement in humanitarian decision-making processes.

Overall, the project contributed to addressing the root causes of GBV and gender inequalities in a comprehensive manner, including increased availability, accessibility, and awareness of comprehensive GBV mitigation, prevention, and response services including legal aid and livelihood opportunities, and enhanced capacities and engagement of local WLOs/WROs in humanitarian decision-making processes to ensure a more inclusive and gender responsive humanitarian response and service delivery. Through the CERF global grant, UN Women signed partnership agreements with 14 local women-led organisations and transferred 34% of the total allocation to them, thereby exceeding the 30% direct funding commitment to/through local civil society organisations as per localisation principles and commitments.

3. Changes and Amendments

Humanitarian contexts across the six countries remained dynamic and fast-changing throughout the project implementation period, especially in Ethiopia and Myanmar, and led to increased humanitarian and protection needs. To address the increased and changed needs of affected women and girls, UN Women submitted a reprogramming request to the CERF Secretariat in August 2022 to enable greater flexibility in project implementation areas, agreements with additional implementing partners, and budget changes. This reprogramming request was approved by the CERF Secretariat.

On 15 February 2023, UN Women submitted a three-month no-cost extension request as a result of technical challenges in committing funds since the introduction of a new ERP system (Quantum) on 1 January 2023. Despite UN Women's internal efforts to overcome these issues, it was unable to reflect all outstanding commitments in the system prior to the original operational closure of the project on 16 February 2023. The no-cost extension was approved by the CERF Secretariat and enabled UN Women to implement outstanding programmatic activities as per the original work plan and project document and ensured full financial delivery.

4. Number of People Directly Assisted with CERF Funding*

Sector/cluster	Protection - Gender-Based Violence									
	Planned					Reached				
Category	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	79,600	23,249	29,090	12,299	**144,238**	87,402	16,180	31,251	6,886	**141,719**
Returnees	260	0	100	0	**360**	1,706	1,186	1,321	467	**4,680**
Internally displaced people	3,854	1,494	1,824	1,036	**8,208**	27,854	8,413	4,471	1,906	**42,644**
Host communities	5,784	1,555	1,295	680	**9,314**	14,470	7,196	5,840	4,355	**31,861**
Other affected people	7,628	1,831	1,096	535	**11,090**	9,684	840	1,131	492	**12,147**
Total	**97,126**	**28,129**	**33,405**	**14,550**	**173,210**	**141,116**	**33,815**	**44,014**	**14,106**	**233,051**
People with disabilities (PwD) out of the total										
	4,523	90	1,014	35	**5,662**	2,759	31	1,109	0	**3,899**

Sector/cluster	Food Security - Food Assistance									
	Planned					Reached				
Category	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	3,790	0	1,774	0	**5,564**	6,832	0	1,443	0	**8,275**
Returnees	0	0	0	0	**0**	0	0	0	0	**0**
Internally displaced people	0	0	0	0	**0**	501	0	0	0	**501**
Host communities	0	0	0	0	**0**	0	0	0	0	**0**
Other affected people	0	0	0	0	**0**	220	0	0	0	**220**

Total	**3,790**	**0**	**1,774**	**0**	**5,564**	7,553	0	1,443	0	**8,996**[2]
People with disabilities (PwD) out of the total										
	80	0	32	0	**112**	143	0	0	0	**143**

Sector/cluster	Multi-Purpose Cash									
	Planned					**Reached**				
Category	**Women**	**Men**	**Girls**	**Boys**	**Total**	**Women**	**Men**	**Girls**	**Boys**	**Total**
Refugees	512	0	0	0	**512**	512	0	0	0	**512**
Returnees	0	0	0	0	**0**	0	0	0	0	**0**
Internally displaced people	0	0	0	0	**0**	0	0	0	0	**0**
Host communities	0	0	0	0	**0**	1,707	0	0	0	**1,707**
Other affected people	220	0	0	0	**220**	220	0	0	0	**220**
Total	**732**	**0**	**0**	**0**	**732**	2,439	0	0	0	**2,439**
People with disabilities (PwD) out of the total										
	140	0	0	0	**140**	140	0	0	0	**140**

[2] Please note that out of the 8,996, 8,264 women and girls are already included in the beneficiary count in the Protection-GBV table above. Thus, only 732 women and girls included in this figure are additional beneficiaries.

5. People Indirectly Targeted by the Project

UN Women reached 710,976 affected community members indirectly across the six countries and three priority sectors/clusters: protection, food security, and multi-purpose cash. These community members benefited from activities including awareness raising on GBV prevention and mitigation, PSEA, gender-equality, and women's rights as well as enhanced availability of GBV and protection services and livelihood opportunities and cash-based interventions.

Please see below the indirect beneficiary breakdown per country:

Bangladesh: 296,235
Cameroon: 85,094
Colombia: 10,624
Ethiopia: 94,836
Myanmar: 27,000
Palestine: 197,187

The number of indirect beneficiaries was calculated in each country based on the number of direct beneficiaries reached with activities related to awareness raising/information dissemination, and livelihood support and multiplying this by the average household size. The exception to this method is in Bangladesh, where the targeted communities were confined to camp settings and the indirect beneficiaries were calculated by using the total number of community members living in the camps.

6. CERF Results Framework

Project objective	Women and girls who have experienced/are experiencing GBV or are at risk of GBV benefit from provision of and access to quality services and empowered to increasingly engage in decision making and leadership in GBV response, mitigation and prevention.
Bangladesh	
Output 1	Beneficiaries, through program interventions, demonstrate changes in attitudes and beliefs towards social norms that perpetuate GBV and gender inequalities (OUTCOME-JOINT)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection – Sexual and / or Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 1.1	Percentage of women, men, girls and boys who report that they disagree or strongly disagree with	80	79	Joint UNFPA/UN Women endline survey[3]

[3]To examine changes over time (12 months) in personal beliefs and social norms towards GBV and harmful practices, UNFPA and UN Women in partnership with Johns Hopkins University implemented a pre-post survey study. In Phase 1 (Baseline, May 2022), the collaborators implemented a validated survey, *Social Norms and Beliefs about GBV* **with staff from implementing partners (IP)/women led**

	locally relevant harmful social norms (e.g. victim-blaming attitudes, discriminatory attitudes towards survivors). (OUTCOME-JOINT)			
Explanation of output and indicators variance:				

Activities	**Description**	**Implemented by**
Activity 1.1	Conduct formal and non-formal education for community members, including women and girls, men and boys on GBV prevention, mitigation and associated risks, including promotion of non-violent, non-discriminatory and gender equitable norms.	Light House, Action Aid Bangladesh, and BRAC
Activity 1.2	Broadcast community radio program and social media on GBV prevention, mitigation and associated risks, including promotion of non-violent, non-discriminatory and gender equitable norms messages in support of positive gender norms and non-violent relationships.	Action Aid Bangladesh
Activity 1.3	Establish billboards and distribute IEC/BBC materials on GBV prevention, mitigation and associated risks, including promotion of non-violent, non-discriminatory and gender equitable norms messages.	LightHouse, Action Aid Bangladesh, and BRAC

Output 2	WLOs and WROs are empowered to increasingly engage in decision making and leadership in GBV response, mitigation and prevention (OUTCOME-JOINT).
Was the planned output changed through a reprogramming after the application stage?	Yes ☐ No ☒
Sector/cluster	Protection – Sexual and / or Gender-Based Violence

Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 2.1	Percentage of targeted WLOs/WROs that report increased	80%- 14 WLOs/WROs	79% - 15 WLOs/WROs	Partner assessment

organizations (WLO) providing GBV services/programs in 11 countries with humanitarian emergencies. In Phase 2 (Endline), the collaborators implemented the same survey, *Social Norms and Beliefs about GBV* as baseline with a few additional demographics' questions. The endline survey was administered approximately 12 months post-baseline. The endline survey was implemented with staff from the IP/WLO programs providing GBV services/programs in the same 11 countries with humanitarian emergencies. This report provides the overall findings ***for the social norm and harmful practices indicators with IP staff*** in the 11 countries where the CERF Global Grant was implemented. 6 indicators were adopted for the survey: Response to Sexual Violence; 2. Husband's Right to use Violence Against his Wife; 3. Protecting Family Honor over Safety of Survivor; 4. FGM; 5. Child marriage and 6. Equitable gender beliefs. Please refer to the attached final report by Johns Hopkins University.

	capacity to implement GBV risk mitigation, prevention and response interventions. (OUTCOME-JOINT)	(14 out of 18 WLOs/WROs)	(15 out of 19 WLOs/WROs)	
Indicator 2.2	Percentage of targeted WLOs/WROs that report increased involvement/participation in humanitarian decision-making. (OUTCOME-JOINT)	50%-9 WLOs/WROs (9 out of 18 WLOs/WROs)	63% - 12 WLOs/WROs (12 out of 19 WLOs/WROs)	Partner assessment
Explanation of output and indicators variance:		19 WLOs/WROs were reached out of which 15 reported increased capacities to implement GBV risk mitigation, prevention, and response interventions, and 12 reported increased involvement in humanitarian decision-making.		

Activities	**Description**	**Implemented by**
Activity 2.1	Conduct training (legal aid, GBV prevention, referral pathway, UN Women's CFM) for WLOs/WROs to identify GBV risks and engage in GBV mitigation strategies, referral pathways, and community level protection mechanisms in close coordination with UNFPA.	ASK
Activity 2.2	Coach WLOs/WROs to identify GBV risks and engage in GBV mitigation strategies, referral pathways, and community level protection mechanisms in close coordination with UNFPA.	ASK
Activity 2.3	Conduct training for WLOs/WROs and service providers including policewomen network to monitor GBV prevention and mitigation strategies at community level in close coordination with UNFPA.	ASK
Activity 2.4	Facilitate dialogue sessions between WLOs/WROs with service providers, including policewomen network to monitor GBV prevention and mitigation strategies at the community level in close coordination with UNFPA.	ASK
Activity 2.5	Facilitate participation of leaders and representatives of WLOs/WROs (including UNFPA supported WLOs/WROs) and representatives of self-organized women's groups in humanitarian decision-making mechanisms and processes in Cox's Bazar.	ASK
Activity 2.6	Conduct refresher trainings in leadership, representation, advocacy skills on humanitarian decision making mechanisms and processes for leaders and representatives of WLOs/WROs (including UNFPA	ASK

	supported WLOs/WROs) and representatives of self-organized women's groups.	
Activity 2.7	Facilitate awareness raising sessions on humanitarian decision making mechanisms and processes to leaders and representatives of WLOs/WROs.	ASK
Activity 2.8	Facilitating peer support to leaders and representatives of WLOs/WROs (including UNFPA supported WLOs/WROs) and representatives of self-organized women's groups to engage in humanitarian decision making processes across the cluster system	ASK

Output 3	Women and girls who have experienced/are experiencing GBV or are at risk of GBV benefit from provision of and access to quality, multi-sectoral services, including legal aid (OUTCOME-SPECIFIC)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection – Sexual and / or Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 3.1	Number of targeted GBV survivors (women and girls at risk) who have access to GBV information, legal advice/assistance, psychosocial support and referrals. (OUTCOME – SPECIFIC)	45,709	37,633 (27,161 women and 10,471 girls)	Partner monitoring reports
Indicator 3.2	Number of targeted GBV survivors (women and girls at risk) who report that GBV services were delivered according to their needs and priorities. (OUTCOME – SPECIFIC)	3,650	3,473	Partner monitoring reports
Explanation of output and indicators variance:		37,633 women and girls were reached with GBV information, legal advice and assistance, psychosocial support and referrals. 3,473 survivors responded to a survey and reported that they were satisfied with the services they received and that these were delivered according to their needs and priorities.		

Activities	**Description**	**Implemented by**
Activity 3.1	Provide access to life-saving information and integrated services through referral pathways, empowerment hubs/safe spaces and/or technology/remote options.	Action Aid Bangladesh

Activity 3.2	Conduct refresher training sessions for service providers in gender responsive service delivery and GBV response in alignment with do-no-harm, protection principles and international standards.	UN Women
Activity 3.3	Provide life-saving services to GBV survivors through the deployment of female police in police stations in 5 camps.	UN Women
Activity 3.4	Support the establishment of Women and Children Desks in 5 Police Stations in camps for providing lifesaving and referral services.	UN Women
Activity 3.5	Provide GBV and SEA related survivor support and services through Complaint Feedback Mechanism establishment, community engagement and information campaigns.	UN Women

Output 4	Reduced risk of GBV through provision of livelihoods opportunities, cash transfers including cash for work (OUTCOME-SPECIFIC)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection – Sexual and / or Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 4.1	Percentage of targeted GBV survivors and women at risk who report increased control over financial resources following their participation in livelihood interventions, including cash for work. (OUTCOME-SPECIFIC)	60% -3,750	69% - 5,392	Partner assessments and monitoring reports
Indicator 4.2	Percentage of targeted women at risk who report sole or joint decision in household decision making as result of livelihood interventions. (OUTCOME-SPECIFIC)	40% -336	20% - 1,541	Partner assessments and monitoring reports
Indicator 4.3	Increase in number of GBV survivors/at risk women and girls accessing livelihoods opportunities to mitigate GBV (protection) risks.	75%-4,600	21% - 7,763	Partner monitoring reports
Explanation of output and indicators variance:		Out of the 37,633 survivors and women at risk who accessed GBV services and information, 7,763 (21%) were supported with livelihood interventions as		

	part of multi-sectoral service delivery. Of these, 69% reported increased control over financial resources, and 20% reported sole or joint household decision-making as a result of their participation in livelihood interventions. The variations for indicators 4.2 and 4.3 are because a larger number of GBV survivors and women at risk were identified than planned as a result of effective outreach efforts within targeted communities.

Activities	**Description**	**Implemented by**
Activity 4.1	Provide skill trainings (indicative training included tailoring, mask production, embroidery, sanitary pad, and homestead gardening) for GBV survivors and women and girls at risk.	Action Aid Bangladesh and BRAC
Activity 4.2	Provide skill trainings (indicative training included tailoring, mask production, embroidery, sanitary pad, and homestead gardening) for GBV survivors and women and girls at risk.	Action Aid Bangladesh and BRAC

Output 5	Representatives of community-based mechanisms, including protection networks and women's groups have increased capacities to design, implement and monitor protection and GBV prevention strategies and initiatives (OUTPUT)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection – Sexual and / or Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 5.1	Number of community protection groups reporting on increased capacities to address GBV as result of UN Women supported training.	14 groups	15 groups	Partner assessments and monitoring reports
Indicator 5.2	Number of WLOs/WROs equipped with increased knowledge and skills to identify GBV risks and lead community level GBV mitigation strategies, referral pathways and protection mechanisms.	11 WLOs/WROs	19 WLOs/WROs	Partner assessments and monitoring reports
Explanation of output and indicators variance:		15 community protection groups participated in UN Women supported training sessions and as a result reported increased capacities to address GBV. In addition, 19 WLOs/WROs were targeted out of which all of them increased their knowledge and skills to identify GBV risks and lead community level GBV mitigation strategies, referral pathways, and protection mechanisms.		

	The indicator 5.2 targets have been exceeded due to a high level of interest and commitment by local WLOs/WROs.

Activities	Description	Implemented by
Activity 5.1	Conduct trainings for community-based groups, including protection networks and women's groups to design, implement and monitor protection and GBV prevention strategies and initiatives close coordination with UNFPA.	ASK
Activity 5.2	Provide coaching to community-based groups, including protection networks and women's groups to implement and monitor protection and GBV prevention strategies and initiatives in close coordination with UNFPA.	ASK

Output 6	WLOs/WROs and representatives of self-organized women's groups have enhanced leadership skills to engage in humanitarian decision making (OUTPUT)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection – Sexual and / or Gender-Based Violence

Indicators	Description	Target	Achieved	Source of verification
Indicator 6.1	Number of targeted WLOs/WROs that report increased access to tools and resources in cluster and inter-cluster humanitarian planning and response processes and mechanisms (OUTPUT SPECIFIC).	14 WLOs/WROs	15 WLOs/WROs	Partner monitoring reports
Indicator 6.2	Number of WLOs/WROs and representatives of women's organizations and networks that report on strengthened leadership skills, increased capacities and knowledge to engage in humanitarian decision making processes	9 WLOs/WROs	12 WLOs/WROs	Partner monitoring reports

Explanation of output and indicators variance:	The project engaged 19 WLOs/WROs, out of which 15 reported increased access to tools and resources in cluster and inter-cluster humanitarian planning and response processes. 12 WLOs/WROs reported strengthened leadership skills and capacities to engage in humanitarian decision-making processes.

Activities	Description	Implemented by
Activity 6.1	Conduct refresher trainings in leadership, representation, advocacy skills on humanitarian decision making mechanisms and processes to leaders and representatives of WLOs/WROs (including UNFPA supported WLOs/WROs) and representatives of self-organized women's groups.	ASK
Activity 6.2	Advocate for access of leaders and representatives of WLOs/WROs (including UNFPA supported WLOs/WROs) and representatives of self-organized women's groups to engage in humanitarian decision making processes across the cluster system in Cox's Bazar.	ASK

Output 7	Availability of GBV multi-sectoral service delivery, capacities and information services through protection centers, empowerment hubs and technology/remote options OUTPUT

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection – Sexual and / or Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 7.1	Number of WLO/WRO staff members engaging in service provision that report on strengthened capacities to respond to GBV cases and provide services to GBV survivors as per international standards and no-harm principles	340	380	Partner monitoring reports; training participant lists
Indicator 7.2	Number of GBV survivors supported by psychosocial support services, case management and orientation through referral pathways and remote/technology-based solutions.	3,650	4,521	Partner monitoring reports; GBV Service Register

Explanation of output and indicators variance:	380 WLO/WRO staff members reported strengthened capacities to respond to GBV cases and provide GBV services in line with international standards and do-no harm principles. This number is higher than expected due to successful engagement with a higher number of WLOs/WROs than originally planned in the project. 4,521 GBV survivors were supported through psychosocial support services, case management and orientation. The number of survivors exceeded the

	target due to effective outreach efforts contributed to survivors' awareness of available GBV services.

Activities	Description	Implemented by
Activity 7.1	Conduct trainings / refresher training to service providers including at UN Women's MPWCs on GBV prevention and response and referral pathways.	UN Women, LightHouse, and ASK
Activity 7.2	Conduct refresher training sessions for service providers in gender responsive service delivery and GBV response in alignment with do-no-harm, protection principles and international standards.	UN Women
Activity 7.3	Provide GBV and SEA related survivor support and services through Complaint Feedback Mechanism establishment, community engagement and information campaigns.	UN Women

Output 8	GBV survivors and at-risk populations have increased access to short-term vocational training and temporary cash for work opportunities (OUTPUT).

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection – Sexual and / or Gender-Based Violence

Indicators	Description	Target	Achieved	Source of verification
Indicator 8.1	Number of survivors and at-risk populations reporting on increased control over financial resources following their participation in livelihood interventions, including cash for work. (OUTPUT-SPECIFIC)	3,750 women and girls	5,392 women and girls	Partner assessments and monitoring reports

Explanation of output and indicators variance:	Out of the 7,763 women reached with livelihood support, 5,392 reported increased control over financial resources. The target is exceeded due to a higher number of survivors and women at risk being identified by implementing partners to participate in livelihood interventions.

Activities	Description	Implemented by
Activity 8.1	Provide skill trainings (indicative training includes tailoring, mask production, embroidery, sanitary pad, and	Action Aid Bangladesh and BRAC

	homestead gardening) for GBV survivors and women and girls at risk.	
Activity 8.2	Provide equipment, start-up kits to most vulnerable women with a view to enhancing protection, livelihoods and dignity.	Action Aid Bangladesh and BRAC

Cameroon				
Output 9	Beneficiaries, through program interventions, demonstrate changes in attitudes and beliefs towards social norms that perpetuate GBV and gender inequalities (OUTCOME-JOINT)			
Was the planned output changed through a reprogramming after the application stage?		Yes ☐	No ☒	
Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 9.1	Percentage of women, men, girls and boys who report that they disagree or strongly disagree with locally relevant harmful social norms (e.g., victim-blaming attitudes, discriminatory attitudes towards survivors). (OUTCOME-JOINT)			Joint UNFPA/UN Women endline survey
Explanation of output and indicators variance:		42,547 people were reached through community awareness raising interventions.		

Activities	**Description**	**Implemented by**
Activity 9.1	Conduct awareness-raising sessions for local communities, including women and girls, men and boys on GBV prevention, mitigation and associated risks, including promotion of non-violent, non-discriminatory and gender equitable norms.	AMEF, UYO, ALVF-EN, WAG
Activity 9.2	Conduct training of communities and religious leaders to recognize and respond to GBV incidents.	AMEF, UYO, ALVF – EN, and WAG
Activity 9.3	Organize HeForShe advocacy dialogues on positive masculinity and the importance of men's and boys' role in supporting GBV prevention and mitigation.	AMEF, UYO, ALVF – EN, WAG

Output 10	WLOs and WROs are empowered to increasingly engage in decision making and leadership in GBV response, mitigation and prevention (OUTCOME-JOINT)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 10.1	Percentage of targeted WLOs/WROs that report increased capacity to implement GBV risk mitigation, prevention and response interventions. (OUTCOME-JOINT)	80% (20 WLOs/WROs)	88.6% - 108 WLOs/WROs (out of a total 122 WLOs/WROs reached)	Endline survey
Indicator 10.2	Percentage of targeted WLOs/WROs that report increased involvement/participation in humanitarian decision-making. (OUTCOME-JOINT)	80% (20 WLOs/WROs)	29.5% - 36 WLOs/WROs (out of a total 122 WLOs reached)	Endline survey
Explanation of output and indicators variance:		The project supported 122 WLOs/WROs out of which 108 (88.6%) reported increased capacities to implement GBV risk mitigation, prevention, and response interventions, while 36 organisations (29.5%) reported increased involvement in humanitarian decision-making. The variance for both indicators is due to high levels of engagement of women's groups, including community groups in the North-West and South-West.		

Activities	**Description**	**Implemented by**
Activity 10.1	Conduct trainings of WLOs/WROs and women's committees on safety audit / behavioral analysis combined with risk and vulnerability mapping skills and methodologies.	WAG, AMEF, UYO and ALVF – EN UN Women and UNFPA[4]

[4] UN Women and UNFPA conducted a joint training for the local WLOs and these local organizations trained the WLOs at the community level.

Output 11	Women and girls who have experienced/are experiencing GBV or are at risk of GBV benefit from provision of and access to quality, multi-sectoral services, including legal aid (OUTCOME-SPECIFIC).

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 11.1	Number of targeted GBV survivors (women and girls at risk) who have access to GBV information, legal advice/assistance, psychosocial support and referrals. (OUTCOME-SPECIFIC)	1000	2,016	Partner monitoring reports
Indicator 11.2	Number of targeted GBV survivors (women and girls at risk) who report that GBV services were delivered according to their needs and priorities. (OUTCOME-SPECIFIC)	1000	1,290	Endline survey
Explanation of output and indicators variance:	2,016 GBV survivors and at-risk women and girls were reached with GBV information, legal advice/assistance, psychosocial support and referrals. Of these, 1,290 (63.8%) reported that GBV services were delivered according to their needs and priorities. The targets were surpassed due to higher than expected demand for services and information among GBV survivors and women and girls at risk in the implementation areas.			

Activities	**Description**	**Implemented by**
Activity 11.1	Provide legal counselling and legal aid support services, including through facilitation of access to official documentation, mobile aid clinics, referrals, case management and court assistance.	WAG, AMEF, UYO, ALVF-EN, MINJUSTICE, DGSN, SED
Activity 11.2	Support refresher trainings of Magistrates' courts and lawyers on the protection of women and girls against sexual and gender-based violence.	MINJUSTICE
Activity 11.3	Support Gender Desk capacities (training and equipment) in delivery of GBV services.	DGSN and SED
Activity 11.4	Provide access to life-saving information and integrated services through referral pathways, empowerment hubs/safe spaces and/or technology/remote options	WAG, AMEF, UYO, ALVF-EN, MINJUSTICE, DGSN, SED, Ministry of Women and Family Empowerment (MINPROFF)
Activity 11.5	Conduct refresher training sessions for service providers in gender responsive service delivery and GBV response	UN Women and UNFPA (joint training)

	in alignment with do-no-harm, protection principles and international standards	
Activity 11.6	Provide SEA and GBV related survivor support and services through risk assessments, service mapping, risk and vulnerability mapping, CBCM-community based complaint mechanism establishment, community engagement and information campaigns	AMEF, UYO, ALVF-EN

Output 12	Reduced risk of GBV through provision of livelihoods opportunities, cash transfers including cash for work (OUTCOME-SPECIFIC)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence

Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 12.1	Percentage of targeted GBV survivors and women at risk who report increased control over financial resources following their participation in livelihood interventions, including cash for work (OUTCOME-SPECIFIC).	70%-1000	72.6% - 554	Endline survey
Indicator 12.2	Percentage of targeted women at risk who report sole or joint decision in household decision making as result of livelihood interventions (OUTCOME-SPECIFIC).	70%-1000	99% - 755	Endline survey

Explanation of output and indicators variance:	763 women were reached with livelihood interventions and based on results from the endline survey, 72.6% of them reported increased control over financial resources while 99% of them reported increased sole or joint household decision-making following their participation in livelihood activities. The variances for indicators for 12.1 and 12.2 are because fewer than expected survivors and women at risk could be identified to participate in livelihood interventions.

Activities	**Description**	**Implemented by**

Activity 12.1	Provide livelihood opportunities and entrepreneurial skills training for GBV survivors and women and girls at risk (including cash for work).	UYO, WAG, CARITAS of Buea, ALVF-EN, MINPROFF
Activity 12.2	Support women centered agricultural activities in IDP settlements, (camp and non-camp) through introduction of vertical and integrated agriculture, animal husbandry and aquaculture.	UYO, WAG, CARITAS of Buea, ALVF-EN, MINPROFF
Activity 12.3	Provide l cash transfers and training to most vulnerable women with a view to enhancing protection, livelihoods and dignity.	WAG, CARITAS of Buea, ALVF-EN

Output 13	Community members (women, men, girls and boys) have increased knowledge, access to information and understanding of key issues related to GBV prevention and positive gender norms (OUTPUT).

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Food Security - Food Assistance			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 13.1	Number of community members sensitized and access information on GBV and gender equality (disaggregated by sex and age) (OUTPUT-SPECIFIC).	10,000	42,547 people (16,345 women, 11,541 men, 8,365 girls and 6,296 boys)	Partner monitoring reports
Explanation of output and indicators variance:		42,547 people were reached with community awareness interventions. The target was exceeded due to multi-partner community mobilisation, outreach, campaigns on positive masculinities and engagement with community and religious leaders and religious. This outreach was based on tools such as the He for She Campaign by UN Women that engages men and boys in GBV prevention and advances positive gender norms as well as human rights of women and girls.		

Activities	**Description**	**Implemented by**
Activity 13.1	Support awareness-raising of communities, including women and girls, men and boys on GBV prevention, mitigation and associated risks, including promotion of	AMEF, UYO, WAG and ALVF – EN

	non-violent, non-discriminatory and gender equitable norms	

Output 14	Representatives of community-based mechanisms, including protection networks and women's groups have increased capacities to design, implement and monitor protection and GBV prevention strategies and initiatives (OUTPUT-SPECIFIC).

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Multi-Purpose Cash

Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 14.1	Number of religious, traditional and women's groups, benefiting from capacity building activities to address harmful cultural practices that perpetuate violence against women and girls	50 organizations	54	Partner monitoring reports
Indicator 14.2	Number of WLOs/WROs equipped with knowledge and skills to identify GBV risks and lead community level GBV mitigation strategies, referral pathways and protection mechanisms.	20 WLOs/WROs	122	Partner monitoring reports UN Women Annual Report

Explanation of output and indicators variance:	The project reached 54 religious, traditional, and women's groups with capacity building activities to address harmful cultural practices that perpetuate violence against women. Furthermore, 122 WLOs/WROs were equipped with additional knowledge and skills to identify GBV risks and lead community level GBV mitigation strategies, referral pathways and protection mechanisms. The target for indicator 14.2 was surpassed due to a high level of engagement of women's groups in the North-West and South-West of the country.

Activities	**Description**	**Implemented by**
Activity 14.1	Conduct training for community-based mechanisms, including those led by women-led committees and women's groups to enhance protection, prevention and response to GBV in crisis affected communities.	WAG, AMEF, UYO and ALVF – EN
Activity 14.2	Conduct training for community-based mechanisms, including those led by women-led committees and women's groups to enhance protection, prevention and response to GBV.	WAG, AMEF, UYO and ALVF – EN

Output 15	WLOs/WROs have increased knowledge and access to tools to lead/engage in GBV mitigation and response strategies and programming in line with international standards and do no harm principles (OUTPUT)

Was the planned output changed through a reprogramming after the application stage?		Yes ☐	No ☒	
Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 15.1	Number of WLOs/WROs that access tools and training on GBV mitigation and response strategies.	20 WLOs/WROs	122	Partner monitoring reports UN Women Annual Report
Explanation of output and indicators variance:	The project engaged 122 WLOs/WROs which were able to access tools and training on GBV mitigation and response strategies. The target for indicator 15.1 was surpassed due to a high level of engagement of women's groups in the North-West and South-West of the country.			

Activities	**Description**	**Implemented by**
Activity 15.1	Conduct training for WLOs/WROs on the development and roll out of communication and social mobilization tools and methodologies in support of GBV prevention and sensitization.	WAG, AMEF, UYO, ALVF – EN UN Women and UNFPA[5]
Activity 15.2	Conduct training for WLOs/WROs to identify GBV risks and engage in/lead GBV mitigation strategies, referral pathways and community level protection mechanisms.	AMEF, UYO, ALVF – EN UN Women and UNFPA[6]

Output 16	WLOs/WROs and representatives of self-organized women's groups have enhanced leadership skills to engage in humanitarian decision making (OUTPUT)

Was the planned output changed through a reprogramming after the application stage?	Yes ☐	No ☒	
Sector/cluster	Protection - Gender-Based Violence		

[5] The local organizations trained the community WLOs and a joint training organized by UN Women and UNFPA enabled to train the local NGOs on communication and social mobilization tools and methodologies in support of GBV prevention and sensitization.

[6] The local organizations trained the community WLOs and a joint training organized by UN Women and UNFPA enabled to train the local NGOs on GBV risks and engage in / lead GBV mitigation strategies, referral pathways and community level protection mechanisms.

Indicators	Description	Target	Achieved	Source of verification
Indicator 16.1	Number of WLOs/WROs that report on strengthened leadership skills and increased capacities and knowledge to engage in humanitarian decision making processes.	20 WLOs/WROs	122	UN Women Annual Report
Explanation of output and indicators variance:		The project engaged 122 WLOs/WROs which were able to access tools and training on GBV mitigation and response strategies. The target for indicator 15.1 was surpassed due to a high level of engagement and organisation of women's groups in the North-West and South-West of the country.		

Activities	Description	Implemented by
Activity 16.1	Provided holistic leadership training of WLOs/WROs and women's committees (Management resource mobilization, advocacy skill, networking, community mobilization, GBV protection in humanitarian context).	WAG, AMEF, UYO, ALVF – EN UN Women and UNFPA[7]
Activity 16.2	Conduct training and provide mentoring on building organizational capacities of WLOs/WROs and women and youth committees (for example, in relation to the development of strategic documents, action plans, administrative and financial procedure manuals).	WAG, AMEF, UYO, ALVF – EN UN Women and UNFPA[8]

Output 17	Availability of GBV multi-sectoral service delivery, capacities and information services through protection centers, empowerment hubs and technology/remote options OUTPUT
Was the planned output changed through a reprogramming after the application stage?	Yes ☐ No ☒
Sector/cluster	Food Security - Food Assistance

Indicators	Description	Target	Achieved	Source of verification
Indicator 17.1	Number of GBV survivors supported by psychosocial support services, case management and orientation through referral pathways and	800	2,679	Partner monitoring reports

[7] The local organizations trained the community WLOs and a joint training organized by UN Women and UNFPA enabled to train the local NGOs on management of organizations, resource mobilization, advocacy skill, networking, community mobilization, GBV protection in humanitarian context

[8] The local organizations trained the community WLOs and a joint training organized by UN Women and UNFPA enabled to train the local NGOs on development of strategic documents, action plans, administrative and financial procedure manuals).

	remote/technology-based solutions (OUTPUT-SPECIFIC).			
Indicator 17.2	Number of service providers that report on strengthened capacities to respond to GBV cases and provide services to GBV survivors as per international standards and do no-harm principles	20	724	Partner monitoring reports
Explanation of output and indicators variance:		2,679 GBV survivors were supported by psychosocial support services, case management and orientation through referral pathways and technology-based solutions. Furthermore, 724 service providers received training and strengthened their capacities to respond to GBV cases and provide services as per international standards and do-no-harm principles. The target for indicator 17.1 was surpassed due to a higher demand for services among survivors than expected and indicator target 17.2 was surpassed due to government support and collaboration with UNFPA. In addition, there was a reallocation of funds and increase in the number of partner agreements, which enabled the scaling up of relevant interventions.		

Activities	**Description**	**Implemented by**
Activity 17.1	Provide GBV survivors with psychosocial support and case management services by hiring 6 psychosocial workers.	AMEF, UYO, ALVF-EN, MINPROFF
Activity 17.2	Support the functioning of safe house of Maroua through the provision of emergency kits and equipment.	ALVF-EN

Output 18	GBV survivors and at-risk populations have increased access to short-term vocational training and temporary cash for work opportunities (OUTPUT).			
Was the planned output changed through a reprogramming after the application stage?		Yes ☐	No ☒	
Sector/cluster	Food Security - Food Assistance			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 18.1	Number of women at risk accessing skills training related to livelihoods and income generation opportunities.	60	763	Partner monitoring reports UN Women Annual Report
Explanation of output and indicators variance:		763 women at risk accessed training related to livelihoods and income generating opportunities through the project. The target was surpassed due to higher-than-expected needs and demand among targeted beneficiaries. To respond to the demands, UN Women entered a partnership with MINPROFF		

	to reach out to and train a larger number of beneficiaries. Furthermore, re-budgeting and an increase in the number of implementing partners, including LWLOs, enabled a scale up of these interventions.

Activities	Description	Implemented by
Activity 18.1	Conduct training sessions of women and young girl mothers in functional literacy and numeracy, basic ICT, awareness on available social services etc.) through women empowerment center	UYO, CARITAS of Buea, WAG, ALVF-EN, and MINPROFF
Activity 18.2	Provide trainings on business management and vocational skills including entrepreneurship, financial management, restaurant business etc. to women and girls.	UYO, CARTAS of Buea, WAG, ALVF – EN and MINPROFF
Activity 18.3	Conduct a market survey analysis to identify appropriate value chain for the target population	UYO, CARTAS of Buea, WAG, ALVF – EN and MINPROFF

Colombia	
Output 19	Beneficiaries, through program interventions, demonstrate changes in attitudes and beliefs towards social norms that perpetuate GBV and gender inequalities (OUTCOME-JOINT).

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 19.1	Percentage and number of women, men, girls and boys who report that they disagree or strongly disagree with locally relevant harmful social norms (e.g., victim-blaming attitudes, discriminatory attitudes towards survivors). (OUTCOME-JOINT)	60%1800	64.6% - 1,458	Baseline and endline surveys.
Explanation of output and indicators variance:		2,255 people were surveyed out of which 1,458 (64.4%) reported that they disagreed or strongly disagreed with local harmful social norms. The variance against this indicator is because the project was predominantly carried out in conservative rural communities where unequal gender relationships are dominant and GBV is socially validated.		

Activities	Description	Implemented by
Activity 19.1	Conduct awareness-raising of communities, including women and girls, men and boys on GBV prevention, mitigation and associated risks, including promotion of non-violent, non-discriminatory and gender equitable norms.	FUNDEAS Lutheran World Federation FUPAD APS
Activity 19.2	Organize virtual and face-to-face awareness raising events and activities including through non-formal education, local radio programs and social media messaging on nonviolent relations and positive masculinities.	FUNDEAS Lutheran World Federation

Output 20	WLOs and WROs are empowered to increasingly engage in decision making and leadership in GBV response, mitigation and prevention (OUTCOME-JOINT).

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Food Security - Food Assistance			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 20.1	Percentage and number of targeted WLOs/WROs that report increased capacity to implement GBV risk mitigation, prevention and response interventions (OUTCOME-JOINT).	60%10 WLOs/WROs	61% - 17 WLOs/WROs (out of 28 WLOs/WROs targeted)	Partner reports by LWF and FUNDEAS
Indicator 20.2	Percentage and number of targeted WLOs/WROs that report increased involvement/participation in humanitarian decision-making (OUTCOME-JOINT).	60%10 WLOs/WROs	88% - 15 WLOs/WROs (out of the 17 WLOs/WROs targeted)	Partner reports by LWF and FUNDEAS
Explanation of output and indicators variance:		28 WLOs/WROs were targeted for capacity building sessions on GBV out of which 17 reported increased capacities to implement GBV risk mitigation, prevention, and response interventions. An additional 17 WLOs/WROs were targeted with Gender in Humanitarian Action training sessions. Out of these, 15 WLOs reported increased involvement in humanitarian decision-making processes. The targets for both indicators are exceeded due to the strong presence of WLOs/WROs in implementation areas and their interest in becoming more engaged in humanitarian response to amplify the voices of local women in prioritisation in the delivery of humanitarian services.		

Activities	Description	Implemented by
Activity 20.1	Conduct capacity building sessions (on GBV risk mapping, dissemination of referral pathways and women-led community protection groups) of WLOs/WROs to identify GBV risks and engage in/lead GBV mitigation strategies, referral pathways and community level protection mechanisms	FUNDEAS Lutheran World Federation
Activity 20.2	Organize refresher training sessions for leaders and representatives of WLOs/WROs and women's committees to engage in humanitarian decision making processes across the cluster system.	FUNDEAS Lutheran World Federation

Output 21	Women and girls who have experienced/are experiencing GBV or are at risk of GBV benefit from provision of and access to quality, multi-sectoral GBV services, including legal aid. (OUTCOME -SPECIFIC)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 21.1	Number of targeted GBV survivors (women and girls at risk) who have access to GBV information, legal advice/assistance, psychosocial support and referrals (OUTCOME-SPECIFIC).	900	1,625 women and girls (1,518 women and 107 girls)	Service provider reports Procurement documents of resilience kits and delivery notes Partner monitoring reports Partner beneficiary lists
Indicator 21.2	Number of targeted GBV survivors (women and girls at risk) who report that GBV services were delivered according to their needs and priorities.	400	634 women and girls (592 women and 42 girls)	Service provider reports Partner beneficiary lists
Explanation of output and indicators variance:		1,625 women and girls were reached with GBV information, legal advice and assistance, psychosocial support, and referrals. Out of these, 634 reported that these services were delivered to their needs and priorities. There is an overachievement against the target set for indicator 21.1 due to increased humanitarian needs, which increased the demand for psychological and legal aid services for GBV survivors and women at risk.		

Activities	Description	Implemented by
Activity 21.1	Provide access to life-saving information and integrated services through referral pathways, empowerment hubs/safe spaces and/or technology/remote options.	FUNDEAS Lutheran World Federation
Activity 21.2	Provide legal counselling and legal aid support services, including through facilitation of access to official documentation, mobile aid clinics, referrals, case management and court assistance.	FUNDEAS Lutheran World Federation

Output 22	Reduced risk of GBV through provision of livelihoods opportunities, cash transfers including cash for work (OUTCOME-SPECIFIC)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 22.1	Percentage of targeted GBV survivors and women at risk who report increased control over financial resources following their participation in livelihood interventions, including cash for work (OUTCOME-SPECIFIC).	70%-520	93%- 775 (Out of a total 829 women targeted for livelihood interventions)	Baseline and endline surveys Partner final project reports Beneficiary lists
Indicator 22.2	Increase in number of GBV survivors/at risk women and girls accessing livelihood opportunities to mitigate GBV (protection risks).	60%-300	81% - 431 (out of a total 532 women)	Baseline and endline surveys Partner monitoring reports Livelihoods procurement and purchase plans and delivery notes Training participant lists
Explanation of output and indicators variance:		829 women were targeted for livelihood interventions including employability skill training, out of which 775 (93%) reported increased control over their financial resources. The targets were exceeded due to an amendment of a partner agreement with FUPAD which expanded the delivery of livelihood interventions from Nariño into Chocó. This resulted in increased coverage and outreach.		

Activities	Description	Implemented by
Activity 22.1	Provide micro-livelihood opportunities, vocational training, start-up packages and capacity building on financial literacy for GBV survivors and women, girls at risk.	FUPAD APS CIP
Activity 22.2	Provide technical and financial support to women-centered agricultural activities through inputs, such as tools and seeds, and capacity building.	FUPAD APS

Output 23	WLOs/WROs and representatives of self-organized women's groups have enhanced leadership skills to engage in humanitarian decision making (OUTPUT)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence

Indicators	Description	Target	Achieved	Source of verification
Indicator 23.1	Number of WLOs/WROs that report increased capacities and knowledge to engage in humanitarian decision making processes	60%-10 WLOs/WROs	88% - 15 WLO	Baseline and endline surveys Beneficiary sheets Partner monitoring reports
Indicator 23.2	Number of women community leaders that report strengthened leadership skills and enhanced engagement in humanitarian decision making processes as result of UN Women supported programmatic interventions (cluster level and beyond)	70%-60 women leaders in local communities	100%- 140 women leaders in local communities	Baseline and endline surveys Partner monitoring reports

Explanation of output and indicators variance:	17 WLOs/WROs were targeted with Gender in Humanitarian Action training sessions, out of which 15 reported increased capacities and knowledge to engage in humanitarian decision-making processes. The target for indicator 23.1 was exceeded due to the strong presence of WLOs/WROs in implementation areas and their interest in becoming more engaged in humanitarian response to amplify the voices of local women. Furthermore, 140 women leaders were targeted through capacity strengthening interventions and all 140 reported strengthened leadership

	skills and enhanced engagement in humanitarian decision-making processes as a result.

Activities	Description	Implemented by
Activity 23.1	Conduct refresher training sessions) for leaders and representatives of WLOs/WROs on humanitarian architecture (HCT, cluster system, inter-cluster system, humanitarian program cycle process, GAM,	FUNDEAS UN Women Lutheran World Federation
Activity 23.2	Organize dialogues among WLOs/WROs and members of humanitarian clusters on gender related priorities and gaps in cluster planning and response and how to address them through the leadership of WLOs/WROs.	FUNDEAS Lutheran World Federation
Activity 23.3	Provide refresher trainings for leaders and representatives of WLOs/WROs and women's committees on gender in humanitarian action, leadership, and advocacy skills.	FUNDEAS Lutheran World Federation

Output 24	Availability of GBV multi-sectoral service delivery, capacities and information services through protection centers, empowerment hubs and technology/remote options OUTPUT-SPECIFIC

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Food Security - Food Assistance			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 24.1	Number of service providers (institutions) that report on strengthened capacities to respond to GBV cases and provide services to GBV survivors as per international standards and do no-harm principles.	16	44 institutions (comprising of 104 individual duty bearers: 67 women and 37 men)	Partner monitoring reports The creation of GBV referral pathways Beneficiary sheets
Explanation of output and indicators variance:		44 institutions were trained and reported on strengthened capacities to respond to GBV cases and provide services as per international standards and do-no-harm principles. The target was exceeded due to high interest from officials/relevant institutions across 10 municipalities (Tumaco, Barbacoas, Magüí Payán, Roberto Payán and Pasto in Nariño and Quibdó, Carmen del Darién, Riosucio, Alto-Medio-Bajo, and Baudó in Chocó).		

Activities	Description	Implemented by
Activity 24.1	Provide capacity building sessions and activities to the service providers and local authorities on how to respond to GBV cases and provide services to GBV survivors as per international standards and do no-harm principles.	FUNDEAS Lutheran World Federation
Activity 24.2	Provide access to life-saving information and integrated services through referral pathways, empowerment hubs/safe spaces and/or technology/remote options.	FUNDEAS Lutheran World Federation

Ethiopia	
Output 25	Targeted people, through programme interventions, report changes in perceptions and attitudes towards social norms and practices that perpetuate gender-based violence and gender inequalities (OUTCOME-JOINT).

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 25.1	Percentage of women, men, girls and boys who report that they disagree or strongly disagree with locally relevant harmful social norms (e.g., victim-blaming attitudes, discriminatory attitudes towards survivors (OUTCOME- JOINT)			Joint UNFPA/UN Women endline survey
Explanation of output and indicators variance:		17,243 people were reached through community awareness raising interventions. .		

Activities	Description	Implemented by
Activity 25.1	Conduct awareness-raising of communities, including women and girls, men and boys in IDPs and host communities on GBV prevention, mitigation and associated risks, including promotion of non-violent, non-discriminatory and gender equitable norms	NCA EWLA SCI Agar

Output 26	WLOs and WROs are empowered to increasingly engage in decision making and leadership in GBV response, mitigation and prevention (OUTCOME- JOINT).

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 26.1	Percentage of targeted WLOs/WROs that report increased capacity to implement GBV risk mitigation, prevention and response interventions (OUTCOME- JOINT).	80%-13	70% - 12 WLOs/WROs (out of the 17 WLOs/WROs who completed the perception survey)	Outcome 2 monitoring survey
Indicator 26.2	Percentage of targeted WLOs/WROs that report increased involvement/participation in humanitarian decision-making (OUTCOME-JOINT).	80%- 13	75.6% - 13 WLOs/WROs (out of the 17 WLOs/WROs who completed the perception survey)	Outcome 2 monitoring survey
Explanation of output and indicators variance:		17 WLOs/WROs completed the outcome 2 monitoring survey which informed the progress against indicators 26.1 and 26.2. Out of the 17 organisations which responded, 12 reported increased capacities to implement GBV risk mitigation, prevention and response interventions, while 13 reported increased involvement in humanitarian decision-making.		

Activities	**Description**	**Implemented by**
Activity 26.1	Conduct refresher training sessions for leaders and representatives of WLOs/WROs on humanitarian	UN Women, NEWA

	architecture (HCT, cluster system, inter-cluster system, humanitarian program cycle process, GAM)	
Activity 26.2	Organize dialogues among WLOs/WROs and members of humanitarian clusters on gender related priorities and gaps in cluster planning and response and how to address them through the leadership of WLOs/WROs.	UN Women, NEWA

Output 27	Women and girls who have experienced/are experiencing GBV or are at risk of GBV benefit from provision of and access to quality, multi-sectoral services, including legal aid (OUTCOME-SPECIFIC).

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 27.1	Number of targeted GBV survivors (women and girls at risk) who have access to GBV information, legal advice/assistance, psychosocial support and referrals (OUTCOME-SPECIFIC)	2592	3,841 total (2,335 women, 1,487 girls, 19 boys)	Attendance lists, distribution lists, GBV case management reports, session reports, service providers reports, training reports, monitoring visits
Indicator 27.2	Number of targeted GBV survivors (women and girls at risk) who report that GBV services were delivered according to their needs and priorities (OUTCOME-SPECIFIC).	2592	1,645 total (1,233 women, 422 girls)	Exit forms from safe houses, satisfaction forms GBV case management reports and partner risk assessments

Explanation of output and indicators variance:	In total, 3,841 GBV survivors and women and girls at risk accessed GBV information, services and referrals. The target for indicator 27.1 has been surpassed due to additional signed partner agreements with SCI, GSA and Agar which contributed to this result. Of the 3,841, 1,645 women reported that GBV services were delivered according to their needs and priorities. The variance for indicator 27.2 is due to the fact that women who accessed GBV information and received dignity kits reached by Save the Children, Agar, and GSA were not surveyed.

Activities	Description	Implemented by
Activity 27.1	Provide GBV and SEA-related survivor support and services through risk assessments, service mapping, CBCM-community based complaint mechanism establishment, community engagement and information campaigns.	EWLA, NCA, SCI, GSA and Agar
Activity 27.2	Provide shelter-based comprehensive services for survivors of violence through food provision, accommodation, medical service and psychological support).	AWSAD, SCI, GSA and Agar

Output 28	Community members (women, men, girls and boys) have increased knowledge, access to information and understanding of key issues related to GBV prevention and positive gender norms (OUTPUT-SPECIFIC).

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Food Security - Food Assistance			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 28.1	Number of community members sensitized and accessed information on GBV and gender equality (disaggregated by sex and age) (OUTPUT-SPECIFIC).	10,560	17,243 total (8,774 women, 3,211 men, 3,009 girls, 2,189 boys)	Partner monitoring reports
Explanation of output and indicators variance:		17,243 community members were reached with information on GBV and gender equality. The target has been surpassed due to additional signed agreements with SCI and Agar which contributed to these results/increased outreach.		

Activities	Description	Implemented by
Activity 28.1	Organize community dialogues and media campaigns on prevention and protection of women and girls from all forms of violence.	NCA, EWLA, SCI and Agar

Output 29	Representatives of community-based mechanisms, including protection networks and women's groups have increased capacities to design, implement and monitor protection and GBV prevention strategies and initiatives (OUTPUT-).

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Multi-Purpose Cash			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 29.1	Number of community protection and women's groups representatives benefiting from capacity building activities to prevent and respond to GBV.	340	443	Attendance sheets, training reports, and photos from partners
Explanation of output and indicators variance:		443 community protection and women's groups representatives benefited from capacity building activities to prevent and respond to GBV. The target was exceeded mainly due to NCE's innovative and participatory approaches for community mobilisation and was able to reach more women groups' representatives through coffee corners and 'Tsiwa Mahber' (religious women's groups) than planned.		

Activities	**Description**	**Implemented by**
Activity 29.1	Conduct rapid assessment on institutional customary judicial mechanisms in the two regions.	EWLA
Activity 29.2	Conduct training for community-based mechanisms, including those led by women-led committees and women's groups to enhance protection, prevention and response to GBV.	NCA, EWLA, SCI
Activity 29.3	Establish CBCM procedures with inputs from community members/ partners and design user friendly guides/procedures on CBCM.	NCA, EWLA, SCI
Activity 29.4	Conduct training for CBCM focal points and community members on the functionality and process of SEA and GBV referral and reporting.	NCA, EWLA. SCI

Output 30	WLOs/WROs have increased knowledge and access to tools to lead/engage in GBV mitigation and response strategies and programming in line with international standards and do no harm principles (OUTPUT)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 30.1	Number of WLOs/WROs that access tools and training on GBV mitigation and response strategies (OUTPUT-SPECIFIC).	16	41	Training reports
Explanation of output and indicators variance:		UN Women and NEWA reached 41 WLOs/WROs through the project, all of which accessed tools and training on GBV mitigation and response strategies. UN Women and partners were able to reach more WLOs/WROs -including through its regional networks for example in Afar and Amhara- than planned. This was due to high demand from WLOs/WROs and due to centralising some of the trainings to Addis Ababa during the peak of the Northern Ethiopia conflict resulting in engagement and participation of additional organisations.		

Activities	Description	Implemented by
Activity 30.1	Organize trainings for WLOs/WROs to identify GBV risks and engage in/lead GBV mitigation strategies, referral pathways and community level protection mechanisms.	NEWA
Activity 30.2	Orient and train WLOs/WROs in developing locally relevant tools to monitor GBV prevention and mitigation strategies and engage in participatory safety audits at community level.	NEWA

Output 31	WLOs/WROs and representatives of self-organized women's groups have enhanced leadership skills to engage in humanitarian decision making (OUTPUT)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 31.1	Number of WLOs/WROs that report on strengthened leadership skills and increased capacities and knowledge to engage in	8	41	Training reports

	humanitarian decision making processes			
Explanation of output and indicators variance:		UN Women and NEWA reached 41 WLOs/WROs through the project, all of which reported strengthened leadership skills and increased capacities to engage in humanitarian decision-making processes. UN Women and partners were able to reach more WLOs/WROs - including through its regional networks for example in Afar and Amhara- than planned. This was due to high demand from WLOs/WROs and due to centralising some of the trainings to Addis Ababa during the peak of the Northern Ethiopia conflict resulting in engagement and participation of additional organisations.		

Activities	**Description**	**Implemented by**
Activity 31.1	Provide refresher trainings for leaders and representatives of WLOs/WROs and women's committees on gender in humanitarian action, leadership, and advocacy skills.	NEWA and UN Women

Output 32	Availability of GBV multi-sectoral service delivery, capacities and information services through protection centers, empowerment hubs and technology/remote options OUTPUT			
Was the planned output changed through a reprogramming after the application stage?		Yes ☐	No ☒	
Sector/cluster	Food Security - Food Assistance			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 32.1	Number of women and girls that received intersectional survivor centered support through referral systems and legal aid centres. (OUTPUT-SPECIFIC).	3240	951	Referral and shelter reports, partner monitoring reports.
Indicator 32.2	Number of service providers that report on strengthened capacities to respond to GBV cases and provide services to GBV survivors as per international standards and do no-harm principles	320	2,252	Training reports, attendance sheets, partner monitoring reports
Explanation of output and indicators variance:		951 women and girls received intersectional survivor-centred support through referral systems and legal aid centres. The indicator progress is below target		

	due to the insecurity and access issues faced by the implementing partner, EWLA as a result of the Northern Ethiopia conflict. During certain parts of the project implementation period, the targeted IDP sites for legal aid were under control of Tigrayan forces, making it impossible to provide services. Furthermore, high local government turnover due to the evolving conflict delayed the set up of free legal aid centres and the implementing partner had to seek renewed permission to operate after every change in local authorities. On indicator 32.2, 2,252 service providers reported increased capacities to respond to GBV cases and provide services to GBV survivors as per international standards and do-no-harm principles as a result of capacity-building activities. Implementing partners trained more service providers than targeted due to high levels of interest, including from local government authorities with whom UN Women had pre-existing partnerships such as the Ministry of Women and Social Affairs, the Ministry of Justice, and Ministry of Health, and the fact that it was one of the few activities that could continue during the height of the conflict in different locations and modalities. Furthermore, additional agreements signed with SCI, GSA and Agar contributed to the increased number of service providers reached with capacity building interventions.

Activities	**Description**	**Implemented by**
Activity 32.1	Hold community-based consultations with IDPs, host communities and key partners to assess existing procedures for handling SEA and GBV reports and complaints.	EWLA, SCI
Activity 32.2	Conduct gender analysis of the GBV situation, including risks, trends, mitigation, response and prevention.	UN Women
Activity 32.3	Support quick orientation for service providers on psychological first aid for SEA and GBV survivors.	UN Women, GSA and Agar
Activity 32.4	Conduct refresher training for customary courts, police force, and other security units on GBV and SEA.	EWLA
Activity 32.5	Conduct refresher training targeting for key actors and organizations in the local justice system on survivor-centered support.	NCA, EWLA, GSA
Activity 32.6	Establish two legal aid centers by EWLA to expand women access to justice, with focus on survivors of GBV	EWLA
Activity 32.7	Provide legal counselling and legal aid support services, including through facilitation of access to	EWLA

	official documentation, mobile aid clinics, referrals, case management and court assistance.	

Output 33	GBV survivors and at-risk populations have increased access to short-term vocational training and temporary cash for work opportunities (OUTPUT).-OUTPUT SPECIFIC

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Food Security - Food Assistance			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 33.1	Number of survivors and women at risk benefited from skills/ vocational training and income generating opportunities	240	501	Passbooks issued by the Amhara Credit and Saving Scheme, training reports
Explanation of output and indicators variance:		501 women were reached with skill / vocational training and income generating opportunities. The target has been surpassed due to additional signed agreements with Good Samaritan Association and Agar which contributed to this result.		

Activities	**Description**	**Implemented by**
Activity 33.1	Conduct skills/vocational trainings for GBV survivors and at-risk women in IDPs and host communities.	AWSAD, GSA and Agar
Activity 33.2	Establish self-help saving groups for GBV survivors and women at risk, including IDPs and in host communities.	AWSAD
Activity 33.3	Facilitate livelihood opportunities for GBV survivors and at risk women through cash and in-kind support.	AWSAD, GSA and Agar

Myanmar	
Output 34	Targeted people, through program interventions, report changes in perceptions and attitudes towards social norms and practices that perpetuate gender-based violence and gender inequalities (OUTCOME-JOINT).

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence

Indicators	Description	Target	Achieved	Source of verification
Indicator 34.1	Percentage of women, men, girls and boys who report that they disagree or strongly disagree with locally relevant harmful social norms (e.g., victim-blaming attitudes, discriminatory attitudes towards survivors)-OUTCOME-JOINT.			Joint UNFPA/UN Women endline survey
Explanation of output and indicators variance:		8,256 people were reached through community awareness raising interventions.		

Activities	Description	Implemented by
Activity 34.1	Conduct awareness-raising sessions for communities, including women and girls, men and boys on GBV prevention, mitigation and associated risks, including promotion of non-violent, non-discriminatory and gender equitable norms.	Finn Church Aid, Finnish Refugee Council and Yaung Chi Thet
Activity 34.2	Establish community level women's protection groups including monitoring mechanisms.	Finn Church Aid, Finnish Refugee Council and Yaung Chi Thet
Activity 34.3	Conduct training sessions with women's protection groups to discuss GBV protection and prevention mechanisms, legal rights, access to services and information.	Finn Church Aid, Finnish Refugee Council and Yaung Chi Thet
Activity 34.4	Organize dialogue sessions between community women's groups, government departments and CSOs working on GBV case management and legal and psychosocial support.	Activity not implemented
Activity 34.5	Organize community dialogue through learning sessions between groups.	Finn Church Aid, Finnish Refugee Council and Yaung Chi Thet

Output 35	WLOs and WROs are empowered to increasingly engage in decision making and leadership in GBV response, mitigation and prevention (OUTCOME-JOINT).
Was the planned output changed through a reprogramming after the application stage?	Yes ☐ No ☒
Sector/cluster	Food Security - Food Assistance

Indicators	Description	Target	Achieved	Source of verification

Indicator 35.1	Percentage of targeted WLOs/WROs that report increased involvement/participation in humanitarian decision-making (OUTCOME-JOINT).	50% -7 WROs/WLOs	75.8% - 69 WROs/WLOs	Baseline and Endline Survey
Explanation of output and indicators variance:		149 WLOs/WROs completed the outcome 2 survey out of which 91 WLOs/WROs reported increased access to tools and resources on humanitarian planning and response processes. This indicator was then measured based on how many of those 91 organisations reported increased involvement in humanitarian-decision making, which were 69 WLOs/WROs, or 75.8%. The target was exceeded due to WLOs/WROs' interest in becoming more engaged in humanitarian action considering the changing context in Myanmar and with outreach support from OCHA to local actors regarding different training sessions and close collaboration with UNFPA.		

Activities	**Description**	**Implemented by**
Activity 35.1	Provide refresher trainings (jointly with UNFPA where possible) for leaders and representatives of WLOs/WROs and women's committees on gender in humanitarian action, leadership, and advocacy skills.	UN Women together with UNFPA and UNOCHA on some relevant topics
Activity 35.2	Organize dialogues among WLOs/WROs and members of humanitarian clusters on gender related priorities and gaps in cluster planning and response and how to address them through the leadership of WLOs/WROs.	UN Women together with UNFPA and UNOCHA on some relevant topics
Activity 35.3	Undertake a rapid analysis/assessment of WLOs/WROs participation in humanitarian processes and decision making.	UN Women

Output 36	Women and girls who have experienced/are experiencing GBV or are at risk of GBV benefit from provision of and access to quality, multi-sectoral services, including legal aid (OUTCOME-SPECIFIC).
Was the planned output changed through a reprogramming after the application stage?	Yes ☐ No ☒
Sector/cluster	Multi-Purpose Cash

Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 36.1	Number of targeted GBV survivors (women and girls at risk) who have access to GBV information, legal advice/assistance, psychosocial	1,416	1,290	Partner monitoring reports

	support and referrals (OUTCOME-SPECIFIC).		(1,111 women and 179 men)	
Indicator 36.2	Number of targeted GBV survivors (women and girls at risk) who report that GBV services were delivered according to their needs and priorities (OUTCOME-SPECIFIC).	200	504	Partner monitoring reports
Explanation of output and indicators variance:		In total, 1,290 survivors and women and girls at risk accessed GBV information, psychosocial support and referrals. The target for indicator 36.1 was partially met due to the security situation which resulted in significant challenges for survivors to access services and information in targeted communities. Of the 1,290, 504 women reported that GBV services were delivered according to their needs and priorities.		

Activities	**Description**	**Implemented by**
Activity 36.1	Strengthen referrals to specialized GBV services through awareness activities, community protection mechanisms, livelihoods and cash programming related activities and dissemination of relevant information.	FRC, YCT, FCA

Output 37	Reduced risk of GBV through provision of livelihoods opportunities, cash transfers including cash for work (OUTCOME-SPECIFIC).			
Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒				
Sector/cluster	Multi-Purpose Cash			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 37.1	Percentage of targeted GBV survivors and women at risk who report increased control over financial resources following their participation in livelihood interventions, including cash for work (OUTCOME-SPECIFIC).	1,500 - 70 %	88% - 4,094	Partner monitoring reports

Indicator 37.2	Percentage of targeted women at risk who report sole or joint decision in household decision making as result of livelihood interventions (OUTCOME SPECIFIC).	1,500 - 70 %	88% or 4,094	Partner monitoring reports
Explanation of output and indicators variance:		In total, 4,652 survivors and women at risk benefitted from livelihood interventions. Out of these, 4,094 (88%) reported increased control over financial resources and sole or joint household decision-making as a result of their participation in livelihood interventions. The targets were exceeded due to extension of partnership agreements resulting from exchange rate benefits, which enabled a scale up of the interventions.		

Activities	**Description**	**Implemented by**
Activity 37.1	Provide micro-livelihood opportunities and conduct financial, digital and management training for GBV survivors and women and girls at risk.	FRC, YCT, FCA
Activity 37.2	Provide grants to crisis affected women and women's groups for collective micro-livelihood activities.	FRC, YCT, FCA
Activity 37.3	Establish marketplace for women's products.	FCA, YCT
Activity 37.4	Support women centered agricultural activities in IDP settlements, camp and non-camp settings, including through provision of agricultural inputs.	FCA, YCT
Activity 37.5	Organize training sessions for crisis affected women on livestock and vertical agriculture practices.	YCT, FCA, FRC
Activity 37.6	Organize awareness raising sessions on organic farming.	FCA, YCT
Activity 37.7	Establish women's saving groups to ensure women's access to microfinance.	FCA, YCT

Output 38	Community members (women, men, girls and boys) have increased knowledge, access to information and understanding of key issues related to GBV prevention and positive gender norms (OUTPUT).
Was the planned output changed through a reprogramming after the application stage?	Yes ☐ No ☒
Sector/cluster	Food Security - Food Assistance

Indicators	**Description**	**Target**	**Achieved**	**Source of verification**

Indicator 38.1	Number of community members sensitized and accessed information on GBV and gender equality (disaggregated by sex and age) (OUTPUT-SPECIFIC).	2, 226	8,256 (2,299 men, 5,211 women, 217 boys and 529 girls)	Partner monitoring reports
Indicator 38.2	Number of targeted women and girls at risk who report increased understanding-knowledge of their rights to protection and HR more broadly.	1,274	5,248	Partner monitoring reports
Indicator 38.3	Number of community members surveyed who report increased knowledge of GBV risks and how to seek services and support.	1,366	3,166	Partner monitoring reports
Explanation of output and indicators variance:		In total, 8,256 community members were sensitised and accessed information on GBV and gender equality, 5,248 women and girls reported increased understanding of their rights to protection, and 3,166 community members reported increased knowledge on GBV risks and how to seek services and support. The targets for all three indicators were exceeded due to expansion of partnership agreements which enabled a scale up of the interventions.		

Activities	**Description**	**Implemented by**
Activity 38.1	Conduct awareness-raising of communities, including women and girls, men and boys on GBV prevention, mitigation and associated risks, including promotion of non-violent, non-discriminatory and gender equitable norms.	YCT, FRC, FCA
Activity 38.2	Conduct a survey among community members to establish their level of knowledge of GBV risks and how to seek services and support.	YCT, FRC, FCA

Output 39	Representatives of community-based mechanisms, including protection networks and women's groups have increased capacities to design, implement and monitor protection and GBV prevention strategies and initiatives (OUTPUT).
Was the planned output changed through a reprogramming after the application stage?	Yes ☐ No ☒
Sector/cluster	Multi-Purpose Cash

Indicators	Description	Target	Achieved	Source of verification
Indicator 39.1	Number of women's groups, benefiting from capacity building activities to address harmful cultural practices that perpetuate violence against women and girls at community level.	29	369	Partner monitoring reports
Indicator 39.2	Number of community protection group representatives reporting on increased capacities to prevent and respond to GBV as result of UN Women supported training and other programmatic interventions.	200	407	Partner monitoring reports
Explanation of output and indicators variance:		369 women's groups benefited from capacity building activities to address harmful cultural practices that perpetuate violence against women and girls at the community level, and 407 community protection group representatives increased their capacities to respond to GBV as a result of UN Women supported training. The targets for both indicators were exceeded due to exchange rate benefits which enabled a scale up of some relevant interventions.		

Activities	Description	Implemented by
Activity 39.1	Conduct training for leaders/representatives of community-based mechanisms, including those led by women-led committees and women's groups to enhance protection, prevention and response to GBV.	FRC, FCA, YCT

Output 40	WLOs/WROs and representatives of self-organized women's groups have enhanced leadership skills to engage in humanitarian decision making processes (OUTPUT).

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence

Indicators	Description	Target	Achieved	Source of verification
Indicator 40.1	Number of targeted WLOs/WROs that report increased access to tools and resources in cluster and inter-cluster humanitarian planning and response processes and mechanisms (OUTPUT SPECIFIC).	14 WLOs/WROs	91	Attendance sheets, capacity building plans, baseline and endline survey

Indicator 40.2	Number of targeted WLOs/WROs that report increased knowledge of entry points and process to access humanitarian funding as result of UN Women supported training (OUTPUT SPECIFIC).	14 WLOs/WROs	69	Attendance sheets, capacity building plans, baseline and endline survey
Explanation of output and indicators variance:		149 WLOs/WROs completed the outcome 2 survey out of which 91 WLOs/WROs reported increased access to tools and resources while 69 WLOs/WROs reported increased knowledge of entry points and processes to access humanitarian funding as a result of UN Women supported training. The target was exceeded due to WLOs/WROs interest in becoming more engaged in humanitarian action considering the changing context in Myanmar and with support from OCHA in advertising different trainings.		

Activities	**Description**	**Implemented by**
Activity 40.1	Conduct training for leaders and representatives of WLOs/WROs and women's committees jointly with UNFPA where possible to engage in humanitarian decision making processes across the cluster system (through refresher trainings in leadership, representation, advocacy skills and facilitation of awareness raising sessions on humanitarian decision making mechanisms and processes).	UN Women, UNFPA and UNOCHA
Activity 40.2	Conduct refresher trainings for WLOs/WROs on skills and capacities to access humanitarian funding mechanisms	UN Women, UNFPA and UNOCHA
Activity 40.3	Conduct refresher training sessions) for leaders and representatives of WLOs/WROs on humanitarian architecture (HCT, cluster system, inter-cluster system, humanitarian program cycle process, GAM,	UN Women, UNFPA and UNOCHA
Activity 40.4	Organize dialogues among WLOs/WROs and members of humanitarian clusters on gender related priorities and gaps in cluster planning and response and how to address them through the leadership of WLOs/WROs.	UN Women, UNFPA and UNOCHA

Output 41	GBV survivors and at-risk populations have increased access to short-term vocational training and temporary cash for work opportunities (OUTPUT SPECIFIC).-OUTPUT SPECIFIC
Was the planned output changed through a reprogramming after the application stage?	Yes ☐ No ☒
Sector/cluster	Food Security - Food Assistance

Indicators	Description	Target	Achieved	Source of verification
Indicator 41.1	Number of GBV survivors and women at risk accessing micro-livelihood opportunities and training	812	1,683	Partner monitoring reports
Indicator 41.2	Number of GBV survivors and women at risk having access to unconditional cash transfers with a view to enhancing protection	420	1,475 GBV survivors and women at risk have access to unconditional cash transfers with a view to enhancing protection.	Partner monitoring reports
Indicator 41.3	Number of GBV survivors who access livelihoods and income generation support	740	1,494	Partner monitoring reports
Explanation of output and indicators variance:		1,683 survivors and women at risk accessed micro-livelihood opportunities and training, 1,475 survivors and women at risk accessed unconditional cash transfers with a view to enhancing protection, and 1,494 survivors accessed livelihoods and income generating opportunities. The targets were exceeded due to exchange rate benefits which enabled the scaling up of interventions.		

Activities	Description	Implemented by
Activity 41.1	Establish cash-for-work schemes for crisis affected and at-risk women in local communities.	FCA, YCT, FRC
Activity 41.2	Provide unconditional cash transfers to most vulnerable women with a view to enhancing protection, livelihoods and dignity.	FCA, YCT, FRC

Palestine	
Output 42	Beneficiaries, through program interventions, demonstrate changes in attitudes and beliefs towards social norms that perpetuate GBV and gender inequalities (OUTCOME-JOINT)).
Was the planned output changed through a reprogramming after the application stage?	Yes ☐ No ☒
Sector/cluster	Protection - Gender-Based Violence

Indicators	Description	Target	Achieved	Source of verification
Indicator 42.1	Percentage of women, men, girls and boys who report that they disagree or strongly disagree with locally relevant harmful social norms			Joint UNFPA/UN Women endline survey

	(e.g., victim-blaming attitudes, discriminatory attitudes towards survivors)".			
Explanation of output and indicators variance:				

Activities	**Description**	**Implemented by**
Activity 42.1	Organize 200 awareness-raising workshops targeting women and girls, men and boys in the West Bank and Gaza on GBV prevention, mitigation and associated risks, including promotion of equitable gender norms and positive behavior change towards women's and girls' protection from GBV.	AISHA in Gaza and PSCCW in the West Bank
Activity 42.2	Organize 200 awareness-raising workshops targeting women and girls, men and boys living in marginalized areas in the West Bank and Gaza on available GBV services. The workshops will be one of the referral mechanisms for GBV survivors following the GBV sub-cluster referral pathways.	AISHA in Gaza and PSCCW in the West Bank
Activity 42.3	Organize 200 HeForShe dialogues on positive masculinity and the importance of men's and boys' role in supporting GBV prevention and mitigation.	AISHA in Gaza and PSCCW in the West Bank
Activity 42.4	Support 20 female and male youth-led community initiatives that promote GBV prevention and favourable social norms. Some of the initiatives can highlight/focus on some of the consequences of GBV (early marriage, school dropout, femicide)	AISHA in Gaza and PSCCW in the West Bank

Output 43	WLOs and WROs are empowered to increasingly engage in decision making and leadership in GBV response, mitigation and prevention (OUTCOME-JOINT).
Was the planned output changed through a reprogramming after the application stage?	Yes ☐ No ☒
Sector/cluster	Food Security – Food Assistance

Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 43.1	Percentage of targeted WLOs/WROs that report increased capacity to implement GBV risk mitigation, prevention and response interventions (OUTCOME-JOINT)	90% - 8 WLOs/WROs	100% - 9 WLOs/WROs	Perception surveys, baseline and endline surveys

Indicator 43.2	Percentage of targeted WLOs/WROs that report increased involvement / participation in humanitarian decision-making (OUTCOME-JOINT)	90% - 8 WLOs/WROs	100% - 9 WLOs/WROs	Perception surveys, baseline and endline surveys
Explanation of output and indicators variance:		9 WLOs/WROs completed the survey and all of them reported increased capacities to implement GBV risk mitigation, prevention and response interventions, as well as increased involvement in humanitarian decision-making.		

Activities	**Description**	**Implemented by**
Activity 43.1	Organize 4 refresher trainings (2 in the West Bank and 2 in Gaza) to build the capacities of WLOs/WROs on GBV risks and mitigation strategies, referral pathways, and community level protection mechanisms.	AISHA in Gaza and PSCCW in the West Bank
Activity 43.2	Organize 4 refresher trainings (2 in the West Bank and 2 in Gaza) to strengthen the capacities of WLOs/WROs on monitoring of GBV prevention and engaging in participatory safety audits at community level.	AISHA in Gaza and PSCCW in the West Bank
Activity 43.3	Provide technical assistance and organize 4 refresher training sessions (2 in the West Bank and 2 in Gaza) for WLOs/WROs members of the GBV sub-cluster on the collection of sex- age and disability-disaggregated data (SADDD) needed to inform humanitarian GBV response.	AISHA in Gaza and PSCCW in the West Bank

Output 44	Women and girls who have experienced/are experiencing GBV or are at risk of GBV benefit from provision of and access to quality, multi-sectoral services, including legal aid (OUTCOME-SPECIFIC).
Was the planned output changed through a reprogramming after the application stage?	Yes ☐ No ☒
Sector/cluster	Protection – Sexual and / or Gender-Based Violence

Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 44.1	Number of targeted GBV survivors (women and girls at risk) who have access to GBV information, legal advice/assistance, and referrals (OUTCOME-SPECIFIC).	7,600 women	8,016 (7,992 women and 24 girls)	Partner assessments
Indicator 44.2	Number of targeted GBV survivors (women and girls at risk) who report that GBV services were delivered	5,600 women and girls	10,494 women and girls	Partner assessments

	according to their needs and priorities (OUTCOME SPECIFIC).			
Explanation of output and indicators variance:		8,016 women and girls accessed GBV information, legal advice and assistance, and referrals. UN Women and partners were able to expand their reach to exceed the target for this indicator. In addition, 10,494 women and girls who received GBV services reported that these were delivered to their needs and priorities.		

Activities	**Description**	**Implemented by**
Activity 44.1	Support 2 refresher training sessions (1 in the West Bank and 1 in Gaza) for service providers in gender responsive service delivery and multisectoral GBV response in alignment with do-no-harm, protection principles and international standards.	AISHA in Gaza and PSCCW in the West Bank
Activity 44.2	Provide 100 individual women with legal counselling services to women survivors of GBV in the West bank and Gaza, including facilitation of access to official documentation, legal aid clinics, referrals, case management and court assistance.	AISHA in Gaza and PSCCW in the West Bank
Activity 44.3	Provide 300 groups with legal counselling services to women survivors of GBV in the West bank and Gaza, including facilitation of access to official documentation, legal aid clinics, referrals, case management and court assistance.	AISHA in Gaza and PSCCW in the West Bank
Activity 44.4	Provide information and referral to life-saving information and multisectoral GBV service providers through technology (upgrading and maintenance of an online application/system that provides online GBV counselling and referral)	AISHA in Gaza and PSCCW in the West Bank
Activity 44.5	Provide 100 individual and 300 group psychosocial counselling for women survivors of GBV (including women with disabilities at 20% target) according to MHPSS working group and GBV sub cluster SOPs.	AISHA in Gaza and PSCCW in the West Bank
Activity 44.6	Provide sheltering services to women staying at shelters/safe spaces for women survivors of GBV. The sheltering services will be part of a GBV case management package designed to support women whose lives are at risk and are in need of sheltering services as lifesaving.	AISHA in Gaza

Output 45	Reduced risk of GBV through provision of livelihoods opportunities, cash transfers including cash for work (OUTCOME-SPECIFIC).

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒				
Sector/cluster	Food Security - Food Assistance			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 45.1	Percentage of targeted GBV survivors and women at risk who report increased control over financial resources following their participation in livelihood interventions, including cash for work (OUTCOME-SPECIFIC).	60% - 200	73% - 219 (219 out of 300 women surveyed)	Gender Sensitive Resilience Capacity Index Tool – baseline and endline surveys.
Indicator 45.2	Percentage of targeted women at risk who report sole or joint decision in household decision making as result of livelihood interventions (OUTCOME SPECIFIC).	60 per cent-120	68% - 292 (292 out of 432 women surveyed)	Gender Sensitive Resilience Capacity Index Tool – baseline and endline surveys.
Explanation of output and indicators variance:		To measure progress against indicator 45.1, 300 women were surveyed and 219 (73%) reported increased control over their financial resources following their participation in livelihood interventions, including cash for work. A second survey was conducted with 432 women out of which 292 (68%) reported sole or joint household decision-making as a result of livelihood interventions.		

Activities	**Description**	**Implemented by**
Activity 45.1	Provide two refresher sessions for members of the cash working group on gender sensitive Cash Based Initiatives.	WAC in Gaza and YWCA in the West Bank
Activity 45.2	Conduct skills/business needs assessment for cash for work beneficiaries in order to assign them to skill-matching cash for work opportunities.	WAC in Gaza and YWCA in the West Bank
Activity 45.3	Develop vulnerability criteria for the section of women beneficiaries of cash for work opportunities and unconditional cash assistance (in alignment with UN Women guidance note on gender responsive CBIs in Palestine and the Cash working group vulnerability criteria)	WAC in Gaza and YWCA in the West Bank

Activity 45.4	Organize four skill-building training courses for women cash for work beneficiaries as relevant to the scope of and skills needed for the cash for work opportunities.	WAC in Gaza and YWCA in the West Bank
Activity 45.5	Provide skill-matching cash for work opportunities to 300 women survivors of GBV (200 in Gaza and 100 in the West Bank) for a cycle of 3 months including skilled and semi-skilled opportunities	WAC in Gaza and YWCA in the West Bank
Activity 45.6	Provide unconditional cash assistance for 200 women survivors of GBV and their families (100 in the West Bank and 100 in Gaza). Priority will be given to those who are most vulnerable such as women with disabilities, widows, women at risk of forced displacement/ transfer and women heads of households.	WAC in Gaza and YWCA in the West Bank

Output 46	Representatives of community-based mechanisms, including protection networks and women's groups have increased capacities to design, implement and monitor protection and GBV prevention strategies and initiatives (OUTPUT-SPECIFIC).

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Food Security - Food Assistance			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 46.1	Number of representatives/members of women-led protection committees who participate in capacity building trainings	50 representatives	75 representatives	Pre-and post-training assessments
Indicator 46.2	Number of women-groups led initiatives undertaken to promote behavioural change and positive family relations in marginalized communities.	8 initiatives	8 initiatives	Terms of Reference (ToRs), document appraisals, assessments, and interviews
Indicator 46.3	Number of women, men, girls and boys who participate in community awareness raising workshops and dialogues on GBV prevention and social norms.	15,000 community members	15,984 community members	Perception surveys, baseline and endline surveys
Explanation of output and indicators variance:		75 representatives of women-led protection committees participated in capacity building trainings, 8 women-group led initiatives were undertaken to promote behavioural change and positive family relations in marginalised communities, and 15,984 community members participated in community		

	awareness raising workshops and dialogues on GBV prevention and social norms.

Activities	Description	Implemented by
Activity 46.1	Organize 4 refresher training sessions (2 in the West Bank and 2 in Gaza) for women-led protection committees and women's CBOs members of GBV coalitions/networks on GBV core concepts and principles, risk identification, GBV mitigation measures, GBV case management and referral pathways as per the GBV sub cluster SOPs.	AISHA in Gaza and PSCCW in the West Bank
Activity 46.2	Organize 4 refresher training sessions (2 in the West Bank and 2 in Gaza) for multi-sectoral GBV service providers (legal, psychosocial, health) on PSEA including on complaint mechanisms and survivors' assistance.	AISHA in Gaza and PSCCW in the West Bank
Activity 46.3	Support 8 community initiatives led by women's protection committees (4 in the West Bank and 4 in Gaza) on GBV prevention.	AISHA in Gaza and PSCCW in the West Bank

Output 47	WLOs/WROs and representatives of self-organized women's groups have enhanced leadership skills to engage in humanitarian decision making processes (OUTPUT- SPECIFIC).

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection – Sexual and / or Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 47.1	Number of targeted WLOs/WROs that report increased involvement/participation in humanitarian decision-making (OUTPUT SPECIFIC).	6 WLOs/WROs	8 WLOs/WROs	Perception surveys, baseline and endline surveys
Indicator 47.2	Number of targeted WLOs/WROs that report increased participation in cluster and inter-cluster planning and response (OUTPUT SPECIFIC)	8 WLOs/WROs	9 WLOs/WROs	Perception surveys, baseline and endline surveys
Explanation of output and indicators variance:	While maintaining the pre-identified resources and budget, UN Women and partners were able to expand their reach-out targeting additional WLOs/WROs.			

Activities	Description	Implemented by
Activity 47.1	Provide 4 refresher trainings (2 in the West Bank and 2 in Gaza) for leaders and representatives of WLOs/WROs and women's committees on gender in humanitarian action, leadership, and advocacy skills.	UN Women
Activity 47.2	Conduct evidence-based advocacy with humanitarian cluster and inter-cluster coordination mechanisms (through bilateral meetings and workshops) on the importance of WLOs/WROs participation in humanitarian decision making mechanisms and processes (i.e. development of humanitarian needs overview and response plan, participation in the humanitarian gender group, participation in verification of GAM coding exercise and project vetting panels)	UN Women
Activity 47.3	Organize dialogues among WLOs/WROs and members of humanitarian clusters on gender related priorities and gaps in cluster planning and response and how to address them through the leadership of WLOs/WROs.	UN Women
Activity 47.4	Undertake a rapid analysis/assessment of WLOs/WROs participation in humanitarian processes and decision making.	UN Women

Output 48	WLOs/WROs have increased access to information and understanding of humanitarian decision making processes and mechanisms (including humanitarian funding mechanisms).-OUTPUT- SPECIFIC

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection – Sexual and / or Gender-Based Violence

Indicators	Description	Target	Achieved	Source of verification
Indicator 48.1	Number of targeted WLOs/WROs that report increased knowledge of humanitarian funding mechanisms - OUTPUT- SPECIFIC	10 WLOs/WROs	10 WLOs/WROs	Perception surveys, baseline and endline surveys
Indicator 48.2	Number of targeted WLOs/WROs that report receiving funding through participation in the humanitarian response plan (HRP) or Humanitarian Fund (HF)- OUTPUT-SPECIFIC	6 WLOs/WROs	8 WLOs/WROs	Perception surveys, baseline and endline surveys

Explanation of output and indicators variance:	While maintaining the pre-identified resources and budget, UN Women and partners were able to expand their reach-out targeting additional WLOs/WROs.

Activities	Description	Implemented by
Activity 48.1	Provide 4 refresher training sessions (2 in the West Bank and 2 in Gaza) for leaders and representatives of WLOs/WROs on humanitarian architecture (HCT, cluster system, inter-cluster system, humanitarian program cycle process, GAM, and humanitarian program fund-HF)	UN Women
Activity 48.2	Conduct Advocacy meetings with the oPt Humanitarian Fund (HF) management (OCHA) to introduce a target (30 per cent) for funding WLOs/WROs in the West Bank and Gaza through the different HF country allocations	UN Women
Activity 48.3	Conduct Advocacy meetings with the Palestinian Non-governmental network (PNGO) which participates in HCT meetings to nominate women's representatives to participate in HCT on PNGOs' behalf.	UN Women

7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas[9] often lacking appropriate consideration and visibility: women and girls, people with disabilities, education and protection. **The following sections demonstrate how cross-cutting issues and the ERC's four underfunded priority areas have been addressed through project activities and should highlight the achieved impact wherever possible.**

a. Accountability to Affected People (AAP) [10]:

UN Women and implementing partners involved crisis-affected people, including vulnerable groups, throughout the design, implementation and monitoring of the project. Various modalities were used to ensure community voices were incorporated in the project activities including focus group discussions, community consultations, and key informant interviews in Bangladesh, Myanmar, and Ethiopia as well as socialisation sessions in targeted communities in Colombia. This ensured communities were aware of the project, its objectives and interventions and allowed them to provide inputs into the design as well as amendments throughout the implementation. UN Women and partners kept crisis-affected communities informed about the project through sessions in multi-purpose women centres and the establishment of Feedback and Complaint Mechanisms (CFMs). UN Women country offices and

[9] These areas include: support for women and girls, including tackling gender-based violence, sexual and reproductive health and empowerment; programmes targeting people with disabilities; education in protracted crises; and other aspects of protection. The ERC recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and UNCTs/HCTs when prioritizing life-saving needs for inclusion in CERF requests. While CERF remains needs-based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the Questions and Answers on the ERC four priority areas here.

[10] AAP and PSEA are part and parcel of IASC commitments, and therefore mandatory for compliance for all UN agencies and partners. Agencies do not necessarily need to establish new AAP and PSEA mechanisms for CERF projects if functioning ones are already in place. For more information please refer to the IASC AAP commitments.

partners ensured communities were aware of the CFMs through awareness raising activities and trained staff and partners to ensure corrective and follow up action to any feedback and complaints received.

b. AAP Feedback and Complaint Mechanisms:

UN Women and partners in all six implementing countries ensured that comprehensive, confidential, and survivor-centred community-based complaint mechanisms (CBCMs) were established with adequate consideration to intersectionality and diversity factors. To ensure the CBCMs were meaningfully accessible to targeted community members, all CBCMs ensured entry points, including complaint and suggestion boxes, community consultations, focus group discussions, and hotlines. Feedback and complaints were effectively handled in line with partners' internal policies while some countries such as Palestine, Myanmar, and Cameroon also established CBCM committees to address any feedback and complaints in a confidential and timely manner. A community-based approach, the incorporation of local solutions, the integration of formal and informal community structures, and alignment to existing referral pathways ensured that CBCMs in implementation areas were contextualised, needs-based and efficient.

c. Prevention of Sexual Exploitation and Abuse (PSEA):

UN Women worked to mitigate, prevent, and respond to SEA throughout the project. All partner agreements included PSEA commitments in line with the Secretary General's Bulletin and IASC guidelines and partners received PSEA training. To ensure a zero-tolerance policy on SEA, UN Women worked with partners and stakeholders to raise awareness and build capacities on PSEA and available CBCMs. UN Women also worked with communities to increase their understanding of SEA and how to report and seek survivor-centred support through CBCMs and referral pathways. To respond to any SEA allegations in a confidential and effective manner, UN Women and partners ensured CBCMs were established and that existing mechanisms were strengthened using formal and informal community structures and preferences, including the selection of PSEA focal points. UN Women co-chaired the PSEA Networks in Ethiopia, Myanmar, and Colombia, and worked closely with PSEA Networks in other countries to ensure coordination.

d. Focus on women, girls and sexual and gender minorities, including gender-based violence:

This project was designed to advance gender equality and the empowerment and protection of women and girls as well as sexual and gender minorities where feasible. It aimed to address the underlying causes of GBV and gender discrimination by implementing a comprehensive set of interventions aligned to country-level HCT and GBV sub-cluster priorities. These interventions included community engagement and awareness raising to change attitudes towards social norms and practices that perpetuate GBV and gender inequalities, the delivery of essential services including legal aid to survivors, provision of livelihood opportunities, capacity building of service providers to strengthen the delivery of survivor-centred support, and increased partnerships with local WLOs/WROs to amplify the voices of crisis-affected women and girls and increase their influence in humanitarian decision-making to ensure a more gender-responsive humanitarian response. Through the above interventions, the project aimed to create lasting change and contribute to more inclusive, equal, and just societies.

e. People with disabilities (PwD):

UN Women supported 4,042 people with disabilities (2,902 women, 1,109 girls, and 31 men) throughout the project with protection and livelihood services. During the project design and implementation, inclusion of and accessibility for PwD was a key consideration. To address the needs and promote protection of PwD, particularly women and girls, UN Women adapted project interventions. This included ensuring access to distribution sites and training spaces for people with mobility issues, awareness raising in different

formats, including the use of subtitles, audio and sign language, sharing messages for and about the rights of PwD, tailoring livelihood interventions to the needs of PwD and using disability status as a selection criterion as seen in Palestine and Colombia. UN Women used the Washington Group Questionnaire to collect and analyse disability disaggregated data. UN Women trained WLOs on disability inclusion and helped strengthen their capacities to address PwD through their service delivery.

f. Protection:

This project focuses on increasing the protection of crisis-affected women, girls, men and boys, with a specific focus on women and girls who experienced or are at risk of experiencing GBV. UN Women and partners mainstreamed protection throughout this project by: 1) prioritising the safety and dignity of crisis-affected women, girls, men, and boys in all their diversities and applying a survivor-centred approach and do-no-harm principles to minimise any unintended negative effects; 2) ensuring safe and meaningful access to comprehensive GBV services and information, including legal aid and livelihood opportunities; 3) setting up and strengthening localised protection and accountability mechanisms; and 4) supporting women and girls' participation, leadership, and empowerment to increase their capacities and resilience in humanitarian settings. Furthermore, UN Women promoted an intersectional approach to address different vulnerabilities that women and girls experience and strengthened capacities of WLOs/WROs to bring the most marginalised voices into humanitarian processes.

g. Education:

N/A

8. Cash and Voucher Assistance (CVA)

Use of Cash and Voucher Assistance (CVA)?

Planned	Achieved	Total number of people receiving cash assistance:
Yes, CVA is a component of the CERF project	Yes, CVA is a component of the CERF project	**2,439**

If **no**, please describe why CVA was not considered. Where feasible, CVA should be considered as a default response option, and multi-purpose cash (MPC) should be utilised wherever possible.

If **yes**, briefly note how CVA is being used, highlighting the use of MPC, and if any linkages to existing social protection systems have been explored.

UN Women and its implementing partners provided CVA in Myanmar, Palestine, and Cameroon under this CERF project. In all three countries, CVA was provided to women and girls who experienced or were at risk of experiencing GBV and provided as part of a comprehensive GBV response.

In Myanmar, cash distributions were provided by implementing partner FCA to 1,475 GBV survivors and women at risk in Rakhine and Kachin with a focus on increasing protection and livelihood support. This led to increased economic resilience and the creation of temporary employment opportunities for vulnerable women.

In Palestine, UN Women and partners implemented cash for work (CfW) and unconditional cash assistance which supported 300 women through temporary job placements for three-month periods for which they received USD 300, and 432 women with unconditional cash transfers of USD 150. This helped vulnerable women improve their economic situation and increased their access to income generating opportunities. UN Women Palestine, through the Gender-Sensitive Resilience Capacity Index (GS-RCI), found that women who engaged in CVA interventions demonstrated a significant improvement in their economic situation (40 per cent in Gaza and 28.1% in the West Bank).

In Cameroon, 102 vulnerable women benefited from restricted cash transfers, while 130 women were reached with cash for work interventions and entrepreneurial skill training in line with their existing skill sets and experience.

UN Women country offices did coordinate the CVA beneficiary selection processes with other relevant actors in the country, including local women's organisations and networks, UNFPA, the Food Security Cluster, and Cash Working Groups to avoid duplication and ensure complementarity with ongoing cash interventions. The beneficiary selection considered a wide range of vulnerability criteria including age, income, disability status, known GBV experience, area of residence and others. Exploring potential linkages with existing social protection systems and leveraging established structures and mechanisms could be further enhanced in future CVA programming in order to strengthen the impact and sustainability of such interventions.

Parameters of the used CVA modality:

Specified CVA activity (incl. activity # from results framework above)	**Number of people receiving CVA**	**Value of cash** (US$)	**Sector/cluster**	**Restriction**
Activity 12.1 Provide livelihood opportunities and entrepreneurial skills training for GBV survivors and women and girls at risk (including cash for work)	130	US$ 28,166	Protection - Gender-Based Violence	Restricted
Activity 12.3 Provide cash transfers and training to the most vulnerable women with a view to enhancing protection, livelihoods, and dignity.	102	US$ 22,100	Protection - Gender-Based Violence	Restricted
Activity 41.2 Provide unconditional cash transfers to most vulnerable women with a view to enhancing protection, livelihoods and dignity.	1,475	US$ 134,538	Protection - Gender-Based Violence	Unrestricted
Activity 45.5 Provide skill-matching cash for work	300	US$ 90,000	Food Security – Food Assistance	Restricted

opportunities to 300 women survivors of GBV for a cycle of 3 months including skilled and semi-skilled opportunities				
Activity 45.6 Provide unconditional cash assistance for women survivors of GBV and their families. Priority will be given to those who are most vulnerable such as women with disabilities, widows, women at risk of forced displacement / transfer and women heads of households.	432	US$ 64,800	Food Security – Food Assistance	Unrestricted

9. Visibility of CERF-funded Activities

Title	Weblink
Bangladesh	
UN Women Newsletter: Cox's Bazar Update | Oct-Dec 2022	https://asiapacific.unwomen.org/en/digital-library/publications/2023/02/coxs-bazar-update-oct-dec-2022?fbclid=IwAR3zmNXT9j_IGHBLhxfo4vkI7ISFjhu0877L9Q1fuzlR3byoV8wsSvqi-G0
UN Women Newsletter: Cox's Bazar Update | Jul-Sep 2022	https://asiapacific.unwomen.org/en/digital-library/publications/2022/10/coxs-bazar-update-jul-sep-2022#view
UN Women Newsletter: Cox's Bazar Update | April-June 2022	https://asiapacific.unwomen.org/en/digital-library/publications/2022/08/coxs-bazar-update-apr-jun-2022
UN Women Newsletter: Cox's Bazar Update | Jan-Mar 2022	https://asiapacific.unwomen.org/en/digital-library/publications/2022/05/coxs-bazar-update-jan-mar-22
UN Women Newsletter: Cox's Bazar update - July-Sep 2021	https://asiapacific.unwomen.org/en/digital-library/publications/2021/12/coxs-bazar-update-july-sep-21
FB: Cox's Bazar Update, Q4 2022 now online	bit.ly/3Nthlz6
FB: Dialogue Session between Women Leaders and Women Police	bit.ly/46ojTHs

FB: skills development training for gender-diverse people	bit.ly/3r7oaPv
FB: tailoring training for woman with disability	bit.ly/3JXXBmv
FB: women leaders raise awareness to end child marriage	bit.ly/3ppnjJg
FB: skills development training for a gender-diverse group	bit.ly/3raoHzT
FB: livelihoods training/sanitary napkin production	bit.ly/445cQSs
FB: fish farming supplements family nutrition	bit.ly/3XqCQoV
FB: gardening training promotes protection and economic resilience	bit.ly/43Z4VpG
FB: gender responsive police training protects women from violence	bit.ly/3Nv3Tef
Colombia	
Twitter	https://twitter.com/UNCERF/status/1501118543668162563?cxt=HHwWhsC9kZfXhdUpAAAA
Twitter	https://twitter.com/ONUMujeresCol/status/1536844063462268930?cxt=HHwWhICx3Y_i-9MqAAAA
Twitter	https://twitter.com/ONUMujeresCol/status/1591840313173110785?cxt=HHwWgsCj3ZaVrZcsAAAA
Twitter	https://twitter.com/ONUMujeresCol/status/1552787046116347905?cxt=HHwWgsC--ezIzYwrAAAA
Twitter	https://twitter.com/ONUMujeresCol/status/1564398419665379328?cxt=HHwWgICztd-E7rUrAAAA
Twitter	https://twitter.com/ONUMujeresCol/status/1626312942776983552?cxt=HHwWgIC9_afA6ZEtAAAA
Twitter	https://twitter.com/ochacolombia/status/1564697002822205440
Twitter	https://twitter.com/ochacolombia/status/1626269605730652160

Twitter	https://twitter.com/ochacolombia/status/1661005081532047361
Facebook	https://shorturl.at/epD06
En Nariño más de 200 mujeres indígenas Awá recibieron ayuda humanitaria de emergencia	https://colombia.unwomen.org/es/stories/noticia/2022/11/entrega-de-ayuda-humanitaria-al-pueblo-indigena-awa
Avanza respuesta humanitaria para las mujeres en Tumaco, Nariño	https://colombia.unwomen.org/es/stories/noticia/2022/07/avanza-respuesta-humanitaria-para-las-mujeres-en-tumaco-narino
Avanza en Chocó respuesta humanitaria para mujeres	https://colombia.unwomen.org/es/noticias-y-eventos/articulos/2021/10/cerf-choco-respuesta-humanitaria
ONU Mujeres con apoyo del Fondo Central para la acción de casos de emergencias (CERF), entregó kits de resiliencia a 240 mujeres en Riosucio y Carmen del Darién en Chocó	https://colombia.unwomen.org/es/stories/noticia/2022/10/entrega-kits-de-resiliencia-en-choco?fbclid=IwAR0YukZaU9FjOo_TxHqLpyhH7vIWcLAaGB3YEEZj-5Wsqpw0OvOAvj2Xvk0 https://qradio.com.co/co/onu-mujeres-con-apoyo-del-fondo-central-para-la-accion-de-casos-de-emergencias-cerf-entrego-kits-de-resiliencia-a-240-mujeres-en-riosucio-y-carmen-del-darien-en-choco/
Juntas salvamos vidas, proyecto financiado por el CERF en Chocó y Nariño, hizo su cierre oficial	https://colombia.unwomen.org/es/stories/noticia/2023/02/juntas-salvamos-vidas-cerro-oficialmente-en-quibdo
Ethiopia	
Twitter	https://twitter.com/unwomenethiopia/status/1626091053529923584
Twitter	https://twitter.com/unwomenethiopia/status/1593114148841598976
Twitter	https://twitter.com/unwomenethiopia/status/1590211329150926848
Twitter	https://twitter.com/unwomenethiopia/status/1588403164537028609
Rehabilitating survivors of conflict-related sexual violence	https://africa.unwomen.org/en/stories/feature-story/2022/09/rehabilitating-survivors-of-conflict-related-sexual-violence

From where I stand: it was shocking to see the horrific violence women endured due to the conflict in Northern Ethiopia	https://africa.unwomen.org/en/stories/from-where-i-stand/2022/11/safe-house-in-woldia-ethiopia
Video documentary	https://we.tl/t-ONZiIH5uYz
Myanmar	
A breath of hope for Rohingya women in Myanmar's Rakhine state	https://asiapacific.unwomen.org/en/stories/feature-story/2022/12/a-breath-of-hope-for-rohingya-women-in-rakhine-state https://myanmar.un.org/en/213963-breath-hope-rohingya-women-myanmar%E2%80%99s-rakhine-state
In a Myanmar village, a man will try to change men's culture	https://asiapacific.unwomen.org/en/news-and-events/stories/2021/12/a-man-will-try-to-change-mens-culture
Palestine	
UN Women and UNFPA are joining forces to combat rising gender-based violence in Palestine under a new project funded by the United Nations Central Emergency Response Fund (UN CERF).	*English Weblink: https://bit.ly/3JJhQ6d* *Arabic Weblink: https://bit.ly/40zpIya* *English Facebook post link: https://bit.ly/3LRH9Wk* *Arabic Facebook post link: https://bit.ly/3FU7oro*
In the words of Samar Al Shaer: 'I have become more aware of my rights and the organizations that can provide me with protection from violence'	*Weblink: https://bit.ly/3LUBO0M* *Facebook post link: https://bit.ly/3TMypCV*
In the words of Zahra Ahmed: 'As a woman with disability, earning an income through the cash-for-work experience was financially, socially, and personally empowering'	*Weblink: http://bitly.ws/GYdy*

'Women-led Organizations and Women's Rights Organizations Role in Humanitarian Action in Palestine: Barriers and Opportunities' Report	*Weblink: https://bit.ly/40Bw1RL* *Facebook post link: https://bit.ly/3THJ9m8*
Social Media Cards on 'Women-led Organizations and Women's Rights Organizations role in Humanitarian Action in Palestine: Barriers and Opportunities' Report	*Facebook post link: https://bit.ly/42EHy4z*
Gender-sensitive Resilience Capacity Index (GS- RCI) Report	*Weblink: https://bit.ly/40A0GPb* *Facebook post link: https://bit.ly/3FUNCfE*

Stories published on the occasion of the 2023 International Humanitarian Day -global communications

Tackling discriminatory gender norms in Cameroon | UN Women – Headquarters

UN Women and partners fight gender-based violence by helping to change social norms and attitudes in Ethiopia | UN Women – Headquarters

Giving a voice to gender-based violence survivors in Palestine | UN Women – Headquarters

Women's organizations remain at the front line of the crisis response in Myanmar | UN Women – Headquarters

3.2 Project Report 20-RR-FPA-042

1. Project Information

Agency:	UNFPA	**Country:**	Global
Sector/cluster:	Protection - Gender-Based Violence Health	**CERF project code:**	20-RR-FPA-042
Project title:	Harnessing the leadership of local Women-Led Organisations for promoting positive social norms and improving access to survivor-centred lifesaving multisectoral GBV response.		
Start date:	17/02/2021	**End date:**	16/02/2023
Project revisions:	No-cost extension ☒ Redeployment of funds ☐ Reprogramming ☒		

Funding

Total requirement for agency's sector response to current emergency:	**US$ 210,134,542**
Total funding received for agency's sector response to current emergency:	**US$ 79,255,308**
Amount received from CERF:	**US$ 17,004,108**
Total CERF funds sub-granted to implementing partners:	**US$ 9,552,493**
Government Partners	US$ 282,250
International NGOs	US$ 1,234,612
National NGOs	US$ 7,923,516
Red Cross/Crescent Organisation	US$ 112,115

2. Project Results Summary/Overall Performance

This two-year project was implemented from 16 February 2021 to 16 May 2023 in 11 countries **(Bangladesh, Cameroon, Colombia, Ethiopia, Iraq, Mali, Myanmar, Palestine, Somalia, Sudan, and Venezuela).**

The project supported a total of 168 Service Delivery Points in the 11 countries, including Women and Girls Safe Spaces, Mobile Teams/Clinics, One-Stop Centres and Health Facilities. These Service Points were supported to provide integrated Gender-Based Violence and Sexual Reproductive Health services reaching a total of 1,343,739 beneficiaries with direct services. Of which, 71,772 People accessed Sexual and Reproductive Health services, 50,026 women and girls received customized Dignity Kits, 676,394 people accessed individual and group psychosocial support, and 4,125 women were provided Cash and Voucher Assistance. Additionally, 1,607 Interagency Emergency Sexual and Reproductive Health (IARH) kits were procured and provided to health facilities.

The project also supported the strengthening of local capacity to provide quality services by delivering refresher training to 2,430 GBV and non-GBV actors on GBV basic concepts, case management and referral pathway as well as 1,640 health care providers on the health sector response to GBV including the Minimum Emergency Response Package (MISP) and/or on the Guidance on Clinical Management of Rape (CMR) and Intimate Partner Violence (IPV).

3. Changes and Amendments

Several countries implementing this project have faced challenges, restrictions and escalation of existing crises that caused delays in implementing the project activities, including contracting Implementing Partners. This required making some amendments/changes to the planned interventions to adapt to the evolving situation. A reprogramming request has been submitted to OCHA, detailing the changes and their justifications.

In summary, COVID-19 related restrictions have continued to affect access to services and group gatherings in Bangladesh and Myanmar. Political constraints and security situation have impacted the roll-out of GBVIMS managed by the government in Ethiopia and Palestine, delayed custom clearance of the mobile delivery and SRHR unit as well as affected the provision of awareness raising activities and PSS services due to restrictions on CSOs in Myanmar. The security situation has also caused delays to identify implementing partners with presence, permissions, and capacity in specific targeted locations in Ethiopia (Tigray) and Myanmar (Chin State). Additionally, in Sudan, livelihood training was adapted to income generating activities to respond to recommendations stemming from other project's evaluation.

Additionally, a no-cost extension was requested due to some challenges faced because of the introduction of a new ERP system (Quantum), including delays in rolling-over remaining funds from 2022 to 2023 affecting budget utilization (committing the funds in the system as well as disbursing). The delayed funds rollover made it impossible to estimate the project remaining balance which in turn, made it impossible to manage the totality of the unspent resources. Additionally, in some Countries, changes in exchange rates (versus the USD) were significant in 2022 and resulted in savings. Furthermore, in the case of one CO, savings were made due to the shift from in-person to online training/workshop.

4. Number of People Directly Assisted with CERF Funding*

Sector/cluster	Health									
	Planned					Reached				
Category	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	0	0	0	0	**0**	0	0	0	0	**0**
Returnees	0	0	0	0	**0**	0	0	0	0	**0**
Internally displaced people	70	60	70	40	**240**	319	82	62	46	**509**
Host communities	50	40	50	30	**170**	162	37	32	26	**257**
Other affected people	1565	10	300	0	**1,875**	1,775	596	341	185	**2,897**
Total	**1,685**	**110**	**420**	**70**	**2,285**	**2,256**	**715**	**435**	**257**	**3,663**
People with disabilities (PwD) out of the total										
	31	0	6	0	**37**	**33**	**1**	**7**	**0**	**41**

Sector/cluster	Protection - Gender-Based Violence									
	Planned					Reached				
Category	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	33,679	14,409	34,356	21,086	**103,530**	139,395	64,317	42,632	23,022	**269,366**
Returnees	56,822	32,473	26,246	11,657	**127,198**	56,921	11,996	18,222	11,016	**98,155**
Internally displaced people	143,041	41,715	72,973	22,262	**279,991**	216,749	59,780	89,189	40,011	**405,729**
Host communities	84,030	25,372	**51,892**	15,398	**176,692**	189,137	67,333	77,081	36,818	**370,369**
Other affected people	36,901	14,232	21,844	6,539	**79,516**	100,030	30,731	54,187	11,509	**196,457**
Total	**354,473**	**128,201**	**207,311**	**76,942**	**766,927**	**702,232**	**234,157**	**281,311**	**122,376**	**1,340,076**
People with disabilities (PwD) out of the total										
	15,056	7,440	3,329	8,503	**34,328**	**11,241**	**3,096**	**4,093**	**1,031**	**19,461**

5. People Indirectly Targeted by the Project

A total of 1,419,687 people were indirectly reached by this CERF project. Indirect beneficiaries are counted through:

1. The project's interventions aimed at improving access to services and strengthening GBV/ SRH integrated services and multi sectoral response, including scaling up service delivery points, provision of necessary equipment and IARH kits, in addition to updating the services mapping and referral pathways. This project is considered to have a "spillover effect", through benefiting family members of the project's direct beneficiaries. Therefore, families of individuals who received direct services and participated in the project activities like case management and DK distribution as well as survivors who have received referral services are considered indirect beneficiaries and are calculated based on the average household size in each country. Additionally, refresher training of service providers and volunteers have contributed to enhancing the capacity of and readiness of partners to deliver quality services and reduce GBV risks, enabling the reach of more beneficiaries both directly and indirectly.
2. Family members of recipients if dignity kits that include items and flash cards with information benefitting targeted women and girls as well as their family members.
3. Indirect beneficiaries are people reached with 1) Mass Awareness Raising activities on GBV risks and services, such as miking, radio spots, social media posts, text/SMS messages, media outlets, 2) activities organized during the occasion of International Women's Day and the 16 days campaign. 3) distribution of PSEA leaflets and copies of the updated GBV referral pathway by community-based organizations, 4) community outreach activities in the catchment areas of the service delivery points. Lastly it is hoped that direct beneficiaries would disseminate information to their respective family members, as well as community members. Using a community-based approach, community volunteers engaged in different activities are counted as indirect beneficiaries of the project and many of them will be engaged as community change makers.

6. CERF Results Framework

Project objective	Promoting leadership of WLOs to change harmful social norms and improve access to quality -sectoral GBV response services
Output 1	Targeted people, through programme interventions, report changes in perceptions and attitudes towards social norms and practices that perpetuate gender-based violence and gender inequalities.(OUTCOME-COMMON 1)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 1.1	Percentage of women, men, girls and boys who report that they disagree or strongly disagree with locally relevant harmful social norms (e.g., victim-blaming attitudes, discriminatory attitudes towards survivors, justifying GBV under certain circumstances, etc). (INDICATOR-COMMON 1)	20% (increase from the baseline)	20%	Bangladesh Joint UNFPA/UN Women endline survey

Explanation of output and indicators variance:	N/A

Activities	**Description**	**Implemented by**
Activity 1.1	Community awareness raising	N/A

Output 2	WLOs and WROs are empowered to increasingly engage in decision making and leadership in GBV response, mitigation and prevention. (OUTCOME -COMMON 2)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Health

Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 2.1	Percentage of targeted WLOs/WROs that report increased capacity to implement GBV risk mitigation, prevention and response interventions. (INDICATOR – COMMON 2.1)	80%	80%	Training Post Test, assessment report on capacities, gaps and needs of WLOs.
Indicator 2.2	Percentage of targeted WLOs/WROs that report increased involvement/participation in humanitarian decision-making.(INDICATOR - COMMON 2.2)	20% (increase from the baseline)		Evaluation of UNFPA-UN Women Global CERF Block Grant

Explanation of output and indicators variance:	N/A

Activities	**Description**	**Implemented by**
Activity 1.1	Capacity building of WLO/WRO staff	N/A

Output 3	Quality multisectoral GBV response services are accessible to women and girls and delivered through a survivor centered approach. (OUTCOME-SPECIFIC)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - GBV

Indicators	Description	Target	Achieved	Source of verification
Indicator 3.1	% of women and girls (disaggregated by age and disability) who accessed focused support services indicating satisfaction with services (disaggregated by service accessed) (INDICATOR-SPECIFIC 1)	80%	84%	Client Satisfaction Survey
Indicator 3.2	% of women and girls who report that the focused support services they accessed were delivered in accordance with their needs and preferences (disaggregated by type of support, gender and age) (INDICATOR SPECIFIC 2)	80%	100%	Client Satisfaction Survey
Explanation of output and indicators variance:		N/A		

Activities	Description	Implemented by
Activity 1.1	GBV services provision	N/A

Output 4	GBV risk mitigation measures contribute to positive changes in reported perceptions of safety and risks

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	

Indicators	Description	Target	Achieved	Source of verification
Indicator 4.1	# of women and girls participating in GBV risk mitigation interventions (including safety audits, GBV risk assessments and DK interventions	6096	6672	Safety Audit Report and Dignity Kits Distribution Master Roll
Indicator 4.2	Number of Safety audit conducted	32	32	Safety Audit Report
Indicator 4.3	Number of girls received age appropriate DKs	6000	6,134	Dignity Kits Distribution Master Roll
Indicator 4.4	Number of awareness sessions conducted by social mobilizers	3000	24,575	GBViE Service Data (Kobo)

Indicator 4.5	# of women, girls, men and boys (disaggregated by age) who received information about GBV risks, services available and how to access them	30,000	214,139	GBViE Service Data (Kobo)
Explanation of output and indicators variance:		Indicator 4.4 and 4.5: considering the positive feedback and acceptance from the local community of awareness raising activities, more sessions were organized compared with the initial plan.		

Activities	**Description**	**Implemented by**
Activity 4.1	Conduct community safety audits to strengthen life savings multi-sectoral GBV prevention and risk mitigation services.	Action Aid Bangladesh
Activity 4.2	Procure and distribute "Dignity Kits" that enable the disaster affected most vulnerable adolescent girls to restore the sense of dignity and add to protection against GBV	CWFD
Activity 4.3	Identify and work with young female and male volunteers to engage in GBV prevention efforts, including awareness sessions on GBV harmful consequences	Mukti Cox's Bazar, Gana Unnayan Kendra (GUK)

Output 5	Lifesaving integrated GBV/SRH services are available and accessible to women and girls

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster				
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 5.1	# service delivery points where women and girls can access multiple integrated services that meet their needs	12	22	Quarterly IP Progress Report
Indicator 5.2	Number of health care providers (workers) received refreshers training and orientation on "Protocol on health sector response to GBV including clinical management of rape (CMR)"	50	58	Attendance Sheet
Indicator 5.3	Number of GBV actor/case workers and Case Coordinators and non-	160	504	Attendance Sheet

	GBV actors and women led organisations received refreshers training on integrated SRHR and GBV services including safe referral			
Indicator 5.4	Number of Women Friendly Spaces functional in 4 cyclone and flood affected project districts	8	8	Quarterly Workplan Progress Report

Explanation of output and indicators variance:	Indicator 5.1: the project target did not initially account for 9 Women and Girls Safe Spaces partially supported by this CERF fund. Indicator 5.2: Slightly higher overachievement as an additional number of health care providers requested to attend the CMR training. Indicator 5.3: during the COVID-19 lockdown period, remote refreshed training and coaching were organized for the GBV case worker, case coordinators etc, which made it possible to reach more participants. After the ease of the lockdown period, in-person refresher training was resumed, targeting the 160 participants in various project locations.

Activities	**Description**	**Implemented by**
Activity 5.1	Refresher training for the health care providers in 7 Upazila Health Complexes and 4 District health facilities on "Protocol on health sector response to GBV including Clinical Management of Rape and intimate partner violence (CMR/IPV)	Action Aid Bangladesh
Activity 5.2	Orient GBV actor/case workers and case coordinators, non-GBV actors, and the women-led IPs on lifesaving integrated SRH/GBV intervention during emergencies:	Action Aid Bangladesh
Activity 5.3	Establish Women and Girls Safe Spaces and providing quality services, information and activities that promote healing and well-being case management services (psychosocial, legal, referrals) by trained GBV protection teams	Action Aid Bangladesh
Activity 5.4	Provide integrated GBV-SRHR services in Multi-purpose Women Centers in Cox's Bazar	RTMI, PHD

Output 6	Women and girls access quality PSS (including case management services).
Was the planned output changed through a reprogramming after the application stage?	Yes ☒ No ☐
Sector/cluster	Protection - Gender-Based Violence

Indicators	Description	Target	Achieved	Source of verification
Indicator 6.1	# of women and girls (disaggregated by age) who accessed Psychosocial interventions	12000	48,200	Quarterly Progress Report and Facility Register
Indicator 6.2	Number of women and girls supported with safe referral services	200	13,046	Work Plan Progress Report Register
Indicator 6.3	Number of outreach information sessions conducted for community mobilisation on GBV prevention and response service and safe referrals	1200	1,677	Work Plan Progress Report Register
Indicator 6.4	Percentage of GBV case workers who show an improvement in GBV - MHPSS knowledge/skills through pre/post tests and supervision tools	70%	70%	Pre and post training tests and supervision tool
Indicator 6.5	Number of GBV staff trained to provide quality, age-appropriate, focused psychosocial support services to women and girls	29	55	Attendance Sheet
Indicator 6.6	Number of staffs trained on basic concept of GBV, PSEA and PSS from other agencies	150	167	Attendance Sheet
Indicator 6.7	# of women, girls, men and boys (disaggregated by gender and age) receiving remote counseling services and information on GBV risks and available services through the Alapon helpline	36,183	30,757	IP Quarterly Reports
Explanation of output and indicators variance:		Indicator 6.1 and 6.2: The reason for overachievement is once we started organizing outreach sessions with community women and girls, more people started visiting our Women Friendly Spaces to seek support and take part in activities. Also, Women and girls were highly interested to take Midwifery related referral services. Indicator 6.5: organizing remote refresher training during COVID 19 lockdown made it possible to reach more participants. Indicator 6.6: In 2023, a training on GBV and Disability Inclusion and another training on PSS was organized to capacitate the newly recruited social mobilizers, case workers, centre coordinators etc. Indicator 6.7: the target was initially reprogrammed to 20,000. However, it was possible to reach more people than expected because of the promotion		

	of Alapon helpline as part of the rapid response to the north-eastern flash flood, menstrual health programme for urban dwellers, and other UNFPA supported projects, in addition to the government online platforms for school adolescents "Kishor Batayan" which also promoted Alapon during Facebook live sessions.

Activities	**Description**	**Implemented by**
Activity 6.1	Update and use of referral pathway in the affected districts to ensure safe and timely referrals to relevant services for GBV survivors	Action Aid Bangladesh
Activity 6.2	Conduct outreach to facilitate conditions for community mobilisation, community organisation, community ownership or community control over GBV services	Action Aid Bangladesh
Activity 6.3	Provide psychosocial support interventions, including case management services to women and girls	Mukti
Activity 6.4	Provide refreshers training to other agencies on GBV, PSEA and PSS who are working on GBV in Cox's bazar	Mukti
Activity 6.5	Raise awareness about available multi-sector services and how to access them, targeting adolescent girls	CWFD

Output 7	Safe and ethical information management systems for GBV incident monitoring and case management are established and/or supported through inter-agency mechanisms.

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Health			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 7.1	# GBV service providers (individuals) using GBVIMS or GBVIMS+	23	18	GBV Sub-Sector Data Recording Tool
Indicator 7.2	Number of GBV staff oriented on GBVIMS , data analyses and data management	48	110	Attendance Sheet
Explanation of output and indicators variance:		Indicator 7.1: Due to the ongoing rationalization process here led by ISCG (Inter Sectoral Coordination Group) within Cox's Bazar; several GBV Service Providers including 2 GBVIMS signatories concluded their response in Cox's Bazar. As a result, it was not possible to reach the target.		

	Indicator 7.2: As 2 new organizations have been enlisted as signatory to the GBVIMS Information Sharing Protocol (ISP) and started using GBVIMS and GBVIMS+. Additional refresher training was organized to capacitate the staff of these organizations on GBVIMS/GBVIMS+.

Activities	Description	Implemented by
Activity 7.1	Provide GBVIMS/GBVIMS+ refresher trainings to Case Workers to improve case management services for GBV survivors and women and girls at risk in Cox's Bazar.	GBV Sub-sector
Activity 7.2	Provide refresher training on service data management tools and methods (data collection, cleaning, analysis, and Excel / Kobo use) to program staff, including social Mobilizers and case management staff from GUK and MUKTI	Mukti

Output 8	Increased capacity of local women's organization(s) to implement GBV prevention and response programmes

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Health			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 8.1	# of WLOs that have received technical or operational capacity development support	16	29	Attendance Sheet
Explanation of output and indicators variance:		The reason for the overachievement is that UNFPA received request from more WLOs to take part in capacity building initiatives that were organized under this project.		

Activities	Description	Implemented by
Activity 8.1	Provide refresher sessions to WLOs on how to strengthen institutional capacity to implement GBV specialized programs in Union Parishad	Action Aid Bangladesh, CWFD

Output 9	Targeted people, through programme interventions, report changes in perceptions and attitudes towards social norms and practices that perpetuate gender-based violence and gender inequalities. (OUTCOME - COMMON 1)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 9.1	Percentage of women, men, girls and boys who report that they disagree or strongly disagree with locally relevant harmful social norms (e.g., victim-blaming attitudes, discriminatory attitudes towards survivors). (INDICATOR - COMMON 1)	20% (increase from the baseline)	20%	Cameroon Joint UNFPA/UN Women endline survey
Explanation of output and indicators variance:		N/A		

Activities	Description	Implemented by
Activity 1.1	Community awareness-raising on harmful GBV norms	N/A

Output 10	WLOs and WROs are empowered to increasingly engage in decision making and leadership in GBV response, mitigation and prevention. (OUTCOME – COMMON 2)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 10.1	Percentage of targeted WLOs/WROs that report increased capacity to implement GBV risk mitigation, prevention and response interventions. (INDICATOR – COMMON 2.1)	80%	93.3%	Quarterly Reports
Indicator 10.2	Percentage of targeted WLOs/WROs that report increased involvement/participation in humanitarian decision-making. (INDICATOR – COMMON 2.2)	20% (increase from the baseline)	93.3%	Quarterly Reports
Explanation of output and indicators variance:		N/A		

Activities	Description	Implemented by

Activity 1.1	Capacity building of WRO/WLO staff on leadership and coordination Capacity building of WRO/WLO staff on GBV program implementation	N/A

Output 11	Quality multisectoral GBV response services are accessible to women and girls and delivered through a survivor centred approach (OUTCOME – SPECICIF)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 11.1	Percentage of women and girls who accessed focused support services indicating satisfaction with services (disaggregated by age and service accessed). (INDICATOR SPECIFIC 1)	80%	80%	Satisfaction Survey
Indicator 11.2	Percentage of targeted people who report that the focused support services they accessed were delivered in accordance with their needs and preferences (disaggregated by type of support, gender and age). (INDICATOR – SPECIFIC 2)	80%	80%	Satisfaction Survey
Explanation of output and indicators variance:		N/A		

Activities	**Description**	**Implemented by**
Activity 1.1	GBV service provision Survey implementation	N/A

Output 12	Engage men, boys, and community leaders in community dialogues accountable to women and girls to support GBV prevention, mitigation and response

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence

Indicators	Description	Target	Achieved	Source of verification
Indicator 12.1	# of men and boys, including youth and community leaders, identified, trained and acting as a GBV prevention allies in their community	120	120	Attendance Sheets and Training Reports
Explanation of output and indicators variance:		N/A		

Activities	Description	Implemented by
Activity 12.1	Community dialogues are conducted in targeted communities with community and religious leaders to ensure community engagement in the fight against GBV.	COMMINSUD, LUKMEF, ALVF
Activity 12.2	Conduct capacity building activities on GBV prevention, services and human rights approach to promote social change towards women's rights specifically targeting community leaders, men and boys as allies in GBV advocacy efforts to address negative social norms.	COMMINSUD, LUKMEF, ALVF
Activity 12.3	Organize three-day refresher trainings of community leaders and youth on mitigating and managing cases of GBV in emergencies and ensuring the full respect for the core concepts of GBV, including the survivor-centred approach	COMMINSUD, LUKMEF, ALVF
Activity 12.4	Organize specific outreach sessions and community dialogues to engage men and boys as allies in GBV prevention including to challenge harmful social norms and act as champions of gender equality	COMMINSUD, LUKMEF, ALVF

Output 13	Lifesaving integrated GBV/SRH services are available and accessible to women and girls.
Was the planned output changed through a reprogramming after the application stage?	Yes ☐ No ☒
Sector/cluster	Health

Indicators	Description	Target	Achieved	Source of verification
Indicator 13.1	# service delivery points where women and girls can access multiple integrated services that meet their needs	24	24	IPs Quarterly Reports

Indicator 13.2	Number of social workers and community workers capacitated on GBV and available services and PSEA	120	120	Training Reports and Attendance Sheets
Explanation of output and indicators variance:		N/A		

Activities	**Description**	**Implemented by**
Activity 13.1	Orient health providers on the Minimum Emergency Response Package (MISP) including the Guidance on CMR and IPV, for RH in Crisis including the Clinical Management of Rape (CMR) service	UNFPA, ALVF, COMINSUD
Activity 13.2	Provide GBV and SRH case management, including remote service delivery where relevant	ALVF, COMINSUD
Activity 13.3	Recruit and deploy first-line support by GBV and SRH front-line workers in health and protection spaces, responding to survivors' emotional, physical, safety, and support needs(3 GBVIE national expert, 2 SRH expert, 1 IMO, National cash officer)	ALVF, COMINSUD
Activity 13.4	Provide health facilities with Interagency Emergency Sexual and Reproductive Health (IARH) Kits including post-rape treatment kits (Kit number 3) that includes emergency contraception (EC) to prevent unintended pregnancy and Post –Exposure Prophylaxis (PEP) medication to prevent HIV infection	ALVF, COMINSUD
Activity 13.5	Conduct integrated mobile clinics for service provisions to hard-to-reach IDP sites where beneficiaries don't have access to services	ALVF, COMINSUD
Activity 13.6	Conduct community-based outreach activities focused on access to services, especially life-saving and time-sensitive health services	ALVF, COMINSUD
Activity 13.7	Refresh training of social workers and community workers on GBV and available services including PSEA and complaint mechanism	ALVF, COMINSUD
Activity 13.8	Roll-out the implementation of the Clinical Management of Rape (CMR) protocols with the new Intimate Partner Violence (IPV) component	ALVF, COMINSUD, UNFPA

Output 14	Women and girls access quality PSS (including case management services).

Was the planned output changed through a reprogramming after the application stage?			Yes ☐	No ☒
Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 14.1	# of women and girls (disaggregated by age) who accessed Psychosocial interventions	12885	7,890	IPs Quarterly Reports
Explanation of output and indicators variance:		Suspension of activities in some locations impacted the achievement of the target. The Bali Batibo and Tubah - Fundong stretches of the road between 2021/ 2022 witnessed long periods of road blocks which cumulatively caused over 30 % of work and service interruptions.		

Activities	**Description**	**Implemented by**
Activity 14.1	Setup/support Women and Girls only Safe Spaces that provide quality services, information and activities that promote healing and well-being	ALVF, COMINSUD, LUKMEF, MINPROFF
Activity 14.2	Provide case management services by GBV protection teams	ALVF, COMINSUD, LUKMEF, MINPROFF
Activity 14.3	Update and disseminate referral pathways for beneficiaries including child and adolescent survivors and persons with disabilities	ALVF, COMINSUD, LUKMEF, MINPROFF
Activity 14.4	Provide remote service delivery (e.g. remote referral, safety planning, remote PFA, and remote case management where appropriate).	ALVF, COMINSUD, LUKMEF, MINPROFF

Output 15	GBV risk mitigation measures contribute to positive changes in reported perceptions of safety and risks.

Was the planned output changed through a reprogramming after the application stage?			Yes ☐	No ☒
Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 15.1	# of women and girls participating in GBV risk mitigation interventions (including safety audits, GBV risk assessments and DK interventions)	8000	12,783	GBV Assessment and Safety Audits Report. Dignity Kits distribution list

Explanation of output and indicators variance:	Additional GBV assessments and Safety Audits were organized with the community.

Activities	**Description**	**Implemented by**
Activity 15.1	Conduct safety audits and GBV risk assessment engaging local women's organizations and adolescent girls in the targeted regions	ALVF, COMMINSUD, LUKMEF, Plan International
Activity 15.2	Conduct Dignity Kits interventions, including information dissemination about GBV risks, risk mitigation strategies and available services promoting safety, dignity.	ALVF, COMMINSUD, LUKMEF, MINPROFF, UNFPA

Output 16	Cash Voucher Assistance (CVA) is integrated as a survivor-centered GBV response service modality.

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence

Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 16.1	# of women and older girls (disaggregated by age) who receive cash assistance as part of their case management to meet their urgent needs, avoid risky coping mechanisms and to contribute to GBV response/recovery for GBV survivors	300	334	Payment Sheets from Vendor

Explanation of output and indicators variance:	N/A

Activities	**Description**	**Implemented by**
Activity 16.1	Provide cash assistance to 300 women and older girls as part of GBV case management (medical bills, transportation) as part of a multisectoral response to enhance resilience, mitigate GBV risk and ensure immediate needs are met.	ALVF, COMMINSUD, LUKMEF
Activity 16.2	Support GBV/protection analysis for CVA assessments to identify any potential risks/harms and to address barriers to participation	ALVF, COMMINSUD, LUKMEF, UNFPA

Output 17	Girls' access adolescent-specialized integrated SRH/GBV services			
Was the planned output changed through a reprogramming after the application stage?			Yes ☐	No ☒
Sector/cluster	Health			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 17.1	# and % of safe spaces implementing SRH/GBV/life skills interactive learning and sharing sessions with adolescent girls	6	6	Safe Spaces Reports
Explanation of output and indicators variance:		N/A		

Activities	**Description**	**Implemented by**
Activity 17.1	Establishment of adolescent-only time in WGSS to provide integrated SRH/GBV services and information on age and other identity factors specific needs and risks, and educational life skills sessions for adolescent girls.	LUKMEF, COMINSUD, Plan International, ALVF

Output 18	Increased capacity of local women's organization(s) to implement GBV prevention and response programmes			
Was the planned output changed through a reprogramming after the application stage?			Yes ☐	No ☒
Sector/cluster				
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 18.1	# of WLOs that have received technical or operational capacity development support	6	20	Attendance Sheet
Explanation of output and indicators variance:		Additional WLOs in need of support were identified.		

Activities	**Description**	**Implemented by**
Activity 18.1	Refreshers and technical support provided to strengthen institutional capacity of local women's organization(s) to implement GBV specialized programs	ALVF, COMMINSUD, Plan International, UNFPA
Activity 18.2	Provide ongoing mentoring and coaching to develop local frontline responders' core, professional and	ALVF, COMMINSUD, Plan International, UNFPA

	behavioral competencies necessary for effective GBV prevention and response programming	

Output 19	Targeted people, through programme interventions, report changes in perceptions and attitudes towards social norms and practices that perpetuate gender-based violence and gender inequalities. (OUTCOME COMMON 1)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 19.1	Percentage of women, men, girls and boys who report that they disagree or strongly disagree with locally relevant harmful social norms (e.g., victim-blaming attitudes, discriminatory attitudes towards survivors). (INDICATOR – COMMON 1)	20% (increase from the baseline)	20%	Joint UNFPA/UN Women endline survey Colombia
Explanation of output and indicators variance:		N/A		

Activities	**Description**	**Implemented by**
Activity 1.1	Community awareness raising on harmful social norms	N/A

Output 20	WLOs and WROs are empowered to increasingly engage in decision making and leadership in GBV response, mitigation and prevention. (OUTCOME – COMMON 2)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 20.1	Percentage of targeted WLOs/WROs that report increased capacity to implement GBV risk mitigation, prevention and response interventions. (INDICATOR – COMMON 2.1)	80%	93.33%	Post Support Evaluation Report

Indicator 20.2	Percentage of targeted WLOs/WROs that report increased involvement/participation in humanitarian decision-making. (INDICATOR – COMMON 2.2)	20% (increase from the baseline)	86.67%	Post Support Evaluation Report
Explanation of output and indicators variance:		N/A		

Activities	**Description**	**Implemented by**
Activity 1.1	Capacity building of WLO/WROs staff on leadership and coordination Capacity building of WLO/WROs staff on GBV program implementation	N/A

Output 21	Quality multisectoral GBV response services are accessible to women and girls and delivered through a survivor centered approach. (OUTCOME – SPECIFIC)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence

Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 21.1	Percentage of women and girls who accessed focused support services indicating satisfaction with services (disaggregated by age and service accessed). (INDICATOR – SPECIFIC 1)	80%	92.22%	Satisfaction Survey Tool
Indicator 21.2	Percentage of women and girls who report that the focused support services they accessed were delivered in accordance with their needs and preferences (disaggregated by type of support, gender and age). (INDICATOR – SPECIFIC 2)	80%	86.58%	Satisfaction Survey Tool
Explanation of output and indicators variance:		N/A		

Activities	**Description**	**Implemented by**
Activity 1.1	GBV service provision	N/A

Output 22	Lifesaving integrated GBV/SRH services are available and accessible to women and girls.

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 22.1	# of health facilities supported with Post -rape treatment kits for Clinical Management of Rape (according to national protocols known as PEP kit and forensic sampling kits for rape)	4	6	Kits Distribution Sheet
Indicator 22.2	#health institutions (Hospitals or regional clinics) supported that integrate a survivor-centered approach in their responses to GBV survivors and reduce barriers to women's access.	1	6	Quarterly Progress Reports
Indicator 22.3	# service delivery points where women and girls can access multiple integrated services that meet their needs	8	21	Quarterly Progress Reports
Indicator 22.4	# of health facilities supported with Post -rape treatment kits for Clinical Management of Rape (according to national protocols known as PEP kit and forensic sampling kits for rape)	4	6	Kits Distribution Sheet

Explanation of output and indicators variance:	Indicator 22.2: Technical support was provided to the 6 health facilities that received supplies for sexual violence care in order in adopt the survivors-cantered approach. Indicator 22.3: Additional community safe spaces were supported, which proved to be a key strategy for extending GBV interventions to hard-to-reach communities. Furthermore, the 6 health facilities were mistakenly not accounted for in the project target, now included in the project result.

Activities	**Description**	**Implemented by**
Activity 22.1	Health actors (Hospitals or regional clinics) are supported to integrate a survivor-centered approach in their responses to GBV survivors including safe and ethical referrals	UNFPA

Activity 22.2	Provide individual, timely, confidential and safe assistance to survivors of GBV through health institutions (Hospitals or regional clinics) supported to integrate a survivor-centered approach in their responses including safe and ethical referrals.	Health Facilities : San Andrés de Tumaco and Divino Niño en Tumaco (Nariño), Hospital San Francisco de Asís de Quibdó (Chocó), San José de Maicao (La Guajira), Hospital Nuestra señora de los remedios (Riohacha / La Guajira) Unidad Básica Materno Infantil la Libertad IMSALUD en Cúcuta, Norte de Santander

Output 23	Women and girls access quality PSS (including case management services).

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Health

Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 23.1	# of women and girls (disaggregated by age) who accessed Psychosocial interventions (including CM and individual and group PSS at the WGSS)	1120	1951	Quarterly Progress Reports
Indicator 23.2	# of targeted areas where GBV case management services have been established.	3	8	Quarterly Progress Reports
Indicator 23.3	# of women, adolescents and girls reached with lifesaving information on GBV services and key messages for GBV prevention and risk mitigation measures that contribute to positive changes in locally relevant harmful social norms and promote safety and dignity for women and girls.	6200	12,967	Quarterly Progress Reports
Indicator 23.4	# of women, adolescents and girls participating in group psychosocial support and pedagogical activities through safe spaces	2400	5,665	Attendance Sheet and Quarterly Progress Reports

Explanation of output and indicators variance:	Indicator: 23.1, 23.3 and 23.4: Because of the fluctuating exchange rate, savings were made that allowed for the deployment of additional GBV response teams, resulting in reaching more people.

Activities	**Description**	**Implemented by**

Activity 23.1	Contract and train case workers providing remote and in person GBV case management	UNFPA, IP Alianza por la solidaridad
Activity 23.2	Adapt GBV case management protocols to ethnic groups including remote service delivery where relevant.	UNFPA
Activity 23.3	Provide case management services (psychosocial and protection) by GBV protection teams through remote modality, if necessary.	UNFPA, IP Alianza por la solidaridad
Activity 23.4	Develop, update, and disseminate referral pathways for child and adolescent survivors and persons with disabilities	UNFPA, IP Alianza por la solidaridad
Activity 23.5	Establish 4 Women and Girls only Safe Spaces that provide quality services, information and activities that promote healing and well-being.	UNFPA, IP Alianza por la solidaridad, IP Significarte
Activity 23.6	Provide group psychosocial activities to women and adolescents through safe spaces, including refresher on life skills/education sessions to change internalized harmful gender norms, increase understanding of GBV causes, consequences and risks, and strengthen solidarity and support among survivors	UNFPA, IP Alianza por la solidaridad, IP Significarte

Output 24	CVA is integrated as a survivor-centered GBV response service modality.

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 24.1	# of women and adolescents who receive cash assistance as part of their case management to prevent GBV for those at imminent risk and to contribute to GBV response/recovery for GBV survivors.	300	800	Cash Distribution Tracking Sheet
Explanation of output and indicators variance:		Because of the fluctuating exchange rate, savings were made that allowed for the deployment of additional GBV response teams, resulting in reaching more people.		

Activities	**Description**	**Implemented by**

Activity 24.1	Integrate cash assistance into GBV multisectoral response programming, where it is directly required to implement life-saving actions (i.e. cash or vouchers for transport vouchers to/from health or shelter services; phones and phone credit to provide access to life-saving remote PSS services; access to urgent medical or legal care that incurs costs; purchase of basic needs items to avoid potentially harmful or life-threatening risky coping mechanisms; other urgent financial needs as identified through case management)	PSP: Supergiros and IP: Alianza por la Solidaridad (APS)

Output 25	Safe and ethical information management systems for GBV incident monitoring and case management are established and/or supported through inter-agency mechanisms.

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 25.1	# national GBV data system SIVGE (integrated information system on gender violence) strengthened with safe and ethical information management for programming and advocacy purposes.	1	1	Progress Report
Explanation of output and indicators variance:		N/A		

Activities	**Description**	**Implemented by**
Activity 25.1	Recruit 1 GBV information manager to support national GBV data systems	UNFPA
Activity 25.2	Develop an information management protocol to safely and ethically inform programming and advocacy, and analyze GBV in association with the Ministry of Health to strengthen the national data management system called SIVGE (integrated information system on gender violence)	UNFPA
Activity 25.3	Involve new actors and new emergencies in the information management system, resulting in improving the national data management system called SIVGE (integrated information system on gender violence) data management practices and evidence-informed programming and advocacy.	UNFPA

Output 26	GBV risk mitigation measures contribute to positive changes in reported perceptions of safety and risks.

Was the planned output changed through a reprogramming after the application stage?			Yes ☐	No ☒
Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 26.1	# of women and girls participating in GBV risk mitigation interventions (including safety audits, GBV risk assessments and DK interventions	200	451	Safety Audit Reports
Indicator 26.2	# of women and adolescents in reproductive age receiving dignity kits	1004	1790	Kits Distribution Sheet
Explanation of output and indicators variance:		Because of the fluctuating exchange rate, savings were made that allowed for the deployment of additional GBV response teams, resulting in reaching more people.		

Activities	**Description**	**Implemented by**
Activity 26.1	Mainstream GBV risk mitigation and survivor support across key humanitarian clusters and sectors, in line with the IASC GBV Guidelines.	UNFPA
Activity 26.2	Distribute dignity kits tailored to the local contexts, adapted to COVID-19, accompanied by life-saving information on GBV services	UNFPA, Alianza por la Solidaridad

Output 27	Security and Justice actors are supported to integrate a survivor-centered approach in their responses to GBV survivors including safe and ethical referrals

Was the planned output changed through a reprogramming after the application stage?			Yes ☐	No ☒
Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 27.1	# of protection and judicial institutions (Police Officers,Comisarias de Familia, ICBF, Fiscalia General de la	6	14	Attendance Sheet and Quarterly Progress Report

	Nación, Defensoría del Pueblo, Medicina Legal), supported to integrate a survivor-centered approach in their responses to GBV survivors and reduce barriers to women's access.			
Explanation of output and indicators variance:		Based on the gaps and needs analysis conducted during the project, a greater number of GBV institutions were identified with the need of support. As a result, all identified institutions were included and the budget was adjusted accordingly.		

Activities	**Description**	**Implemented by**
Activity 27.1	Protection and justice actors (Police Officers,Comisarias de Familia, ICBF, Fiscalia General de la Nación, Defensoría del Pueblo, Medicina Legal) are supported to integrate a survivor-centered approach in their responses to GBV survivors including safe and ethical referrals	GENFAMI, APS
Activity 27.2	Provide individual, timely, confidential and safe assistance to survivors of gender based violence through protection and justice institutions (Police Officers,Comisarias de Familia, ICBF, Fiscalia General de la Nación, Defensoría del Pueblo, Medicina Legal) supported to integrate a survivor-centered approach in their responses including safe and ethical referrals.	Protection and justice institution with the support of IPs (GENFAMI, APS)

Output 28	Women-led organizations and local women's rights organizations increase capacities to implement GBV prevention, mitigation and response programmes

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster				
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 28.1	# of WLOs that have received technical or operational capacity development support	10	16	Attendance Sheet and Quarterly Progress Report
Explanation of output and indicators variance:		During the pre-selection of the WLOs, a greater number of organizations with the need of support were identified. As a result, all identified WLOs were included and the budget was adjusted accordingly.		

Activities	**Description**	**Implemented by**

Activity 28.1	Identify women-led organizations to support front-line services for women and other GBV survivors.	UNFPA
Activity 28.2	Refresher and technical support provided to strengthen institutional capacity of local women's organization(s) to implement GBV specialized programmes, ongoing mentoring and ensure sustainable development of frontline responders and their participation on the GBV sub-cluster or working group	APS, HALU, Colectiva de Mujeres, UNFPA
Activity 28.3	Provide grants to women-led organizations to support front-line services for women and other GBV survivors, enabling the sustainability of the GBV response at coverage areas.	APS, HALU, Colectiva de Mujeres
Activity 28.4	Conduct community-based outreach advocacy and activities focused on access to services, especially life-saving and timely, secure and confidential GBV services, so that survivors know where to find help.	WLOs targeted through indicator 28.1
Activity 28.5	Participatory GBV risk assessment and safety audit engaging local women's organizations and adolescent girls in the emergency context to improve safety and security for women and girls.	WLOs targeted through indicator 28.1
Activity 28.6	Design and distribute life-saving information on GBV services to reduce GBV risks, and promote safety and dignity.	WLOs targeted through indicator 28.1

Output 29	Participation of Women's Rights and women led organization in key humanitarian structures is increased.

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 29.1	# of WLOs/WROs targeted who participate in relevant local fora (LCT meetings, local GBV sub-clusters,) captured at a quarterly basis.	10	14	Attendance Sheet and Quarterly Progress Report
Explanation of output and indicators variance:		During the pre-selection of the WLOs, a greater number of organizations with the need of support were identified.		

Activities	Description	Implemented by
Activity 29.1	Strengthening of leadership capacities to increase WLOs participation in key humanitarian structures such as the Protection Cluster, AoRs, pooled fund steering groups, revision group of HPCs and participation in expanded HCTs.	APS, HALU, Colectiva de Mujeres

Output 30	Targeted people, through programme interventions, report changes in perceptions and attitudes towards social norms and practices that perpetuate gender-based violence and gender inequalities. (OUTCOME -COMMON 1)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 30.1	Percentage of women, men, girls and boys who report that they disagree or strongly disagree with locally relevant harmful social norms (e.g., victim-blaming attitudes, discriminatory attitudes towards survivors). (INDICATOR – COMMON 1)	20% (increase from the baseline)	20%	Ethiopia Joint UNFPA/UN Women endline survey
Explanation of output and indicators variance:		N/A		

Activities	Description	Implemented by
Activity 1.1	Community awareness raising on harmful social norms	N/A

Output 31	WLOs and WROs are empowered to increasingly engage in decision making and leadership in GBV response, mitigation and prevention. (OUTCOME – COMMON 2)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**

Indicator 31.1	Percentage of targeted WLOs/WROs that report increased capacity to implement GBV risk mitigation, prevention and response interventions. (INDICATOR – COMMON 2.1)	80%	96.25%	Checklist of skill assessment, Field Monitoring Report
Indicator 31.2	Percentage of targeted WLOs/WROs that report increased involvement/participation in humanitarian decision-making. (INDICATOR – COMMON 2.2)	20% (increase from the baseline)	96.25%	Checklist of skill assessment, Field Monitoring Report
Explanation of output and indicators variance:		N/A		

Activities	**Description**	**Implemented by**
Activity 1.1	Capacity building for WLO/WROs staff on leadership and coordination Capacity building on WLO/WROs staff on GBV program implementation	N/A

Output 32	Quality multisectoral GBV response services are accessible to women and girls and delivered through a survivor centered approach. (OUTCOME – SPECIFIC)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 32.1	Percentage of women and girls who accessed focused support services indicating satisfaction with services (disaggregated by age and service accessed). (INDICATOR – SPECIFIC 1)	80%	88.87%	Client Satisfaction Survey Tool
Indicator 32.2	Percentage of women and girls who report that the focused support services they accessed were delivered in accordance with their needs and preferences (disaggregated by type of support, gender and age). (INDICATOR – SPECIFIC 2)	80%	98.57%	Client Satisfaction Survey Tool

Explanation of output and indicators variance:	N/A

Activities	**Description**	**Implemented by**
Activity 1.1	GBV service provision	N/A

Output 33	Life-saving integrated GBV/SRH services are available and accessible to women and girls.

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Health

Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 33.1	# service delivery points where women and girls can access multiple integrated services that meet their needs	5	8	Service data and IPs Quarterly Reports

Explanation of output and indicators variance:	Within existing budget and budget made available from reprogramming some activities, it was possible to respond to existing needs and establish and support more WGSS than planned in Tigray region

Activities	**Description**	**Implemented by**
Activity 33.1	Conduct refresher training targeting women-led organizations on the provision of GBV case management that meets global standards of care, with specific focus on the survivor-centered approach	OSSHD, FHE, AWA
Activity 33.2	Provision of GBV and SRH case management services that respond to the survivors' emotional, physical, safety and support needs	OSSHD, FHE, AWA
Activity 33.3	Conduct community-based outreach activities including mobile outreach, to raise awareness about and increase access to services, especially life-saving and time sensitive GBV/SRH health services so that GBV survivors, specifically persons with disabilities and child and adolescent survivors know where to find help	OSSHD, FHE, AWA
Activity 33.4	Implement the Clinical Management of Rape (CMR) protocols with the new Intimate Partner Violence (IPV) component for the integation of GBV and SRH services in the delivery of survivor-centered care	Health Facilities in Tigray and Amhara with UNFPA Support

Activity 33.5	Equip 15 health facilities with Interagency Emergency Sexual and Reproductive Health (IARH) Kits including post-rape treatment kits that include emergency contraception to prevent unintended pregnancy and post exposure prophylaxis medication to prevent HIV infection	UNFPA
Activity 33.6	Build capacity on the different components including inventory management and fleet management to advance the national supply chains in order to ensure that post-rape treatment supplies are available for the continuity of lifesaving CMR services.	UNFPA
Activity 33.7	Conduct a training of trainers (TOT) on CMR protocols with the new intimate partner violence component to promote sustainability; trainers will cascade the training down to community level using content designed to influence health care providers to change their behaviour/attitudes towards the treatment of survivors of IPV	UNFPA

Output 34	Women and girls access quality psychosocial support services.

Was the planned output changed through a reprogramming after the application stage? Yes ☒ No ☐

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 34.1	# of women and girls (disaggregated by age) who accessed Psychosocial interventions (including CM and individual and group PSS at the WGSS)	35,744	34,741	Service data and IP Quarterly Progress Report
Indicator 34.2	Number of professional mental health counsellors deployed who provide one-on-one counselling to survivors and mentor/supervise members of WLOs who provide basic psychosocial support at community level	5	7	IP Quarterly Progress Report
Explanation of output and indicators variance:		Indicator 34.1: target was reprogrammed to 26,390. However, it was possible to reach more people due to the following reasons: 1- Within existing budget and budget made available from reprogramming some activities, it was possible to establish and support more WGSS and reach more people. 2- UNFPA initiated community based MHPSS in Tirgay with the support of		

	MHPSS Specialist deployed in Mekelle which helped reach more community with PSS individual and group services. Indicator 34.2: UNFPA deployed MHPSS staff through the Implementing Partners as per the need on the ground, therefore, it was possible to deploy more specialists than planned in the initial stage.]

Activities	**Description**	**Implemented by**
Activity 34.1	Develop, update, and disseminate referral pathways for child and adolescent survivors and persons with disabilities	OSSHD, FHE, AWA, with the leadership of the GBVAOR led by UNFPA
Activity 34.2	Deploy five professional mental health care providers at field level in Women Affairs Offices to deliver individual counselling services to survivors of GBV who have been referred through a case management organization. They also closely work with WLO staff and health care service providers in the respective health facilities.	OSSHD, FHE, AWA
Activity 34.3	Five professional mental health care providers supervise/mentor Government counterparts and WLOs offices that manage GBV cases and provide basic psychosocial support services	OSSHD, FHE, AWA
Activity 34.4	Conduct refresher training on provision of basic psychosocial support targeting Government counterparts and members of WLOs. The training will be conducted at field level by WAA and WAT and UNFPA will assign resource person for the training.	OSSHD, FHE, AWA

Output 35	GBV risk mitigation measures contribute to positive changes in reported perceptions of safety and risks.
Was the planned output changed through a reprogramming after the application stage?	Yes ☐ No ☒
Sector/cluster	Protection - Gender-Based Violence

Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 35.1	# of women and girls participating in GBV risk mitigation interventions (including safety audits, GBV risk assessments and DK interventions)	10,160	8,756	IPs Quarterly Reports and UNFPA Dignity Kits Stock Registry
Indicator 35.2	Number of women and girls of reproductive age who received culturally appropriate dignity kits to	8,000	8,000	IP Quarterly Report, UNFPA Dignity Kits Stock Register

	address their hygiene and protection needs.			
Explanation of output and indicators variance:		Indicator 35.1: The security situation in the targeted Wordas affected the implementation of the activities.		

Activities	**Description**	**Implemented by**
Activity 35.1	Mainstream GBV risk mitigation and survivor support across key humanitarian clusters and sectors, in line with the IASC GBV Guidelines.	AWA, UNFPA
Activity 35.2	Conduct participatory GBV risk assessments by engaging local women's organizations, community members and inter-cluster/sector humanitarian staff	UNFPA with GBVAOR
Activity 35.3	Provide female dignity kits to girls and women of reproductive age affected by the conflict to address their hygiene and protection needs and disseminate information on GBV services to reduce GBV risk, and promote safety and dignity	UNFPA

Output 36	Safe and ethical information management systems for GBV incident monitoring and case management are established and supported through inter-agency mechanisms
Was the planned output changed through a reprogramming after the application stage?	Yes ☒ No ☐
Sector/cluster	Protection - Gender-Based Violence

Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 36.1	Number of new non-governmental GBV PSS service provider organizations/entities implementing the GBVIMS to support service provision	5	0	N/A
Indicator 36.2	Number of CERF funded zones with new an inter-agency Information Sharing Protocol in place where not previously implemented to safely and ethically inform programming and advocacy	5	0	N/A
Explanation of output and indicators variance:		Indicators 36.1 & 36.2: This is reprogrammed. The GBVIMS in Ethiopia Context is managed by government offices. In the project targeted locations,		

	the government offices were affected by the crisis and were not able to manage a new system.

Activities	Description	Implemented by
Activity 36.1	Conduct refresher training on the functionality of the GBVIMS basic tools, data analysis, and information sharing protocols with implementing organizations	N/A
Activity 36.2	Organize information sharing protocol(ISP) development workshop and develop a protocol	N/A
Activity 36.3	Conduct GBVIMS data analysis refresher training	OSSHD, FHE

Output 37	Increased capacity of local women's organizations to implement GBV prevention and response program

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Health			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 37.1	Total number of WLOs targeted that report increased capacities to implement GBV prevention and response programming	5	7	UNFPA Internal Report
Explanation of output and indicators variance:		The number of WLOs identified in need of support exceeded the planned target, thus UNFPA engaged them in technical support and capacity building by UNFPA technical staff		

Activities	Description	Implemented by
Activity 37.1	Provide technical support to strengthen institutional capacity of local women's organizations to implement GBV specialized programmes.	UNFPA
Activity 37.2	Provide refresher training to Government counterparts and members of WLOs on behavioural change communication approaches and strategies	UNFPA
Activity 37.3	Develop communication materials that promote behavioural change and disseminate to community members through awareness raising sessions and multiple media platforms	UNFPA

Activity 37.4	Deploy GBV program officers to provide technical support, trainings and mentoring to Women Affairs offices, WLO and implementing partners	UNFPA

Output 38	Targeted people, through programme interventions, report changes in perceptions and attitudes towards social norms and practices that perpetuate gender-based violence and gender inequalities. (OUTCOME – COMMON 1)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster				
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 38.1	Percentage of women, men, girls and boys who report that they disagree or strongly disagree with locally relevant harmful social norms (e.g., victim-blaming attitudes, discriminatory attitudes towards survivors). (INDICATOR – COMMON 1)	20% (increase from the baseline)	20%	Iraq Joint UNFPA/UN Women endline survey
Explanation of output and indicators variance:		N/A		

Activities	**Description**	**Implemented by**
Activity 1.1	Community awareness on harmful social norms	N/.A

Output 39	WLOs and WROs are empowered to increasingly engage in decision making and leadership in GBV response, mitigation and prevention. (OUTCOME – COMMON 2)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 39.1	Percentage of targeted WLOs/WROs that report increased capacity to implement GBV risk mitigation, prevention and response interventions. (INDICATOR – COMMON 2.1)	80%	80%	Post training Evaluation Report

Indicator 39.2	Percentage of targeted WLOs/WROs that report increased involvement/participation in humanitarian decision-making. (INDICATOR – COMMON 2.2)	20% (increase from the baseline)	91%	Post training Evaluation Report
Explanation of output and indicators variance:		N/A		

Activities	**Description**	**Implemented by**
Activity 1.1	Capacity building for WLO/WROs on humanitarian leadership and coordination Capacity building for WLO/WROs staff on GBV program implementation	N/A

Output 40	Quality multisectoral GBV response services are accessible to women and girls and delivered through a survivor centered approach. (OUTCOME – SPECIFIC)
Was the planned output changed through a reprogramming after the application stage?	Yes ☐ No ☒
Sector/cluster	Protection - Gender-Based Violence

Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 40.1	Percentage of women and girls who accessed focused support services indicating satisfaction with services (disaggregated by age and service accessed). (INDICATOR – SPECIFIC 1)	80%	92.3%	Impact Assessment Survey Report
Indicator 40.2	Percentage of targeted people who report that the focused support services they accessed were delivered in accordance with their needs and preferences (disaggregated by type of support, gender and age) (INDICATOR-SPECIFIC 2).	80%	92.3%	Impact Assessment Survey Report
Explanation of output and indicators variance:		N/A		

Activities	**Description**	**Implemented by**
Activity 1.1	GBV service provision	N/A

	Satisfaction survey implementation	

Output 41	Lifesaving integrated GBV/SRH services are available and accessible to women and girls.

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 41.1	# service delivery points where women and girls can access multiple integrated services that meet their needs	6	17	Iraq TrackStudio Tool and Staff missions to project locations
Indicator 41.2	# of women, girls, men and boys (disaggregated by age) who received information about GBV risks, services available and how to access them	50000	113,496	Iraq TrackStudio Tool
Explanation of output and indicators variance:		Indicator 41.1: The project initially planned to support a total of 6 Service Delivery Points and mistakenly did not account for the mobile teams in the project target. However, a total of 17 Service Delivery Points were supported (9 Women Centres, 8 Mobile Teams). Indicator 41.2: with the successful implementation of both the Women Centres and mobile teams, it was possible to reach a larger number of beneficiaries than anticipated.		

Activities	**Description**	**Implemented by**
Activity 41.1	Conduct awareness raising sessions and disseminate key GBV/SRH messages	IHAO, AL-Masellah
Activity 41.2	Provide essential supplies and equipment to the service delivery points for GBV prevention and response	Tajdid, IHAO, ALmessalah, Harikar

Output 42	Women and girls access quality PSS (including case management services)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Health

Indicators	Description	Target	Achieved	Source of verification
Indicator 42.1	# of women and girls (disaggregated by age) who accessed Psychosocial interventions	30,000	34,081	Iraq TrackStudio Tool
Indicator 42.2	# of Women Community Centres that are PWD- friendly (providing physical access and reducing barriers, design and participation to inclusive activities, etc.) and provide quality survivor-centered GBV services	10	10	IPs progress reports
Explanation of output and indicators variance:		N/A		

Activities	Description	Implemented by
Activity 42.1	Provide GBV services through 10 Women Community Centers (two in each) in the targeted governorates.	IHAO, AL-Masellah, Tajdid
Activity 42.2	Deploy mobile teams and outreach community mobilizers to deliver GBV services for IDPs and returnees scattered among the host community	Tajdid
Activity 42.3	Develop/adapt functional GBV referral system to facilitate GBV referrals to other service delivery points, including mental health, medical, safety and legal support	IHAO, AL-Masellah, Tajdid
Activity 42.4	Provision of PSS through mobile teams to women and girls who cannot visit the community centers	IHAO, AL-Masellah, Tajdid, Harikar
Activity 42.5	Support specialized and non-specialized mental health and psychosocial support response services to the survivors of GBV	IHAO, AL-Masellah
Activity 42.6	Conduct community dialogues on negative consequence of Gender Based Violence among key community influencers in the targeted governorates	AL-Masellah, Tajdid
Activity 42.7	Organize community-based outreach to sensitize men and boys to support GBV prevention and response interventions in the targeted governorates.	AL-Masellah, Tajdid

Output 43	Women and girls access gender sensitive livelihoods programmes as part of a multisectoral response to GBV

Was the planned output changed through a reprogramming after the application stage?	Yes ☐	No ☒		
Sector/cluster				
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 43.1	# of women and girls (disaggregated by age) who accessed livelihood support services	200	155	IPs Progress Reports and Iraq TrackStudio Tool
Indicator 43.2	# of Women and girls who received life skill training in the targeted areas -disaggregated by age	1000	170	IPs Progress Reports and Iraq TrackStudio Tool
Explanation of output and indicators variance:		Indicator 43.1 and 43.2: Due to insufficient outreach efforts targeting the specific demographic, as well as barriers such as limited and difficult access to the far away locations, and financial opportunities led to the lack of interest.		

Activities	**Description**	**Implemented by**
Activity 43.1	Conduct vocational trainings for a total of 200 women and older adolescent girls in line with Key Actions of the Minimum Standard 12 related to Economic empowerment and Livelihoods	IHAO, AL-Masellah, Tajdid, Harikar
Activity 43.2	Support livelihood interventions for women and older adolescent girls in line with Key Actions of the Minimum Standard 12 related to Economic empowerment and Livelihoods	IHAO, AL-Masellah, Tajdid, Harikar
Activity 43.3	Conduct life skills training for women and girls in the targeted governorates	IHAO, AL-Masellah, Tajdid, Harikar
Activity 43.4	Develop referral pathways for Livelihood services and cash transfer partners	IHAO, AL-Masellah, Tajdid, Harikar

Output 44	Security and Justice actors are supported to integrate a survivor-centered approach in their responses to GBV survivors including safe and ethical referrals.

Was the planned output changed through a reprogramming after the application stage?	Yes ☐	No ☒		
Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**

Indicator 44.1	# of individual staff of judicial institutions and law enforcement bodies (police, judges and prosecutors) supported to reduce barriers to women's access to justice (disaggregated by type of organization)	30	58	IPs Progress Reports and Iraq TrackStudio Tool
Indicator 44.2	# of services delivery points (Family Protection Units (FPUs) and Attorney General Office (AGO) with at least two staff trained in GBV	5	6	IPs Progress Reports and Iraq TrackStudio Tool
Indicator 44.3	# of security and justice staff trained in GBV case management	50	55	IPs Progress Reports and Iraq TrackStudio Tool
Explanation of output and indicators variance:		Indicator 44.1: the high demand for the training program led to a larger number of attendees than initially expected. The training delivery process was made more efficient, enabling a higher number of participants to be accommodated within the allocated resources. Effective resource management and planning resulted in cost savings, allowing the training program to cover more participants without exceeding the budget.		

Activities	**Description**	**Implemented by**
Activity 44.1	Provide refresher training to police officers, judges and prosecutor on GBV case management in the targeted governorates	UNFPA
Activity 44.2	Support FPU for GBV services provision	UNFPA

Output 45	GBV risk mitigation measures contribute to positive changes in reported perceptions of safety and risks.

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 45.1	# of women and girls participating in GBV risk mitigation interventions (including safety audits, GBV risk assessments and DK interventions)	5,000	7,576	Dignity Kits Distribution sheet and Safety Audits Reports.
Explanation of output and indicators variance:		Additional number of Dignity kits were procured with the same planned amount.		

Activities	Description	Implemented by
Activity 45.1	Procure and distribute dignity kits for women and girls in the targeted areas	UNFPA

Output 46	Increased capacity of local women's organizations to implement GBV prevention and response programmes

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 46.1	# of WLOs that have received technical or operational capacity development support	30% 5	5	IPs Progress Reports and Iraq TrackStudio Tool
Explanation of output and indicators variance:		N/A		

Activities	Description	Implemented by
Activity 46.1	Provide technical assistance to women led organizations to design and implement programmes focused on Gender Based Violence response and prevention.	UNFPA
Activity 46.2	Support women's grassroots organizations for their leadership and management skill to implement GBV prevention and response program using community-based approach	UNFPA

Output 47	Targeted people, through programme interventions, report changes in perceptions and attitudes towards social norms and practices that perpetuate gender-based violence and gender inequalities. (OUTCOME – COMMON 1)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 47.1	Percentage of women, men, girls and boys who report that they disagree or strongly disagree with locally relevant harmful social norms	20% (increase from the baseline)	20	Mali Joint UNFPA/UN Women endline survey

	(e.g., victim-blaming attitudes, discriminatory attitudes towards survivors). (INDICATOR – COMMON 1)			
Explanation of output and indicators variance:		N/A		

Activities	**Description**	**Implemented by**
Activity 1.1	Community awareness raising on harmful social norms	N/A

Output 48	WLOs and WROs are empowered to increasingly engage in decision making and leadership in GBV response, mitigation and prevention. (OUTCOME – COMMON 2)
Was the planned output changed through a reprogramming after the application stage?	Yes ☐ No ☒
Sector/cluster	Health

Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 48.1	Percentage of targeted WLOs/WROs that report increased capacity to implement GBV risk mitigation, prevention and response interventions. (INDICATOR – COMMON 2.1)	80%	90%	Quarterly Progress Reports
Indicator 48.2	Percentage of targeted WLOs/WROs that report increased involvement/participation in humanitarian decision-making. (INDICATOR – COMMON 2.2)	20% (increase from the baseline)	90%	Quarterly Progress Reports
Explanation of output and indicators variance:		N/A		

Activities	**Description**	**Implemented by**
Activity 1.1	Capacity building for WLO/WROs staff on humanitarian leadership and coordination Capacity building of WLO/WROs staff on GBV program implementation	N/A

Output 49	Quality multisectoral GBV response services are accessible to women and girls and delivered through a survivor centered approach. (OUTCOME – SPECIFIC)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒				
Sector/cluster				
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 49.1	Percentage of women and girls who accessed focused support services indicating satisfaction with services (disaggregated by age and service accessed). (INDICATOR – SPECIFIC 1)	80%	100%	Satisfaction Survey Report
Indicator 49.2	Percentage of targeted people who report that the focused support services they accessed were delivered in accordance with their needs and preferences (disaggregated by type of support, gender and age). (INDICATOR – SPECIFIC 2)	80%	100%	Satisfaction Survey Report
Explanation of output and indicators variance:		N/A		

Activities	**Description**	**Implemented by**
Activity 1.1	GBV service provision Satisfaction survey implementation	N/A

Output 50	Lifesaving integrated GBV/SRH services are available and accessible to women and girls.

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒				
Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 50.1	# service delivery points where women and girls can access multiple integrated services that meet their needs	6	14	IPs Quarterly Reports

Explanation of output and indicators variance:	The project initially planned to support 6 Service Delivery Points (4 One Stop Center, 2 WGSS). While additional 2 WGSS were supported, the 8 mobile teams were mistakenly not accounted for in the project target.

Activities	**Description**	**Implemented by**
Activity 50.1	Support the implementation of multi-sectorial GBV services for survivors in 4 health structures in the regions of Ségou, Mopti, Tombouctou and Gao (including establishment and /or renovation and equipment of those structures)	UNFPA, HELP, IEDA
Activity 50.2	Provide orientation sessions on implementation of new national protocols for holistic care for survivors with health actors	UNFPA
Activity 50.3	Deploy/Provide GBV and SRH case management, including remote service delivery where relevant, in One Stop center and current mobile clinic.	UNFPA, HELP, IEDA
Activity 50.4	Supply Interagency Emergency Sexual and Reproductive Health (IARH) Kits including post-rape treatment kits (Kit number 3) that includes emergency contraception (EC) to prevent unintended pregnancy and Post–Exposure Prophylaxis (PEP) medication to prevent HIV infection.	UNFPA
Activity 50.5	Contribute to the deployment integrated mobile clinics for service provisions where needed in the project intervention area (Regions of Segou (Ségou, San, Niono and Macina), Mopti (Bandiagara, Bankass, Djenne, Douentza), Timbuktu (Timbuktu, Dire, Gourma-Rharous, Niafunke) and Gao (Gao, Ansongo, Bourem)	HELP, IEDA
Activity 50.6	Strengthen national supply chains and capacities to ensure that post-rape treatment supplies are available to ensure continuity of lifesaving CMR services.	UNFPA
Activity 50.7	Conduct community-based outreach activities focused on access to services, especially lifesaving and time-sensitive health services, so that survivors know where to find help.	HELP, IEDA, WILDAF

Output 51	Women and girls access quality PSS (including case management services)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 51.1	# of women and girls (disaggregated by age) who accessed Psychosocial interventions	36000	29,416	IPs Quarterly Reports and GBVIMS
Indicator 51.2	# of women, girls, men and boys (disaggregated by age) who received information about GBV risks, services available and how to access them	20000	92,498	IPs Quarterly Reports and GBVIMS
Explanation of output and indicators variance:		Indicator 51.1: Access challenges to some localities affect the ability to reach the target. Indicator 51.2: Awareness and information sessions took place during mobile teams and during community mobilization activities reaching more audience than planned.		

Activities	**Description**	**Implemented by**
Activity 51.1	Provision of quality Case Management and PSS services in Women and Girls only Safe Spaces	UNFPA, HELP, IEDA
Activity 51.2	Develop and update referral pathways at the circle level and ensure printing and dissemination to stakeholders in the project implementation area	UNFPA
Activity 51.3	Raise awareness about available multi-sector services and how to access them, targeting specific groups including women with disabilities, women migrants, and adolescent girls	HELP, IEDA, WILDAF
Activity 51.4	Conduct outreach for community mobilization	HELP, IEDA, WILDAF
Activity 51.5	Provision of remote service delivery (e.g. remote referral, safety planning, remote PFA, and remote case management where appropriate).	UNFPA, HELP, IEDA
Activity 51.6	Set up and operationalize community accountability (complaints and feedback) mechanisms in the 4 project intervention regions to improve quality of services	UNFPA, HELP, IEDA

Output 52	Women access gender sensitive livelihoods programmes as part of a multisectoral response to GBV			
Was the planned output changed through a reprogramming after the application stage?			Yes ☐	No ☒
Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 52.1	# of women and girls (disaggregated by age) who accessed livelihood support services	500	12,354	Quarterly Progress Reports
Explanation of output and indicators variance:		This activity did not only target the individual Income Generating Activities which have targeted GBV survivors at the One Stop Center level, but also the group IGAs which took place in the women;s centers.		

Activities	**Description**	**Implemented by**
Activity 52.1	Provision of gender sensitive livelihoods programmes / economic support, including gender livelihoods and market analyses, and vocational training, as part of a multisectoral response to enhance resilience, mitigate GBV risk and ensure immediate needs are met.	UNFPA, HELP, IEDA

Output 53	GBV risk mitigation measures contribute to positive changes in reported perceptions of safety and risks			
Was the planned output changed through a reprogramming after the application stage?			Yes ☐	No ☒
Sector/cluster	Health			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 1.1	GBV awareness and dignity kits distribution for IDP women and girls	5,000	7,576	Field reports, PDM reports
Explanation of output and indicators variance:		Indicator 53.1: There has been a lot of population movement which has led to an increase in the number of IDPs.subsequently, more people were reached with Safety Audit and GBV Assessment activities.		

Activities	**Description**	**Implemented by**
Activity 53.1	Participatory GBV risk assessment engaging local women's organizations and adolescent girls in the emergency context.	UNFPA, HELP, IEDA

Activity 53.2	Mainstream GBV risk mitigation and survivor support across key humanitarian clusters and sectors, in line with the IASC GBV Guidelines.	UNFPA
Activity 53.3	Distribute of dignity kits tailored to the local contexts including information dissemination about GBV risks, risk mitigation strategies and available GBV services promoting safety and dignity.	UNFPA, HELP, IEDA

Output 54	Safe and ethical information management systems for GBV incident monitoring and case management are established and/or supported through inter-agency mechanisms.

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection-GBV			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 1.1	Coordination meetings on GBV IMS	40	40	Attendance sheet and Minutes of Meeting
Explanation of output and indicators variance:		N/A		

Activities	**Description**	**Implemented by**
Activity 54.1	GBVIMS is supported and expanded to include new actors and new emergencies, resulting in improved data management practices and evidence-informed programming and advocacy.	GBV Sub-sector, UNFPA
Activity 54.2	GBVIMS user organizations safely share and analyze GBV incident data for programming and advocacy.	GBV Sub-sector, UNFPA

Output 55	Security and Justice actors are supported to integrate a survivor-centered approach in their responses to GBV survivors including safe and ethical referrals

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection-GBV			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**

Indicator 1.1	Capacity building sessions for authorities and civil society	55	55	Refresher Training Report
Explanation of output and indicators variance:		N/A		

Activities	**Description**	**Implemented by**
Activity 55.1	Provide orientation sessions on implementation of new national protocols for holistic care for survivors with justice and security actors	UNFPA

Output 56	Increased capacity of local women's organization(s) to implement GBV prevention and response programs.

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 1.1	Capacity building sessions for WLOs	35	35	Refresher Training Reports
Explanation of output and indicators variance:		N/A		

Activities	**Description**	**Implemented by**
Activity 56.1	Refreshers and technical support provided to strengthen institutional capacity of local women's organization(s) to implement GBV specialized programs	UNFPA

Output 57	Participation of Women's Rights and women led organization in key humanitarian structures is increased.

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 57.1	# of WLOs/WROs targeted who participate in relevant fora (Expanded HCT meetings,	20	35	Quarterly Progress Reports

	GBV sub-clusters,) captured at a quarterly basis.			
Explanation of output and indicators variance:		More WLOs/WROs were identified and integrated to the GBV Sub-Sector		

Activities	**Description**	**Implemented by**
Activity 57.1	Advocate for and support WLOs/WRO to become active members of the humanitarian infrastructure, such as the Protection Cluster, AoRs, pooled fund steering groups, revision group of HPCs and participation in expanded HCTs.	UNFPA

Output 58	Targeted people, through programme interventions, report changes in perceptions and attitudes towards social norms and practices that perpetuate gender-based violence and gender inequalities.(OUTCOME -COMMON 1)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 58.1	Percentage of women, men, girls and boys who report that they disagree or strongly disagree with locally relevant harmful social norms (e.g., victim-blaming attitudes, discriminatory attitudes towards survivors). (INDICATOR – COMMON 1)	20% (increase from the baseline)	20%	Myanmar Joint UNFPA/UN Women endline survey
Explanation of output and indicators variance:		N/A		

Activities	**Description**	**Implemented by**
Activity 1.1	Awareness raising	N/A

Output 59	WLOs and WROs are empowered to increasingly engage in decision making and leadership in GBV response, mitigation and prevention. (OUTCOME – COMMON 2)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Health

Indicators	Description	Target	Achieved	Source of verification
Indicator 1.1	Percentage of WLO/WROs staff trained in engaging in leadership and decision-making	95%	95%	Refresher Training Feedback Survey
Explanation of output and indicators variance:		N/A		

Activities	Description	Implemented by
Activity 1.1	Refresher trainings with WLO/WROs staff	N/A

Output 60	Quality multisectoral GBV response services are accessible to women and girls and delivered through a survivor centred approach. (OUTCOME – SPECIFIC)
Was the planned output changed through a reprogramming after the application stage?	Yes ☐ No ☒
Sector/cluster	GBV

Indicators	Description	Target	Achieved	Source of verification
Indicator 1.1	Percentage of women, men, girls and boys who report that they disagree or strongly disagree with locally relevant harmful social norms (e.g., victim-blaming attitudes, discriminatory attitudes towards survivors). (INDICATOR – COMMON 1)	20% increase from baseline	20%	Client Exit Form
Explanation of output and indicators variance:		N/A§		

Activities	Description	Implemented by
Activity 1.1	Awareness raising	N/A

Output 61	Community members (women, men, girls and boys) have increased knowledge, access to information and understanding of key issues related to GBV prevention and positive gender norms.
Was the planned output changed through a reprogramming after the application stage?	Yes ☐ No ☒
Sector/cluster	Protection - Gender-Based Violence

Indicators	Description	Target	Achieved	Source of verification
Indicator 1.1	Percentage of community members who understand key GBV issues	95%	95%	Monitoring reports Trainings attendance sheets
Explanation of output and indicators variance:		N/A		

Activities	Description	Implemented by
Activity 61.1	Conduct structured community mobilization in Northern Rakhine	UNFPA, CFSI, Raising Voices
Activity 61.2	Raise awareness about available multi-sector services, and how to access them, targeting specific vulnerable groups, including women with disabilities, and adolescent girls	IRC, FRC, Metta, CFSI,COLDA,CCERR

Output 62	Lifesaving integrated GBV/SRH services are available and accessible to women and girls.

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence

Indicators	Description	Target	Achieved	Source of verification
Indicator 1.1	Percentage of directly targeted women and girls with access to integrated GBV/SRH services	100%	100%	Monitoring reports
Explanation of output and indicators variance:		N/A		

Activities	Description	Implemented by
Activity 62.1	Orient health providers on the Minimum Emergency Response Package (MISP) and national GBV Guidelines for the Health Sector (including CMR)	UNFPA
Activity 62.2	Provision of SRHR, including appropriate care and referral for GBV survivors, services through Mobile SRHR and Delivery Unit	MRCS

Activity 62.3	Procurement and distribution of Inter-agency ERH Kits (post-rape and clean delivery kits)	UNFPA
Activity 62.4	Livelihood support activities through sanitary pad production	Acted

Output 63	Increased capacity of local women's organization(s) to implement GBV prevention and response programmes.

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 1.1	Percentage of local WLO staff trained in institutional capacity to implement GBV specialized programs	95%	95%	Refresher training reports
Explanation of output and indicators variance:		N/A		

Activities	**Description**	**Implemented by**
Activity 63.1	Refreshers provided to strengthen institutional capacity of local women's organization(s) to implement GBV specialized programs	UNFPA

Output 64	Women and girls access quality PSS (including case management services).

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 64.1	# of women and girls (disaggregated by age) who accessed Psychosocial interventions	7,327	13,817	UNFPA Access Database
Explanation of output and indicators variance:		PSS activities in 2021 were significantly impacted by COVID-19 different waves as well as insecurity after the military coup, resulting in difficulty to conduct large scale PSS activities at community level. However, IPs adapted		

	implementation modalities, such as conducting individual session, house to house visit, small-scale group session, virtual sessions, etc. In 2022, when some COVID-19 restrictions were lifted, partners were able to organize community focused PSS activities at larger scales at WGCs, and community level. As a result, although this target was revised during programming to 5000, it was possible to overachieve.

Activities	**Description**	**Implemented by**
Activity 64.1	Provision of quality GBV case management and PSS services	CFSI, METTA, FRC, IRC

Output 65	CVA is integrated as a survivor-centered GBV response service modality.

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence

Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 65.1	# of women and older girls (disaggregated by age) who receive cash assistance to meet their urgent needs, avoid risky coping mechanisms and to contribute to GBV response/recovery for GBV survivors.	195	393	UNFPA Access Database and Financial Documents

Explanation of output and indicators variance:	Cash assistance to survivors were based on the actual needs of the survivors even though we set specific target. Furthermore, UNFPA strengtherned CVA in GBV programming since 2022.

Activities	**Description**	**Implemented by**
Activity 65.1	Integration of Cash and Voucher assistance into GBV response programming	CFSI, METTA, FRC, IRC

Output 66	GBV risk mitigation measures contribute to positive changes in reported perceptions of safety and risks.

Was the planned output changed through a reprogramming after the application stage? Yes ☒ No ☐

Sector/cluster	Protection - Gender-Based Violence

Indicators	Description	Target	Achieved	Source of verification
Indicator 66.1	# of women and girls participating in GBV risk mitigation interventions (including safety audits, GBV risk assessments and DK interventions)	3,050	2,255	Distribution Plan, Distribution Report and Distribution List
Explanation of output and indicators variance:		Although this target was reprogrammed to 1,757, the target was over-achieved for the following reason 1- UNFPA is receiving higher demand for dignity kits due to increased number of internally displaced people in targeted locations, 2- The unit price of the dignity kits was not as high as anticipated due to the fluctuating market price.		

Activities	Description	Implemented by
Activity 66.1	Dignity kit procurement and distribution including kits customized for adolescents and elderly women delivered with information on protection concerns and available services	UNFPA, IRC and other distribution partners

Output 67	Targeted people, through programme interventions, report changes in perceptions and attitudes towards social norms and practices that perpetuate gender-based violence and gender inequalities. (OUTCOME – COMMON 1)
Was the planned output changed through a reprogramming after the application stage?	Yes ☐ No ☒
Sector/cluster	Protection - Gender-Based Violence

Indicators	Description	Target	Achieved	Source of verification
Indicator 67.1	Percentage of women, men, girls and boys who report that they disagree or strongly disagree with locally relevant harmful social norms (e.g., victim-blaming attitudes, discriminatory attitudes towards survivors). (INDICATOR – COMMON 1)	20% (increase from the baseline)	20%	Palestine Joint UNFPA/UN Women endline survey
Explanation of output and indicators variance:		N/A		

Activities	Description	Implemented by
Activity 1.1	Training and survey conducted with community members on harmful social norms	N/A

Output 68	WLOs and WROs are empowered to increasingly engage in decision making and leadership in GBV response, mitigation and prevention. (OUTCOME – COMMON 2)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 68.1	Percentage of targeted WLOs/WROs that report increased capacity to implement GBV risk mitigation, prevention and response interventions. (INDICATOR – COMMON 2.1)	80%	86%	WLOs Baseline and Endline Survey
Indicator 68.2	Percentage of targeted WLOs/WROs that report increased involvement/participation in humanitarian decision-making. (INDICATOR -COMMON 2.2)	20% (increase from the baseline)	21%	WLOs Baseline and Endline Survey
Explanation of output and indicators variance:		N/A		

Activities	Description	Implemented by
Activity 1.1	Capacity building conducted with WLO/WROs staff on leadership and coordination	N/A

Output 69	Quality multisectoral GBV response services are accessible to women and girls and delivered through a survivor centred approach. (OUTCOME – SPECIIFC)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**

Indicator 69.1	Percentage of women and girls who accessed focused support services indicating satisfaction with services (disaggregated by age and service accessed). (INDICATOR – SPECIFIC 1)	80%	97%	Beneficiary satisfaction Survey
Indicator 69.2	Percentage of targeted people who report that the focused support services they accessed were delivered in accordance with their needs and preferences (disaggregated by type of support, gender and age). (INDICATOR – SPECIFIC 2)	80%	93%	Beneficiary satisfaction Survey
Explanation of output and indicators variance:		N/A		

Activities	**Description**	**Implemented by**
Activity 1.1	Service provision	N/A

Output 70	Lifesaving integrated GBV/SRH services are available and accessible to women and girls

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 70.1	# service delivery points where women and girls can access multiple integrated services that meet their needs	9	10	IP's and UNFPA progress reports
Indicator 70.2	# of women and girls (disaggregated by age and disability) who accessed focused support services indicating satisfaction with services	5,000	3,387	Beneficiary satisfaction Survey
Indicator 70.3	# of health staff trained to provide quality CMR services	100	72	UNFPA Quarterly Progress Reports, Trainers' and Activity Reports

Explanation of output and indicators variance:	Indicator 70.2: The usage of the survey was started in Q3 2021 after 7 months of starting the project due to challenges in the IPs capacity building on tracking this indicator and the use of new tools. However, the planned number of beneficiaries was reached and surveyed people expressed high satisfaction. Indicator 70.3: different challenges have led to not reaching the planned target: 1- The sensitivity of the topic where MoH is still the only lead for this service in Palestine. 2- The lack of expert trainers for this topic (medical and technical background linked to GBV). 3- The difficulty of mobility between Gaza Strip and West Banks, where nominated trainees from Gaza Strip needed permits to cross to West Bank and most of their permits were rejected.

Activities	**Description**	**Implemented by**
Activity 70.1	Safe spaces are made accessible for persons with disabilities and they have an accessible GBV service directory with Braille language that will be updated based on the updated emergency service directory.	ACHA, CFTA
Activity 70.2	Provide integrated protection services and reintegration support to women GBV survivors in 2 shelters; one in Gaza (Beit Al-Aman Centre) and one shelter in the West Bank (Nablus).	ACHA, FDS
Activity 70.3	Conduct refresher training for medical staff at hospitals, local CBOs in Jordan Valley and Qalqelia, Wisal CBOs network in Gaza and other service providers, on detection and referral for GBV survivors, including women and girls with disabilities.	CFTA, PWWSD, PFPPA
Activity 70.4	Provide technical and financial support to health and social service providers in the West Bank safe spaces and mobile clinics in providing the Minimum Initial Service Package (MISP). MISP training in Gaza is covered under other funding.	MoH
Activity 70.5	Provide technical support for integration of accessible youth friendly GBV/SRH services and GBV prevention and response, with a focus on referral, into primary health care mobile clinics in the West Bank.	PMRS, PFPPA
Activity 70.6	Strengthen capacity of service providers in CBOs and safe spaces on PSEA by conducting PSEA refresher training and strengthen complaint mechanisms and monitoring capacities.	UNFPA, CFTA
Activity 70.7	Conduct awareness raising on PSEA among communities through media campaigns, animation videos, social media and publications.	UNFPA, CFTA

Activity 70.8	Support 15 CBOs working in Gaza Strip and Qalqilya,, Jordan Valley and Jerusalem to provide multi sectoral remote quality services.to communicate, monitor cases and document progress.	ACHA, PWWSD
Activity 70.9	Conduct refresher training for health care providers on Clinical Management of Rape (CMR) Intimate partner violence (IPV). This will be coordinated with the health cluster.	UNFPA
Activity 70.10	Conduct refresher trainings for GBV PSS actors on IPV identification , first line response, safety planning and referrals	ACHA, CFTA, PWWSD

Output 71	Women and girls access quality PSS (including case management services).

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 71.1	# of women, girls, men and boys (disaggregated by age, and disability) who accessed PSS support services	15,000	31,022	IPs quarterly progress reports and Online IPs Activity Tracker
Explanation of output and indicators variance:		The project target was planned to be achieved from the direct IPs activities, including activities in safe spaces. The target overachievement was due the contribution of the activities implemented by the additional 14 WLOs that were supported through CERF grants as part of the capacity development support intervention, in addition to the variety of PSS service provision that increased the outreach for women, girls, men and boys (in-person, hot-lines, schools, safe spaces, open days, and others). Noting that the demand for PSS services was high during the Project's Life Cycle due to the impact of COVID-19 pandemic, and the humanitarian crisis in Gaza.		

Activities	**Description**	**Implemented by**
Activity 71.1	Provide, in coordination with UN Women, MHPSS, case management and legal consultation services to 10,000 women and girls at risk of GBV, women and girls with disabilities (WGWDs), women and girls GBV survivors in Nablus and Beit AL Aman shelter, elderly women and women impacted by quarantine through helplines, mobile communication, WhatsApp and other tools in addition to Safe spaces visits	ACHA, PMRS, PFPPA, CFTA, PWWSD

Activity 71.2	Provide 150 GBV survivors, in coordination with UN Women, with chronic illness with psychosocial well-being, and needed therapy and follow up.	ACHA, PMRS, PFPPA, CFTA, PWWSD
Activity 71.3	Provide PSS, including case management services for 700 women and girls with disability (WGWD) survivors leveraging on the coordination between I implementing partners and the GBV sub-cluster for targeting and responding to WGWDs needs.	ACHA, PMRS, PFPPA, CFTA, PWWSD
Activity 71.4	Conduct 400 awareness-raising sessions (accessible for people living with disability) on GBV and available GBV services among 6,000 women and girls at high risk of GBV in coordination with the community based organizations on how to access services and referral mechanisms through social media and protection networks in area C, Jerusalem Gaza Strip.	ACHA, PMRS, PFPPA, CFTA, PWWSD, sharek, Burj Al-laqlaq, SYFS
Activity 71.5	Produce a series of videos to be broadcasted in the social media related to the legal and psychosocial and mental health of GBV survivors.	ACHA, PMRS, PWWSD
Activity 71.6	Disseminate SMS mobile messages that contain tips that support GBV survivors and women at risk and contribute to their wellbeing. The messages will be developed and approved in the GBV SC and the community networks such as Hemaya in Jerusalem and Wisal network in Gaza.	ACHA, CFTA, PMRS, PWWSD
Activity 71.7	Enhance the knowledge and awareness of vulnerable groups of women and girls, in the affected communities on GBV by scaling up the existing GBV and youth mobile applications to include more features such as; online counselling, connect to helpline.	PMRS
Activity 71.8	Conduct a refresher training of youth peer educators (YPEER Palestine) to provide PSS through nontraditional methods (theatre, drama, music, arts)	PMRS, SYFS
Activity 71.9	Provision of physical and virtual sensitive group PSS interventions to young women and men in university and non-governmental clinical sites (fixed and mobile) by young educators.	PMRS
Activity 71.10	Delivery of critical community awareness and education sessions (physically and virtually) on mental health, stigma, negative/positive coping mechanism and misconceptions around depression, suicide, violence, SRHR, GBV.	PMRS, SYFS

Activity 71.11	Delivery of tailored community-based refresher training to CBOs and youth groups from universities on adolescent and youth mental health.	PMRS, SYFS

Output 72	GBV risk mitigation measures contribute to positive changes in reported perceptions of safety and risks.

Was the planned output changed through a reprogramming after the application stage? Yes ☒ No ☐

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 72.1	# of non-GBV specialists trained on PFA and referral, as a refresher	30	41	IPs quarterly progress reports and Online IPs Activity Tracker
Indicator 72.2	# of women and girls participating in GBV risk mitigation interventions (including safety audits, GBV risk assessments and DK interventions)	500	517	UNFPA Activity Report and GBV Risk Assessment Report
Explanation of output and indicators variance:		Indicator 72.1: more participants were included due to the high interest, particularly with the updated national referral pathway. Indicator 72.2: the consultant who organized the assessment opted to get a larger sample to ensure better results. Activity 72.2: The survey was planned to be organized for all countries involved in this project by both UNFPA and UN Women's headquarters, therefore this activity was reprogrammed and not implemented at the Country Office level.		

Activities	**Description**	**Implemented by**
Activity 72.1	Conduct refresher training for 30 non-GBV specialist organizations on GBV PFA and referral.	PWWSD, ACHA
Activity 72.2	Conduct joint pre and post behaviour change assessment with UN Women on the impact of interventions on women and other beneficiaries.	N/A

Output 73	Safe and ethical information management systems for GBV incident monitoring and case management are established and/or supported through inter-agency mechanisms.

Was the planned output changed through a reprogramming after the application stage?	Yes ☒	No ☐

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 73.1	# Non-governmental GBV PSS service provider organizations/entities reporting under the current GBVIMS to support their service provision to install and roll out GBV IMS+	30	13	UNFPA CO Quarterly Progress Reprots
Explanation of output and indicators variance:	This indicator was reprogrammed. After conducting two national workshops with 40 representatives from 25 organizations on the GBVIMS+ roll-out, only 13 organizations were interested and committed to using the system. UNFPA started to assess the needs to rollout GBVIMS+ 2020-2021, but the government refused to use any data platform except for the "Observatory" - (governmental initiative to establish an online platform to consolidate the data from WLOs service providers) and froze the process. Additionally, there was a challenge to replace the OCHA system to collect the data through GBVIMS and 5Ws, and till now OCHA didn't finalize the debate to adopt the GBVIMS+.			

Activities	Description	Implemented by
Activity 73.1	Roll-out GBVIMS+ to improve GBV data collection and information management and sharing practices as well as ensure interventions design are informed by GBV trends.	UNFPA
Activity 73.2	Conduct refresher training sessions (2 in the West Bank and 2 in Gaza) for all organizations reporting on the GBV IMS.	UNFPA

Output 74	CVA is integrated as a survivor-centered GBV response service modality.

Was the planned output changed through a reprogramming after the application stage?	Yes ☐	No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 74.1	# of women and older girls who receive cash assistance to meet their urgent needs and avoid risky coping mechanisms.	2000	2000	UNFPA CVA Database and UNFPA CO Quarterly Monitoring Reports

Indicator 74.2	# of risk analysis conducted through the GBV Coordination group and the Palestine Cash Working Group on ensuring cash or voucher interventions do not exacerbate GBV.	1 joint risk analysis	1	GBV Risk Assessment Report and UNFPA CO Quarterly Monitoring Reports
Indicator 74.3	# of national joint action plans developed between the inter-agency Cash Working Group and GBV coordination group highlighting key joint activities to mitigate and prevent GBV risks in cash assistance to avoid doing harm or exacerbating GBV for beneficiaries of CVA is in place by year 2.	1 joint action plan	1	National Joint Action Plan and UNFPA CO Quarterly Monitoring Reports
Explanation of output and indicators variance:		N/A		

Activities	**Description**	**Implemented by**
Activity 74.1	Integrate Cash and Voucher assistance into GBV multisectoral response programming for purchase of basic needs items to avoid potentially harmful or life-threatening risky coping mechanisms and/or other urgent financial needs as identified through case management. UNFPA will immediately top-up e-vouchers for existing caseload in early 2021, followed by in-depth consultations with partners and women and girls, GBV risk analysis and targeting for a new caseload in 2022.	UNFPA
Activity 74.2	UNFPA GBV Coordination group works with Cash Working Group(s) in Gaza and/or West Bank to develop a joint GBV Risk Analysis for CVA and a joint action plan.	UNFPA

Output 75	Girls have access to adolescent-specialized integrated SRH/GBV services

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence

Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 75.1	# of safe spaces/health facilities implemented. SRH/GBV/life skills interactive learning and sharing sessions with adolescent girls	3	2	IPs Quarterly Progress Reports, Online IPs Activity Tracker, and

				CERF UNFPA CO M&E Database
Explanation of output and indicators variance:		N/A		

Activities	**Description**	**Implemented by**
Activity 75.1	Scale up integration of youth friendly health services in the West Bank, with a focus on GBV/SRH. This activity has funding from another donor in Gaza, the CERF will be used to fund the West Bank.	PMRS, Sharek

Output 76	Women access gender sensitive livelihoods programmes as part of a multisectoral response to GBV
Was the planned output changed through a reprogramming after the application stage?	Yes ☐ No ☒
Sector/cluster	Protection - Gender-Based Violence

Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 76.1	# of women led small businesses that received support and were expanded/developed.	200	200	IPs Quarterly Progress Reports, Online IPs Activity Tracker and CERF UNFPA CO M&E Database
Explanation of output and indicators variance:		N/A		

Activities	**Description**	**Implemented by**
Activity 76.1	Provide support and guidance for 200 female GBV survivors with small businesses (focus on non-traditional women's businesses) that were affected by the COVID-19 emergency situation through coaching and small grants. This represents continuing support to women who previously received UNFPA projects and in cooperation with UN Women economic empowerment program.	CFTA, ACHA, PFPPA, PMRS, PWWSD

Output 77	Increased capacity of local women's organization(s) to implement GBV prevention and response programmes
Was the planned output changed through a reprogramming after the application stage?	Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 77.1	# of WLOs that have received technical or operational capacity development support	10	14	IPs Quarterly Progress Reports, Online IPs Activity Tracker and CERF UNFPA CO M&E Database
Explanation of output and indicators variance:		Additional WLOs were supported using the resources saved from reprogrammed activities.		

Activities	Description	Implemented by
Activity 77.1	Build the organizational capacity of WLOs in responding to GBV needs in aspects related to financial management, proposal writing, contingency planning and engagement with the humanitarian structure.	CFTA, PMRS, PFPPA, PWWSD

Output 78	Targeted people, through programme interventions, report changes in perceptions and attitudes towards social norms and practices that perpetuate gender-based violence and gender inequalities. (OUTCOME – COMMON 1)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 78.1	Percentage of women, men, girls and boys who report that they disagree or strongly disagree with locally relevant harmful social norms (e.g., victim-blaming attitudes, discriminatory attitudes towards survivors). (INDICATOR – COMMON 1)	20% (increase from the baseline)	20%	Somalia Joint UNFPA/UN Women endline survey
Explanation of output and indicators variance:		N/A		

Activities	Description	Implemented by
Activity 1.1	Community awareness raising on harmful social norms	N/A

Output 79	WLOs and WROs are empowered to increasingly engage in decision making and leadership in GBV response, mitigation and prevention. (OUTCOME -COMMON 2)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 79.1	Percentage of targeted WLOs/WROs that report increased capacity to implement GBV risk mitigation, prevention and response interventions. (INDICATOR – COMMON 2.1)	80%	87%	CERF Sheet – Capacity Development
Indicator 79.2	Percentage of targeted WLOs/WROs that report increased involvement/participation in humanitarian decision-making. (INDICATOR – COMMON 2.2)	20% (increase from the baseline)	66%	CERF Sheet – Capacity Development
Explanation of output and indicators variance:		N/A		

Activities	**Description**	**Implemented by**
Activity 1.1	Capacity building of WLO/WROs staff on leadership and coordination Capacity building of WLO/WROs staff on GBV program implementation	N/A

Output 80	Quality multisectoral GBV response services are accessible to women and girls and delivered through a survivor centred approach. (OUTCOME – SPECIFIC)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 80.1	Percentage of women and girls who accessed focused support services indicating satisfaction with services (disaggregated by age and service	80%	84%	IPs Progress Reports

	accessed). (INDICATOR – SPECIFIC 1)			
Indicator 80.2	Percentage of targeted people who report that the focused support services they accessed were delivered in accordance with their needs and preferences (disaggregated by type of support, gender and age). (INDICATOR – SPECIFIC 2)	80%	85%	IPs Progress Reports
Explanation of output and indicators variance:		N/A		

Activities	**Description**	**Implemented by**
Activity 1.1	GBV service provision Satisfaction survey implementation	N/A

Output 81	Lifesaving integrated GBV/SRH services are available and accessible to women and girls.

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence

Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 81.1	# service delivery points where women and girls can access multiple integrated services that meet their needs	10	15	Facility Mapping Reports
Explanation of output and indicators variance:		The project initially planned to support 15 Service Delivery Points (5 WGSS, 5 One-Stop Centres and 5 mobile teams). However, the mobile teams were mistakenly not accounted for in the project target.		

Activities	**Description**	**Implemented by**
Activity 81.1	Support 5 existing One-stop centres to provide CMR, PSS including case management to facilitate referrals for legal aid support and safe shelter.	UNFPA
Activity 81.2	Orient health providers on the Minimum Initial Service Package (MISP) including the Guidance on CMR and	UNFPA

	IPV, for RH in Crisis including the Clinical Management of Rape (CMR) service	
Activity 81.3	Supply Interagency Emergency Sexual and Reproductive Health (IARH) Kits including post-rape treatment kits (Kit number 3) that includes emergency contraception (EC) to prevent unintended pregnancy and Post –Exposure Prophylaxis (PEP) medication to prevent HIV infection.	UNFPA
Activity 81.4	Deploy integrated mobile clinics to provide integrated GBV services – treatment for physical injuries; psycho-social first aid, information on available referrals, initial intake of GBV survivors and referral for PSS case management as needed	SBACO, READO, OSPAD, SLNMA, TAAKULO
Activity 81.5	.Implement of the Clinical Management of Rape (CMR) protocols with the new Intimate Partner Violence (IPV) component for the integration of GBV and SRH services in delivering survivor-centered care	SBACO, READO, OSPAD, SLNMA, TAAKULO
Activity 81.6	Put in place confidential and safe spaces within the health facilities to provide lifesaving CMR services.	SBACO, READO, OSPAD, SLNMA, TAAKULO

Output 82	Women and girls access quality PSS (including case management services).

Was the planned output changed through a reprogramming after the application stage? Yes ☒ No ☐

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 82.1	# of women and girls (disaggregated by age) who accessed Psychosocial interventions (including CM and individual and group PSS at the WGSS)	2,500	25,768	IPs Progress Reports
Explanation of output and indicators variance:		The project target should have been 20,000. It was indicated in the reprogramming process that the target was mistakenly indicated as 2,500 instead of the planned value of 20,000.		

Activities	**Description**	**Implemented by**
Activity 82.1	Provide individual psychosocial case management services including material support.	SBACO, READO, OSPAD, SLNMA, TAAKULO

Activity 82.2	Raise awareness about available multi-sector services and how to access them, targeting specific groups including women with disabilities, women migrants, adolescent girls	SBACO, READO, OSPAD, SLNMA, TAAKULO
Activity 82.3	5 Women and Girls only Safe Spaces to provide PFA,, recreational and life skills, GBV information and referrals to other services as required.	SBACO, READO, OSPAD, SLNMA, TAAKULO
Activity 82.4	Develop, update, and disseminate referral pathways for child and adolescent survivors and persons with disabilities	UNFPA

Output 83	GBV risk mitigation measures contribute to positive changes in reported perceptions of safety and risks.

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 83.1	# of women and girls participating in GBV risk mitigation interventions (including safety audits, GBV risk assessments and DK interventions)	25,000	25,802	IPs Quarterly Reports
Indicator 83.2	# women and girls who report that the MHM supplies and information received were delivered in accordance with their needs and preferences (disaggregated by age)	11000	12,278	Distribution Reports
Explanation of output and indicators variance:		N/A		

Activities	**Description**	**Implemented by**
Activity 83.1	Mainstream GBV risk mitigation and survivor support across key humanitarian clusters and sectors, in line with the IASC GBV Guidelines.	UNFPA
Activity 83.2	Distribute risk mitigation materials (Dignity Kits, reusable sanitary pads, solar lamps and improved stoves, latrines that lock from the inside, etc.) tailored to the local contexts accompanied by information on GBV services to reduce GBV risk, and promote safety and dignity.	SBACO, READO, OSPAD, SLNMA, TAAKULO

Activity 83.3	Conduct participatory GBV risk assessment engaging local women's organizations and adolescent girls in the emergency context.	N/A.
Activity 83.4	Provide protected housing using existing GBV shelters for GBV survivors.	SBACO, READO, OSPAD, SLNMA, TAAKULO

Output 84	CVA is integrated as a survivor-centered GBV response service modality.

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 84.1	# of women and girls GBV survivors who received cash and voucher assistance as part of their case management to contribute to GBV response/recovery.	400	400	CVA Reports
Explanation of output and indicators variance:	N/A			

Activities	**Description**	**Implemented by**
Activity 84.1	Identify, assess and select service providers for Cash and Voucher assistance.	UNFPA
Activity 84.2	Organize orientation workshops for service providers on specific considerations when providing CVA and conducting GBV risk assessment for CVA.	UNFPA
Activity 84.3	Integrate cash and voucher assistance into GBV multi sectoral response programming, for transport vouchers to/from health or shelter services; access to urgent medical or legal care that incurs costs; and purchase of basic needs items and other needs as identified via case management.	UNFPA

Output 85	Increased capacity of local women's organization(s) to implement GBV prevention and response programmes.

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 85.1	# of WLOs that have received technical or operational capacity development support	10	9	CERF Capacity Development Support Reports
Explanation of output and indicators variance:		N/A		

Activities	Description	Implemented by
Activity 85.1	.Refreshers and technical support provided to strengthen institutional capacity of local women's organization(s) to implement GBV specialized programs	UNFPA
Activity 85.2	Provide ongoing mentoring and coaching to develop local frontline responders' core, professional and behavioral competencies necessary for effective GBV prevention and response programming	UNFPA
Activity 85.3	Identify gaps and support WLO/WROs to meet criteria for pooled funding to enable sustainability for providing frontline response.	UNFPA

Output 86	Targeted people, through programme interventions, report changes in perceptions and attitudes towards social norms and practices that perpetuate gender-based violence and gender inequalities. (OUTCOME – COMMON 1)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 86.1	Percentage of women, men, girls and boys who report that they disagree or strongly disagree with locally relevant harmful social norms (e.g., victim-blaming attitudes, discriminatory attitudes towards survivors). (INDICATOR – COMMON 1)	20% (increase from the baseline)	20%	Sudan Joint UNFPA/UN Women endline survey
Explanation of output and indicators variance:		N/A		

Activities	Description	Implemented by
Activity 1.1	Community dialogues and awareness raising on harmful effects of GBV/domestic violence	N/A

Output 87	WLOs and WROs are empowered to increasingly engage in decision making and leadership in GBV response, mitigation and prevention. (OUTCOME – COMMON 2)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 87.1	Percentage of targeted WLOs/WROs that report increased capacity to implement GBV risk mitigation, prevention and response interventions. (INDICATOR – COMMON 2.1)	80%	100%	Capacity Assessment Survey
Indicator 87.2	Percentage of targeted WLOs/WROs that report increased involvement/participation in humanitarian decision-making.(INDICATOR – COMMON 2.2)	20% (increase from the baseline)	100%	Capacity Assessment Survey
Explanation of output and indicators variance:		More staff participated than anticipated – in some cases, all WLO/WRO programme staff		

Activities	Description	Implemented by
Activity 1.1	Capacity building of WLO/WROs staff on leadership and coordination Capacity building of WLO/WROs staff on GBV program implementation	N/A

Output 88	Quality multisectoral GBV response services are accessible to women and girls and delivered through a survivor centred approach. (OUTCOME – SPECIFIC)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 88.1	Percentage of women and girls who accessed focused support services indicating satisfaction with services (disaggregated by age and service accessed). (INDICATOR – SPECIFIC 1)	80%	90%	2022 Impact Assessment
Indicator 88.2	Percentage of targeted people who report that the focused support services they accessed were delivered in accordance with their needs and preferences (disaggregated by type of support, gender and age). (INDICATOR – SPECIFIC 2)	80%	90%	2022 Impact Assessment
Explanation of output and indicators variance:		N/A		

Activities	Description	Implemented by
Activity 1.1	GBV service provision Satisfaction survey implementation	N/A

Output 89	Lifesaving integrated GBV/SRH services are available and accessible to women and girls

Was the planned output changed through a reprogramming after the application stage? Yes ☒ No ☐

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 89.1	# service delivery points where women and girls can access multiple integrated services that meet their needs	16	13	Quarterly Progress Report
Explanation of output and indicators variance:		Target was not met due to access issues in East Jebel Maraa, and WGSS in West Darfur because of the conflict in the surrounding locations. High Currency inflation also affected the possibility to support all planned WGSS.		

Activities	Description	Implemented by

Activity 89.1	Orient and provide refresher trainings to 500 health providers on Clinical Management of Rape (CMR) in 4 target locations	Global Aid Hand, Sudanese Family Planning Association (SFPA), Childhood Development Foundation (CDF)
Activity 89.2	Print updated CMR/IPV protocols	UNFPA
Activity 89.3	Supply Interagency Emergency Sexual and Reproductive Health (IARH) Kits including post-rape treatment kits (Kit number 3+ 9).	UNFPA

Output 90	Women and girls access quality PSS (including case management services).

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence

Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 90.1	# of women and girls (disaggregated by age) who accessed Psychosocial interventions (including CM and individual and group PSS at the WGSS)	6,000	6,000	Quarterly reports and activity reports
Indicator 90.2	# of women, girls, men and boys (disaggregated by age) who received information about GBV risks, services available and how to access them	13,500	30,536	Quarterly reports and attendance sheets

Explanation of output and indicators variance:	Indicator 90.2: Mobile theatre and community awareness raising sessions in public locations received a high number of participants/attendees.

Activities	**Description**	**Implemented by**
Activity 90.1	Support Women and Girls centers that provide quality services, information and activities (including vocational training) that promote healing, well-being and resilience.	CAFA, Global Aid Hand, SFPA, CDF
Activity 90.2	Provide GBV case management and PSS by trained staff at localities level	CAFA, Global Aid Hand, SFPA, CDF
Activity 90.3	Service mapping and development updating and dissemination of referral pathways, for child and adolescent survivors and persons with disabilities.	CAFA, Global Aid Hand, SFPA, CDF

Activity 90.4	Raise awareness about available multi-sector services and how to access them, targeting specific groups including women with disabilities, women migrants, adolescent girls	CAFA, Global Aid Hand, SFPA, CDF

Output 91	GBV risk mitigation measures contribute to positive changes in reported perceptions of safety and risk.

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 91.1	# of women and girls participating in GBV risk mitigation interventions (including safety audits, GBV risk assessments and DK interventions)	12,000	15,000	Dignity Kits distribution sheet and Safety Audits Reports.
Explanation of output and indicators variance:		N/A		

Activities	**Description**	**Implemented by**
Activity 91.1	Conduct participatory GBV risk assessment engaging local women's organizations and adolescent girls in the emergency context.	Blue Nile sub-sector with the support of IP CAFA

Output 92	Women access gender sensitive livelihoods programmes as part of a multisectoral response to GBV

Was the planned output changed through a reprogramming after the application stage? Yes ☒ No ☐

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 92.1	# of women who accessed livelihoods support services	800	430	Quarterly Reports
Explanation of output and indicators variance:		The Target was reprogrammed to 300 as this activity moved from provided mere livelihood training to income generating activities training reaching less participants. Project evaluations, including one conducted by Islamic relief in BN state, concluded that income generating activities provide a more sustainable solution to poverty alleviation in rural communities, in addition to		

	Sudan's socioeconomic composition and trends, the country office believes that IGA will be of more benefit to the target communities.

Activities	Description	Implemented by
Activity 92.1	.Provision of gender sensitive livelihoods programmes / economic support, including vocational training, as part of a multisectoral response to enhance resilience, mitigate GBV risk and ensure immediate needs are met	CAFA, Global Aid Hand, CDF, SFPA

Output 93	Security and Justice actors are supported to integrate a survivor-centered approach in their responses to GBV survivors including medical legal interlinkages, safe and ethical referrals.

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence

Indicators	Description	Target	Achieved	Source of verification
Indicator 93.1	Number of judicial institutions and law enforcement actors (local police force, prosecutors and judges)supported to reduce barriers to women's access to justice	100	255	Workshop Records and Attendance Sheets

Explanation of output and indicators variance:	Due to interest in the refresher training, the number of participants per workshop was increased.

Activities	Description	Implemented by
Activity 93.1	Orientation sessions/ training of Judiciaries on survivor-centered approach in their responses to GBV survivors including safe and ethical referrals.	CAFA, Global Aid Hand, CDF, SFPA

Output 94	Increased capacity of local women's organization(s) to implement GBV prevention and response programmes.

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence

Indicators	Description	Target	Achieved	Source of verification

Indicator 94.1	# of WLOs that have received technical or operational capacity development support	4	5	Financial and Quarterly Reports
Explanation of output and indicators variance:		N/A		

Activities	**Description**	**Implemented by**
Activity 94.1	Refreshers and technical support provided to strengthen institutional capacity of local women's organization(s) to implement GBV specialized programmes.	CAFA, Global Aid Hand, CDF, SFPA
Activity 94.2	Refreshers and technical support provided to strengthen institutional capacity of local women's organization(s) to implement GBV specialized programs	CAFA, Global Aid Hand, CDF, SFPA
Activity 94.3	Provide ongoing mentoring and coaching to develop local frontline responders' core, professional and behavioral competencies necessary for effective GBV prevention and response programming	CAFA, Global Aid Hand, CDF, SFPA

Output 95	Targeted people, through programme interventions, report changes in perceptions and attitudes towards social norms and practices that perpetuate gender-based violence and gender inequalities. (OUTCOME – COMMON 1)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 95.1	Percentage of women, men, girls and boys who report that they disagree or strongly disagree with locally relevant harmful social norms (e.g., victim-blaming attitudes, discriminatory attitudes towards survivors). (INDICATOR – COMMON 1)	20% (increase from the baseline)	20%	Venezuela Joint UNFPA/UN Women endline survey
Explanation of output and indicators variance:		N/A		

Activities	**Description**	**Implemented by**
Activity 1.1	Community awareness raising on harmful social norms	N/A

Output 96	WLOs and WROs are empowered to increasingly engage in decision making and leadership in GBV response, mitigation and prevention. (OUTCOME – COMMON 2)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒				
Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 96.1	Percentage of targeted WLOs/WROs that report increased capacity to implement GBV risk mitigation, prevention and response interventions. (INDICATOR – COMMON 2.1)	80%	92%	Pre and post test
Indicator 96.2	Percentage of targeted WLOs/WROs that report increased involvement/participation in humanitarian decision-making.(INDICATOR – COMMON 2.2)	20% (increase from the baseline)	96%	Survey with WLOs
Explanation of output and indicators variance:		N/A		

Activities	**Description**	**Implemented by**
Activity 1.1	Capacity building of WLO/WROs staff on humanitarian leadership and coordination Capacity building of WLO/WROs staff on GBV program implementation	N/A

Output 97	Quality multisectoral GBV response services are accessible to women and girls and delivered through a survivor centred approach. (OUTCOME – SPECIFIC)

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒				
Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 97.1	Percentage of women and girls who accessed focused support services indicating satisfaction with services (disaggregated by age and service	80%	86%	Satisfaction Survey

	accessed). (INDICATOR - SPECIFIC 1)			
Indicator 97.2	Percentage of targeted people who report that the focused support services they accessed were delivered in accordance with their needs and preferences (disaggregated by type of support, gender and age). (INDICATOR – SPECIFIC 2)	80%	92%	Satisfaction Survey
Explanation of output and indicators variance:		N/A		

Activities	**Description**	**Implemented by**
Activity 1.1	GBV service provision Satisfaction survey implementation	N/A

Output 98	Lifesaving integrated GBV/SRH services are available and Women and girls

Was the planned output changed through a reprogramming after the application stage? Yes ☒ No ☐

Sector/cluster	Health			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 98.1	# service delivery points where women and girls can access multiple integrated services that meet their needs	12	6	Delivery Slip
Indicator 98.2	Number of targeted healthcare facilities providing lifesaving quality Clinical Management of Rape (CMR) services	6	6	Delivery Slip
Indicator 98.3	Number of targeted healthcare facilities supplied with Interagency Emergency Sexual and Reproductive Health (IARH) 3y 9 Kits	6	6	Delivery Slip
Indicator 98.4	Number of health providers oriented on the Minimum Emergency Response Package	75	229	Attendance list, pre and post tests

	(MISP) including the Guidance on CMR and IPV, for RH in Crisis including the Clinical Management of Rape (CMR) service as one of the main lifesaving integrated SRH/GBV intervention during emergencies and need to apply culturally sensitive approaches,			
Indicator 98.5	# of Safe Spaces created and supported	8 (1 new and seven already established)	12	Monitoring Reports and Photographic Records
Explanation of output and indicators variance:		Indicator 98.1: reprogrammed. The target was mistakenly indicated as 12 instead of 6. Indicator 98.4: this target was greatly surpassed because the workshops were implemented through virtual platforms, because of the COVID 19 pandemic. This allowed us to incorporate more participants in the training, since the costs of logistics (transportation, accommodation, and refreshments) decreased significantly. Indicator 98.5: Although the target for this indicator originally included only 8 WGSS, these community-based spaces turned out to have very different conditions and material requirements, which allowed us to reach a greater number of centres with the allotted funds.		

Activities	**Description**	**Implemented by**
Activity 98.1	Implement the Clinical Management of Rape (CMR) protocols with the new Intimate Partner Violence (IPV) component for the integation of GBV and SRH services in the delivery of survivor-centered care	UNFPA
Activity 98.2	Deliver a refresher training to health providers in the targeted areas on the CMR protocols with the new IPV component	UNFPA
Activity 98.3	Put in place confidential and safe spaces within the health facilities to provide lifesaving CMR services.	PLAFAM, UNIANDES, CODEHCIU
Activity 98.4	Procure and distribution medical and non-medical equipment.	UNFPA (medical), IPs (non medical): PLAFAM, UNIANDES, CODEHCIU
Activity 98.5	Monitoring of activities and results	UNFPA
Activity 98.6	Orient health providers on the Minimum Emergency Response Package (MISP) including the Guidance on CMR and IPV, for RH in Crisis including the Clinical Management of Rape (CMR) service as one of the main lifesaving integrated SRH/GBV intervention during	UNFPA

	emergencies and need to apply culturally sensitive approaches, understanding that structural and cultural factors contribute to women's and girls' vulnerability to the intertwined GBV and SRH risks	
Activity 98.7	Supply Interagency Emergency Sexual and Reproductive Health (IARH) Kits including post-rape treatment kits (Kit number 3) that includes emergency contraception (EC) to prevent unintended pregnancy and Post –Exposure Prophylaxis (PEP) medication to prevent HIV infection.	UNFPA
Activity 98.8	Conduct community-based outreach activities focused on access to services, especially life-saving and time-sensitive health services, so that survivors know where to find help.	PLAFAM, UNIANDES, CODEHCIU
Activity 98.9	Establishment and maintenance of WG only SS	CODEHCIU, Aliadas en cadena, Uniandes, PLAFAM

Output 99	Women and girls access quality PSS services (including Case Management services)			
Was the planned output changed through a reprogramming after the application stage?			Yes ☐	No ☒
Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 99.1	# of women and girls (disaggregated by age) who accessed Psychosocial interventions (including CM and individual and group PSS at the WGSS)	3033	3642	Monitoring Reports
Indicator 99.2	# of women and girls using WGSS to meet their needs through information, recreation and psychosocial support activities that contribute to their personal empowerment within 8 WGSS in Táchira, Apure, Zulia, Bolivar and Miranda	400	401	Monitoring Reports
Explanation of output and indicators variance:		N/A		

Activities	**Description**	**Implemented by**

Activity 99.1	Provision of PSS, PFA and counselling services to GBV survivors	CODEHCIU, Aliadas en cadena, Uniandes, PLAFAM
Activity 99.2	Provision of GBV Case management services to GBV survivors	CODEHCIU, Aliadas en cadena, Uniandes, PLAFAM
Activity 99.3	Provision of Legal Aid Services to GBV survivors	CODEHCIU, Aliadas en cadena, Uniandes, PLAFAM
Activity 99.4	Develop, update, and disseminate referral pathways.	GBVAOR
Activity 99.5	WGSS provide information, information and activities that promote, empowerment, healing and well-being	CODEHCIU, Aliadas en cadena, Uniandes, PLAFAM

Output 100	GBV risk mitigation measures contribute to positive changes in reported perceptions of safety and risks.

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 100.1	# of women and girls participating in GBV risk mitigation interventions (including safety audits, GBV risk assessments and DK interventions)	150	308	Monitoring Reports and Assessments Reports
Indicator 100.2	# target audience who have been exposed to communication messages on discontinuation of harmful traditional practices	20059	23,848	Monitoring Reports and Attendance Lists
Explanation of output and indicators variance:		Indicator 100.1: The target for this indicator was surpassed because the funding available allowed us to include a greater diversity of women and girls, as well as more methods of consultation, than originally planned. Indicator 100.2: The target for this indicator was surpassed because the IPs demonstrated the capacity to reach a wider audience than was originally planned. Also, the awareness raising sessions were positively received in communities, leading to a greater demand for these types of spaces.		

Activities	**Description**	**Implemented by**
Activity 100.1	Organization of GBV prevention, Sexual Violence, New and positive masculinities sessions and activities for the local community adapted to their needs and languages (including indigenous communities and PwD)	CODEHCIU, Aliadas en cadena, Uniandes, PLAFAM

Activity 100.2	Participatory GBV risk assessment engaging local women's organizations and adolescent girls in the emergency context	UNFPA

Output 101	Safe and ethical information management systems for GBV incident monitoring and case management are established and/or supported through inter-agency mechanisms.

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 101.1	# of Non-governmental GBV PSS service provider organisations/entities implementing the GBVIMS or GBVIMS+ to support their service provision	5	10	Technical Reports
Explanation of output and indicators variance:		As part of the GBVIMS rollout, the GBV AoR led the organizational mapping and self-assessment of the ten participating organizations. This information was sent and evaluated by the Steering Committee that recommended implementing Primero/GBVIMS+ instead of GBVIMS (offline), requiring a re-evaluation of the organizations according to the criteria necessary to use the platform in the country.		

Activities	**Description**	**Implemented by**
Activity 101.1	Offline GBVIMS establishment (second year)	GBVAOR
Activity 101.2	Coaching sessions to GBV services providers on GBVIMS management	GBVAOR
Activity 101.3	GBVIMS user organizations safely share and analyze GBV incident data for programming and advocacy	GBVAOR

Output 102	CVA is integrated as a survivor-centered GBV response service modality

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence

Indicators	Description	Target	Achieved	Source of verification
Indicator 102.1	% of women and older girls who receive cash assistance as part of their case management or, when case management is not possible, as an individual protection assistance, to prevent GBV for those at imminent risk and to contribute to GBV response/recovery for GBV survivors.	58	340	Monitoring Reports
Explanation of output and indicators variance:		The implementation for this indicator was originally planned as a single payment to each survivor, based on the estimated value of the required services. However, for context reasons, it was implemented through specific payments to cover the services required by each GBV survivor. This allowed us to reach a greater number of survivors with the allotted funds.		

Activities	Description	Implemented by
Activity 102.1	Integration of Cash and Voucher assistance into GBV multisectoral response programming as a life-saving action UNFPA´s IP	CODEHCIU, Aliadas en cadena, Uniandes, PLAFAM

Output 103	Increased capacity of local women's organization(s), to implement GBV prevention and response programmes
Was the planned output changed through a reprogramming after the application stage?	Yes ☐ No ☒
Sector/cluster	Protection - Gender-Based Violence

Indicators	Description	Target	Achieved	Source of verification
Indicator 103.1	# of WLOs that have received technical or operational capacity development support	32	33	Monitoring Reports, Training Process Reports, Attendance Lists
Indicator 103.2	# of WLOs that have received technical or operational capacity development support	32	33	Monitoring Reports, Training Process Reports, Attendance Lists
Indicator 103.3	# of governmental institutions with GBV responsibilities (public ministry, ministry of women, municipal women's institutes, protection councils, interior and justice ministry) who receive material support to provide quality	5	54	Monitoring Reports, Administrative Support Reports and Photographic Records

	GBV response services following international standards			
Explanation of output and indicators variance:		Indicator 103.3: More governmental institutions showed a demand for material assistance than originally foreseen. In view of this, an analysis was made of the available possibilities for support considering the existing resources, and it was agreed to adjust this support to meet the total number of institutions requesting support. It is important to highlight that the target was 25 institutions (5 per state).		

Activities	**Description**	**Implemented by**
Activity 103.1	Conduct refreshers and technical support provided on safe referrals to humanitarian actors and public institutions	UNFPA
Activity 103.2	Provision of material support (stationery, furniture, laptops, etc) to public institutions with GBV responsibilities	UNFPA
Activity 103.3	Conduct refreshers and provide technical support to strengthen institutional capacity of local women's organization(s) to implement GBV specialized programmes (Case management, PSS in emergencies, safe spaces for women and girls, amon other topics)	UNFPA, GBVAOR

Output 104	Women access gender sensitive livelihoods programmes as part of a multisectoral response to GBV

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 104.1	# of women who access gender sensitive livelihoods programmes as part of a multisectoral response to enhance resilience, mitigate GBV risk and ensure immediate needs are met	50	67	Monitoring Reports, Attendance Lists and Photographic Records
Explanation of output and indicators variance:		N/A		

Activities	**Description**	**Implemented by**
Activity 104.1	Provision of gender sensitive livelihoods programmes Including vocational training for women at risk to	CODEHCIU, Aliadas en cadena, Uniandes, PLAFAM

	enhance resilience, mitigate GBV risk and ensure immediate needs are met	

Output 105	Security and Justice actors are supported to integrate a survivor-centered approach in their responses to GBV survivors including safe and ethical referrals

Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 105.1	# of judicial institutions and law enforcement bodies (police officers, judges, public prosecutors and personnel from emergency line 911 and line 0800) supported to reduce barriers to women's access to justice.	250	373	Monitoring Reports, Attendance Lists and Training Reports
Explanation of output and indicators variance:		The initial workshops implemented for this indicator were very positively received by the staff of judicial institutions and law enforcement bodies. This led to a greater demand for this support than was originally planned; thus, the surpassed target.		

Activities	**Description**	**Implemented by**
Activity 105.1	Conduct refreshers sessions to sensitize actors in the justice system on their obligations, including to investigate a complaint of GBV safely	UNFPA

7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas[11] often lacking appropriate consideration and visibility: women and girls, people with disabilities, education and protection. **The following sections demonstrate how cross-cutting issues and the ERC's four underfunded priority areas have been addressed through project activities and should highlight the achieved impact wherever possible.**

[11] These areas include: support for women and girls, including tackling gender-based violence, sexual and reproductive health and empowerment; programmes targeting people with disabilities; education in protracted crises; and other aspects of protection. The ERC recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and UNCTs/HCTs when prioritizing life-saving needs for inclusion in CERF requests. While CERF remains needs-based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the Questions and Answers on the ERC four priority areas here.

a. Accountability to Affected People (AAP) [12]:

UNFPA delivers inclusive humanitarian interventions that target the most vulnerable and historically left behind, including women and girls, adolescents and youth, the elderly, persons with disabilities, displaced, LGBTQIA individuals. UNFPA is increasingly prioritizing AAP and working towards a more systematised approach to delivering accountability in the field. This includes ensuring humanitarian interventions are progressively designed based on feedback from and participation of affected populations, respecting their sexual and reproductive health rights and dignity; integrating AAP in all aspects of programme quality assurance and monitoring, and adjusting interventions based on feedback; strengthening local capacities so communities are able to respond and build their resilience and coping mechanisms.

b. AAP Feedback and Complaint Mechanisms:

UNFPA is working to establish predictable, systematic, and transparent mechanisms through which people affected by crises can provide regular feedback and influence programmes. UNFPA is particularly focused on establishing women and youth friendly community-based feedback mechanisms based on the preferences of local communities. For UNFPA, women and youth friendly feedback mechanisms are those mechanisms that are intentionally designed with, and for, women and young people's specific needs in mind. They are mechanisms that are the most preferred and most utilised means of expressing inputs and/or grievances by women and youth amongst the affected populations. Depending on the context, examples of such mechanisms include Focus Group Discussions, UNFPA/IP feedback focal points, peer to peer feedback, as well as phone helplines, SMS, Email and internet, radio and suggestion boxes. Women and girls are regularly consulted throughout the HPC to ensure the channels are fit for their purpose and they are safe and accessible.

c. Prevention of Sexual Exploitation and Abuse (PSEA):

UNFPA has persistently implemented its survivor/victim-centred Strategy on Protection from Sexual Exploitation, Abuse and Harassment (PSEAH. UNFPA's Institutional safeguarding framework is reflected at country level through effective in-country PSEA structures encompassing (1) SEA risk management; (2) Assessing implementing partners (IPs) (3) Communication and awareness raising; (4) Inter-agency coordination; (5) SEA case management; and (6) Support for SEA survivor/victims. Furthermore, UNFPA is working to strengthen its speak-up culture through (a) improved prevention and early resolution, and (b) increased trust in existing response mechanisms. The UNFPA Integrity Group, which includes PSEAH, the Office of the Executive Director (OED), the Division for Human Resources, the Legal Unit, the Office of Audit and Investigation Services (OAIS), the Ethics Office and the Office of the Ombudsman, coordinates yearly comprehensive action plans to prevent and address PSEAH. UNFPA continues to report all allegations of SEA in the United Nations public tracker and share information on SEA allegations in-country with the senior-most United Nations official.

d. Focus on women, girls and sexual and gender minorities, including gender-based violence:

In its commitment to leaving no one behind, UNFPA works toward a world where vulnerable people including sexual minorities people are afforded the same rights as others, including access to SRH and GBV services. Services are designed to be accessible to all groups by ensuring service entry points are non-stigmatising and adapted to the setting.

e. People with disabilities (PwD):

UNFPA strategies towards disability inclusion are drawn from sound evidence and comprehensive approaches to disability inclusion anchored in the United Nations Disability Inclusion Strategy (UNDIS). UNFPA performance on disability-inclusive programming– is

[12] AAP and PSEA are part and parcel of IASC commitments, and therefore mandatory for compliance for all UN agencies and partners. Agencies do not necessarily need to establish new AAP and PSEA mechanisms for CERF projects if functioning ones are already in place. For more information please refer to the IASC AAP commitments.

measured and reported annually. UNFPA launched the We Decide programme in 2016 to promote the human rights and social inclusion of women and young persons with disabilities. Access to sexual and reproductive health services, information and education for persons with disabilities, including prevention and addressing sexual and gender-based violence (GBV), are at the centre of the programme. *We Decide* has accelerated the strengthening of disability-inclusive programming at UNFPA at all levels through strengthening expertise on disability and by generating evidence and guidance. For UNFPA, programming and advocating with and for persons with disabilities represents a formidable opportunity to take forward the United Nations system-wide pledge to leave no one behind.

f. Protection:

UNFPA works closely with UNHCR as the lead agency of the Protection Cluster, appointed by Inter-Agency Standing Committee (IASC) to mainstream and integrate protection considerations across all its humanitarian projects. This entails applying the protection principles on prioritizing the safety and dignity of the affected population and the survivors, ensuring that the humanitarian aid adheres to the "do no harm" principle. Furthermore, UNFPA, as lead of the GBV area of responsibility, actively facilitates the affected population's access to essential protection services and promotes their active participation in designing and implementing the humanitarian projects on SRH and GBV**.**

g. Education:

NA

8. Cash and Voucher Assistance (CVA)

Use of Cash and Voucher Assistance (CVA)?

Planned	Achieved	Total number of people receiving cash assistance:
Yes, CVA is a component of the CERF project	Yes, CVA is a component of the CERF project	3,807

If **no**, please describe why CVA was not considered. Where feasible, CVA should be considered as a default response option, and multi-purpose cash (MPC) should be utilised wherever possible.

If **yes**, briefly note how CVA is being used, highlighting the use of MPC, and if any linkages to existing social protection systems have been explored.

Different modalities were adopted to ensure Cash Assistance is delivered to GBV survivors and people at risk of GBV. Cash Assistance was delivered with multiple objectives, including mitigation of GBV risks, strengthening livelihoods as part of the response to socioeconomic risk factors, food security and access to services of sexual and reproductive health that are not covered by the health system. For example, in Palestine, women received cash vouchers, through WFP to redeem with food and non-food items based on their needs. In Venezuela, women received Cash Assistance through a special modality adapted to the Venezuela context to cover accommodation, food, transportation, and basic hygiene costs as well as Health services expenses. They also received "Emergency CASH" as part of GBV Case Management services to cover all survivors needs through direct payment to other service providers.

Parameters of the used CVA modality:

Specified CVA activity (incl. activity # from results framework above)	**Number of people receiving CVA**	**Value of cash** (US$)	**Sector/cluster**	**Restriction**
Cameroon: Cash assistance to women and older girls as part of case management (lifesaving/high risk cases)	334	US$ 36,509	Protection - Gender-Based Violence	Restricted
Colombia: Distribution of emergency unconditional cash to protect women and girls facing high GBV risks that threatens their lives	458	US$ 60,469	Protection - Gender-Based Violence	Unrestricted
Myanmar: Cash assistance as part of case management	393	US$ 16,359	Protection - Gender-Based Violence	Restricted
Palestine: Food and hygiene vouchers	2,000	US$ 200,000	Protection - Gender-Based Violence	Restricted
Palestine: Grants for women who established their own businesses	200	US$ 160,000	Protection - Gender-Based Violence	Restricted
Somalia: Cash support integrated in case management for urgent protection/GBV related needs.	400	US$ 40,000	Protection - Gender-Based Violence	Unrestricted
Venezuela: CVA integrated into GBV Case Management	340	US$ 28,165.28	Protection - Gender-Based Violence	Unrestricted

9. Visibility of CERF-funded Activities

Title	**Weblink**
Bangladesh	https://docs.google.com/document/d/1HYpQmygxj-Lk494CM03t1tbziY4HC_m-/edit Refresher Training for Non GBV Actors on Lifesaving Integrated SRH/GBV Intervention during Emergencies Discussion on prevention of GBV during disaster with 25 networking organizations in Satkhira Training on Health Sector Response to Gender based Violence (CMR)

	Community Outreach Session Maternal Health Check-up at Women Friendly Space https://drive.google.com/drive/folders/120TWthEbFInYwTQkbBwU6KerZtowtSPy?usp=sharing
Cameroon	[N/A]
Colombia	https://twitter.com/UNFPAColombia/status/1440737251999117318?s=20 Socios: https://twitter.com/uaesaarauca/status/1440770987813789701?s=21 https://www.facebook.com/AxSColombia/posts/1862901930548975 https://www.facebook.com/AxSColombia/posts/1854312251407943 https://www.facebook.com/AxSColombia/posts/1847712595401242 https://www.facebook.com/AxSColombia/posts/1847641745408327 https://twitter.com/AxSolidaridadCO/status/1436034169734369280?s=20 https://twitter.com/AxSolidaridadCO/status/1433429506614697989?s=20 https://twitter.com/AxSolidaridadCO/status/1432343599203725317?s=20 https://twitter.com/AxSolidaridadCO/status/1431617570952695814?s=20 https://colombia.unfpa.org/es/news/el-10-de-diciembre-mujeres-de-la-frontera-pedalean-por-una-vida-libre-de-violencias; https://www.laopinion.com.co/cucuta/buscan-erradicar-violencia-contra-la-mujer-con-la-bicicleta; https://twitter.com/unfpacolombia/status/1469448041660928010?s=21; https://twitter.com/unfpacolombia/status/1469445141853356036?s=21
Mali	https://fb.watch/8SNG2vL3pr/ https://www.facebook.com/387875494726195/posts/1789234927923571/
Palestine	PWWSD SMS text (translated from Arabic): "In case you've experinced any type of violence: physical, psychological, economic, political, don't hesitate to call the free line of PWWSD 1800606060 to provide the PSS counselling services." https://www.facebook.com/palestinianmedicalreliefsociety/photos/a.166371936881516/1765541803631180/ https://www.facebook.com/groups/1775389312737144/permalink/3011954162413980/ https://m.facebook.com/groups/BethlehemUni/permalink/4447848928569076/ Dunia Alwatan: https://www.alwatanvoice.com/arabic/news/2021/06/17/1419367.html Ma'an Agency:

	https://www.maannews.net/news/2043154.html Masader: http://masader.ps/ar/node/86456 Hebron FM: http://904fm.ps/news_detail.php?id=17280 Gender in Palestine: https://www.facebook.com/groups/1580696795538917/permalink/2966379886970594 Videos Link: https://www.youtube.com/watch?v=8L8SKBGjdO4&list=PL1rAKBawD7i5tl1SN3JsacZFWC6owIAsO&index=1&t=3s https://www.youtube.com/watch?v=lFY4Ou6qe34&list=PL1rAKBawD7i5tl1SN3JsacZFWC6owIAsO&index=2&t=7s ACHA safe spaces adaptation photos: https://drive.google.com/drive/folders/1Emto9HUi0Dej6hYZdE16kieO8qr9700B visibility material Success Story General visibility material
Somalia	https://somalia.unfpa.org/en/news/healing-survivors-gbv-idp-camps https://somalia.unfpa.org/en/news/gbv-one-stop-centre-and-women-and-girls%E2%80%99-safe-spaces-fully-operational-bosaso https://somalia.unfpa.org/en/publications/integrating-care-gbv-survivors-reproductive-health-services

ANNEX: CERF FUNDS DISBURSED TO IMPLEMENTING PARTNERS

CERF Project Code	Cluster/Sector	Agency	Partner Type	Total CERF Funds Transferred to Partner US$
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$327,938
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$116,973
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$152,962
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$518,703
20-RR-FPA-042	Health	UNFPA	NNGO	$42,615
20-RR-FPA-042	Health	UNFPA	NNGO	$12,983
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$78,556
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$86,047
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$109,868
20-RR-FPA-042	Gender-Based Violence	UNFPA	INGO	$88,696
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$12,454
20-RR-FPA-042	Gender-Based Violence	UNFPA	GOV	$7,259
20-RR-FPA-042	Gender-Based Violence	UNFPA	GOV	$10,000
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$15,350
20-RR-FPA-042	Gender-Based Violence	UNFPA	INGO	$309,417
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$188,238
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$100,397
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$199,555
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$7,082

20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$377,575
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$267,232
20-RR-FPA-042	Gender-Based Violence	UNFPA	INGO	$48,503
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$318,386
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$337,565
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$165,767
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$305,502
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$245,223
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$322,606
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$20,717
20-RR-FPA-042	Gender-Based Violence	UNFPA	INGO	$124,164
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$320,453
20-RR-FPA-042	Gender-Based Violence	UNFPA	INGO	$243,818
20-RR-FPA-042	Gender-Based Violence	UNFPA	INGO	$212,713
20-RR-FPA-042	Gender-Based Violence	UNFPA	RedC	$112,115
20-RR-FPA-042	Gender-Based Violence	UNFPA	INGO	$133,384
20-RR-FPA-042	Gender-Based Violence	UNFPA	INGO	$7,957
20-RR-FPA-042	Gender-Based Violence	UNFPA	INGO	$40,013
20-RR-FPA-042	Gender-Based Violence	UNFPA	INGO	$25,947
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$172,138
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$225,915
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$295,931
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$49,893

20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$167,580
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$30,309
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$29,556
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$11,618
20-RR-FPA-042	Gender-Based Violence	UNFPA	GOV	$3,010
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$299,999
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$165,000
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$165,001
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$207,649
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$219,800
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$8,600
20-RR-FPA-042	Gender-Based Violence	UNFPA	GOV	$20,645
20-RR-FPA-042	Gender-Based Violence	UNFPA	GOV	$16,691
20-RR-FPA-042	Gender-Based Violence	UNFPA	GOV	$22,700
20-RR-FPA-042	Gender-Based Violence	UNFPA	GOV	$24,030
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$101,734
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$118,251
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$113,291
20-RR-FPA-042	Gender-Based Violence	UNFPA	GOV	$50,450
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$42,079
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$79,117
20-RR-FPA-042	Gender-Based Violence	UNFPA	GOV	$1,450
20-RR-FPA-042	Gender-Based Violence	UNFPA	GOV	$74,468

20-RR-FPA-042	Gender-Based Violence	UNFPA	GOV	$51,547
20-RR-FPA-042	Health	UNFPA	NNGO	$294,941
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$220,468
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$99,853
20-RR-FPA-042	Gender-Based Violence	UNFPA	NNGO	$154,046