

# PHILIPPINES RAPID RESPONSE STORM 2021

21-RR-PHL-50868

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# PART I – ALLOCATION OVERVIEW

Reporting Process and Consultation Summary:		
Please indicate when the After-Action Review (AAR) was conducted and who participated.	20 June 2	022
The AAR, facilitated by OCHA was attended by CERF UN Agencies IOM, UNFPA, UNICEF, WFP, implementi provincial government officials, and beneficiaries. AAR workshops were organized in parallel on 02 June in Maasi Surigao city, Caraga. The outcomes of the AAR were presented to the HCT. In March 2021, the RC/HC also organized a mid-term review high-level mission to the CERF areas, together with Canada, UK and Norway. The report is available		

#### 1. STRATEGIC PRIORITIZATION

# Statement by the Resident/Humanitarian Coordinator:

The swift approval of the CERF Rapid Response grant was crucial to address critical needs early in response to Super Typhoon Rai. In the HNP document, jointly launch with the Department of Foreign Affairs, urgent support was needed to address the pressing needs of 2.4 million people most affected by the storm. By acting quickly and generously, flexible CERF funding to the Philippines enabled a response to address urgent concerns, such as shelter, food security and water sanitation and hygiene (WASH) and protection.

The grant proved to be a catalyst in many ways by mobilizing additional resources. The funding channeled through IOM, UNFPA, UNICEF and WFP allowed the UN agencies and their partners to respond quickly and in a coordinated manner, paved the way for additional resources to come in. To date, about of \$77.8 million is mobilized – or 46% of the total funding.

This grant also fostered multi-sectoral collaboration. In many sites, diverse set of actors worked in sync to harmonize messaging, ensure a wider reach, and greater impact of the projects. Thirty-four per cent of the CERF grant was awarded to INGOs and local NGOs,9 with 10 per cent awarded to local NGOs alone.

#### **CERF's Added Value:**

CERF funds led to the fast delivery of assistance to people in need and helped respond to time-critical needs. The rapid approval of funding on 24 December 2021 allowed IOM, UNFPA, UNICEF, WFP, as well as their implementing partners to scale up the response in support of the government by deploying staff and emergency supplies to provide life-saving aid in CCCM, emergency shelter, food, health, WASH, protection, and logistics. Life-saving information were widely provided, particularly on health and hygiene behaviours for the prevention and control of COVID-19.

The funding enhanced both face-to-face and virtual coordination and improved information sharing and analysis among the humanitarian community and government counterparts. This led to enhanced collaboration during the response, including agreements to explore jointness for future responses

Did CERF funds lead to a fast delivery of as	sistance to people in need?	
Yes  The recipient agencies reported that the rapid the target beneficiaries. Activating existing partr to move swiftly. According to UNICEF, they we as a quick starter for other sources of funding to as they felt there was immediate support, especially.	nerships and preparedness activities on the ere able to quickly deploy pre-positioned s o come in. Recipient local governments als	e ground, CERF funding allowed organizations supplies. IOM noted that the CERF fund acted so relayed that it gave people a sense of hope
Did CERF funds help respond to time-critical	al needs?	
Yes  Despite the challenges posed by the pandemic, needs early in the response for camp coordinate.	<u> </u>	· ·

Existing standby partnerships with local partners and other preparedness activities such as prepositioning of supplies, aided UN agencies in providing critical, life-saving support at the onset of the emergency. Provision of multi-purpose cash allowed beneficiaries to buy food and other essential needs, repair houses, and restart livelihoods. When evacuation centres were closed earlier than expected, the grant provided flexibility, allowing UN agencies to shift strategies to best address people's needs. UNICEF, for example, was able to provide household sanitation repair kits for early recovery.

WFP was able to fulfil 100 percent of the transportation requests received from government partners. This includes 164 trucks funded through CERF which transported 196,600 DSWD Family Food Packs, along with other various relief items such as Hygiene Kits, Kitchen Kits, Sleeping Kits, Family kits, laminated sacks and various donated items. CERF funding helped augment critical operations such medical services offered in hospitals and other health facilities.

$\label{eq:decomposition} \mbox{Did CERF } \underline{\mbox{improve coordination}} \mbox{ amongst the humanita}$	rian community?	
Yes ⊠	Partially □	No □
Coordination among the humanitarian community in the couloCHA established two satellite offices that served as hum City for Southern Leyte. The two humanitarian hubs later be where partners can meet and gather relevant information. openly shared to prevent duplication of activities and services.	nanitarian coordination hubs in Surigao City for Coecame a common UN field office space for OCH.  During regular coordination meetings, information	Caraga region and Maasin A, IOM, WFP and UNFPA
With CERF funding, WFP established connectivity at 4 comwide range of users such as UN agencies, I/NGOs, government to communicate needs and connect to external partners.	ment staff, and affected communities with interne	
UN agencies also converged in their projects. WFP worked referral pathways at WFP distribution sites. UNICEF, WFF sites managed by IOM in Surigao City had its own sanitation point for all actors. Local government partners relayed that of the CERF related activities the local government was able	P, IOM and local partners collaborated in ensuring facilities. For the government, CERF meetings we they will be adopting the 3W for future incidents.	g each house transitional ere seen as a convergence Another positive outcome
$\label{eq:decomposition} \mbox{Did CERF funds help} \ \underline{\mbox{improve resource mobilization}} \ \mbox{from}$	om other sources?	
Yes ⊠	Partially □	No □
The grant proved to be a kick starter in mobilizing internal at of the HNP published in February 2022 Typhoon Rai's fur allowed agencies to garner more resources after establishing been mobilized – or 46% of the total funding, which allow humanitarian activities that reached over one million most version.	nding requirement reached \$169 million. The C ng their presence quickly on the ground. To date, wed more than 200 organizations and partners t	ERF grant of \$12 million, about of \$77.8 million has

Additional funding support from other donors also enabled organizations such as IOM and WFP to extend beyond the CERF timeline.

# Considerations of the ERC's Underfunded Priority Areas1:

The projects implemented by UNFPA, UNICEF, IOM, and WFP were all protection-led, jointly targeting those most at risk and strengthening their access to basic services and protection. All project staff, including government partners, were oriented on PSEA and were made aware of reporting mechanisms, while referral pathways were activated.

#### Support for women and girls, including tackling gender-based violence, reproductive health and empowerment

Project partners considered the needs of women and girls from project inception, to targeting and throughout implementation. Women and girls were capacitated to lead gender mainstreaming in their communities through advocates of GBV prevention and mitigation, as they were seen as partners in the community and not just beneficiaries. Sector specific interventions were also mindful of the needs of this group. WASH response prioritized households with vulnerable women-members (single mothers, pregnant, lactating, elderly). Apart from the provision of hygiene, dignity kits, sanitation repair kits enabled households to repair their damaged toilets to restore privacy and dignity. Program partners also ensured that activities were safe and easily accessible to reduce possible risks of long-distance travel. In total, the grant addressed the needs of 204,576 women and girls.

#### Programmes targeting disabled people

CERF-funded projects utilized a targeting framework that prioritized families with members with disabilities. Implementers ensured that accessibility was considered in availing of various services which included the provision of mobile services, closer proximity of activity sites to the communities, transportation services, and prioritization of persons with disabilities and the elderly during registration and distribution. Children with disabilities have made use of the child-friendly spaces and encouraged their interaction with other kids. Post activity assessments were also distributed to document their feedback. Overall, the various interventions served 7.596 people with disabilities.

Table 1: Allocation Overview (US\$)

Total amount required for the humanitarian response	168,906,963
CERF	11,974,601
Country-Based Pooled Fund (if applicable)	0
Other (bilateral/multilateral)	65,777,444
Total funding received for the humanitarian response (by source above)	77,452,045

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

Agency	Project Code	Sector/Cluster	Amount
IOM	21-RR-IOM-037	Shelter and Non-Food Items	1,830,009
IOM	21-RR-IOM-037	Camp Coordination and Camp Management	1,170,006
UNFPA	21-RR-FPA-035	Protection - Gender-Based Violence	1,985,841
UNFPA	21-RR-FPA-035	Health - Sexual and Reproductive Health	593,173
UNICEF	21-RR-CEF-059	Water, Sanitation and Hygiene	2,716,836
UNICEF	21-RR-CEF-059	Protection - Child Protection	407,525
UNICEF	21-RR-CEF-059	Education	271,684
WFP	21-RR-WFP-042	Food Security - Food Assistance	2,039,678
WFP	21-RR-WFP-042	Common Services - Logistics	659,896
WFP	21-RR-WFP-042	Common Services - Emergency Telecommunications	299,953
Total			11,974,601

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

Total funds implemented directly by UN agencies including procurement of relief goods	7,843,719
Funds sub-granted to government partners*	0
Funds sub-granted to international NGO partners*	3,228,948
Funds sub-granted to national NGO partners*	901,934
Funds sub-granted to Red Cross/Red Crescent partners*	0
Total funds transferred to implementing partners (IP)*	4,130,882
Total Control of the	11,974,601

<sup>\*</sup> 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:**

Super Typhoon Rai/Odette struck Philippines on 16 and 17 December 2021 causing widespread damage across the Visayas and Mindanao Islands. The authorities declared a state of calamity on 20 December and the Humanitarian Country Team released a response plan on 24 December, calling for \$107.5 million to address multi-sectoral needs of 530,000 people in Regions VIII and XIII, in support of the Government's response efforts.

## Operational Use of the CERF Allocation and Results:

In response to the crisis, the ERC quickly allocated \$12 million from CERF's Rapid Response window for the immediate commencement of life-saving activities. This funding enables UN agencies and partners to provide life-saving assistance to 247,700 people, including 71,900 women, 74,300 men, 101,500 children, and including 1,962 people with disabilities in the Water, sanitation and hygiene, Education, Protection, Food Security, Shelter, Camp Coordination and Management, Health, Logistics and Telecommunications sectors.

#### **People Directly Reached:**

CERF activities reached 505,883 people, more than twice the 247,000 people initially targeted. The largest increase in reach can be attributed to the number of people reached by the Shelter cluster as more people benefited from distribution of tarpaulins as well as other types of shelter assistance and the corresponding Build Back Safer training for repair and reconstruction. A total of 24,000 households or an estimated 120,000 individuals benefitted from the distribution of shelter grade tarpaulins distribution conducted from December 2021 to March 2022 in 35 municipalities, which served as temporary, makeshift shelter while the recipients repaired their shelters.

The under-achievement in one indicator (UNICEF Indicator 2.2) is due to no confirmed case of unaccompanied and separated children in TY Rai affected areas in CARAGA and Southern Leyte, thus, no intervention was necessary. The number of evacuation centres served and the corresponding conditional cash transfers from those in them is less than planned due to the early closure of decampment of these centres in the context of COVDI-19. There were also activities planned around communal facilities in these centres which did not take place. Upon recalibration in strategy, new approaches to sanitation repair kits (UNICEF Indicators 1.4 & 1.5) and shelter (IOM, Indicators 2.1, 2.3, 2.4) were proposed, which focused on more durable solutions supporting early recovery.

# People **Indirectly** Reached:

CERF also proved to be valuable outside of the planned targets. Information campaigns on health, hygiene, nutrition, child protection, and building back better have reach at least 300,000 people. Information awareness raising and radio messaging also touched those in the community who are not direct targets. These include women of other ages aside from the usually targeted women of reproductive age (WRA) and adolescent girls as well as men of other ages. Moreover, information sessions also reached community members and local leaders, among others.

Through the provision of logistics and telecommunications common services by WFP, this project supported the Government as well as a wide range of organizations including UN agencies, to facilitate the implementation of the humanitarian activities in response to the impact of Typhoon Rai. It is estimated that at least 600,000 individuals affected by the Typhoon have indirectly benefited from telecommunications and logistics support provided by WFP to other humanitarian partners.

Some WASH key interventions also included governance activities to increase ownership and sustainability. For example, community WASH committees, composed mostly of women, were formed; barangay health workers and nutrition scholars were trained, grouped and supported to roll out hygiene promotion across villages; toilet construction monitors were formed and trained for the distribution of

SRKs. These enabling environment activities were carried out in collaboration with rural sanitary inspectors and municipal health officers in the project's target sites delivering a WASH sector system strengthening dimension to the response.

The dignity kits, solar lamps, and solar radios have benefitted not just the women and girls who directly provided with the items, but their immediate and extended families who live in the same house. They were able to share these items to others in the household. For women and girls provided with cash assistance, the money spent on the mothers' and the neonates' needs. Some of the cash used to buy food for the family and children's school supplies.

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
Camp Coordination and Camp Management	2,200	2,200	1,800	1,800	8,000	3,875	4,055	1,760	2,578	12,268
Common Services - Emergency Telecommunications	0	0	0	0	0	0	0	0	0	0
Common Services - Logistics	0	0	0	0	0	0	0	0	0	0
Education	835	119	6,742	7,303	14,999	167	662	64,70	6,582	13,881
Food Security - Food Assistance	38,750	38,750	23,000	24,500	125,000	47,259	55,279	11,761	12,601	126,900
Health - Sexual and Reproductive Health	4,350	0	0	0	4,350	6,902	0	397	0	7,399
Protection - Child Protection	16,000	16,000	8,640	9,360	50,000	10,285	5,855	6,841	6,652	29,633
Protection - Gender- Based Violence	40,392	5,000	9,598	5,000	59,990	48,578	20,263	8,572	7,082	84,495
Shelter and Non-Food Items	3,025	3,025	2,475	2,475	11,000	15,385	15,380	51,048	51,367	133,180
Water, Sanitation and Hygiene	20,000	20,000	24,000	16,000	80,000	27,815	27,143	21,597	21,572	98,127

<sup>\*</sup> Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

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

Category	Planned	Reached
Refugees	0	0
Returnees	0	0
Internally displaced people	60,000	237,792
Host communities	62,700	124,721
Other affected people	125,000	143,370
Total	247,700	505,883

Table 6: Total No	umber of People Direct	Number of peodisabilities (Pv	ople with vD) out of the total	
Sex & Age	Planned	Reached	Planned	Reached
Women	71,900	160,266	608	2,881
Men	74,300	128,637	608	2,395
Girls	49,500	108,546	361	1,118
Boys	52,000	108,434	385	1,202
Total	247,700	505,883	1,962	7,596

# PART II - PROJECT OVERVIEW

## 3. PROJECT REPORTS

# 3.1 Project Report 21-RR-IOM-037

1. Proj	ect Inform	nation						
Agency:		IOM			Country:		Philippines	
Sactor/ol	uotori	Shelter and Non-Food	tems		CEDE project	t oodo	21-RR-IOM-037	
Sector/cluster:		Camp Coordination and	l Camp Ma	anagement	CERF project	code.	21-KK-IUW-037	
Project title: Humanitarian Assistance on Shelter and Camp Coordination and Camp Management (CCCM) Rai Affected People						anagement (CCCM)	for Super Typhoon	
Start date	<b>e</b> :	18/12/2021			End date:		17/06/2022	
Project re	oject revisions: No-cost extension   Redeployment of fur				nent of funds		Reprogramming	
	Total re	quirement for agency's	sector res	sponse to cur	rent emergency	<b>/</b> :		US\$ 21,000,000
	Total fu	nding received for agen	cy's secto	or response to	current emerç	gency:		US\$ 0
	Amoun	t received from CERF:						US\$ 3,000,015
Funding	Total C	ERF funds sub-granted	o implem	enting partne	rs:			US\$ 797,290
퓜	Gov	ernment Partners						US\$ 0
		rnational NGOs				US\$ 797,290		
		onal NGOs						US\$ 0
	Red	Cross/Crescent Organisa	ition					US\$ 0

# 2. Project Results Summary/Overall Performance

With an aim to mitigate the impact of Rai on the most affected population, IOM, and its implementing partners (IP) Catholic Relief Services (CRS) and CARE Philippines, provided life-saving humanitarian assistance on Shelter and Camp Coordination and Camp Management (CCCM) to 109,448 people in 37 of the most vulnerable, underserved communities. The project overall contributed to 93 per cent increase in confidence and trust in government's response to Typhoon Rai, according to the respondents surveyed during Post-distribution Monitoring (PDM) in June 2022. Half of the respondents reported that they would have continued resorting to negative coping mechanisms, such as borrowing money and selling their assets, to address their immediate and recovery needs if assistance did not come.

Approximately 133,180 people benefitted from the project's Shelter intervention, including distribution of shelter grade tarpaulins, Shelter Repair Kits (SRK), Multi-Purpose Cash Assistance (MPCA) and transitional shelters' related activities: Build Back Safer (BBS) training, Cash-for-Work (CfW) for building of the transitional shelters. The PDM conducted with 54 individuals found that the SRK (96%) and MPCA (98%) met their immediate shelter needs. 94 per cent reported that they were able to apply BBS knowledge for rebuilding their home, with 89 per cent having completed their repair or construction process. All reported improvement in one of the following aspects: privacy (77%), protection against harsh weather (93%), security (80%) and comfort (78%). Furthermore, 60 per cent reported that it would have taken more than a year to repair their houses without the assistance.

Approximately 12,268 internally displaced individuals in 27 Evacuation Centres (ECs) and displacement sites benefitted from the project's CCCM intervention, such as CfW for site care and maintenance, modular tents and solar lamps, and CCCM technical assistance. Three Displacement Tracking Matrix (DTM) reports were produced from December 2021 to February 2022, which maximized IOM's other resources, and was distributed widely to government and humanitarian responders. Of the 39 individuals surveyed during the PDM, all expressed that the project's assistance helped improving the living condition at ECs and displacement sites. Local officials and IDP team leaders, found the information relevant and useful alongside other technical assistance.

# 3. Changes and Amendments

The project observed a significant shift in need particularly with the ECs closing more rapidly than initially expected, as the government promoted early decampment in the context of COVID-19. Many IDPs, whose shelters were either not yet repaired or from "No-build Zones", were left outside the ECs in dire living conditions. IDPs from "No-build Zones" were particularly left behind as the local governments struggled to identify a permanent relocation site and aid with their longer-term solutions to temporary shelters. IOM, in consultation with the donor, has thus recalibrated the plan and responded to the needs on the ground by utilizing the project's resources more on Shelter component including tarpaulins, materials for SRK and transitional shelters, and assistance through cash, thereby resulting in overachievements in relevant indicators. This revision in the plan was reported to and communicated with the donor during the Mid-term Strategy Review in March 2022.

# 4. Number of People Directly Assisted with CERF Funding\*

Sector/cluster	Camp Coord	Camp Coordination and Camp Management								
			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	2,200	2,200	1,800	1,800	8,000	3,875	4,055	1,760	2,578	12,268
Host communities	0	0	0	0	0	0	0	0	0	0
Other affected people	0	0	0	0	0	0	0	0	0	0
Total	2,200	2,200	1,800	1,800	8,000	3,875	4,055	1,760	2,578	12,268
People with disabilities (Pwl	People with disabilities (PwD) out of the total									
	55	55	45	45	200	178	188	0	0	366

Sector/cluster	Shelter and I	Shelter and Non-Food Items								
	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	3,025	3,025	2,475	2,475	11,000	15,385	15,380	51,048	51,367	133,180
Host communities	0	0	0	0	0	0	0	0	0	0
Other affected people	0	0	0	0	0	0	0	0	0	0
Total	3,025	3,025	2,475	2,475	11,000	15,385	15,380	51,048	51,367	133,180
People with disabilities (PwD) out of the total										
	76	76	61	61	274	0	3	0	0	3

<sup>\*</sup> Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

# 5. People Indirectly Targeted by the Project

The project contributed to regional wider support beyond the target communities of an estimated 80,160 population through its Shelter and CCCM assistance. The Shelter assistance promoted early decampment and safe return of evacuees and decreased their risk of COVID-19 infection during displacement especially at sites where congestion and limited access to services including health remain as persistent issue. Training on Build Back Safer, relevant IEC materials, and participatory approaches to shelter repair and building of transitional shelters facilitated transfer of knowledge on safer and resilient shelter designs and construction techniques to local communities, which in turn contribute to replication of the approach to wider communities prone to disasters. IOM promoted local procurement of SRK, IEC materials, and construction materials; MPCA allowed beneficiaries to acquire their basic and essential necessities from local stores, which contributed to reviving local markets destroyed by the Typhoon.

6. CERF Resu	Ilts Framework								
Project objective	Most vulnerable affected people have access to emergency shelter solutions for their damaged houses, and safer and more dignified living conditions in the evacuation centres.								
Output 1	Affected households are assisted for	their emergency shelter ne	eeds						
Was the planned of	output changed through a reprogram	ming after the application	stage? Yes ⊠	No □					
Sector/cluster	Shelter and Non-Food Items								
Indicators	Description	Target	Achieved	Source of verification					
Indicator 1.1	# of individuals benefitting from in- kind Shelter assistance	11,000 *131,000 including 120,000 individuals benefitting from emergency shelter response and 11,000 individuals assisted with SRK  (the original proposal inadvertently listed the target as 11,000 instead of 131,000	131,854 Including: approx. 120,000 individuals benefitting from tarpaulins, 11,231 benefitting from SRK, 623 supported with transitional shelter	Distribution Lists     Acknowledgement receipts					
Indicator 1.2	# of individuals benefitting from MPC grant	11,000	10,211 Including 9,716 recipients of SRK, 495 engaged in CfW for transitional shelter construction	Profiling     Distribution Lists     Acknowledgement receipts					
Indicator 1.3	Total value of MPC cash distributed in USD	218,410	254,029.09 Including MPCA of USD 218,079.59 and CfW of USD 35,949.50 for transitional shelter construction	Profiling     Distribution Lists     Acknowledgement receipts					
Indicator 1.4	% of households that indicate that MPC assisted in meeting their immediate needs of shelter repair and purchase of household items	85%	98%	1. Post distribution Monitoring (PDM) 2. KII 3. FGD					

	(post-distribution monitoring of target beneficiaries with a statistically representative sample)			
Indicator 1.5	% of households that were able to apply BBS knowledge for rebuilding their homes (post-distribution monitoring of target beneficiaries with a statistically representative sample)	85%	94%	Post distribution     Monitoring (PDM)     KII     FGD
Indicator 1.6	# of shelters constructed or rehabilitated that are accessible to persons with disabilities	50	54	Profiling     distribution list     acknowledgment receipts

#### Explanation of output and indicators variance:

The project distributed Shelter Repair Kits (SRK) from January to June 2022 to 2,831 household or a total of 11,231 individuals with totally or partially damaged houses in nine municipalities in Southern Leyte (3), Surigao Del Norte (4) and Dinagat Island (2). The SRK included basic items to meet immediate shelter needs, such as corrugated galvanized iron (CGI) sheets. plain sheets, coco lumber, nails, and plywood. The distribution of SRK came with BBS training on safer shelter designs and proper construction techniques that are aligned with SPHERE standards. Training was opened to the community in general and reached 3,010 individuals (1,241 F, 1,769 M) including the beneficiaries of SRK. They were provided with Information, Education and Communication (IEC) materials that highlighted eight key messages of the training. The PDM found a significant 94 per cent reporting that they were able to apply BBS knowledge for rebuilding their home with majority recalling 5-7 out of eight key BBS messages and 65 per cent referring to the BBS handouts. Additionally, a total of 24,000 households or an estimated 120,000 individuals benefitted from shelter grade tarpaulins distribution conducted from December 2021 to March 2022 in 35 municipalities in Southern Leyte (5), Surigao del Norte (12), Dinagat Island (6), Bohol (3), Cebu (1) and Negros Oriental (8), which served as temporary, makeshift shelter while the recipients repaired their shelters. One of the key achievements under the Shelter component under the HNP includes the development of a transitional shelter site in Cagniog City, Surigao del Norte from February to June 2022. It needs to be noted that CERF funding was used only for the initial life-saving phase of IOM's Shelter response. This was conducted under the flagship of IOM and through crossagency collaboration that engaged other governments, UN agencies and NGOs. Targeting the IDPs from "No-build Zones" that needed longer-term solutions to temporary shelters, IOM provided 123 households or a total of 623 (304 F, 319 M) with a transitional shelter that included a built-in toilet and a living space of about 16 square meters. IOM utilized resources under this project that primarily contributed to the construction materials of these shelters. Meanwhile, cross-stakeholders' coordination brought in multisectoral assistance that addressed multiple dimensions of the needs of the targeted households, including the UNICEF and Action Against Hunger (AAH) that complemented the latrine construction with additional kits and technical assistance, World Food Programme (WFP) that assisted with logistics assistance, the United Nations Fund for Population Activities (UNFPA) with hygiene kits, Development of Social Welfare and Development (DSWD) with site management and food packages, as well as Technical Education and Skills Development Agency (TESDA) with training to building proper, safe transitional shelters, and the National Housing Authority (NHA)

for site development. A handover ceremony was conducted on 15 June 2022, which affirmed the ownership of the transitional shelters to the communities and local governments.

A total of 2,371 households or 9,716 (4,930F, 4,786 M) were provided with either Multi-Purpose Cash Assistance (MPCA) of about PHP 4,599 (USD 92) each or PHP 10,903,980 (USD 218,079.59) in total from January to June 2022. The activity mainly supported the additional shelter needs of the SRK recipients. IOM maximized resources from other projects to cover the cash assistance for all SRK beneficiaries. Notably, the PDM found 98 per cent reporting that the MPCA met their immediate shelter needs either completely or moderately. The project also facilitated a CfW of PHP 1,797,475 (USD 35,949.50) for these 123 households, which engaged a total of 495 labours (73 F, 422 M), supporting the building of the transitional shelters. The project observed a significant shift in need particularly with the ECs closing down more rapidly than the initial expectation, as the government promoted early decampment in the context of COVID-19. Many IDPs, whose shelters were either not yet repaired or from "No-build Zones", were left outside the ECs in a dire living condition. IDPs from "No-build Zones" were particularly left behind as the local governments struggled to identify a permanent relocation site and help with their longer-term solutions to temporary shelters. IOM, in close consultation with the donor, has calibrated on the plan and utilized the project's resources more on Shelter component including tarpaulins, materials for SRK and transitional shelters, and assistance through cash, thereby resulting in overachievements in indicators 1.1 and 1.3. In addition, the modality of cash assistance for shelter was provided in MPCA and CfW based on the preferences and consultations with the local communities and government stakeholders. Furthermore, IOM's technical assistance by engineers, BBS training that included demonstrations and utilized scale models, distribution of IEC materials on BBS, and social preparation activities, facilitated effective transfer of knowledge on safe shelter designs and construction techniques, which allowed beneficiaries to make use of the in-kind and cash assistance to drive their shelter repair based on their needs and in compliance with SPHERE and other humanitarian standards, as shown in overachievement of indicators 1.4 and 1.5.

Activities	Description	Implemented by
Activity 1.1	Identification and verification of beneficiaries.	IOM, CRS and CARE
Activity 1.2	Procurement of shelter repair kits.	IOM, CRS and CARE
Activity 1.3	Distribution of Shelter Repair Kits with Build Back Safer Trainings	IOM, CRS and CARE
Activity 1.4	Distribution of MPC	IOM and CRS
Activity 1.5	Post distribution monitoring	IOM, CRS and CARE

Output 2	The most vulnerable IDPs in evacuation centres (ECs) have access to safer and more dignified living conditions						
Was the planned output changed through a reprogramming after the application stage? no Yes □ No ☒							
Sector/cluster	Camp Coordination and Camp Management						
Indicators	Description	Target	Achieved	Source of verification			

Indicator 2.1	# of ECs supported with appropriate site management services	40	27	Plan of work		
Indicator 2.2	# of individuals (with sex disaggregation) benefitting from CCCM	8,000	12,391 Including 123 individuals at EC supported with site maintenance and care, 3,998 benefitting from modular tents, 7,524 from solar lamps, 623 at transitional shelter site supported with CCCM technical assistance	Profiling     Distribution Lists     Acknowledgement receipts		
Indicator 2.3	# of individuals benefiting from conditional cash transfers (CFW)	1,600	33	Profiling     Distribution Lists     Acknowledgement receipts		
Indicator 2.4	Total value of conditional cash transfers distributed in USD	USD 112,000	USD 1,650	Profiling     Distribution Lists     Acknowledgement receipts		
Indicator 2.5	% of individuals residing in ECs expressing that their living conditions in the ECs are improved through the assistance. (measured through a household survey with a statistically representative sample; 90% CL, 5% CI)	85%	100%	End-line Assessment and Monitoring     KII     FGD		
Indicator 2.6	% of identified government counterparts and LGU officials that indicate the relevance and usefulness of received information materials on CCCM in the COVID-19 context (key-informant interviews, shared with at least 20 partners)	75%	100%	End-line Assessment and Monitoring     KII     FGD		
Explanation of o	output and indicators variance:	intervention. This include 1,650) at one EC in Surig 33 IDPs (13 F, 20 M) in s cubicles, cooking counter closing of the EC. Everyo PHP 2,500 (USD 50). Dis December 2021 to March individuals in 10 ECs of 1 Norte (5) and Dinagat Isla maintaining physical distributed to solar lamps 3,931 M) in 17 ECs in 16	d the support through CfV also del Norte in March 202 ite care and maintenance its, washing areas, and come undertook the work for stribution of modular tents in 2022 to 1,000 displaced 7 municipalities in Souther and (2), which supported that are and privacy between to 1,638 households or 7 municipalities in Souther municipalities in Southern	22. The activity engaged such as setting up bathing induct of clean-up prior to rative days and received was conducted from households or 3,998 ern Leyte (10), Surigao del the decongestion and families. IOM also ,524 individuals (3,593 F,		

for safety purpose. Furthermore, IOM provided technical assistance on setting up a CCCM committee, regular coaching and mentoring to the members of the committee and local government leaders on proper maintenance and management of the transitional shelter site in Cagniog City from January to June 2022. Of the 39 individuals (31 F, 8 M) surveyed during the PDM, all expressed that the project's assistance helped improving the living condition at ECs and displacement sites either completely or moderately.

The project faced many ECs closing down post initial assessment of 68 ECs, while identifying increased needs in Shelter. In the context of COVID-19, many LGUs closed the ECs to prevent the outbreak at sites and promoted early decampment. Only one EC, which was assisted through cash for work, was open to conduct the very activity. Meanwhile, the IDPs, moved out of ECs, were left without their shelters fully repaired. IOM, in consultation with the donor, has calibrated on the plan utilized the project's resources more on Shelter component thereby resulting in underachievement in relevant indicators including 2.1, 2.3 and 2.4. Meanwhile, the distribution of modular tents, solar lamps, distribution of information materials, and Shelter assistance was informed by initial assessment of 68 ECs and prioritized the underserved IDPs in these ECs, which contributed to overachievements of indicators 2.5 and 2.6.

Activities	Description	Implemented by
Activity 2.1	Conduct assessment to determine specific maintenance work for each EC	IOM
Activity 2.2	Conduct care and maintenance work for each EC through Cash-for-Work scheme and provision of basic materials	IOM
Activity 2.3	Distribution of modular tents and PPE to targeted ECs to ensure compliance with emergency COVID protocols.	IOM
Activity 2.4	Distribution of IEC materials to ECs and Government counterparts, local government units (LGU)/DSWD (CCCM in COVID-19 context)	IOM

# 7. Effective Programming

# a. Accountability to Affected People (AAP) 2:

The project was informed by the results of rapid needs assessments and three DTM reports conducted by IOM from January to February 2022 across 29 municipalities in most affected regions. Continuous DTM rollouts and community engagement activities through regular field visits helped the project team understand community perspectives and facilitated extensive inclusion, representation and participation of the IDPs including from the vulnerable groups. The project engaged target communities in Vulnerability Index profiling and ensured that they were better aware of the project's prioritization or selection process of target beneficiaries. Beneficiaries were provided with adequate time to update their profiles. Series of community consultations and local government partners consultations took place to ensure interventions are responsive to needs and priorities of local governments and affected population. The PDM found a majority reporting that they were consulted on their need prior to implementation (75%) and aware of the selection criteria (84%).

<sup>&</sup>lt;sup>2</sup> 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.

#### b. AAP Feedback and Complaint Mechanisms:

Utilizing the Information, Communication and Accountability Monitoring (ICAM) template as a common service platform, the project identified the evolving information needs, preferred communication channels and available accountability mechanism. The findings informed the project's feedback and complaint mechanism, which are easily accessible to all relevant stakeholders. IOM deployed various channels, including designated community leaders, LGU, agency field staff, SMS, suggestion box, and a hotline. Feedback mechanism and the available channels have been thoroughly explained to barangay officials and beneficiaries during consultation meetings. IOM also indicated hotline number to all distributed IEC materials, posted relevant information sheets in each target evacuation site and community, assigned designated focal points per thematic area, and collected feedback through regular field visits and monitoring activities. Of the 14 surveyed that used the feedback mechanisms, all (100%) reported either completely or moderately satisfied with how the concern was handled by IOM.

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

Prior to deployment, all project staff were trained on how to respond to a disclosure and safely refer to specialized services, if requested by the survivor, and have updated information on the GBV referral pathways, and the prevention of sexual exploitation and abuse (PSEA) focal points for reporting. IOM, CRS, CARE Philippines, its staff and vendors were trained on and signed a Code of Conduct, which promoted just and appropriate relationships between humanitarian staff and vulnerable community members, including PSEA. No reports of PSEA cases were confirmed during the implementation period.

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

The project was guided by IOM's Institutional Framework for Addressing GBV in Crises, and other principles to ensure measures are taken to mitigate risks of GBV in activities and gender-specific needs are addressed. Beneficiary selection used IOM's Vulnerability Index Tool, ensured prioritization of vulnerable women. Transitional shelters incorporated built-in latrines thereby reducing the risk of GBV from communal latrines that are often not sex disaggregated and properly maintained. Modular tents provided, helped to maintain privacy between the families. Furthermore, the technical CCCM assistance at transitional shelter sites included the orientation of camp managers and local officials on measures for GBV risk prevention and on updated GBV referral pathways. Community consultations promoted participation of all segments, especially women and girls. Monitoring activities such as FGDs and end-line assessment were conducted to capture information related to differences in impact and satisfaction on the assistance between genders.

# e. People with disabilities (PwD):

The project addressed the needs of PwDs, whenever possible. IOM's Vulnerability Index Tool incorporated socio-economic vulnerabilities of families, enabling the project to reach at least 369 PwDs. The rapidly evolving situation of displacements and lack of an accurate database made it difficult to estimate a precise number of beneficiaries. Transportation assistance was provided to PwDs in receipt of relief supplies including SRK. The project also deployed mobile team of engineers to support PwDs with shelter repair, which included technical assistance on PwD friendly measures for shelters such as placing the shelter alongside the road for easy access. BBS training covered simple modification techniques that families with PwDs can apply to improve accessibility and build a more inclusive shelter. Furthermore, MPCA allowed beneficiaries with increased vulnerabilities, to address greater needs such as hiring additional labour for shelter repair and purchase essential items based on their priorities.

#### f. Protection:

Shelter assistance, through technical assistance and BBS training, provided safer shelter solutions to affected communities, prioritizing those with increased socio-economic vulnerabilities and severe damage to their shelters. IOM's assistance resulted in 89 per cent completing shelter repair (at the time of PDM), while the remaining continue to receive technical assistance. In addition, 77 per cent reported their shelters are compliant with SPHERE standards (3.5 square meters/person), all reporting improvement in one of the following: privacy (77%), protection against harsh weather (93%), security (80%) and comfort (78%). The support also encouraged early decampment especially in the context of COVID-19. CCCM assistance helped the camp managers and LGUs to comply with national COVID-19 CCCM Operations Guidelines, providing a safer and more dignified environment for evacuees, with increased the protection

from COVID-19 and GBV. Notably, the PDM found all (100%) expressing that with the assistance their living conditions at the evacuation centres improved

#### 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	102,244

If **no**, please describe why CVA was not considered. Where feasible, CVA should be considered as a default response option, and multipurpose 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.

The project facilitated cash assistance of PHP 12,783,955 (USD 255,679.09) in total, wherein 10,244 individuals received the cash. IOM provided MPCA of PHP 4,599 (USD 92) each or a total of PHP 10,903,980 (USD 218,079.59) to 2,371 families - with 9,716 household members (4,980 F, 4,786 M) – to augment for additional shelter needs in 15 municipalities from Southern Leyte (3), Surigao del Norte (9) and Dinagat Island (3). MPCA served to address additional needs of the family to finance daily labour for shelter repair or purchase additional materials or essential household materials depending on the evolving situations and priorities. Of the 38 PDM respondents (30 F, 8 M) that received MPCA, the beneficiaries spent the cash to augment the shelter and basic needs such as on additional construction materials (37%), daily wage for local skilled labour (25%), followed by food, health and utilities. Notably, the PDM signified the project's impact on the communities' shelter conditions post-crisis. Beneficiaries (98%) found MPCA met their immediate shelter needs either completely or moderately. A CfW of PHP 1,797,475 (USD 35,949.50) was also conducted in Cagniog City in Surigao del Norte, which engaged 495 local skilled labours (73 F, 422 M) that constructed transitional shelters for 123 households. Additionally, a CfW of PHP 82,500 (USD 1,650) engaged 33 IDPs (20M, 13F) to support the EC site care and maintenance in Surigao del Norte. Several measures were taken to ensure distribution is conducted in a timely and accountable manner. Prior to the distribution and conduct of CfW, IOM organized stakeholders and community consultations to orient them on the usage of MPCA, cash received through CfW, and details of work and distribution. The field team also undertook an ocular survey with the selected Financial Service Providers (FSP), Palawan Pawnshop, to confirm its distribution capacity as well as its accessibility for the beneficiaries to receive MPCA. Memorandum of Agreement was coordinated with the FSP to ensure accountable transactions to the beneficiaries. During the distributions, IOM provided transportation assistance to those with difficulties accessing to local FSP and distribution sites. This was done especially for vulnerable groups such as senior citizens, PwDs, pregnant women and lactating mothers. IOM also ensured that temporary shelters were available to protect beneficiaries from hot and rainy weather conditions while they waited in the que. The presence of field staff at the distribution site also allowed beneficiaries to raise complaints and concerns on the spot. Minimum health protocols were adhered to at the distribution sites through crowd management, observance of physical distancing, setting up of hand sanitization stand, and provision of face masks.

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				
1.4 Distribution of MPCA	10,211 including 9,716 that benefitted from MPCA, and 495 that received cash through CfW	US\$ 254,029.09	Multi-Purpose Cash	Unrestricted				

	for transitional shelter construction			
2.2 Conduct care and maintenance work for each EC through Cash-for-Work scheme and provision of basic materials	33	US\$ 1,650	Multi-Purpose Cash	Unrestricted

9. Visibility of CERF-funded Activities						
Title	Weblink					
Shelter Tarps and modular tents in General Luna Science High School	https://twitter.com/IOM_Philippines/status/1490146992722706433					
7,000 Shelter Tarpaulins Distribution	https://twitter.com/IOM Philippines/status/1495968090290638848					
CCCM Odette affected communities	https://www.facebook.com/IOMPhilippines/posts/pfbid0zoRQKz4Cmcw4bX6A7izNx51Vob3mx6rzzACi7fcShNg2wReXyStRQXp953kZFikFl					
Dinagat Island Shelter grade tarpaulins	https://www.facebook.com/IOMPhilippines/posts/pfbid0y3RJDvmoWcjZX5WdxnjM YeWgkcEZNQN9bUJ1fHatH2Xms4qqskvs2DBkbUAtXksEl					
A Month after Typhoon Rai	https://www.facebook.com/IOMPhilippines/posts/pfbid0y3RJDvmoWcjZ X5WdxnjMYeWgkcEZNQN9bUJ1fHatH2Xms4qqskvs2DBkbUAtXksEl					
Meet Kaka Bag-ao	https://www.facebook.com/IOMPhilippines/videos/1600856776941899/					
DTM Report 2	https://www.facebook.com/IOMPhilippines/posts/pfbid0xtTsQ5BYWeMdMzLVXGHQz6858ZBkNWKN9TxS8AA3qVW5BxcABMPPWK78g1zAypl					
Solar lamps in Dinagat	https://www.facebook.com/IOMPhilippines/posts/pfbid02KnNpKBKWD2 SebQ3fmF1oXhNDj4qUZUkFC5fTPdzGt4Zomo2xcaQkiNQaBtfRRFxl					
Families who lived in No-Build Zones	https://twitter.com/IOM Philippines/status/1535512035139518464					
Transitional Shelters	https://twitter.com/IOM Philippines/status/1537373035195678720					
2nd batch of Transitional Shelters	https://twitter.com/IOM_Philippines/status/1537373003184746496					
Shelter Repair Kits distribution	https://twitter.com/IOM Philippines/status/1478612325686865926					
CARE shelter recovery support	https://www.facebook.com/CAREPhilippines/posts/pfbid02o62NRxx5wy uw5znXmpuoZnK4u3FoUa4JPe4dHg6ff3KyXrZUuv9MrfeDDY1Mrpizl					
CARE in Siargao	https://www.facebook.com/CAREPhilippines/posts/pfbid0S94ddk4d7Phd QdPfQZ6KgSQZZuQxAqLqem7d9pkWEZhMgGhqkt8KmChakRK78C9rl					

# 3.2 Project Report 21-RR-FPA-035

1. Proj	I. Project Information								
Agency:		UNFPA			Country:		Philippines		
Sector/cluster:		Protection - Gender-Based Violence			CERF project	code:	21-RR-FPA-035		
Project ti	tle:	Health - Sexual and Reproductive Health  Integrated Sexual Reproductive Health and Gender-Based Violence Prevention and R Rai (Odette)					ention and Response	to Super Typhoon	
Start date	<b>e</b> :	10/01/2022			End date:	e: 09/07/2022			
Project re	evisions:	No-cost extension		Redeployn	nent of funds		Reprogramming		
	Total re	quirement for agency's	sector res	ponse to cur	rent emergency	<b>/</b> :		US\$ 9,000,000	
	Total fu	nding received for agency's sector response to current emergency:						US\$ 594,903	
	Amount	t received from CERF:						US\$ 2,579,014	
Funding	Total C	ERF funds sub-granted t	o implem	enting partne	rs:			US\$ 1,322,084.06	
Fun	Gov	ernment Partners					US\$ 0		
		rnational NGOs	1000					US\$ 513,311.74	
		onal NGOs Cross/Crescent Organisa	tion				US\$ 807,772.32 US\$ 0		

# 2. Project Results Summary/Overall Performance

UNFPA reached 91,984 (64,549 women and girls, 27,345 men and boys) people through its integrated SRH and GBV interventions in CARAGA region in the Provinces of Surigao del Norte (Surigao City, Tagana-An, Malimono, San Benito, General Luna) and Dinagat Island (Libjo and Basilisa) and in the Eastern Visayas region in the Province of Southern Leyte (Bontoc, Maasin and Limasawa). A total of 7,399 girls and women reached with SRH services. Safe deliveries reached 4,345 women through four (4) Emergency Maternity Tent Facilities (EMTF), two (2) Women's Health on Wheels (WHoW) in hard-to-reach areas equipped with 28 emergency reproductive health kits. Sea Ambulance supported referrals from hard-to-reach areas. A total of 2,350 pregnant and postpartum women benefited from cash for health, amounting to \$93,988.00. Community awareness on integrated information on SRH, GBV, and MHPSS through 32 RHMM Reproductive Health Missions reached 2,925 people. Regional and provincial SRH / GBV sub-cluster coordination mechanisms activated to support the mobilisation of multi-sectoral initiatives delivering lifesaving SRH services. The local health staff regained confidence and agency through capacity building initiative and incentives.

Gender based violence services reached 84,495 people through GBV risk mitigation and response services. Ten women friendly spaces (WFS) established to support GBV case management and psychosocial support through 268 trained WFS facilitators. Ten GBV referral pathways established plus Information Education and Communication (IEC). The project supported 1,500 selected vulnerable women and girls including survivors of GBV with unconditional cash for protection amounting to \$360,000 as safety nets. Dignity kits, solar radios and solar lamps provided to 12,125 women and girls to ensure to ensure ease of access to other services. The project continued to engage the community in GBV risk mitigation through awareness raising and radio messages. These also included information about GBV services to ensure that survivor's safe referrals for services. The GBV awareness-raising sessions through radio messaging and

GBV core services reached 27,414 people. The WFS facilitators also conducted community outreaches that reached 39,640 (20,773 women and girls, 18,867 men and boys) with a focus on information about GBV services, GBV risk mitigation and human rights.

# 3. Changes and Amendments

There were no major changes to the original plan apart from the end date of the project. UNFPA however did expand some of the service delivery areas where a) the target number of beneficiaries had been exhausted or b) where agreement or support of the local government was not granted after consultation. In these cases, assessments were made in adjoining municipalities or barangay and additional beneficiaries reached with services or interventions made in expanded locations.

# 4. Number of People Directly Assisted with CERF Funding\*

Sector/cluster	Protection - 0	Protection - Gender-Based Violence								
		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	40,392	5,000	9,598	5,000	59,990	48,578	20,263	8,572	7,082	84,495
Host communities	0	0	0	0	0	0	0	0	0	0
Other affected people	0	0	0	0	0	0	0	0	0	0
Total	40,392	5,000	9,598	5,000	59,990	48,578	20,263	8,572	7,082	84,495
People with disabilities (PwD) out of the total										
	634	78	151	78	941	72	9 304	8	8 10	6 1,227

Sector/cluster	Health - Sexi	Health - Sexual and Reproductive 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	2,350	0	0	0	2,350	6,902	0	497	0	7,399
Host communities	0	0	0	0	0	0	0	0	0	0
Other affected people	2,000	0	0	0	2,000	0	0	0	0	0
Total	4,350	0	0	0	4,350	6,902	0	497	0	7,399
People with disabilities (PwD) out of the total										
	68	0	0	0	68	111	0	0	0	111

<sup>\*</sup> Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

# 5. People Indirectly Targeted by the Project

The dignity kits, solar lamps, and solar radios have benefitted not just the women and girls who directly provided with the items, but their immediate and extended families who live in the same house. They were able to share these items to others in the household. For women and girls provided with cash assistance, the money spent on the mothers' and the neonates' needs. Some of the cash used to buy food for the family and children's school supplies.

Information awareness raising and radio messaging also touched those in the community who are not direct targets. These include women of other ages aside from the usually targeted women of reproductive age (WRA) and adolescent girls as well as men of other ages. Moreover, information sessions also reached community members and local leaders, among others.

6. CERF Results Framework							
Project objective	Project objective Ensuring continuity of life-saving services for Sexual and Reproductive Health and access to multi-sectoral services to mitigate and respond to Gender-Based Violence to address the unique needs of women, girls, persons with disabilities and other at-risk populations.						
Project objective	Project objective Ensuring continuity of life-saving services for Sexual and Reproductive Health and access to multi-sectoral services to mitigate and respond to Gender-Based Violence to address the unique needs of women, girls, persons with disabilities and other at-risk populations.						
Output 1	Continued availability of essential SRH coordination, including provi			ces through strengthened			
Was the planned o	utput changed through a reprogrami	ming after the application	n <b>stage?</b> Yes □	No ⊠			
Sector/cluster	Health						
Indicators	Description	Target	Achieved	Source of verification			
Indicator 1.1	Regional and provincial SRH sub- clusters supported to mobilise multi sector initiatives to provide life- saving SRH services. (regional and provincial sub- clusters)	5	5	Partners' Meeting			
Indicator 1.2	Number of live births assisted by a skilled health personnel	1,500	4,345	Facility reports from Partners' Report and Database			
Indicator 1.3	Number of pregnant and postpartum women and women of reproductive age including adolescent girls supported by temporary maternity clinics and repaired functional	2,000	4,917	Partners' Report and UNFPA's Monitoring and Database			

	health facilities and Reproductive Health Medical Missions						
Indicator 1.4	H.1a Number of emergency health kits delivered to healthcare facilities (Reproductive Health Kits distributed to support Basic and Comprehensive Emergency Obstetric and Neonatal Care)	13	28	Delivery Receipt			
Indicator 1.5	Number of Reproductive Health Medical Missions in severely affected areas	6	32	Partners' Report and RHMM Database			
Explanation of o	utput and indicators variance:	community wide	s that created a routine and	y of services, and the numerous			
Activities	Description	1		Implemented by			
Activity 1.1	as an alternative service delivery me	Procurement and deployment of one (1) unit mobile birthing facility with staff complement as an alternative service delivery model (including staff support to EMTF) to respond in the aftermath of humanitarian emergencies					
Activity 1.2	strengthening in the communities aff	Ensure the continuity of life-saving sexual and reproductive health services and systems strengthening in the communities affected by Super Typhoon Rai, with protection against gender-based violence following an integrated SRH-GBV approach Vision					
Activity 1.3	Provision of support to maternity and	d health facilities t	nrough repairs and equipping	Plan International and World Vision			
Activity 1.4	Conduct of Reproductive Health disadvantaged areas	Medical Missions	in geographically isolated	d and Plan International and World Vision			
Output 2	Social and economic impact of Typ	phoon Odette on	vulnerable pregnant wome	n and adolescents mitigated			
Was the planned	output changed through a reprogram	ming after the ap	pplication stage? Y	es 🗆 No 🗵			
Sector/cluster	Health						
Indicators	Description	Target	Achieved	Source of verification			
Indicator 2.1	Number of people benefitting from sector-specific unconditional cash transfers (Number of people with	2,350	2,350	Partners' Report and UNFPA's Monitoring and Database			

	cash (pregnant and postpartum women)			
Indicator 2.2	Total value of sector-specific unconditional cash transfers distributed in USD	\$93,988	\$93,386	Partners' Report and UNFPA's Monitoring and Database
Explanation of ou	utput and indicators variance:			<u> </u>
Activities	Description			Implemented by
Activity 2.1	Provision of Cash Assistance to p FBD and PPFP	regnant and postpartu	m women to access ANC,	World Vision and Plan International
Output 3 Was the planned	Women and girls, particularly GBV in a safe, confidential and timely moutput changed through a reprogram	anner	·	ulti-sectoral GBV service
Sector/cluster	Protection			
Indicators	Description	Target	Achieved	Source of verification
Indicator 3.1	Number of service providers mobilised to provide life-saving multi- sectoral GBV risk mitigation and response services	40	288	Partners' Report and UNFPA's Monitoring and Database
Indicator 3.2	Number of safe spaces and/or centres constructed or rehabilitated	10	10	Partners' Report and UNFPA's Monitoring and Database
Indicator 3.3	Number of community-based women and youths organised to provide psychosocial support interventions, entry points for GBV reporting and referral to services, and community GBV risk mitigation intervention	200	268	Partners' Report
Indicator 3.4	Number of people benefitting from sector-specific unconditional cash transfers (Number of at risk women supported with cash assistance for protection risk mitigation)	1,500	1,500	Partners' Report

Indicator 3.5	Total value of sector-specific unconditional cash transfers distributed in USD	\$360,000	\$360,000	Partners' Report		
Indicator 3.6	Number of women and girls reached through awareness-raising and/or messaging on prevention and access to services (Number of women and girls reached by lifesaving messages on SRH, GBV, PSEA and MHPSS)	43,290	57,150	Partners' Report		
Indicator 3.7	Number of men and boys reached through awareness-raising and/or messaging on prevention and access to services (Number of men and boys reached by lifesaving messages on SRH, GBV, PSEA and MHPSS)	10,000	21,378	Partners' Report		
Explanation of o	output and indicators variance:	other capacity development of the capacity development of	elopment activities for gove	partners were able to maximize		
Activities	Description	,		Implemented by		
Activity 3.1.1	Provision of mobile Women's Healintegrated SRH (Maternal Health/Far reach areas					
Activity 3.1.2		Setting-up and refurbishment of severely damaged Women and Children Protection Units and the Philippine National Police- Women and Children Protection Centre (PNP-WCPC)				
Activity 3.1.3	GBV response services, in particula	Deployment of GBV response and risk mitigation- trained personnel to provide life-saving GBV response services, in particular clinical management of rape and intimate partner violence (CMR-IPV) and psychosocial support interventions to GBV survivors				
Activity 3.2.1	·	Provision of 3 computer sets for the PNP-WCPC to facilitate immediate recording and filing of case(s) in court with survivors' consent				
Activity 3.2.2	Establishment of Women-Friendly Sp	Establishment of Women-Friendly Spaces in 10 severely affected areas				

		(WEAVERS, Inc.), ACCORD, MARADECA
Activity 3.2.3	Provision of dignity kits with solar lamps and solar radios to target women and adolescent girls	Plan International - Women Enablers Advocates & Volunteers for Empowering and Responsive Solutions (WEAVERS, Inc.), ACCORD, MARADECA
Activity 3.3.1	Organising internally displaced women and youth and orienting them on how to manage WFS (i.e provision of psychological first aid to women and girls, conduct security patrolling in transitional sites/ displacement sites and affected communities, provide safe accompaniment to GBV survivors)	Women Enablers
Activity 3.3.2	Provide cash for work for Women Friendly Space Facilitators	Plan International - Women Enablers Advocates & Volunteers for Empowering and Responsive Solutions (WEAVERS, Inc.), ACCORD, MARADECA
Activity 3.4	Provision of cash assistance for protection to GBV survivors undergoing case management and at-risk women	Coalition Against Trafficking of Women in the Asia Pacific (CATW- AP)
Activity 3.5	Conduct of awareness-raising sessions for women and girls in communities by Women-Friendly Space facilitators on GBV risk mitigation and access to services (face to face and radio based)	
Activity 3.6	Conduct of awareness-raising sessions for men and boys in communities by Women-Friendly Space facilitators on GBV risk mitigation and prevention, (face to face and radio-based)	Plan International - Women Enablers Advocates & Volunteers for Empowering and Responsive Solutions (WEAVERS, Inc.), ACCORD, MARADECA

Output 4	Coordinated delivery of inter-agency	y and multi-sectoral GBV ris	sk mitigation and respons	se established	
Was the planned	output changed through a reprogram	nming after the application	n stage? Yes □	] No ⊠	
Sector/cluster	Protection				
Indicators	Description	Target			
Indicator 4.1	Number of referral pathways established and regularly updated	10	27	Plan International - Women Enablers Advocates & Volunteers for Empowering and Responsive Solutions (WEAVERS, Inc.), ACCORD, MARADECA	
Indicator 4.2	Number of people benefitting from core GBV services (Number of atrisk people benefitting from GBV prevention and response services)	5,000	27,414	Plan International - Women Enablers Advocates & Volunteers for Empowering and Responsive Solutions (WEAVERS, Inc.), ACCORD, MARADECA	
Explanation of o	utput and indicators variance:	For indicator 4.1, the provinces decided to use the referral mechanisms developed for the CERF areas and customized and applied them to other municipalities within the provinces; for indicator 4.2, the support provided the form of more active referral and human resource. The communitywide awareness about GBV services and risk mitigation sessions was a catalyst access to most of the services			
Activities	Description		Implemented by		
Activity 4.1.1	Strengthen and/or deploy GB implementation of an inter-age programme response		UNFPA, GBV-Subcluster, Provincial Social Welfare and Development (PSWDO)		
Activity 4.1.2	Conduct of service mapping and de referral pathways	velopment/updating of GBV	UNFPA, GBV-Subcluster, Provincial Social Welfare and Development (PSWDO)		
Activity 4.2	Conduct dissemination activities on members of inter-agency protection city/municipal level on rights-base survivor-centred GBV prevention ar referral pathways will be shared with	mechanisms at village and ed, culturally sensitive and nd response measures. The	d Social Welfare and Dev		

# 7. Effective Programming

# a. Accountability to Affected People (AAP) 3:

The inter cluster needs assessment that informs the humanitarian needs priorities involved in the community at the onset of the disaster. UNFPA was part of the team that conducted community consultations in Dinagat Islands and South Leyte. Women and girls were also consulted on the items of the Dignity Kits and Maternity Kits that customised in accordance with the cultural expectations. Consultations conducted before the establishment of the Women Friendly Spaces (WFS) to promote buy in and ownership.

#### b. AAP Feedback and Complaint Mechanisms:

Community feedback sessions conducted by staff through focus group discussions and provided responses. A Post Distribution Monitoring survey conducted with the beneficiaries of dignity kits, solar lamps, solar radios; cash voucher assistance, and clients of reproductive health medical missions, to get their feedback on implementation of the activities. Focus group discussions conducted with women and girls who attend the WFS sessions to get their feedback on the WFS programming.

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

UNFPA ensured that all staff undertook the mandatory PSEA training and IPs were oriented on PSEA. The WFS facilitators trained on PSEA were able to conduct community awareness on PSEA. Reporting mechanisms on PSEA mainstreamed in the GBV referral pathway especially for PSS and medical services before further referrals. The PSEA National Hotline was part of the GBV referral pathways that were popularised in Odette Response Areas and supported by Caraga's RIACAT and GBV-CP sub cluster.

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

The project purposely targeted women, girls and those at risk for GBV especially not just as beneficiaries but partners in the community. Women and girls capacitated to lead gender mainstreaming in their communities through advocates of GBV prevention and mitigation

## e. People with disabilities (PwD):

People with disabilities, in particular women with disabilities, were encouraged during community awareness to access services. The mobile services supported access to services for PWD due to proximity of the services. The post distribution assessments included PWDs, and their views documented

#### f. Protection:

The GBV component of the project, especially the risk mitigation component of the project was to ensure that protection of women and girls was paramount including protection from risks of GBV. The cash for protection and health was a risk mitigation measure and community risk awareness sessions contributed to protection of women

## g. Education:

There was no formal education in this project, however informal knowledge gain conducted through all the community structures. The barangay health workers and WFS facilitators all gained knowledge on GBV and SRH. IEC material at the community level promoted knowledge gain

<sup>3</sup> 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 <u>IASC AAP commitments</u>.

# 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	4,084

If **no**, please describe why CVA was not considered. Where feasible, CVA should be considered as a default response option, and multipurpose 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.

Yes, planned: 3,700. Cash for Health for 2350 pregnant and lactating women with priority on those internally displaced persons (IDPs) by the super typhoon Rai; Cash for Work for 234 facilitators of the Women Friendly Spaces (WFS) who were selected from among volunteer IDPs and were tasked to manage the WFS and to provide women and girls in the community, including GBV survivors, with important information for their protection and health, with referrals for further services, as well as with psychosocial support; Cash for Protection for 1500 GBV survivors as a GBV prevention measure and as well as help survivors who choose to escape from perpetrators by improving their access to emergency and lifesaving assistance.

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 2.1 Cash for health	2,350	US\$ 93,988	Health	Unrestricted			
Activity 3.2.2 Cash for Work	234	US\$ 54,289.85	Protection	Unrestricted			
Activity 3.4 Cash for Protection	1,500	US\$ 360,000	Protection	Unrestricted			

1. Visibility of CERF-funded Activities	,					
Title	Weblink					
UNFPA's Cash Voucher Assistance in Dinagat Islands	https://web.facebook.com/UNFPAph/photos/a.230912670334742/5312909015468390/					
Facility Repair	https://web.facebook.com/UNFPAph/photos/a.230912670334742/5304934389599186					
Typhoon Response 6 Months On	https://philippines.unfpa.org/en/resources/typhoon-odette-response-six-months-situation-report-9-0					
Birthing Hope Amidst the Storm	https://plan-international.org/philippines/case-studies/birthing-hope-amidst-the-storm/					
Surviving Rough Waters: How mothers overcame Typhoon Odette	https://plan-international.org/philippines/case-studies/surviving-rough-waters-how-mothers-overcame-typhoon-odette/					

https://www.facebook.com/1324764660/posts/pfbid02Je4FGJRzASAh9591nqzDnAH1 AqiVtQzdgUzDSsxu32vYgAt5Bk7hmX4eHBEi1sYHI/?sfnsn=mo&extid=a&mibextid=2h bdlt
https://twitter.com/UNFPAph/status/1489177511049457664
https://philippines.unfpa.org/en/publications/unfpa-philippines-typhoon-odette-rai- response-snapshot
https://philippines.unfpa.org/en/news/unfpa-putting-humanitarian-heroes-spotlight-gender-based-violence-coordinator-kai-jimenez-0
https://philippines.unfpa.org/en/news/hope-wheels

# 3.3 Project Report 21-RR-CEF-059

1. Project Information								
Agency:		UNICEF			Country:		Philippines	
		Water, Sanitation and H	lygiene					
Sector/cl	uster:	Protection - Child Protection			CERF project	code:	21-RR-CEF-059	
		Education						
Project ti	itle:	Ensuring access to lifesaving WASH, child protection, and education supplies and services with an integrated child survival development and protection framework in communities affected by Typhoon Rai						
Start date	e:	20/12/2021			End date:		19/06/2022	
Project re	evisions:	No-cost extension		Redeployn	nent of funds		Reprogramming	
	Total red	quirement for agency's	sector res	sponse to curi	rent emergency	<i>r</i> :		US\$ 11,000,000
	Total fu	nding received for agen	cy's secto	or response to	current emerg	jency:		US\$ 120,000
	Amount	received from CERF:						US\$ 3,396,045
Funding	Total CERF funds sub-granted to implementing partners:						US\$ 1,470,459	
Ē	Gove	ernment Partners						US\$ 0
		national NGOs						US\$ 1,379,199
		onal NGOs						US\$ 91,260
	Red	Cross/Crescent Organisa	tion					US\$ 0

# 2. Project Results Summary/Overall Performance

UNICEF and its partners provided life-saving WASH, child protection and education assistance to vulnerable communities affected by Super Typhoon Rai in 12 municipalities in 3 provinces in the CARAGA and Eastern Visayas regions.

The project assisted a total of 95,538 people, exceeding the 80,000 targets. This includes 27,815 women, 27,143 men, and 40,580 children, with 2,054 persons with disabilities. Increased access to safe water and sanitation, supported by proactive hygiene promotion, prevented outbreaks of diarrhoea and other WASH-related diseases. Support for education services restored children's learning and contributed to the psychosocial recovery of affected children and the reopening of face-to-face classes in schools that had been closed since March 2020.

For WASH, the largest sectoral component, 91% of the target population was provided access to safe water through provision of supplies and repair of damaged community water systems. More than 88% received hygiene and COVID-19 kits, including more than 28,000 women/girls benefitting from menstrual hygiene materials (MHM). Furthermore, over 100% of the target population was reached with medical supplies and equipment extended to community health facilities and through deployment of mobile medical teams. Partners used the strategy of a Mobile Hardware (to bring toilet materials to HH) and the Sanitation Caravan to reach remote communities to essential hygiene messages and practices. As a result, some IP communities that never had access to sanitation, now benefit from access to safe HH toilets.

In Education, 12,912 children benefitted from receiving individual learning materials. Over 127% of target children accessed formal or non-formal education through temporary learning spaces and other support to restore learning.

For Child Protection, 29,633 people (children, women, men) benefitted, exceeding the 15,000 targets (revised from original planned 50,0000 at CERF mid-year review). More than 10,000 peopled (9,940 children, 166 women, 28 men) or 191% above target, received mental health care services to assist recovery from the trauma of the typhoon through establishment of 9 child-friendly spaces with learning and play materials, handwashing facilities, and mobile services to remote villages and trained caregivers and social workers. 230% (11,497 reached out of the 5,000 planned).

## 3. Changes and Amendments

#### WASH

UNICEF originally planned to extend WASH support to evacuation centres, and the facilities installation was supposed to be for communal use rather than individual households. However, most camps closed just a few weeks after the typhoon struck; displaced people opted to go back to their communities and stay with relatives to start repairing their damaged houses. Adapting to this change in context, UNICEF and its WASH partners revised their approach. Household sanitation repair kits (SRKs) were distributed instead to replace communal latrines and other WASH facilities. In Surigao City, 450 individuals who relocated in a transitory site in Barangay Cagniog were also supported in partnership with IOM.

In Southern Leyte, distribution of sanitation repair materials was accomplished through restricted cash transfers. The change in strategy ensued after further consultation with target beneficiaries. This change resulted in a more sustainable sanitation solution, allowing communities to recover some of the loss in sanitation gains prior to the typhoon. In many cases the funding contributed to moving communities from G0 sanitation levels to G1 ZOD.

#### Child Protection

There was a reduction in the number of target beneficiaries from 50,000 to 15,000. This change was requested at mid-year review to correct an error in beneficiary calculations.

#### Education

Additional beneficiaries were able to access the education supplies provided, and additional participants were accommodated to participate in trainings to maximize the resources. However, for Indicator 3.2, some supplies procured were used for shared purposes rather than for individual purposes, thus a lower result.

# 4. Number of People Directly Assisted with CERF Funding\*

Sector/cluster	Education										
	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	0	0	0	0	0	0	0	0	0	0	
Host communities	0	0	0	0	0	0	0	0	0	0	
Other affected people	835	119	6,742	7,303	14,999	167	662	6,470	6,582	13,881	
Total	835	119	6,742	7,303	14,999	167	662	6,470	6,582	13,881	
People with disabilities (PwD) out of the total											
	17	2	135	146	300	0		1 55	7 59	2 1,150	

Sector/cluster	Water, Sanitation and Hygiene										
			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	4,000	4,000	4,639	3,039	15,678	148	149	76	77	450	
Host communities	16,000	16,000	18,556	12,156	62,712	27,667	26,994	20,226	20,201	95,088	
Other affected people	0	0	805	805	1,610	0	0	1,295	1,294	2,589	
Total	20,000	20,000	24,000	16,000	80,000	27,815	27,143	21,597	21,572	98,127	
People with disabilities (PwD) out of the total											
	400	400	480	320	1,600	85	863	164	170	2,055	

<sup>\*</sup> Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

Sector/cluster	Protection - 0	Protection - Child Protection								
			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	0	0	0	0	0	0	0	0	0	0
Host communities	16,000	16,000	8,640	9,360	50,000	10,285	5,855	6,841	6,652	29,633
Other affected people	0	0	0	0	0	0	0	0	0	0
Total	16,000	16,000	8,640	9,360	50,000	10,285	5,855	6,841	6,652	29,633
People with disabilities (PwD) out of the total										
	320	320	173	187	1,000	1	0	1	5	7

<sup>\*</sup> Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

## 5. People Indirectly Targeted by the Project

Government teams at provincial and municipal levels benefitted from their full involvement in the planning and implementation and their exposure to international norms and standards expected to improve the government's preparedness and response to emergencies.

#### WASH

WASH interventions supported by CERF were complemented with hygiene promotion, reaching more than 500,000 people, often covering entire communities, not just specific target population. These initiatives also included COVID-19 infection prevention and control. UNICEF leveraged other funds received from other sources to complement and reach more people in affected communities with hygiene promotion, including members of vulnerable groups such as persons with disabilities, older people, pregnant and lactating women, indigenous people. A range of promotion strategies were utilized to mitigate lock downs and social distancing, to distribution of IEC materials, were employed by partners.

Some WASH key interventions also included governance activities to increase ownership and sustainability. For example, community WASH committees, composed mostly of women, were formed; barangay health workers and nutrition scholars were trained, grouped and supported to roll out hygiene promotion across villages; toilet construction monitors were formed and trained for the distribution of SRKs. These enabling environment activities were carried out in collaboration with rural sanitary inspectors and municipal health officers in the project's target sites delivering a WASH sector system strengthening dimension to the response.

The mobile medical teams deployed to provide services to prevent and treat diarrhoea and other emergency-related illnesses also provided a holistic package of health interventions for children and mothers, including antenatal consults, vaccination, and counselling on health, nutrition, hygiene, and COVID-19. Two mobile medical teams were deployed to provide services to two cities and seven municipalities across the Provinces of Southern Leyte, Surigao del Norte, and Dinagat Islands.

#### Education

A total of 969 school personnel, child development workers, and LGU personnel benefitted from a refresher course on Education in Emergencies that was developed and approved by the Department of Education and Early Childhood Care and Development Council. This strengthened their capacities to improve their response to the current emergency and preparedness and response to future emergencies.

#### Child Protection

There was a transfer of skills and knowledge as well as influx of innovative ideas when the regional and local child protection actors at the provincial, municipal, city, and village levels were mobilized and capacitated to implement child protection and gender-based violence interventions for emergency response. Some innovations applied by the communities and schools were organizing of local psychosocial support groups, use of combined traditional and digital platforms to widen the reach, and youth dialogues with their local officials to gain their support and commitments. This increased their confidence and deepened their understanding on CP and GBV that led to strengthening of child protection systems, delivery of services including case management and referral pathways, development of policies and plans, inclusion in local budgets as well as increased ability to prepare, prevent and respond to future emergency situations. Likewise, community- and school-based interventions created awareness especially among the young population who are into digital space expanding the advocacy in multiple ways. Organized youth groups also resulted to youth-led community projects such as coastal clean-up drive, feeding programs, sportsfest, and community gardening.

#### 6. CERF Results Framework

#### **Project objective**

Address the immediate and lifesaving needs on WASH, Child Protection, and Education in target municipalities in Surigao del Norte, Dinagat Islands, and Southern Leyte.

Women, men, girls and boys in the affected communities have equitable access to, and use, safe water and sanitation Output 1 services, and adopt good hygiene practices Was the planned output changed through a reprogramming after the application stage? Yes 🗆 No 🛛 Sector/cluster Water, Sanitation and Hygiene Indicators Description Target Achieved Source of verification 80,000 Indicator 1.1 WS.6 Number of people accessing 72,414 Distribution list; progress a sufficient quantity of safe water as and final reports of per agreed sector/cluster implementing partners; coordination standards and norms pictures; trip reports of (through the provision of emergency UNICEF staff member water kits) 80,000 Indicator 1.2 WS.8b Number of people who have 70,646 Distribution list; progress received water treatment supplies and final reports of and can demonstrate appropriate implementing partners: utilisation (Number of people pictures: trip reports of UNICEF staff member provided with hygiene kits or key hygiene items, including on COVID-19 infection, prevention and control Indicator 1.3 SP.1b Number of people benefiting 24,000 28,222 Distribution list; progress and final reports of from menstrual hygiene management kits and/or dignity kits implementing partners; pictures; trip reports of UNICEF staff member Indicator 1.4 WS.7b Number of people who are 48,000 41,448 Distribution list; progress using sufficient and safe water for and final reports of drinking, cooking and personal implementing partners; pictures; trip reports of hygiene use UNICEF staff member Indicator 1.5 WS.9b Number of people who 24,000 14,442 Distribution list; progress report directly using safe and and final reports of dignified toilet/latrines with implementing partners; functional handwashing facilities pictures; trip reports of UNICEF staff member 13 Distribution list; progress Indicator 1.6 Number of healthcare facilities 10 equipped with WASH facilities and final reports of implementing partners; pictures; trip reports of UNICEF staff member Indicator 1.7 Number of healthcare facilities 10 19 Distribution list; progress and final reports of provided with institutional cleaning implementing partners; and disinfection kits pictures; trip reports of UNICEF staff member Indicator 1.8 1.610 2,589 Number of schoolchildren with Distribution list; progress access to WASH supplies and and final reports of facilities in learning centres piloting implementing partners; face-to-face classes pictures: trip reports of UNICEF staff member

Indicator 1.9	Number of learning centres participating in the pilot face-to-face classes with access to COVID-19 cleaning and disinfection kits	14	14	Distribution list; progress and final reports of implementing partners; pictures; trip reports of UNICEF staff member
Indicator 1.10	Number of people reached by medical supplies and services to address acute watery diarrhoea and related common illnesses-	87,200	95,088	Distribution list; progress and final reports of implementing partners; pictures; trip reports of UNICEF staff member
	utput and indicators variance:	focussed intervention number of household than what was planned the Philippine Statistic Indicators 1.4 and 1.5 facilities in evacuation count, to household led challenges related to affected regions), and (e.g., limited type of consightest change in sear related activities was completed before the ongoing in some placed damaged understand sanitation facilities. Was affected regions, skilled Indicator 1.10 - The infacilities provided with extending mobile servers.	s, e.g., distributions of members being lowed (5 persons/houseless Authority.  The strategy was a centres, projected to evel interventions. Coprocurement (e.g., a transport to island rommercial vessels, go a conditions), implered delayed. Distribution CERF deadline but es. Households who ably prioritised re-colith the high numbered labour was in shown itial target included in medical supplies as vices. The medical tente supported facilities.	vailability of supplies in the nunicipalities and provinces, gale warnings issued at the mentation of construction- of SRKs, for example, were actual toilet repairs are still se houses were significantly instruction of their shelters over of damaged houses in the rt supply.  Deeople to be reached by health is well as medical teams expanded their services is resulting in overachievement
Activities	Description		Implement	ed by
Activity 1.1	Provision of emergency family wat disinfectant)	ter kits (water containers	+ water Action Agai	nst Hunger, Plan International
Activity 1.2	Distribution of expanded family hygical for COVID19 prevention and control	ene and dignity kits, with pro	ovisions Action Agai	nst Hunger, Plan International
Activity 1.3	Distribution of MHM items as part of	Distribution of MHM items as part of the family hygiene and dignity kits  Action		
Activity 1.4	Support to re-establishment of systems/sources: disinfection and Provision of materials and technical monitoring in evacuation centres sources in critical communities	repair of wells/springs/hand assistance to ensure water	dpumps Purse, Plar quality	nst Hunger, Samaritan's n International
Activity 1.5 Setting up of temporary/semi-perma centres/communities Installation of handwashing facilities in critical evacu		additional bathing cubicl	es and Purse, ACT	nst Hunger, Samaritan's ED, Plan International (noting ivity was modified to of SRKs)
Activity 1.6	Support to repair and installation of V and COVID-19 community treatment		centres Action Agai	nst Hunger, Plan International
·		·		

Activity 1.7	Distribution of institutional cleaning and disinfection kits to healthcare facilities and COVID-19 community treatment and quarantine facilities  Action Against Hunger, Plan International facilities
Activity 1.8	Provision of essential hygiene materials and basic WASH facilities to learning centres participating in the pilot resumption of face-to-face classes
Activity 1.9	Provision of COVID-19 institutional cleaning and disinfection kits to learning centres participating in the pilot resumption face-to-face classes
Activity 1.10	Procurement and distribution of life-saving medical supplies and provision of services to address acute watery diarrhoea and related common illnesses

Output 2	Children and adolescents are protected from violence, exploitation, abuse, neglect and harmful practices					
Was the planned ou	tput changed through a reprogram	ming after the application	stage? Yes □	No ⊠		
Sector/cluster	Protection - Child Protection					
Indicators	Description	Target	Achieved	Source of verification		
Indicator 2.1	H.9 Number of people provided with mental health and pyscho-social support services	5,300	10,134	Monitoring tools based on weekly reporting by IPs, validated by UNICEF's Consultants in the field, through bi-weekly updating meetings, and quarterly programmatic visits. Documentation includes attendance sheets and photos.		
Indicator 2.2	CP.1 Number of unaccompanied or separated children identified and assisted, including family tracing and reunification (%)	100	0	Monitoring tools based on weekly reporting by IPs, validated by UNICEF's Consultants in the field, through bi-weekly updating meetings, and quarterly programmatic visits.		
Indicator 2.3	CC.1 Number of frontline aid workers (e.g. partner personnel, social workers, teachers, WASH frontline aid workers) who received short refresher training to support programme implementation in child protection and PSEA.	50	142	Monitoring tools based on weekly reporting by IPs, validated by UNICEF's Consultants in the field, through bi-weekly updating meetings, and quarterly programmatic visits. Documentation includes attendance sheets and photos.		

Indicator 2.4	PP.1a Number of referral pathways established and regularly updated9 (municipal level referral pathways)	9	15	Monitoring tools based on weekly reporting by IPs, validated by UNICEF's Consultants in the field, through bi-weekly updating meetings, and quarterly programmatic visits. Printed tarpaulins displayed in strategic sites.
Indicator 2.5	PS.2 Number of people benefitting from core GBV services (e.g. case management, psycho-social support, clinical management of rape, PEP, etc.)	50	19	Monitoring tools based on weekly reporting by IPs, validated by UNICEF's Consultants in the field, through bi-weekly updating meetings, and quarterly programmatic visits. Documentation such as intake forms.
Indicator 2.6	CC.2 Number of people reached through awareness-raising and/or messaging on prevention and access to services (on CP, PSEA and GBV)	5,000	11,497	Monitoring tools based on weekly reporting by IPs, validated by UNICEF's Consultants in the field, through bi-weekly updating meetings, and quarterly programmatic visits. Documentation such as attendance sheets and photos, and online views and interactions.
Indicator 2.7	AP.2a Number of affected people who state that they are aware of feedback and complaints mechanisms established for their use	5,000	7,841	Monitoring tools based on weekly reporting by IPs, validated by UNICEF's Consultants in the field, through bi-weekly updating meetings, and quarterly programmatic visits. Filled-up feedback forms.
Explanation of output and indicators variance:			es using <i>Usap Tayo</i> Flip to ensure that adolescer	Chart and MHPSS Peer nts and youth are provided
		with MHPSS services appropriate for their specific needs and concerns.  On Indicator 2.2, though this is a standard indicator, the Department of Social Welfare and Development (DSWD), the lead government agency for Protection Cluster, confirmed no case of unaccompanied and separated children in TY Rai/Odette affected areas in CARAGA and Southern Leyte, thus, no response is done except continuous monitoring. This can be		

		attributed to the preparedness and experier emergencies.	nce of the two regions in previous
		On Indicator 2.5, these are the monitored C implementing partners referred by local gov providers for financial support. Given the se challenges surrounding the confidentiality a very few would come out and seek help.	rernment agencies and service ensitivity of such cases and the
Activities	Description		Implemented by
Activity 2.1	girls, boys, parents/caregivers, teach Spaces (CFS), while observing safet CFS implementation includes mobilize	realth and psychosocial support to affected hers including establishment of Child Friendly by protocols prescribed by the Health cluster. Izing community and youth volunteers and as d helplines to facilitate access to MHPSS.	
Activity 2.2	Support to LGUs for the promotion and implementation of SOPs and facilitate continuity of child protection services.		CFSI and ABS-CBN Bantay Bata 163
Activity 2.3	Mapping of social service workforce responding to emergency		CFSI
Activity 2.4	providing child protection servi psychological, and legal services for	ction Units and other CP service providers in ces (child-centred, integrated medical, r children and women survivors of violence) plies and equipment to ensure continued	CFSI
Activity 2.5	Refresher training course on chi humanitarians)	ld protection and PSEA (SEA involving	CFSI and ABS-CBN Bantay Bata 163
Activity 2.6	Awareness raising activities on Child Protection reporting mechanisms and prevention of VAC and GBV including PSEA		CFSI and ABS-CBN Bantay Bata 163
Activity 2.7		ith parents, caregivers, and children) to help anisms and prevention of VAC and GBV	CFSI
Activity 2.8	Establishing new and/or strengthening accessible to affected population, do	ng of existing feedback mechanisms that are osing the feedback loop	CFSI

Output 3	Children and adolescents have access to inclusive quality education and learning in safe and protected environments					
Was the planned output changed through a reprogramming after the application stage? Yes ☐ No ☒						
Sector/cluster	Education					
Indicators	Description	Target	Achieved	Source of verification		
Indicator 3.1	Ed.1 Number of children accessing formal or non-formal education	6,360	8,132	Monitoring forms submitted by implementing partners; Programmatic Visits		

				conducted by staff and consultant;
				Regular coordination meeting with implementing partners;
				Delivery receipts and acknowledgement receipts of supplies received by beneficiaries;
				Photo documentation
Indicator 3.2	Number of children receiving individual learning materials	14,045	12,912	Monitoring forms submitted by implementing partners; Programmatic Visits conducted by staff and consultant;
				Regular coordination meeting with implementing partners;
				Delivery receipts and acknowledgement receipts of supplies received by beneficiaries; Photo documentation
Indicator 3.3	CC.1 Number of teachers/ Child Development Workers who received short refresher training to support programme implementation	954	969	Monitoring forms submitted by implementing partners; Programmatic Visits conducted by staff and consultant;
				Regular coordination meeting with implementing partners; Participation by staff and consultant in actual activities; Photo documentation
Explanation of output and indicators variance:		Indicator 3.1 – Addition education supplies the	onal beneficiaries were a at were provided	ble to gain access to
		Indicator 3.2 – Some rather than for individ		used for shared purposes
			onal participants were accommonated maximize the resources	commodated to participate

Activities	Description	Implemented by
Activity 3.1	Provision of Early Childhood Development Kits, Schools in a Box, Teacher Kits	Plan International, CFSI, Save the Children
Activity 3.2	Provision of Learn at Home ECCD Kits, contextualised storybook with age and developmentally-appropriate message on COVID-prevention, learner kits	
Activity 3.3	Training of teachers and Child Development Workers on Education in Emergency	Plan International, CFSI, Save the Children

## 7. Effective Programming

## a. Accountability to Affected People (AAP) 4:

In WASH, feedback from target households on their preference for individual toilets resulted in strategy modification, from communal to household approach. In the distribution of SRKs, households were consulted on materials they will need to repair their sanitation facilities, noting the limited allocation the project could afford for each household. In Southern Leyte, cash transfers were even applied to replace the SRKs as recommended by the beneficiaries. Repairing and rehabilitating broken water systems involved conduct of technical assessments that require discussions with end-users.

In addition, partners consulted young people on their needs and concerns which led to the organizing of sportsfest as a form of psychosocial support. Likewise, feedback on the low utilization of hotlines by young people led to the shift from online trainings to face-to-face and community-based trainings and awareness raising to further encourage them to avail of the hotline services and magnify the advocacy messages.

## b. AAP Feedback and Complaint Mechanisms:

WASH partners set up feedback and complaints boxes in strategic areas in the communities where beneficiaries and non-beneficiaries alike can anonymously report issues and concerns. Visibility materials, e.g., tarpaulins, included hotline numbers, email addresses, and social media sites of partners. These proved effective: For example, in one village in Siargao Island, a community member texted that some households whose houses were totally damaged were excluded in the SRK distribution. This prompted the concerned partner to immediately reiterate selection criteria to the whole village for the distribution of repair kits which include reviewing capacity of households to raise counterparts.

For Education, implementing partners ensured that feedback forms are collected after each training activity. Feedback boxes were also placed in schools to gather feedback and recommendations on project implementation.

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

PSEA is fully integrated into all UNICEF partnership agreements, supply chain contracts and capacity-building activities for the staff, consultants, volunteers, vendors, and implementing partners. Information, education and communication (IEC) materials on PSEA are produced, localized, and displayed in project sites. All partners have a low-risk rating following a PSEA assessment and have designated PSEA focal persons to ensure compliance to all core standards. The joint CP and GBV referral pathway include PSEA hotlines. Partners also ensure the mapping of referral services and/or directory of service providers in project sites to provide immediate support to victim-survivors. PSEA is mainstreamed as well in community-based orientations and awareness-raising activities.

<sup>4</sup> 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 <u>IASC AAP commitments</u>.

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

To advocate for prevention measures against GBV, UNICEF collaborated with clusters to mainstream CP and GBV into their interventions. Safe access to WASH facilities is ensured for CFS users; school-based Child Protection Committees were capacitated on CP and GBV; and CFSs are used for Nutrition-related activities and served as entry points in detecting potential abuse cases. The *Safe and No Touch* are taught to young people so they can be empowered with information to protect themselves. Within the context of recovery and rehabilitation, the project has built the capacity of local government leaders, service providers, and local structures to address CP and GBV in emergencies from a system strengthening approach.

WASH response prioritized households with vulnerable women-members (single mothers, pregnant, lactating, elderly). Hygiene and dignity kits include MHM supplies. The provision of SRKs enabled households to repair their damaged toilets to restore privacy and dignity, especially for women and girls.

#### e. People with disabilities (PwD):

Implementing partners have gathered data on persons and children with disabilities and were prioritized in the access to services and supplies like water and hygiene kits, and toilet repair kits. P/CWD were also part of the selection criteria for the distribution of supplies. Moreover, CFS tents are installed in areas where PWDs can easily access but are safe, with enough light, away from busy roads, no hazards, among others. Children with disabilities have made use of the child-friendly spaces and interacted with other kids. The implementing partner closely coordinated with the MSWDOs for referrals and access to services. Partners identified, visited, and interviewed PWDs at their homes with the MSWDOs and assessed the needed services like provision of assistive devices. Disability data on CFS users has been culled out to further guide UNICEF on how to make the CFSs kits and its activities more inclusive, localized and context based.

#### f. Protection:

The convergence of Child Protection, WASH and Education in providing lifesaving supplies, services, and information to the affected population and especially targeting vulnerable and at-risk sectors has contributed to the rebuilding of a protective environment for the displaced communities. The rights of the affected and displaced populations have been put at the centre of the project design especially the right to live a life of dignity, respect, and free from any form of discrimination, violence, exploitation and abuse. The needs assessment conducted, the consultative approach, the mobilization of protection actors from different sectors and clusters, and the empowerment of the people themselves, especially the children, adolescents, youth, women, people with disabilities and other vulnerable sectors, resulted in: greater awareness and increased resilience, prevention and response measures are established with capacitated service providers, and provision of basic needs are met and enjoyed without discrimination.

## g. Education:

The project acknowledges that urgent action is needed to prevent further losses in learning. The project design considered the need for inclusive quality education and learning in safe and protected environments; hence, activities were designed towards the restoration of and improved access to essential education services and learning continuity to safeguard the welfare, well-being, and development needs of children in affected communities.

A key consideration is the reestablishment of in-person educational activities to prevent the prolonged disruption of education due to the compounding effects of the typhoon and the pandemic. Education services and supplies were delivered and contributed to the mitigation of further interruptions to learning.

## 8. Cash and Voucher Assistance (CVA)

## Use of Cash and Voucher Assistance (CVA)?

Planned	Achieved	Total number of people receiving cash assistance:
No	Yes, CVA is a component of the CERF project	3,936 (representative of benefitting households)

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.

In Southern Leyte, after extensive consultation with beneficiaries, conditional cash grants were provided to target households in lieu of SRK distribution so that they can purchase materials themselves to repair their damaged toilets. In Surigao del Norte, including Siargao Island, and in the Province of Dinagat Island, SRK distributions came with a minimal cash support that target households can utilize to hire skilled labour or as incentive that they can avail once repair of their toilets is completed.

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 1.5 Cash distribution for SRKs (Southern Leyte Province)	1,515	US\$ 120	Water, Sanitation and Hygiene	Restricted
Activity 1.5 Cash distribution for labour counterpart/incentive for SRKs (CARAGA)	2,421	US\$ 20-30	Water, Sanitation and Hygiene	Unrestricted

9. Visibility of CERF-funded Activities		
Title	Weblink	
School-in-a-box reaches Southern Leyte schools	<u>FB</u> , <u>TW</u> , <u>IG</u>	
One month on – UNICEF CFS in Surigao	FB, TW, IG	
One month on – UNICEF H&N tents in Siargao	FB, TW, IG	
One month on – UNICEF education supplies in Dinagat	FB, TW, IG	
One month on – UNICEF WASH supplies in Dinagat	FB, TW, IG	
One month on – UNICEF CFS in Siargao	FB, TW, IG	
One month after landfall - UNICEF's response on the ground	FB, TW, IG	
Delivery of hygiene kits to Limasawa Island	FB, TW, IG	
15-30s response update: Education	FB, TW, IG	
Super Typhoon Odette WASH Emergency Response in Caraga	Website, FB, IG, TW	
Stories from the field: Lenjie Concha	Website, FB, TW, IG	
Affected children with disabilities in Siargao receive education supplies	FB, TW, IG	
Stories from the field: Hacelmae Escobido	Website, FB, TW	
UNICEF Emergency Response helps Odette-stricken village in water crisis	Article: Web, FB, TW, IG Video: FB, TW, IG	

Stories from the field: Reyn Ambag	Website, FB, TW, IG			
Day in the life: Nicole goes back to in-person learning	FB, TW, IG			
Child-friendly spaces in Caraga	<u>FB</u> , <u>TW</u> , <u>IG</u>			
A family receives WASH supplies in Maasin City, Southern Leyte	FB, TW, IG			
CFS Youth Animators	Article: Web, FB, TW, IG Video: FB, TW, IG			
UNICEF Emergency Response in Limasawa: Octobre Family	FB, TW, IG			
Water system rehabilitation - Maasin City, Southern Leyte	FB, TW, IG			
WASH support in transitional shelters in Surigao	FB, TW, IG			
Schools in Southern Leyte resume classes after Typhoon Odette	Web, FB, TW, IG			
CFS Youth Volunteer in Siargao	FB, TW, IG			
WASH training for community volunteers	Web, FB, TW, IG			
Gender-based violence education sessions	FB, TW, IG			
Daisy's story – a WASH volunteer in Siargao	Web, FB, TW, IG			
CPERP Sportsfest in Surigao	<u>FB</u>			

## 3.4 Project Report 21-RR-WFP-042

1. Proj	ect Inform	ation						
Agency:		WFP			Country:		Philippines	
		Food Security - Food A						
Sector/cl	uster:	Common Services - Log Common Services - Em Telecommunications	-		CERF project	code:	21-RR-WFP-042	
Project ti	Project title: Emergency food assistance and provision of common services in areas affected by							Rai
Start date	e:	01/01/2022	1/01/2022			End date:		
Project re	evisions:	No-cost extension		Redeployn	nent of funds		Reprogramming	
	Total re	quirement for agency's	sector res	ponse to cur	rent emergency	<i>r</i> :		US\$ 25,800,000
	Total fu	nding received for agen	cy's secto	r response to	current emerg	ency:		US\$ 301,375
	Amount	received from CERF:						US\$ 2,999,527
Funding	Total Cl	ERF funds sub-granted	to impleme	enting partne	rs:			US\$ 540,147
Tu'T	Inter	ernment Partners national NGOs						US\$ 0 US\$ 540,147
		onal NGOs Cross/Crescent Organisa	ition					US\$ 0 US\$ 0

## 2. Project Results Summary/Overall Performance

#### **Food Assistance**

Through CERF funding, WFP provided 25,380 households (approximately 126,900 individuals) affected by Typhoon Rai with cash-based-transfer (CBT); in Southern Leyte, Dinagat Islands and Siargao Island. Each household received PHP 2,900 (approximately USD 56) This represents USD 1,438,080 distributed directly to beneficiaries.

Based on WFP monitoring findings, the emergency assistance allowed for maintaining the food security indicators of beneficiaries. The Food Consumption Score (FCS) of beneficiaries at time of distribution and post-distribution shows a slight improvement, with a 1.6 percent increase in households with acceptable FCS and a 1.6 percent decrease in households with borderline and poor FCS.

#### Logistics

WFP has fulfilled 100 percent of the transportation requests received from government partners. Since the onset of Typhoon Rai, WFP has mobilized 668 trucks for government partners in the Office of Civil Defense (OCD), the Department of Social Welfare and Development (DSWD) National Resource Operations Center (NROC), and Visayas Disaster Response Center (VDRC). This includes 164 trucks funded through CERF which transported 196,600 DSWD Family Food Packs, along with other various relief items such as Hygiene Kits, Kitchen Kits, Sleeping Kits, Family kits, Iaminated sacks and various donated items. For OCD, cargo transported includes Tarpaulins, Family Packs, Hygiene Kits, Generator Set, Clothes, and Blankets. WFP also set up temporary logistics hubs with Mobile Storage Units (MSU) which were handed over to DSWD for management. The hubs supported storage, consolidation, and onward transport of various relief items.

## **Emergency Telecommunications**

In total, WFP established internet connectivity to support government and humanitarian responders in 24 sites across affected areas, with a daily average of more than 600 users. Connectivity at 4 common operational areas and 10 government coordination sites was established with CERF funding. Users included UN agencies, I/NGOs, government staff, and affected communities. WFP supported the Department of Information and Communications Technology (DICT), the lead of the National Emergency Telecommunications Cluster (ETC), to install new Very Small Aperture Terminal (VSATs) and maintain existing installations across the affected areas. This included the installation of 12 VSAT terminals in Caraga and Southern Leyte.

## 3. Changes and Amendments

WFP and other agencies using cash as a modality faced challenges not initially foreseen when the CERF proposal was prepared in December 2021. New assessments conducted in early 2022 in places that were not reached in the aftermath of the Typhoon showed severe damage worse than initially projected and prompted the revision of the HNP in February 2022 and highlighted the slow recovery of markets and connectivity – which are key pre-conditions for implementation of cash assistance. Continued intermittent connectivity resulted in the limited availability of Financial Service Providers such as Western Union across all regions, especially Dinagat. Additional challenges included delays in obtaining beneficiary data from local authorities, additional consultations in Dinagat Islands with local authorities that were needed to start the distribution, as well as COVID-related movement restrictions. As a result of these challenges, the start of cash assistance distribution shifted to early March.

# 4. Number of People Directly Assisted with CERF Funding\*

Sector/cluster	Common Se	ommon Services - Logistics									
		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	0	0	0	0	0	0	0	0	0	0	
Host communities	0	0	0	0	0	0	0	0	0	0	
Other affected people	0	0	0	0	0	0	0	0	0	0	
Total	0	0	0	0	0	0	0	0	0	0	
People with disabilities (Pwl	People with disabilities (PwD) out of the total										
	C	0	0	0	0	0	0	0	0	0	

Sector/cluster	Common Ser	common Services - Emergency Telecommunications									
		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	0	0	0	0	0	0	0	0	0	0	
Host communities	0	0	0	0	0	0	0	0	0	0	
Other affected people	0	0	0	0	0	0	0	0	0	0	
Total	0	0	0	0	0	0	0	0	0	0	
People with disabilities (PwI	with disabilities (PwD) out of the total										
	0	0	0	0	0	0	0	0	0	0	

<sup>\*</sup> Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

Sector/cluster	Food Securit	Food Security - Food Assistance									
		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	0	0	0	0	0	0	0	0	0	0	
Host communities	0	0	0	0	0	0	0	0	0	0	
Other affected people	38,750	38,750	23,000	24,500	125,000	47,259	55,279	11,761	12,601	126,900	
Total	38,750	38,750	23,000	24,500	125,000	47,259	55,279	11,761	12,601	126,900	
People with disabilities (Pwl	People with disabilities (PwD) out of the total										
	608	608	361	385	1,962	1,004	1,036	308	329	2,677	

<sup>\*</sup> Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

## 5. People Indirectly Targeted by the Project

Through the provision of logistics and telecommunications common services, this project supported the Government as well as a wide range of organizations including UN agencies, to facilitate the implementation of the humanitarian activities in response to the impact of Typhoon Rai. It is estimated that at least 600,000 individuals affected by the Typhoon have indirectly benefited from telecommunications and logistics support provided by WFP to other humanitarian partners.

6. CERF Resul	lts Framework								
Project objective	People affected by Typhoon Rai ar logistics and telecommunications set timely and effective relief efforts.								
Output 1	The poorest households – with emp disability and the elderly) – affected basic food requirements								
Was the planned o	utput changed through a reprogrami	ming after the appli	ication	stage? Yes ⊠	No □				
Sector/cluster	Food Security - Agriculture								
Indicators	Description	escription Target Achieved Source of verification							
Indicator 1.1	FN.1a Number of people receiving food assistance (food and/or cash)	125,000		126,900	WFP Reports				
Indicator 1.2	Cash.2b Total value of sector- specific unconditional cash transfers distributed in USD	1,439,635		1,438,080	WFP Financial Reports				
Explanation of out	put and indicators variance:	Slight variance in the to exchange rate flu			amount transferred is due				
Activities	Description		Imple	mented by					
Activity 1.1	Provide unconditional food assista based transfers to targeted boys, girl affected by Typhoon Rai		WFP, i	in partnership with CRS	and CARE				
Activity 1.2	Monitoring, reporting and After Action	n Reviews	WFP	WFP					
Output 2	The relief efforts of the Government	and the humanitaria	n comm	nunity are supported thro	ugh logistics support				
Was the planned o	utput changed through a reprogrami	ming after the appli	ication	stage? Yes □	No ⊠				
Sector/cluster	Common Services - Logistics								
Indicators	Description	Target		Achieved	Source of verification				
Indicator 2.1	Percentage of transport requests fulfilled	100		100	WFP reports				
Indicator 2.2	CS.3 Number of storage facilities/camps/sites (incl. mobile storage units/treatment centres) installed/maintained	CS.3 Number of storage 4 3 WFP reports facilities/camps/sites (incl. mobile storage units/treatment centres)							

Explanation of outp	ut and indicators variance:		tially planned to set up 4 emergency hubs, 3 hubs were set tional needs and in consultation with the Government.		
Activities	Description	Implemented by			
Activity 2.1	Establishment of Emergency Logistics hubs		WFP		
Activity 2.2	Provision of transport capacity		WFP		

Output 3	The relief efforts of the Government telecommunications support	nent and the huma	anitaria	n community are	supported through emergency				
Was the planned	output changed through a reprogrami	ming after the appl	ication	stage? Ye	s □ No ⊠				
Sector/cluster	Sector/cluster Common Services - Emergency Telecommunications								
Indicators	Description	Description Target Achieved Source of verificati							
Indicator 3.1	Number of common operational areas covered by connectivity services	4		4		4	WFP reports		
Indicator 3.2	Number of government coordination hubs covered by connectivity services	10		10	WFP reports				
Explanation of ou	utput and indicators variance:	N/A							
Activities	Description		Imple	mented by					
Activity 3.1		Deploy connectivity services to be used by humanitarian ommunity, responders and affected population in ffected areas.							
Activity 3.2	Support DICT to provide connective establish and extend the IT service coordination hubs.								

## 7. Effective Programming

## a. Accountability to Affected People (AAP) 5:

WFP provided accessible channels for affected populations to ask questions, voice complaints and provide feedback on areas relevant to operations, in a safe and dignified manner. The feedback mechanisms (described under section 7.b.) was an opportunity to engage with communities and share timely information for corrective action to improve programming. All feedback received and monitoring findings were used to inform program management and decision-making and feed back into WFP communications activities. Key messages on how to provide feedback and clarifying beneficiary rights and entitlements were developed and presented through community outreach and visibility materials, disseminated by WFP and its partners.

WFP also ensured that beneficiaries were informed of their entitlements and about the frequency, timing, and location of distributions. To this end WFP conducted community orientation sessions and displayed information sign on activities sites.

<sup>5</sup> 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 <a href="IASC AAP commitments">IASC AAP commitments</a>.

#### b. AAP Feedback and Complaint Mechanisms:

WFP has an active community feedback and response mechanism (CFRM) that comprises two-way feedback channels (a hotline, a dedicated email address, help desks and feedback boxes) and proactive information provision. The hotline is centrally managed by WFP staff who speak the local languages and is accessible to all affected populations. Key messages on how to provide feedback and clarifying beneficiary rights and entitlements were developed and presented through community outreach and visibility materials, disseminated by WFP and its partners.

Throughout Typhoon Rai response, WFP received feedback via its hotline, cooperating partners, help desks and social media. WFP received a total of 2,709 feedback. 24 percent of the feedback received were from women and 19 percent from men; 57 percent of the CFRM users preferred not to have their gender recorded. Most of the feedback received was related to positive feedback, questions on targeting criteria, followed by request for data amendment

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

WFP maintains zero tolerance for sexual exploitation and abuse and ensures protection against sexual exploitation and abuse (PSEA). WFP Philippines is committed to ensuring safe and accessible reporting mechanisms that can receive and respond to incidents of alleged SEA. SEA complaints are given high priority and any person involved must act within 24 hours of receiving information. Reporting actions are referred to in WFP Philippines' PSEA Standard Operating Procedures (SOP). The SOP set out procedures for the protection from PSEA of beneficiaries and communities by WFP employees or those associated with the work of WFP. It includes raising awareness, mitigating risk, ensuring effective reporting of allegations, suspicions and concerns, and response. This SOP applies to all WFP personnel, personnel of cooperating partners, contractors, suppliers, Financial Service Providers, and daily workers. To enforce the SOP, WFP Philippines has two PSEA focal points in its Country Office in Manila, including one senior staff, and one focal point in each sub-office who have received training on preventing and protection from SEA.

WFP Philippines is an active member of the Philippine PSEA Task Force and participated in the development of a PSEA Task Force Facilitator's Training Manual in 2020. WFP is also a member of the PSEA network.

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

WFP considered the needs and vulnerabilities of different population groups in its response activities. These considerations are factored into WFP's approach to programmatic planning and implementation, from project design, activity site selection and modality selection, to beneficiary targeting and registration. Female-headed households, as well as pregnant women, girls and new mothers, are groups of particular concern. WFP worked with UNFPA to strengthen convergence on gender-based violence (GBV) referral pathways at WFP distribution sites.

To reduce the risks of discrimination, abuse, violence, neglect and exploitation against women and girls, WFP ensured that activity sites were safe and easily accessible, considering travel distance and potential risks for women and girls in making the decision for the choice of locations.

## e. People with disabilities (PwD):

Vulnerable families with people living with disabilities were identified and prioritized during beneficiary targeting. WFP also provided special arrangements during registration and distributions such as special lanes, safe passages, water, and waiting areas for persons with disabilities.

## f. Protection

Protection was integrated into WFP's program design and implementation to ensure the safety, rights and dignity of all beneficiaries. WFP received support from a senior Protection Officer/Stand by Partner, that was deployed to WFP Philippines throughout Typhoon Rai response to strengthen protection mechanisms by providing recommendations, training and creating SOPs.

As part of its continued monitoring process, WFP conducted interviews with 1,866 beneficiaries, with questions on protection and AAP. Results indicated that:

- 99.9 percent of the respondents have signified that they have been accorded with proper respect during the distribution.
- 100 percent of the respondents have attested that the conditions at distribution sites can be considered as dignified.
- 99.7 percent of the respondents did not experience any security challenge related to WFP assistance.
- 96 percent of the participants were informed of the distribution dates prior to the distributions.

#### 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	126,900

If **no**, please describe why CVA was not considered. Where feasible, CVA should be considered as a default response option, and multipurpose 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.

WFP used the services of Western Union agents contracted under a long-term agreement as part of WFP's preparedness measure for any onset of an emergency. The cash assistance is delivered electronically using unique beneficiary coding (Money Transfer Control Number). This MTCN coding enables the recipient to cash out in the outlets of Western Union and its affiliated agencies such as MLhuillier, Cebuana Lhuillier, USSC, Palawan Express, pawn shops, and to load a Mobile Money Envelope (GCash), if preferred. Digital cash transfers are cost-efficient and auditable so that WFP knows that the money reaches the people it was intended for. With WFP systems in place, cash leaves a digital trail that ensures people receive the assistance. Digital controls also protect the people we serve and ensure that their data is protected.

WFP used DSWD's existing database for social protection programmes – Listahanan 3 (L3) – as an important tool and basis for targeting. Data sharing agreements have been concluded with DSWD at central and regional level. Where available, using L3 and other government/LGU lists in combination with community based final validation (applying WFP vulnerability criteria) has enabled WFP to register in SCOPE beneficiary lists that are rigorous and community representative and where complaints received from CFM have been minimal - although the exercise was longer which caused some delays.

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 1.1	126,900	US\$ 1,438,080	Food Security - Agriculture	Unrestricted			

## 9. Visibility of CERF-funded Activities

Title	Weblink
Press release "Nutrition at risk for Typhoon-hit Filipino families, WFP warns"	https://www.wfp.org/news/nutrition-risk-typhoon-hit-filipino-families-wfp-warns
Press release "WFP early recovery projects provide crucial support to communities devastated by 2021 Typhoon Odette"	https://www.wfp.org/news/wfp-early-recovery-projects-provide-crucial-support-communities-devastated-2021-typhoon-odette
CERF AAR in Surigao	https://tinyurl.com/28dsaa7c
Facebook Post	https://www.facebook.com/wfp.philippines/videos/1512099466138874
CERF AAR in Surigao City	https://twitter.com/WFP Philippines/status/1540211891142021120
Twitter Post	https://twitter.com/WFP_Philippines/status/1485557202803109892?s=20&t= 81qw4zZoK5zexJXJh1WWrQ
Situation Reports	https://www.wfp.org/publications/situation-reports-philippines

## ANNEX: CERF FUNDS DISBURSED TO IMPLEMENTING PARTNERS

CERF Project Code	Cluster/Sector	Agency	Implementing Partner Name		under pre-existing partnership agreement		Total CERF Funds Transferred to Partner US\$	Date of First Payment to Implementing Partner	Start Date of CERF Funded Activities By Implementing
			Extended Name	Acronym					Partner*
21-RR-IOM-037	Shelter & NFI	IOM	Catholic Relief Services	CRS	Yes	INGO	\$471,290	7-Feb-22	17-Jan-22
21-RR-IOM-037	Shelter & NFI	IOM	CARE Philippines	CARE	Yes	INGO	\$326,000	16-Feb-22	2-Feb-22
21-RR-FPA-035	Gender-Based Violence	UNFPA	Plan International	Plan Int	Yes	INGO	\$512,312	8-Feb-22	8-Feb-22
21-RR-FPA-035	Health	UNFPA	World Vision	WV	Yes	NNGO	\$204,726	21-Jan-22	21-Jan-22
21-RR-FPA-035	Health	UNFPA	Philippine Society for Responsible Parenthood,	PSRP	Yes	NNGO	\$146,226	16-Feb-22	16-Feb-22
21-RR-FPA-035	Gender-Based Violence	UNFPA	Coalition Against Trafficking of Women in the Asia Pacific (CATW-AP)	CATWAP	Yes	NNGO	\$429,724	19-Jan-22	19-Jan-22
21-RR-FPA-035	Gender-Based Violence	UNFPA	Mindanao Organization for Socio-Economic Progress, Inc.	MOSEP	Yes	NNGO	\$29,998	7-Jun-22	7-Jun-22
21-RR-CEF-059	Gender-Based Violence	UNFPA	Samaritan's Purse	SP	Yes	INGO	\$347.933	14-Feb-22	14-Feb-22
21-RR-CEF-059	Water, Sanitation and Hygiene	UNICEF	Action Against Hunger	AAH	Yes	INGO	\$316,146	31-Dec-22	30-Dec-22
21-RR-CEF-059	Water, Sanitation and Hygiene	UNICEF	Plan International	Plan International	Yes	INGO	\$392,750	31-Jan-22	12-Jan-22
21-RR-CEF-059	Water, Sanitation and Hygiene	UNICEF	ACTED	ACTED	Yes	INGO	\$130,427	11-May-22	28-Apr-22
21-RR-CEF-059	Child Protection	UNICEF	Child and Family Services International	CFSI	Yes	INGO	\$157,085	19-Jan-22	11-Jan-22
21-RR-CEF-059	Child Protection	UNICEF	ABS-CBN Lingkod Kapamilya Foundation	ABS-CBN Lingkod	Yes	NNGO	\$91,260	4-Feb-22	28-Feb-22
21-RR-CEF-059	Education	UNICEF	Plan International	PIP	Yes	INGO	\$5,008	30-Jan-22	12-Jan-22
21-RR-CEF-059	Education	UNICEF	Save the Chilren	SCP	Yes	INGO	\$29,850		2-Feb-22
21-RR-WFP-042	Food Assistance	WFP	Catholic Relief Services	CRS	No	INGO	\$304.033	2-Mar-22	17-Feb-22
21-RR-WFP-042	Food Assistance	WFP	Cooperative American Relief Everywhere	CARE	No	INGO	\$236,114	31-Mar-22	15-Jan-22