

**CUBA
RAPID RESPONSE
STORM
2022**

22-RR-CUB-55712

Francisco Pichon

Resident/Humanitarian Coordinator

PART I – ALLOCATION OVERVIEW

Reporting Process and Consultation Summary:

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

July 12, 2023

The After-Action Review (AAR) was conducted on July 12, 2023. There were 26 participants from the different related UN agencies including the Resident Coordinator Office (RCO), program officers from each sector and focal points from all the CERF implementing agencies (UNDP, UNICEF, WFP, UNFPA, WHO/PAHO). There was a joint presentation conducted by the RC's Office (RCO) and the interagency group, UNETE, that leads joint programming in emergencies. An open discussion on common lessons learned regarding the CERF implementation process made a significant contribution to the present report. A Civil Defence Officer, the main national counterpart for disasters, and 17 participants from others national counterpart entities participated as well.

Please confirm that the report on the use of CERF funds was discussed with the Humanitarian and/or UN Country Team (HCT/UNCT).

Yes No

Please confirm that the final version of this report was shared for review with in-country stakeholders (i.e. the CERF recipient agencies and their implementing partners, cluster/sector coordinators and members and relevant government counterparts)?

Yes No

STRATEGIC PRIORITIZATION

Statement by the Resident/Humanitarian Coordinator:

Hurricane Ian devastated western Cuba and affected about 3.2 million people, alongside the impacts of the complex, post-COVID, global context and US embargo. The exclusion of Cuba from international financial institutions and consequent major challenges to secure financing for development and humanitarian response efforts has made CERF funds more crucial than ever.

CERF projects played a key role in addressing the needs of more than 500,000 people in terms of food security, health, water and sanitation, shelter and education. Although prepositioned items rapidly reached the affected persons, there was a need for much more support to jump-start recovery. The CERF allocation greatly enhanced such efforts in 7 municipalities in the highly impacted provinces of Pinar del Río and Artemisa.

CERF provided humanitarian assistance to the entire population as well as vulnerable groups including women, children and persons with disabilities, supporting habitability conditions, food assistance, rapid return to safe learning spaces, access to safe water and sanitation and the restoring of health services.

Furthermore, it played a crucial role in mobilizing additional resources for the emergency response, strengthened the partnership between the UN and public institutions at both the national and local levels and fostered a coherent and coordinated UN interagency response in the national recovery efforts.

CERF's Added Value:

Life-saving CERF support helped sustain the emergency mechanisms developed by the authorities and prevented the situation from becoming critical in key sectors such as housing, WASH (water, sanitation, and hygiene), health and food security.

During the emergency caused by Hurricane Ian, CERF's objectives and scope fostered inter-agency coordination from the early stages of response planning. This was evident in the joint analysis carried out by agencies, in which all sectors used a more integrated vision of humanitarian assistance in formulating their projects. This same approach has been used in response to similar events in recent years and has become part of inter-agency preparedness for the hurricane season.

Furthermore, CERF's "life-saving" criteria requires an agile response that forces finding quick solutions to emerging implementation challenges. In the emergency under discussion, these challenges occurred more frequently due to the country's difficult economic situation. It was necessary to increase dialogue with all stakeholders and seek alliances with local authorities and communities in order to facilitate response implementation.

The CERF is the primary donor in Cuba in emergencies given the external sanctions that the country faces and its exclusion from international financial institutions. By mobilizing its resources, it encourages other donors to contribute additional funds, thereby amplifying the overall humanitarian response. This collaborative approach helps mitigate the impact of external restrictions and ensures that vital assistance reaches those in need.

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

Yes

Partially

No

This contribution made it possible to undertake high-impact priority actions during the immediate response period. Roof solutions, medical equipment, water storage containers, educational kits and food assistance were all part of the time-critical needs CERF funds helped to meet.

The use of pre-positioned food and non-food items allowed immediate distribution to the affected people and provided immediate basic habitability conditions and food supplies. CERF funds also supported a return to functionality for 331 educational centers. As such, 25,088 girls and 26,655 boys aged 0 to 18 years in 8 of the most affected municipalities facilitating return to protective learning spaces.

Despite this immediate and effective response, the distribution process was still less agile than expected.

Did CERF funds help respond to time-critical needs?

Yes

Partially

No

The CERF allocation allowed for addressing the following critical needs of the affected population:

- Support in providing habitability conditions for families with damaged homes and their subsequent recovery.
- Food assistance for the entire population and vulnerable groups.
- A rapid return to safe learning spaces in the education sector.
- Access to safe water and sanitation in the most affected municipalities.
- Restoration of medical services and the control of communicable diseases as well as paying attention to sexual and reproductive health and gender-based violence.

Did CERF improve coordination amongst the humanitarian community?

Yes

Partially

No

The United Nations System in Cuba keeps an excellent collaborative relationship in the field of humanitarian action with the national authorities, through emergency response efforts. In this case, joint efforts to respond to the immediate needs of the most affected people have been carried out. CERF projects have been instrumental in not only responding to these priorities, but doing so in a swift and effective way. Coordination among other humanitarian actors was strengthened particularly with local authorities. Partnerships with national and local authorities in the affected municipalities were strengthened as a result of this humanitarian project. However, coordination amongst other humanitarian actors in the country might be improved in any further emergencies.

Did CERF funds help improve resource mobilization from other sources?

Yes

Partially

No

CERF funds, which had a timely impact on territories during the most critical moments after Hurricane Ian, catalyzed the mobilization of other funds that broadened the territorial scope of aid to those affected. It also established synergies among actors, allowing for a more efficient and appropriate use of resources.

Out of the 14.7 million mobilized to date for all sectors, 52.4% corresponds to the CERF contribution. These resources have been critical to the response in all sectors, primarily in the WASH, Housing and Early Recovery and Health sectors, representing 97%, 72.5% and 70.8% of their mobilized funds, respectively.

With the performance of these CERF projects and the intervention strategies presented as part of the action plan, other resources were mobilized to support the response. Particularly important were the agencies' own funds and those of other partners, including the Swiss Agency for Development and Cooperation (SDC), the German Federal Foreign Office and The Church of Jesus Christ of Latter-day Saints.

Considerations of the ERC's Underfunded Priority Areas¹

For this CERF allocation, a strong focus on gender and inclusion was ensured in all sectors as part of the prioritized attention paid to vulnerable groups like children, women (including pregnant and nursing women), people with disabilities and the elderly over age 65 in all sectors. The prevention approach to sexual and gender-based violence (SGBV) was directly integrated into WASH and Health interventions and essential sexual and reproductive health services were provided. UNFPA provided a minimum package of SRH services in order to avoid maternal deaths, prevent sexually transmitted diseases and adolescent pregnancies. Also, women's empowerment was promoted through project activity to reactivate food local production (FAO).

The following actions stand out as relevant in the prioritized areas:

Accountability to Affected People (AAP) and AAP Feedback and Complaint Mechanisms

- Direct exchanges during field visits with affected communities, beneficiaries and local authorities
- Scheduling appropriate and inclusive feedback mechanisms among key stakeholders, community members and local counterparts.
- Establishing dialogue spaces for feedback to report and share information about the project
- Strengthening partnerships in order to verify directly satisfaction levels and concerns among families.

Prevention of sexual exploitation and abuse,

- Supporting capacity building for staff and partners
- The participation of the Federation of Cuban Women throughout the response facilitated mechanisms within the communities to enable reporting of gender-based violence (GBV) and sexual exploitation and abuse.
- Explaining PSEA policy during meetings with national counterpart

Focus on women, girls and sexual and gender minorities and gender-based violence

- Training and capacity building among 20 community brigades consisting of healthcare personnel and members of the Federation of Cuban Women (FMC) in order to implement communication and information actions on sexual and reproductive health (SRH) and protection in emergency contexts, including the application of the Minimum Initial Service Package for SRH.
- Improving access of women from vulnerable families to safe water, water storage capacity in their homes and improved hygiene conditions, including menstrual hygiene management.
- Supporting the return of children under five to school allowed working mothers the time needed to get food and water and return to work, helping mitigate protection risks.
- Organizing exchanges and meetings to learn about the implementation of the advancement program for women and gender.
- Promoting women's leadership in the agricultural activities carried out by them on farms
- Giving priority to large families with social and economic vulnerability, single mothers with young children, sick or elderly people and single-parent families with several family members.

People with disabilities (PwD):

- Including the improvement of the educational conditions of children with disabilities studying in regular and special schools.

Others aspects of protection:

- Helping to reduce the protection risks associated with the lack of basic water and hygiene services.
- Contributing to the socio-emotional recovery of affected children after an emergency and guaranteeing the right for girls and boys in affected communities to access education services.
- Assisting in the provision of safe and functional learning spaces and promoting hygiene practices in schools and communities

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

Table 1: Allocation Overview (US\$)

Total amount required for the humanitarian response	35,159,826
CERF	7,827,734
Country-Based Pooled Fund (if applicable)	0
Other (bilateral/multilateral)	0
Total funding received for the humanitarian response (by source above)	7,827,734

TABLE 2: CERF EMERGENCY FUNDING BY PROJECT AND SECTOR/CLUSTER (US\$)

AGENCY	Project Code	Sector/Cluster	Amount
FAO	22-RR-FAO-037	Food Security - Agriculture	500,085
UNDP	22-RR-UDP-007	Shelter and Non-Food Items	2,700,001
UNFPA	22-RR-FPA-039	Health - Sexual and Reproductive Health	400,000
UNICEF	22-RR-CEF-069	Water, Sanitation and Hygiene	1,070,682
UNICEF	22-RR-CEF-069	Education	458,863
WFP	22-RR-WFP-058	Food Security - Food Assistance	1,798,106
WHO	22-RR-WHO-041	Health	899,997
TOTAL			7,827,734

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

Total funds implemented directly by UN agencies including procurement of relief goods	US\$ 0
Funds sub-granted to government partners*	US\$ 0
Funds sub-granted to international NGO partners*	US\$ 0
Funds sub-granted to national NGO partners*	US\$ 0
Funds sub-granted to Red Cross/Red Crescent partners*	US\$ 0
Total funds transferred to implementing partners (IP)*	US\$ 0
Total	US\$ 0

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

2. OPERATIONAL PRIORITIZATION:

Overview of the Humanitarian Situation:

The highly destructive Hurricane Ian impacted about 3.2 million of people in the provinces of Pinar del Río (PR), Artemisa and Havana, and the special municipality of Isla de la Juventud. For more than seven hours ravaged directly several municipalities, including the capital of Pinar del Río. 76,221 people were evacuated, and three deaths were reported in PR. This damage was combined with the complexity of effects in important urban areas and the loss of important livelihoods in both rural and urban municipalities. About 400,000 people were directly affected by the damage which occurred to more than 100,000 homes, many of which collapsed. Others had partial damages, mainly to roofs. The affected people also lost many basic belongings essential to meeting their basic needs both at home and in shelters. There was also a severe negative impact on food security. 68% of the *bodegas* (community food distribution centers) in Pinar del Río and 57% of the community centers providing food to the most vulnerable people were damaged. In addition, most crops in Pinar del Río and Artemisa, which supply Havana (population 2 million), were severely affected. 78% of health institutions were damaged in the affected areas as well as schools (717) as well as other social institutions that provide basic products and services to a great part of the population. The hurricane triggered additional challenges adding to the already complex economic situation the country is facing.

Operational Use of the CERF Allocation and Results:

Among the main operational results:

- 33,375 affected individuals received assistance with temporary shelters. 3,498 home shelters with zinc sheet roofs were established, benefiting 20,988 vulnerable people. These families also received towels, soaps and mattresses. 8,000 tarpaulins remain in stock and are prepositioned for further emergencies. The capacity of government and community construction brigades was strengthened.
- 92 emergency modules and 27 power generators were provided to ensure health services.
- Support was provided to revitalize sexual and reproductive health services, including care for sexual violence victims. Sexual and reproductive health kits, as well as medications and equipment for maternal healthcare, were provided to 141,348 persons.
- The hygiene needs of 12,471 individuals were met, including: 940 disabled women; 2,748 women from vulnerable families; 156 women living with HIV; 46 transgender individuals living with HIV; and 3,530 pregnant and postpartum women.
- Water storage and hygiene conditions were improved for 52,980 vulnerable families. Additionally, 45,524 individuals gained access to safe drinking water with portable purification plants and pumping equipment. 44 healthcare centers received sustainable water storage facilities.
- The return to functionality of 331 educational centers was supported by providing 36,200 square meters of waterproof roof covers and 444 kits of educational materials.
- A total of 480,491 individuals received food assistance in the most affected municipalities.
- About 6,200 kg of short-cycle crop seeds were distributed for planting on 2,620 hectares of land. A total of 13,675 farmers (including 3,551 women) benefited from productive supplies for the rehabilitation of cultivation areas.

The CERF allocation allowed for addressing the following critical needs of the affected population by sector:

- Support to habitability conditions for families with damaged homes and for their subsequent recovery.
- Food assistance for the entire population and vulnerable groups.
- A rapid return to safe learning spaces in the education sector.
- Access to safe water and sanitation in the most affected municipalities.
- Restoration of medical services and the control of communicable diseases, as well as paying attention to sexual and reproductive health and gender-based violence.

641,721 people were reached.

The implemented projects aimed to provide a comprehensive and coordinated package of immediate assistance across various sectors with the goal of significantly improving living conditions in the targeted communities. By fostering collaboration among different sectors, efforts were concentrated within the same communities and families whenever feasible, maximizing the combined impact of these complementary actions.

People Directly Reached:

The estimation of beneficiaries was based on information gathered by local governments, communities and social workers at the local level. This ensured the transparency of the distribution process. The population of the affected areas was informed and actively participated in the resource distribution processes.

Estimates of the total number of beneficiaries for each sector, as well as their disaggregation by sex, were obtained from information collected directly in the territories by each sectoral lead agency. In the areas visited during the fieldwork, the reliability of the data collected was observed. The local governments established control models that were verified.

CERF activities reached all municipalities from Pinar del Río, Artemisa and two communities from other provinces. Direct beneficiaries reached the amount of 653,497 people in 22 municipalities overcoming the planned number of beneficiaries.

The estimate of direct beneficiaries include:

- a) Beneficiaries of nine of the municipalities reached (Pinar del Río: La Palma, Los Palacios, Pinar Del Río, San Juan y Martínez, San Luis, Viñales and Consolación del Sur; Artemisa: and Bahía Honda and San Cristóbal). Food Assistance and Health sectors provided assistance to the entire population of those territories.
- b) Beneficiaries of UNDP shelter and early recovery interventions in Minas de Matahambre Guane, Sandino and Mantua
- c) Beneficiaries in the Education sector in Minas de Matahambre.
- d) Other direct beneficiaries of WFP and FAO non-matching interventions in other territories of the Artemisa province.

In the Shelter and WASH sectors, the number of beneficiaries was more than 10% higher than planned. Lower prices and other adjustments in procurement processes facilitated reaching more people than anticipated.

People Indirectly Reached:

At least 615,866 people in the provinces of Pinar dl Río and Artemisa benefited indirectly from the implementation of the following actions:

- 269 people were trained to repair the roofs of damaged homes.
- 5,292 people, receiving care in health centers and in the communities, benefited from efforts promoting sexual and reproductive health.
- 51,000 families (150,000 people) were benefited by the rapid return of children to safe learning spaces, thus allowing them to join in recovery efforts.
- 615,846 people from the provinces of Pinar dl Río and Artemisa benefited indirectly from WFP support to improve food storage capacities with the delivery of warehouses, pallets and lighting.
134,478 households (approximately 537,912 people in 18 affected municipalities) benefited from greater and guaranteed access to and consumption of fresh and nutritious food.

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

Sector/Cluster	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Education	0	0	25,089	26,655	51,744	0	0	25,089	26,655	51,744
Food Security - Agriculture	38,161	75,854	7,384	8,359	129,758	38,416	76,396	7,395	8,373	130,580
Food Security - Food Assistance	195,853	193,602	44,776	47,227	481,458	204,029	205,476	48,105	51,293	508,903
Health - Sexual and Reproductive Health	229,493	229,247	52,610	55,525	566,875	129,208	17,091	25,318	28,515	200,132
Shelter and Non-Food Items	21,722	21,968	5,296	5,653	54,639	27,646	28,987	6,405	7,756	70,794
Water, Sanitation and Hygiene	78,489	72,449	15,924	17,248	184,110	109,752	101,306	22,266	24,120	257,444

* 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	4,840	4,840
Host communities	0	0
Other affected people	570,974	648,657
Total	575,814	653,497

Table 6: Total Number of People Directly Assisted with CERF Funding*

Sex & Age	Table 6: Total Number of People Directly Assisted with CERF Funding*		Number of people with disabilities (PwD) out of the total	
	Planned	Reached	Planned	Reached
Women	231,591	270,583	8,545	7,815
Men	231,853	255,993	6,989	7,587
Girls	54,663	61,905	1,692	1,837
Boys	57,707	65,016	1,877	1,873
Total	575,814	653,497	19,103	19,112

PART II – PROJECT OVERVIEW

3. PROJECT REPORTS

3.1 Project Report 22-RR-FAO-037

1. Project Information			
Agency:	FAO	Country:	Cuba
Sector/cluster:	Food Security – Agriculture	CERF project code:	22-RR-FAO-037
Project title:	Rehabilitation of short-cycle crops production to the food and nutritional security of vulnerable people affected by Hurricane Ian		
Start date:	25/10/2022	End date:	24/07/2023
Project revisions:	No-cost extension <input checked="" type="checkbox"/>	Redeployment of funds <input type="checkbox"/>	Reprogramming <input type="checkbox"/>
Funding	Total requirement for agency's sector response to current emergency:	US\$ 5,038,000	
	Total funding received for agency's sector response to current emergency:	US\$ 500,000	
	Amount received from CERF:	US\$ 500,085	
	Total CERF funds sub-granted to implementing partners:	US\$ 0	
	Government Partners	US\$ 0	
	International NGOs	US\$ 0	
	National NGOs	US\$ 0	
Red Cross/Crescent Organisation	US\$ 0		

2. Project Results Summary/Overall Performance

The CERF contribution directly benefited 130,580 people (farmers and its family) in 18 severely affected municipalities by hurricane in two provinces (67,317 in Pinar del Río and 63,263 in Artemisa). 50,742 famers (11,859 women) from the most affected 243 productive units (112 in Pinar del Río y 131 in Artemisa) were supported by providing them with agricultural inputs. They include Cooperative Basic Production Units (12), Credit and Services Cooperatives (49), Agricultural production cooperative (9) and Urban farms and household level production units (family farms) of the urban, suburban and familiar agriculture systems (173).

6,200 kg of seeds of short cycle crops were delivered for planting 2620 ha, including Spanish's chard, Chinese's chard, Chive, Lettuce, Chinese cabbage, Red radish, Beetroot and Carrot. The amount of seeds delivered were adjusted to the real needs of the most affected population and prioritized areas for this project. Initial need assessments on the need of semi-protected system, growing and postures houses was reconsider after more detailed inspection and substituted by prioritized netting rolls. Accordingly, 13,675 famers (3,551 women) were benefited with 272 netting rolls for semi-protected cultivation system, 304 netting rolls for growing and postures houses were distributed as well as 10,400 of Seedling trays and 16,500 of fastening kit. The delivery of netting rolls allowed to rehabilitate 19 semi-protected cultivation, 27 growing houses and 3 postures houses.

Production data are recorded in the 4C-Web agricultural statistical model from the Ministry of Agriculture showed that during the planting season, these short-cycle crops increased with 6 000 ton the availability of more nutritious food in the most affected area after hurricane.

The Program of urban, suburban and familiar agriculture reports an average of potential production (ton) for each species of: Spanish's chard (624), Chinese's chard (1,864), Chive (432), Lettuce (2,210), Chinese cabbage (7,575), Red radish (652), Beetroot (3,524) and Carrot (2,027). According to world health organization, approximately 400 grams of vegetables by person must be daily consumed. The production provides 47 270 000 food portions for that amount.

FAO will carry out monitoring to subsequent production reports.

In addition, 1000 direct beneficiaries received a practical handbook "Recommendations for the management and production of short – cycle crops", a tool distributed in order to increase the knowledge in local farmers for rehabilitation and diversification of sustainable food production.

3. Changes and Amendments

The project did not have significant amendments.

Even when some changes were made in the inputs purchased (considering the same approved budget) there were no variations between the planned and actual outcomes. This modification did not affect the scope of activities and results of the project and it was approved for the project technical officer (FAO LTO Officer) and CERF.

Although it was initially planned to attend 10 municipalities, following a request from the Ministry of Agriculture, 8 more also affected by hurricane in the province of Artemisa were included, which led to an increase in 6067 producers (2 030 women) more benefiting from the intervention than had originally been foreseen for the project. This increase of famers benefited, allowed a faster recovery in the production of short-cycle crops that contributed to greater availability of food to the population in this province.

An extension period of three months was requested to complete the delivery of some inputs. The dates of the acquisitions were confirmed in a longer period than planned due to the process of defining technical specification by the counterpart was delayed. Likewise, the time to receive the shipping authorizations required by the Government for the purchased inputs had an impact, not all supplies received the aforementioned shipping approvals soon.

Seeds of the short- cycle crops arrived on February and were submitted to a post- entry quarantine period by forty days. Netting rolls for semi- protected cultivation system and seedling trays were arrived and distributed to the beneficiaries in March as well as the seeds. The supplies of netting rolls for growing and postures and fastening kit were arrived and distributed at the end on April.

In agreement with the government counterpart, the measures to be adopted were reviewed to readjust the planting date of short-cycle crops, based on deliveries confirmed by the suppliers. The main priority was to rehabilitate food production in the shortest possible time and to achieve greater diversification of production.

4. Number of People Directly Assisted with CERF Funding*

Sector/cluster	Food Security – Agriculture									
Category	Planned					Reached				
	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	38,161	75,854	7,384	8,359	129,758	38,416	76,396	7,395	8,373	130,580
Total	38,161	75,854	7,384	8,359	129,758	38,416	75,396	7,395	8,373	130,580
People with disabilities (PwD) out of the total										
	0	0	0	0	0	0	0	0	0	0

* 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 assisted indirectly to 134, 478 households (approximately 537,912 people in 18 affected municipalities, 266 535 of them are women). Prioritized population for attention from national health and educational system facilities were benefited: girls, boys, women with children under 5 years of age, pregnant women, the elderly and people with disabilities. It was increased and guaranteed access to and consumption of fresh and nutritious food.

6. CERF Results Framework

Project objective	Rehabilitate local vegetables production to the food and nutritional security of vulnerable people in the communities of the most affected municipalities.			
Output 1	Guaranteed the availability of nutritive food through the production of short cycle vegetables for affected communities			
Was the planned output changed through a reprogramming after the application stage? Yes <input type="checkbox"/> No <input type="checkbox"/>				
Sector/cluster	Food Security – Agriculture			
Indicators	Description	Target	Achieved	Source of verification
Indicator 1.1	Ag.1 Number of people receiving agricultural inputs (items/packages/kits)	44675	50742	Reports reception and Delivery of inputs Procurement process Photographs
Indicator 1.2	Ag.7 Percentage change in crop yields (More than 90%)	90	90	Partner Reports Delivery Minutes
Explanation of output and indicators variance:		<p>The number of beneficiaries reached receiving agricultural inputs were increased. Additionally, 6067 farmers above to planned number were benefited and provided from other municipalities of Artemisa province.</p> <p>The profile of the planned beneficiaries was calculated using information from the government, and the selection of the beneficiary population was made in collaboration with the Ministry of Agriculture with the criteria of prioritizing the most vulnerable farmers, and women, with previous experience on the production of short -cycle crops.</p>		
Activities	Description	Implemented by		
Activity 1.1	Selection of most vulnerable beneficiaries based on vulnerability criteria in collaboration with the Ministry of Agriculture, and the local governments (with an emphasis on women and young)	Ministry of Agriculture		
Activity 1.2	Purchase of seeds plasticized raffia covers and items for vegetable growing houses	FAO		
Activity 1.3	Printing and distribution of a practical guide for short-cycle productions in emergencies	FAO and Ministry of Agriculture		
Activity 1.4	Distribution of seeds plasticized raffia covers and items for vegetable growing houses	FAO and Ministry of Agriculture		
Activity 1.5	Monitoring and reports of operational and financial implementation	FAO		
Activity 1.6	Closure operational and financial of project	FAO		

7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas² often lacking appropriate consideration and visibility: women and girls, people with disabilities, education and protection. **The following sections demonstrate how cross-cutting issues and the ERC's four underfunded priority areas have been addressed through project activities and should highlight the achieved impact wherever possible.**

a. Accountability to Affected People (AAP)³:

All actors from the Ministry of agriculture, farmers including more vulnerable and community leaders at local level were involved in the design, implementation and monitoring of the project. Dialogue spaces for feedback to report and share information about the project progress were established. A baseline survey was conducted to select the most vulnerable farmers and households, including women. Initially, need of immediate assistance of households, mainly women were identified. The validation activities allowed updating the target population prioritized to receive agricultural inputs.

b. AAP Feedback and Complaint Mechanisms:

Based on the project implementation, objectives and scope were presented and shared with affected communities and local counterparts. This created a mutual framework for follow-up and feedback from implementing partners. Appropriated and inclusive feedback mechanism was scheduled among key stakeholders, community members and local counterparts. A secure line communication and direct contact between all participants from the government to the community of affected producers was established and maintained.

Work meetings took place frequently. Communicating specific needs such as the new identification of affected households and municipalities was updated prioritizing the most vulnerable families and women. All partners were involved in two technical field mission for feedback and monitoring to the receipt, distribution and directly resources delivered to the final beneficiaries. Progress reports on implementation were archived.

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

All FAO members in the project coordination successfully completed the PSEA online course. In the meetings with the coordination groups of the national counterpart and the producers, it was explained about policy on Protection against Sexual Exploitation and Abuse. All of them were committed to guaranteeing the implementation of its projects, a work environment free from harassment, in particular sexual harassment, as well as the highest standards of conduct for its employees regarding sexual exploitation and abuse.

The local municipal offices and their technical teams developed an accountability and feedback system that allowed beneficiaries at the community level to express any complaints or denunciations; institutional policies, the code of conduct and the complaint management process were socialized in the socialization and registration of families. FAO has in place its protocols to receive, investigate and resolve Sexual exploitation and abuse complaints.

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

From the identification of beneficiaries, women producers were prioritized. Exchanges meetings to learn about the implementation of advancement program for the women and gender politics design by the government and ministry of agriculture were organized. It was contributed to gender equality and promoting the empowerment and protection of women and girls, as well sexual and gender minorities,

² These areas include: support for women and girls, including tackling gender-based violence, sexual and reproductive health and empowerment; programmes targeting people with disabilities; education in protracted crises; and other aspects of protection. The ERC recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and UNCTs/HCTs when prioritizing life-saving needs for inclusion in CERF requests. While CERF remains needs-based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the Questions and Answers on the ERC four priority areas [here](#).

³ 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](#).

by avoiding causes of gender inequality and ensuring equal opportunities for all. In coordination with the national institutions, FAO ensured that women have improved access and kept control over the assets and resources. Women leadership in the productive unit's governance and agricultural activities carried by them in the farms was promoted.

e. People with disabilities (PwD):

The local government counterparts of the project did not report data on people with disabilities among the beneficiary farmers.

f. Protection:

Throughout project implementation, regulations of population protection approved in Cuba were considered by the local counterpart. Those regulations recognize the right to protection in favour of the most vulnerable population: girls, boys, women and the elderly. The main priority was the identification of the most affected farmers and families. This allowed to evaluate the vulnerability, risks and protection status of each family benefited. The activities developed did not generate any acts of violence or any threat against the population.

g. Education:

FAO promoted through the meeting exchanges and with the distribution of practical handbook "Recommendations for the management and production of short –cycle crops" to increase the knowledge in local farmers to rehabilitate and diversify the sustainable food production. This offer was an opportunities to improve and recommendations good practices, technologies and methodologies to better address climate variability with sustainable and resilient production systems.

8. Cash and Voucher Assistance (CVA)

Use of Cash and Voucher Assistance (CVA)?

Planned	Achieved	Total number of people receiving cash assistance:
No	0	0

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.

N/A

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
N/A		US\$		

9. Visibility of CERF-funded Activities

Title	Weblink
N/A	

3.2 Project Report 22-RR-UDP-007

1. Project Information			
Agency:	UNDP	Country:	Cuba
Sector/cluster:	Shelter and Non-Food Items	CERF project code:	22-RR-UDP-007
Project title:	Immediate response to provide temporary emergency shelter and restore basic living conditions for hurricane Ian affected people in the province of Pinar del Rio, Cuba.		
Start date:	11/10/2022	End date:	10/04/2023
Project revisions:	No-cost extension <input type="checkbox"/>	Redeployment of funds <input type="checkbox"/>	Reprogramming <input type="checkbox"/>
Funding	Total requirement for agency's sector response to current emergency:		US\$ 8,000,000
	Total funding received for agency's sector response to current emergency:		US\$ 100,000
	Amount received from CERF:		US\$ 2,700,001
	Total CERF funds sub-granted to implementing partners:		US\$ 0
	Government Partners		US\$ 0
	International NGOs		US\$ 0
	National NGOs		US\$ 0
Red Cross/Crescent Organisation		US\$ 0	

2. Project Results Summary/Overall Performance

Through CERF funding, UNDP supported the Government of Pinar del Rio in providing assistance to **70,794 people affected** by Hurricane Ian, including 27,646 women, 28,987 men and 14,161 children.

The project delivered 11,125 tarpaulins (including 3,125 that were pre-positioned in the country) to provide temporary shelter for **33,375 people**. 9,235 mattresses were delivered to affected people, including 4,395 for people staying in temporary shelter and 4,840 for other people evacuated in shelter conditions. A total of 3,498 home shelters are being progressively set up with 35m2 roof modules composed of zinc sheets and nails to protect **20,988 vulnerable people**, prioritizing those who lost their entire roof. These families received towels and soaps, reaching 8,900 people. Affected families also received **15,007 mattresses**, complementing efforts from the government and other donors, out of these 8,900 also received towels and soaps. The construction capacity of government and community brigades was strengthened by training **1,424 local people**, who received 590 kits and 1,139 specialized and basic tools to facilitate the installation of roofs on home shelters. **The total number of beneficiaries 70,794 can be broken down as follows: 33,375+20,988+15,007+1,424.**

In Pinar del Río, 8,000 tarpaulins remain in stock after replacing pre-positioned units and recovering those already used in temporary shelters. They could benefit another 24,000 people in the event of another extreme hydro-meteorological event.

A partnership was established between UNDP and the authorities of Pinar del Río, facilitating assistance to the province by providing goods purchased with CERF funds, which has been the largest contributor to the creation of shelters in the province (only 35% of the affected houses have been recovered). UNDP complemented this assistance with its own funds, enabling the efficient management of 90 containers of humanitarian aid, with field and technical assistance to prepare communities and families.

While the initial target number of beneficiaries was 54,639, the final number of beneficiaries rose to 70,794 as a result of procurement adjustments that allowed for an increase in humanitarian assistance. There was a high level of satisfaction among the Government, the agencies and the population about the humanitarian assistance provided by UNDP, with the decisive contribution of the CERF, which strengthens UNDP's reputation and allows the continuation of the activities foreseen in the UN Plan of Action.

3. Changes and Amendments

The implementation of the project was mainly affected by the complexity of procuring goods within the framework of humanitarian assistance. The key factors were:

- Low availability of suppliers, limited access to shipping lines and price volatility in the international market, resulting in delays in the delivery of procured goods.
- Lack of Long-Term Agreements (LTAs) to procure goods in response to the emergency.
- Delays in the procurement of roofing due to non-compliance in the delivery from China by one of the contracted suppliers.
- Technical complexity in the procurement of electrical transformers.
- Delays in the internal processes of extraction from the port of Mariel, transfer to Pinar del Río and distribution to the municipalities.

Two extensions were requested, which ended on 10 August 2023 with the execution of the entire available budget (see more details in the extension documents to CERF).

At the time of writing, some 30 containers of roofs, mattresses, tarpaulins, towels and soaps were still being moved and distributed, as well as roofs being put on the home shelters.

The project's planned indicators were overachieved. More essential items were procured due to initial savings in the procurement processes and subsequent adjustments following the cancellation of processes due to non-compliance by the roofing supplier. More tarpaulins, mattresses, tools, towels and soaps were procured. **As a result, the number of people supported increased from the original 54,639 to 70,794.**

4. Number of People Directly Assisted with CERF Funding*

Sector/cluster	Shelter and Non-Food Items									
Category	Planned					Reached				
	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	1,924	1,946	469	501	4,840	1,924	1,946	469	501	4,840
Host communities	0	0	0	0	0	0	0	0	0	0
Other affected people	19,798	20,022	4,827	5,152	49,799	25,722	27,041	5,936	7,255	65,954
Total	21,722	21,968	5,296	5,653	54,639	27,646	28,987	6,405	7,756	70,794
People with disabilities (PwD) out of the total										
	989	1,001	241	257	2,488	989	1,001	241	257	2,488

* 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 CERF-funded humanitarian response was complemented by UNDP funding to prepare local actors involved in the response, communities and families to better manage the reconstruction process. Training was provided to 144 housing technicians, representatives of the Community Architect Programme, delegates from the People's Councils and the construction brigades that installed the roofs. Initially, 39 houses were visited and 89 people were directly trained to install the roofs on the shelters. Four pilot actions were carried out in the municipalities of Pinar del Río, San Luis, San Juan y Martínez and Consolación del Sur, during which 36 people were trained, including technical staff, the community and families. At the same time, UNDP has used its own funds to strengthen emergency management capacity in the areas of administration, procurement, logistics and communications.

6. CERF Results Framework

Project objective	The project provides life-saving and time-critical shelter and non-food items (NFIs) for the immediate provision of temporary and semi-temporary emergency shelter and basic living conditions for hurricane-affected people in the most affected communities in Pinar del Rio province
Output 1	Affected people protected in temporary shelter: "Shelter Houses" with galvanized roof sheets (26 400 units, that will cover 3 300 shelter houses that house at least two families, 6 people per house, benefiting 19 800 people) and "Temporary Facilities" with plastic tarpaulins (10 000 units that will cover 10 000 shelter houses, benefiting 40 000 people), and toolkits to quickly set up these shelters; and provide electricity coverage for vital basic services for affected communities.

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

Sector/cluster	Shelter and Non-Food Items			
Indicators	Description	Target	Achieved	Source of verification
Indicator 1.1	SN.1a Number of people receiving in-kind shelter assistance	49,800	70,794	Report from the Government of Pinar del Rio UNDP field visits to Pinar del Rio
Indicator 1.2	Percentage of coverage for women affected as compared to the total number of people affected in the territories of intervention	55	60	Report from the Government of Pinar del Rio UNDP field visits to Pinar del Rio
Indicator 1.3	Number of vital public services reactivated	50	0	In the project's extension request No. 1, it was agreed that the transformers would be procured with UNDP's own funds. Section 3 Changes and Amendments

Explanation of output and indicators variance:	<p>Initially, the expected population to be sheltered in temporary facilities and later in home-based shelters was 49,800 people, considering the purchase and delivery of 10,000 tarpaulins for 30,000 people in temporary shelters and of 3,300 roof modules for the same number of families, benefiting 19,800 people in home-based shelters.</p> <p>Finally, 16,000 tarpaulins were procured as a result of adjustments to procurement procedures during project implementation. A total of 3,125 tarpaulins pre-positioned in the country were delivered, plus 8,000 of those procured under the project, for a total of 11,125 tarpaulins benefiting 33,375 people. A total of 8,000 pre-positioned tarpaulins will remain to be used in future hurricane seasons. In addition, 3,498 roofing modules were purchased, gradually benefiting 20,988 people. A total of 24,242 mattresses and 4,450 towels and soaps modules will benefit 17,800 people.</p> <p>According to the government's initial damage assessment, people receiving tarpaulins and/or roofs will also receive mattresses, towels and soaps.</p> <p>Of the 33,375 people who have received tarpaulins to create temporary facilities; 4,395 have received mattresses and other 4,840 were delivered to people evacuated in shelter conditions. Of the 20,988 people who received roofs, 8,900 have received towels and soaps, and a further 15,007 who have found a shelter solution through the government, or another donor have received mattresses, including 8,900 who have received towels and soaps.</p> <p>The total number of beneficiaries is 70,794, comprising 33,375 who received tarpaulins for temporary facilities (including 4,395 who received mattresses. Also, other evacuated people received 4,840 mattresses + 20,988 who received roofs for home shelters (including 8900 who received towels and soaps) + 15,007 who received mattresses (including 8900 who received towels and soaps).</p>
---	---

Activities	Description	Implemented by
Activity 1.1	Conduct the procurement process for supplies to provide shelter houses and temporary facilities for 16 600 families (49 800 people)	UNDP
Activity 1.2	Distribute the supplies for the rehabilitation of 13 300 houses that benefit 16 600 families (49 800 people), ensuring gender equity and prioritizing people in conditions of greater vulnerability	Government of Pinar del Rio
Activity 1.3	Conduct the procurement process for electrical transformers and distribute it in affected communities)	Not purchased with CERF funds. Adjusted in extension request no.1 of the project.

Output 2 Affected vulnerable people, including evacuated people, receive basic means (14 592 mattresses benefiting the same amount of people) to improve basic living conditions in the Shelter Houses and Temporary Facilities ensured by the project ensuring gender equity.

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

Sector/cluster Shelter and Non-Food Items

Indicators	Description	Target	Achieved	Source of verification
Indicator 2.1	SN.1a Number of people receiving in-kind shelter assistance	14,592	33,142	Report from the Government of Pinar del Rio UNDP field visits to Pinar del Rio
Indicator 2.2	Percentage of coverage for women affected as compared to the total number of people affected in the territories of intervention	55	60	Report from the Government of Pinar del Rio UNDP field visits to Pinar del Rio
Indicator 2.3	Percentage of households reporting adequate access to household non-food items	15	22	Report from the Government of Pinar del Rio UNDP field visits to Pinar del Rio

Explanation of output and indicators variance:

The original plan was to procure 14,592 single mattresses for the same number of people. During the implementation of the project, adjustments were made to various procurement processes, resulting in positive balances that were used to purchase an additional 9,650 individual mattresses, for a total of **24,242 mattresses, as well as towels and soaps to form 4,450 modules, benefiting 17,800 people.**

The distribution is as follows:

- a) **9,235 people** received mattresses. Out of them **4,395** had previously received tarpaulins. Other evacuated people received **4,840** mattresses.
- b) **8,900 people** received mattresses and towel and soap modules.
- c) **8,900 people** received towel and soap kits.
- d) **6,107 people** received mattresses.

A total of 33,142 people benefited = 9,235+8,900+8,900+8,900+6,107

Of the 33,142 beneficiaries in output 2, only 15,007 people who received mattresses are added to the total number of beneficiaries declared in output 1 (70,794).
The difference between 33,142 - 15,007=18,135 people is included among those who received tarpaulins and roofs

Activities	Description	Implemented by
Activity 2.1	Conduct the procurement process for supplies to provide basic living conditions for 14 592 people affected, including 4840 evacuated people	UNDP
Activity 2.2	Distribute the supplies among recipients at shelter houses, temporary facilities and evacuation centers	Government of Pinar del Rio

7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and

Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas⁴ often lacking appropriate consideration and visibility: women and girls, people with disabilities, education and protection. **The following sections demonstrate how cross-cutting issues and the ERC's four underfunded priority areas have been addressed through project activities and should highlight the achieved impact wherever possible.**

a. Accountability to Affected People (AAP)⁵:

To implement the project, UNDP relied on the mechanisms established by the Ministry of Foreign Trade and Investment (MINCEX) and the National Civil Defense Staff to respond to the effects of Hurricane Ian. These include direct interaction with affected communities and families. Through management stations activated within the People's Councils (administrative subdivisions of the municipalities), an assessment of the impact and needs of the population is carried out. The criteria of social workers and delegates of the People's Councils are then integrated with the monitoring of the representatives of the Housing and Domestic Economy Directorates to design the distribution process of humanitarian aid. The aid is finally distributed at checkpoints after identifying priorities according to social vulnerability by a commission at the community level, which in turn are endorsed by the governments of each municipality.

The governments, in turn, facilitate UNDP's interaction with local community actors and the people who benefit from the delivered goods. Several monitoring visits are carried out to check on deliveries, checklists and people's satisfaction.

b. AAP Feedback and Complaint Mechanisms:

UNDP was able to carry out 10 field visits. In the first stage, it was able to interact with the government and the agencies in charge of the emergency response, to learn about the needs and, in the following stages, to verify the arrival and distribution of the aid.

Partnerships have been established which have made it possible to know and verify directly with the families their level of satisfaction and their concerns. UNDP relies on the channels established by the government to identify the criteria and concerns of the population and, in turn, the solutions to these concerns.

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

UNDP did not establish a mechanism to manage SEA. The government has well-established mechanisms for identifying and responding to acts of sexual exploitation and abuse of persons. During UNDP's operations in the area, there were no incidents that could affect the delivery and monitoring of essential supplies to the affected population.

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

UNDP has been able to verify that the mechanisms put in place by the government to help the recovery of people in Pinar del Rio are based on the principle of equitable distribution of resources according to the priorities identified among the most vulnerable groups. In this way, priority is given to large families with social and economic vulnerability, single mothers with minor children, sick or elderly people, and single-parent families with several family members.

UNDP monitoring has shown that there are many single mothers or women caring for sick and elderly people. Providing these people with technical knowledge on how to safely install and maintain their roofs was a good practice. In addition, basic roofing tools were distributed to the community brigades, which will remain in the People's Councils to be lent to any family that needs them for roof repairs and

⁴ These areas include: support for women and girls, including tackling gender-based violence, sexual and reproductive health and empowerment; programmes targeting people with disabilities; education in protracted crises; and other aspects of protection. The ERC recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and UNCTs/HCTs when prioritizing life-saving needs for inclusion in CERF requests. While CERF remains needs-based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the Questions and Answers on the ERC four priority areas [here](#).

⁵ 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](#).

maintenance. Through lectures, practical demonstrations and technical material in simple language, it was possible to reach and empower this group of people.

e. People with disabilities (PwD):

As part of the Government's response to the effects of Hurricane Ian, priority attention is being given to vulnerable groups. Within this group, priority is given to people with disabilities. Families with more complex situations receive differentiated attention.

f. Protection:

The project had a positive impact on 70,794 people. In the first stage of the response, tarpaulins were delivered to protect people in temporary facilities, which allowed many people to keep part of the goods they were able to salvage after the impact of the hurricane. Later, zinc sheets and nails have been delivered progressively so that people who lost their roofs can ensure their return to their homes, which have been conditioned as shelters, and to take in other families or neighbors in vulnerable situations.

In addition, supplies such as mattresses, towels and soaps have been delivered to enable the affected people to recover their habitability and cover their basic needs

g. Education:

With UNDP's own resources, it has been possible to carry out training activities with the actors involved in housing reconstruction, such as the municipal housing directorates, the Community Architect Programme and the brigades (belonging to different companies) that install the roofs, as well as with communities and families.

Theoretical training and practical demonstrations of shelter roofing have been carried out. The production of basic elements to secure the wooden structures that support the roofs (hurricane-proof strips) has been promoted with local producers, recycling waste material from the production of metal carpentry for social housing. This is an innovative initiative introduced by the project. The government, with the support of the UNDP, is disseminating the importance of their use in various ways, such as: a user's manual, models, training for housing technicians to replicate their use among the population, and indicative drawings in points of sale.

8. Cash and Voucher Assistance (CVA)

Use of Cash and Voucher Assistance (CVA)?

Planned	Achieved	Total number of people receiving cash assistance:
No	No	0

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.

The modality of cash transfers to beneficiaries was not used as the Cuban government has not implemented this mechanism for channeling humanitarian aid.

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
N/A	0	US\$ 0		

9. Visibility of CERF-funded Activities

Title	Weblink
UNDP Cuba supports efforts to improve living conditions of people affected by Hurricane Ian	https://twitter.com/pnudcuba/status/1617542725137534976?s=48&t=31T9eHcPqA0BtallbBspKw
UN Action Plan in Cuba supports 798,000 people in different key areas	https://twitter.com/pnudcuba/status/1583799165242728449?s=48&t=31T9eHcPqA0BtallbBspKw
UNDP remains attentive to damage reports in the aftermath of Hurricane Ian	https://twitter.com/pnudcuba/status/1575207095775166464?s=48&t=31T9eHcPqA0BtallbBspKw
Safe roofs for people affected by Hurricane Ian	https://twitter.com/asteiner/status/1677042585381085186?s=48&t=31T9eHcPqA0BtallbBspKw

3.3 Project Report 22-RR-FPA-039

1. Project Information

Agency:	UNFPA	Country:	Cuba
Sector/cluster:	Health - Sexual and Reproductive Health	CERF project code:	22-RR-FPA-039
Project title:	Sexual and reproductive health, including sexual violence services revitalized		
Start date:	20/10/2022	End date:	19/04/2023
Project revisions:	No-cost extension <input checked="" type="checkbox"/>	Redeployment of funds <input type="checkbox"/>	Reprogramming <input type="checkbox"/>

Funding	Total requirement for agency's sector response to current emergency:	US\$ 2,000,000
	Total funding received for agency's sector response to current emergency:	US\$ 254,066
	Amount received from CERF:	US\$ 400,000
	Total CERF funds sub-granted to implementing partners:	US\$ 0
	Government Partners	US\$ 0
	International NGOs	US\$ 0
National NGOs	US\$ 0	
Red Cross/Crescent Organisation	US\$ 0	

2. Project Results Summary/Overall Performance

UNFPA support through this CERF project contributed to saving the lives of vulnerable populations, particularly adolescent and young women. Pregnant women, women living with HIV, women in vulnerable conditions, transgender people, people with disabilities were reached. Support was provided for the revitalization of sexual and reproductive health services, including care for sexual violence, in 29 health institutions (3 hospitals, 17 community health centers and 9 Maternal Homes) in the 9 municipalities of the Pinar del Rio and Artemisa provinces impacted by Hurricane Ian. The satisfaction of the basic hygiene needs of these groups of people was also supported.

Through alliances with the Ministry of Public Health, especially the Maternal and Child Program and the National Health Promotion Unit, as well as with the Federation of Cuban Women (NGO) a total of 200.132 people were reached.

Sexual and reproductive health kits were provided, including kits for attention to sexual violence, medicines, and equipment for maternal health care. With these, 141.348 women of reproductive age, 44.975 men and 1.338 boys and girls were reached. The hygiene needs of 12.471 people were covered, including 940 women with disabilities, 2.748 women from families in vulnerable conditions, 156 women living with HIV and 46 trans-gender people living with HIV. In addition, 3.530 pregnant and postpartum women and 5.051 women of reproductive age who receive care in the health services of the three hospitals were reached.

The alliance with the Federation of Cuban Women (FMC), as a civil society organization, allowed from the beginning the participation and active incorporation of the community in the response. With the formation and training of 20 community brigades made up of representatives of the Ministry of Health and the FMC, communication and information actions on the protection of sexual and reproductive health in emergency contexts were implemented. These brigades have been formed and activated for other emergencies. A total of 5.292 people who were receiving care in health centers and communities were reached, of whom 4.098 were women and 906 adolescents. 230 health professionals, Civil Defense and FMC personnel received guidance on SRH care in emergency contexts and the application of the Minimum Initial Services Package for SRH. An added value was holding a workshop for identifying good practices

and lessons learned, which included the participation of the counterparts involved at both the national and territorial levels and representatives of civil society.)

3. Changes and Amendments

A free extension of the Project for three months was requested and approved, due to the difficulties associated with the availability of some supplies and medicines, the lags in the responses of the suppliers and the arrival times to the country and therefore the need for the monitoring of reception and distribution to the final beneficiaries. In this context, some purchases for services were adjusted in consultation with CERF, due to the unavailability of some medications. Thus, it was possible to increase the number of sexual and reproductive health kits purchased, anti-shock suits for emergency obstetric care, and other medicines, which also made it possible to expand the reach of people. In the meetings and monitoring visits, the needs for the acquisition of equipment and other medicines that were in short supply and that were affected during the Hurricane were identified. Correspondingly, an incubator and Ultrasound equipment were both also included. It was possible to identify local suppliers for the acquisition of hygiene supplies for health centers (sheets, maternity gowns and towels) that were also an identified need and that allowed savings related to freight costs and also greater promptness in availability of these supplies. This made it possible to expand the amount of population reached and a greater adjustment to the needs of the population.

4. Number of People Directly Assisted with CERF Funding*

Sector/cluster	Health - Sexual and Reproductive Health									
Category	Planned					Reached				
	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	124,501	14,671	23,360	24,824	187,356	129,208	17,091	25,318	28,515	200,132
Total	124,501	14,671	23,360	24,824	187,356	129,208	17,091	25,318	28,515	200,132
People with disabilities (PwD) out of the total										
	8,545	6,038	848	1,853	17,284	940	0	0	0	940

* 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

20 community brigades were formed that carried out information communication actions in the communities of all the municipalities involved in the response. With the work to promote sexual and reproductive health that saves lives, 5.292 people who were receiving care in health centers and communities have been reached, of which 4.098 were women and 906 adolescents. Of these, 1.631 participated in the activities and the rest received communication materials.

6. CERF Results Framework

Project objective	To contribute to save lives of vulnerable populations, particularly, women (pregnant women, transgender) adolescents and young people, people with disabilities ensuring the minimum capacities of sexual and reproductive health services in a maternal hospital and health basic centers, and providing protection for GBV, gender inequalities and discrimination to these vulnerable population groups.				
Output 1	[Contributed to the minimal capacities of the sexual and reproductive health services, including sexual violence clinical care in the nine most affected territories]				
Was the planned output changed through a reprogramming after the application stage?				Yes <input type="checkbox"/>	No <input type="checkbox"/>
Sector/cluster	Health - Sexual and Reproductive Health				
Indicators	Description	Target	Achieved	Source of verification	
Indicator 1.1	% of SRH services (contraception, care deliveries, emergency obstetric) revitalized with the UNFPA support	30	100	100% of SSR services from 7 municipalities, (3 hospitals, 17 polyclinics and 9 maternal homes) Certificates of delivery of inputs to the services, reports of meetings and field visits. Lessons Learned Workshop Report	
Indicator 1.2	% of pregnant women being attended in the maternal services at hospital	95	100	Statistics of births in hospital institutions	
Indicator 1.3	H.7 Number of functional health facilities supported	6	29	Certificates of delivery of inputs to the services, reports of meetings and field visits. Lessons Learned Workshop Report	
Explanation of output and indicators variance:		<p>With the acquisition of medicines, SRH kits and other supplies for maternal health care and sexual and reproductive health, it was possible to revitalize SRH care services in the 9 municipalities. This incorporates attention to maternal health and contraceptive needs, as well as attention to sexual violence.</p> <p>The savings in some acquisitions allowed to increase the number of kits and supplies purchased.</p> <p>Formation and training actions, as well as the availability of communication materials, have been an essential contribution to the revitalization of services and therefore the outreach to people.</p>			
Activities	Description	Implemented by			

Activity 1.1	Coordination meeting with government and health management at the national level and in at the affected municipalities	MoH and UNFPA
Activity 1.2	Acquisition and distribution of critical additional medicines	MoH and UNFPA
Activity 1.3	Acquisition and distribution of the SRH kits	MoH, UNFPA, MINCEX
Activity 1.4	Acquisition and distribution of the Sexual Violence and hygiene kits	UNFPA; FMC and communitarian organizations
Activity 1.5	Meeting with the communitarian organizations and beneficiaries	UNFPA, FMC, communitarian organizations and beneficiaries

Output 2 Improved the protection of the pregnant women, adolescent girls, young women and vulnerable women, people with disabilities through hygienic supplies for basic life conditions.

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

Sector/cluster Health - Sexual and Reproductive Health

Indicators	Description	Target	Achieved	Source of verification
Indicator 2.1	<p>SP.1b Number of people receiving menstrual hygiene management kits and/or dignity kits (Number of vulnerable women, including adolescent girls, pregnant women, people with disabilities, transgender that received hygienic kits (Total number of pregnant women in the 9 municipalities, 85 transgender women and 915 adolescents and women with disabilities))</p> <p>(4585 DK to pregnant women, transgender living with VIH, women living with HIV, women with disabilities and vulnerable families. Acquisition on towels, sheets and gowns for pregnant women: 2835 pregnant women in maternity homes 5051 women in RH in hospitals)</p>	3,720	12,471	Delivery certificates in health services, distribution lists by communities, photos of the deliveries with the support of the community brigades
Indicator 2.2	<p>SP.1a Number of menstrual hygiene management kits and/or dignity kits distributed</p> <p>(4,585 DK 2.390 kits with sheets, towels and maternity gowns.)</p>	3,720	6975	Certificates of delivery in health services, photos of deliveries

Indicator 2.3	(10 meetings 230 persons)	60	230	Reports of meetings, workshops and participants lists
Explanation of output and indicators variance:		It was possible the acquisition of a larger quantity of hygiene kits from some savings in freight and cost of the kits. At the same time, the possibility of making purchases of some hygiene supplies in the country was incorporated for the first time, which made it possible to prepare kits with sheets, towels and gowns aimed at maternity homes and hospital institutions, which would benefit a greater number of women who have been cared for in the institutions during the months of implementation of the response. This expanded the scope and satisfaction of needs.		
Activities	Description	Implemented by		
Activity 2.1	Coordination meetings with the counterparts and beneficiaries	UNFPA and FMC		
Activity 2.2	Selection of items with the hygienic kits	UNFPA, FMC and communitarian organizations		
Activity 2.3	Acquisition and distribution of the Hygienic kits	UNFPA, FMC, communitarian organizations and beneficiaries.		
Activity 2.4	Meetings with beneficiaries	UNFPA, FMC, communitarian organizations and beneficiaries		

7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas⁶ often lacking appropriate consideration and visibility: women and girls, people with disabilities, education and protection. **The following sections demonstrate how cross-cutting issues and the ERC's four underfunded priority areas have been addressed through project activities and should highlight the achieved impact wherever possible.**

a. Accountability to Affected People (AAP)⁷:

A distinctive aspect of the response was the active participation of representatives of the Ministry of Trade and Foreign Investment, the Ministry of Public Health and their importing entities and civil society (FMC) as part of the design, adjustment, implementation and evaluation of the actions developed. Teams were formed at the national, province and community levels that actively participated in the processes of identification of needs and beneficiaries in each of the communities, in the monitoring for the reception of inputs and especially in the distribution processes. This made it possible active participation, but also monitoring mechanisms and timely adjustments to work as necessary.

⁶ These areas include: support for women and girls, including tackling gender-based violence, sexual and reproductive health and empowerment; programmes targeting people with disabilities; education in protracted crises; and other aspects of protection. The ERC recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and UNCTs/HCTs when prioritizing life-saving needs for inclusion in CERF requests. While CERF remains needs-based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the Questions and Answers on the ERC four priority areas [here](#).

⁷ 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](#).

Health personnel from each of the territories and from the institutions were also key actors in the process of monitoring and adjusting the needs, as well as in the identification of the beneficiaries. The 20 community brigades were also in charge of delivering the hygiene kits to each beneficiary, while the province teams delivered the kits of sheets, towels and gowns to the health centers.

10 exchange and monitoring meetings were held in the provinces and municipalities. As part of them, orientation actions were carried out on the Minimum Initial Services Package and the Clinical Management of sexual violence. A final workshop with the participation of government and civil society representatives from all the municipalities made it possible to identify good practices and lessons learned from the response.

b. AAP Feedback and Complaint Mechanisms:

The 20 community brigades that were formed to support the implementation of the response, formed by people from the community itself (Federation of Cuban Women and health personnel), had the role of monitoring and supporting the distribution of supplies, identifying vulnerable people and promoting information and communication actions. They remained active from the beginning and were identified by the population. In this sense, they were mechanisms or ways for the population to convey their concerns and complaints and for timely follow-up.

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

Governments and civil society organizations at the community level have channels through which the population, especially in conditions of vulnerability, can participate in the processes and make complaints and concerns related to sexual exploitation and abuse and other issues related to gender-based violence, discrimination, etc.

The participation of the Federation of Cuban Women throughout the response made it possible for its mechanisms to be active in the communities for channeling complaints related to gender violence (GBV) and sexual exploitation and abuse. GBV prevention including sexual violence was incorporated as part of the orientation meetings. The teams from both provinces received training that includes the prevention of GBV and the clinical management of sexual violence, so they also became recipients of any manifestation or complaint. The formed community brigades maintained systematic interaction with the beneficiary population, which is why they were, at the same time, channels for the transmission of complaints and concerns.

Additionally, the country has a comprehensive Strategy for the prevention and care of gender violence and in the family setting, which is implemented by governments and state institutions at all levels, with the active participation of the FMC. This is an element that is added to the response this time.

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

Attention to sexual and reproductive health and the basic hygiene needs of population groups in disadvantaged conditions was the focus of UNFPA's response. Women of reproductive age were reached, with emphasis on pregnant women and adolescents. In addition, women with disabilities, women in vulnerable conditions (those from families that have lost everything, women with three or more children, etc.) were identified and prioritized at the community level. Women living with HIV and transgender people living with HIV have also been prioritized. All these people were selected by the community brigades based on the specific characteristics of the communities and at the same time the brigades actively monitored that the resources acquired reached each of them.

From the implementation of the Minimum Initial Services Package for SRH, for which the personnel involved in the response from the different sectors and representatives of Civil Society were trained, the focus was on the prevention of maternal mortality and morbidity, as well as the attention to sexual violence. Through the brigades, communication and information actions on SRH that save lives were carried out: communication on contraception, prevention and attention to Sexually Transmitted Infections including HIV, menstrual hygiene, condom use, among others.

The prevention of Gender Violence, including sexual violence, was central to the response. Kits for attention to sexual violence were acquired and training was carried out for the clinical management of sexual violence.

e. People with disabilities (PwD):

Women with disabilities were part of the response in each of the municipalities. The brigades that were formed identified those who were in vulnerable conditions and were provided with 930 hygiene kits to help meet their basic needs.

f. Protection:

Some of the actions that contribute to the protection of people during the implementation of the project are:

- The distribution of hygiene kits to populations in vulnerable conditions by the brigades and in their own environments.
- Sensitization and training on GBV prevention and care, including sexual violence.
- The possibility of systematic communication between the representatives of civil society in each of the communities with the final beneficiaries.

g. Education:

Communication actions on information on sexual and reproductive health that saves lives were implemented during the response. Each of the 20 brigades carried out health promotion activities according to the characteristics of each locality. Educational talks on maternal health, identification of warning signs during pregnancy, contraception, proper use of condoms, and prevention of adolescent pregnancy were implemented. These activities were supported with informational and communicational materials. They were implemented in maternity homes and hospital wards, in community fairs and in schools.

Additionally, two meetings were held with health providers, decision-making personnel from some sectors, representatives of civil society, and experts in the application of the MISV and the clinical management of sexual violence.

8. Cash and Voucher Assistance (CVA)

Use of Cash and Voucher Assistance (CVA)?

Planned	Achieved	Total number of people receiving cash assistance:
No	Choose an item.	0

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.

N/A

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
N/A	0	US\$ 0		

9. Visibility of CERF-funded Activities

Title	Weblink
UNFPA, the United Nations Population Fund, supports the recovery of municipalities affected by Hurricane Ian	https://cuba.unfpa.org/es/news/el-unfpa-fondo-de-poblaci%C3%B3n-de-las-naciones-unidas-apoya-la-recuperaci%C3%B3n-de-los-municipios
UNFPA, the United Nations Population Fund, supports the recovery of municipalities affected by Hurricane Ian	http://www.cubadebate.cu/noticias/2023/03/12/fondo-de-poblacion-de-las-naciones-unidas-apoya-la-recuperacion-de-los-municipios-afectados-por-el-huracan-ian/
UNFPA Cuba donates 1,785,600 male #condoms that are already being distributed to all health areas on the island	[https://twitter.com/UNFPACuba/status/1641456105300832256?ref_src=twsrc%5Etfw
<ul style="list-style-type: none"> • The donation of sheets, towels and buttons for pregnant women arrives at the Abel Santamaría Cuadrado General Teaching Hospital in #PinardelRío. • In support of the Sexual and Reproductive Health Service, it is distributed in the Dr. Modesto Gómez Rubio Polyclinic municipality #SanJuanyMartínez donation by UNFPA Cuba • With the aim of supporting the continuity and quality of sexual and reproductive health services in #PinardelRío, a training workshop is held at the Provincial Health Directorate • Educational activity in the family planning consultation in the #Viñales municipality, using the contraceptive methods donated by UNFPA Cuba #CubaPorLaVida • We continued to deliver the cleanness module to disabled women of childbearing age affected by the cyclone in the Briones Montoto Popular Council. • Donation received for obstetric emergency, safe abortion care, prevention of sexual violence and for safe blood transfusion. • The Cinco de Septiembre Community Teaching Polyclinic in the #ConsolaciondelSur municipality received a donation from UNFPA Cuba, which will have the Maternal and Child Program as its main destination. 	<p>EN PAGINA DE FACEBOOK: Dirección Provincial de Salud de Pinar del Río: https://www.facebook.com/dpspinar?locale=es_LA Publicaciones relacionadas con la respuesta: https://www.facebook.com/profile/100064046829299/search/?q=unfpa&locale=es_LA</p>
<ul style="list-style-type: none"> • The Office in Cuba of UNFPA, United Nations Population Fund, donates 1,785,600 male #condoms that are already being distributed to all health areas on the island. • Counterparts evaluate the implementation of the project "Support for the restoration of sexual and reproductive health services in 	<p>Página de Facebook de UNFPA Cuba: https://www.facebook.com/profile/100067145041589/search/?q=pinar%20del%20rio</p>

municipalities of the two provinces most affected by Hurricane Ián: #Pinar del Río and #Artemisa".

- Support for the reestablishment of sexual and reproductive health services, a priority of the response of the United Nations System in Cuba to #HurricaneIán, with the accompaniment of UNFPA Cuba

Página de Facebook de Sistema de Naciones Unidas en Cuba
<https://www.facebook.com/ONUCuba>

- Pinar del Río: UN-Cuba donates 14.7 million dollars for emergency aid

<https://www.youtube.com/watch?v=kfi0Lahn0gs>

3.4 Project Report 22-RR-CEF-069

1. Project Information

Agency:	UNICEF	Country:	Cuba
Sector/cluster:	Water, Sanitation and Hygiene Education	CERF project code:	22-RR-CEF-069
Project title:	WASH intervention and rehabilitation of educational centers to benefit children, families, and communities in 8 municipalities of Pinar del Río.		
Start date:	05/10/2022	End date:	04/04/2023
Project revisions:	No-cost extension <input checked="" type="checkbox"/>	Redeployment of funds <input type="checkbox"/>	Reprogramming <input type="checkbox"/>

Funding

Total requirement for agency's sector response to current emergency:	US\$ 5,299,862
Total funding received for agency's sector response to current emergency:	US\$ 239,000
Amount received from CERF:	US\$ 1,529,545
Total CERF funds sub-granted to implementing partners:	US\$ 0
Government Partners	US\$ 0
International NGOs	US\$ 0
National NGOs	US\$ 0
Red Cross/Crescent Organisation	US\$ 0

2. Project Results Summary/Overall Performance

Through this CERF UFE grant, UNICEF and its partners provided support in improving water storage and hygiene conditions for 52,980 vulnerable families (211,920 people). In addition, 45,524 people ensured access to safe drinking water through the installation of portable water purification plants and water pumping equipment in affected communities. 44 health care centers in affected communities received safe and sustainable water storage facilities.

The intervention in WASH sector covered 3 levels: strengthening the communities' water supply capacities; increasing the capacities of public health institutions for the sustainable storage of drinking water; and improving hygiene conditions and access to drinking water for vulnerable families.

CERF funds also supported the return to functionality of 331 educational centers through the provision of 36,200 square meters of waterproof roof covers and the delivery of 444 kits of educational materials. 25,088 girls and 26,655 boys aged 0 to 18 years in the 8 most affected municipalities were supported in their rapid return to protective learning spaces.

3. Changes and Amendments

Although CERF funds were committed promptly, it was necessary to request a non-cost extension due to the global supply chain crisis and delays in the nationalization and extraction process upon arrival in the country.

Limited availability of WASH related supplies in the region forced UNICEF to procure water treatment plants and pumps in Europe, with the consequent delay in the arrival of these supplies.

Similarly, during implementation, due to fluctuations in freight rates for items procured from UNICEF Supply Division, UNICEF faced challenges in monitoring the implementation of Grant, with a negative balance of over US\$72,000 at one point.

At the close of the project implementation time, a total of 15,985.80 was left over. These funds had been available from a purchase of WASH supplies and had been reprogrammed for a purchase of water monitoring supplies but at the last minute the supplier was unable to complete the delivery due to the US embargo on Cuba, so this unspent balance was returned to CERF.

4. Number of People Directly Assisted with CERF Funding*

Sector/cluster	Education									
Category	Planned					Reached				
	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	25,089	26,655	51,744	0	0	25,089	26,655	51,744
Total	0	0	25,089	26,655	51,744	0	0	25,089	26,655	51,744
People with disabilities (PwD) out of the total										
	0	0	0	0	0	0	0	0	0	0
Sector/cluster	Water, Sanitation and Hygiene									
Category	Planned					Reached				
	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	78,489	72,449	15,924	17,248	184,110	109,752	101,306	22,266	24,120	257,444
Total	78,489	72,449	15,924	17,248	184,110	109,752	101,306	22,266	24,120	257,444
People with disabilities (PwD) out of the total										
	4,131	3,813	838	908	9,690	5,488	5,065	1,113	1,206	12,872

* 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 intervention in the Water, Hygiene and Sanitation sector allowed approximately 20,000 people to benefit from the improvement in the conditions for sustainable and safe water storage in 44 community health institutions.

In the Education sector, approximately 51,000 families were benefited by the rapid return of children to safe learning spaces, allowing them to join recovery efforts.

6. CERF Results Framework

Project objective Provision of life-saving Water, Sanitation and hygiene supplies and services in the aftermath of the Hurricane Ian to prevent water and vector borne disease in the most affected communities.

Output 1 Safe water storage and treatment means and hygiene kits for vulnerable families, that live in the 7 municipalities that suffered the greatest impact is available.

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
Indicator 1.1	(#Number of people receiving critical WASH supplies	188,800	211,920	Reports of municipalities and local authorities, and UNICEF field visit in February and June.
Indicator 1.2	#Number of WASH/hygiene kits distributed	2,050	2,050	Reports of municipalities and local authorities, and UNICEF field visit in February and June.

Explanation of output and indicators variance: Due to lower prices obtained in the procurement of WASH supplies (tanks and collapsible tanks), 23,120 additional people of affected communities improved their basic hygiene and water storage conditions.

Activities	Description	Implemented by
Activity 1.1	Procurement and transport of basic supplies: Hygiene kits Water Purification Tabs 10 L water container 250 litre water containers	UNICEF Cuba
Activity 1.2	Delivery of basic supplies to the Government of Cuba	UNICEF Cuba
Activity 1.3	Distribution of basic supplies by the Government to the beneficiaries	UNICEF Cuba

Output 2 Affected public health facilities have sustainable water storage resources

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
Indicator 2.1	H.7 Number of functional health facilities supported	30	44	Reports of provincial health authorities and

				UNICEF field visit results on February and June.
Explanation of output and indicators variance:		Due to the lower prices obtained for the procurement of water tanks, 14 additional health institutions improved their hygiene and water storage conditions, mainly the community medical offices that directly serve the affected population.		
Activities	Description	Implemented by		
Activity 2.1	Procurement and transport of 5000 litre water containers	UNICEF Cuba		
Activity 2.2	Delivery of basic supplies to the Ministry of Health	UNICEF Cuba		
Activity 2.3	Distribution of basic supplies to the beneficiaries	Government of Cuba		

Output 3	Communities with interruptions in access to water supply are benefiting from drinking water supply services with the portable water purification plants and motor pumps.			
Was the planned output changed through a reprogramming after the application stage? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				
Sector/cluster	Water, Sanitation and Hygiene			
Indicators	Description	Target	Achieved	Source of verification
Indicator 3.1	WS.6 Number of people accessing sufficient and safe water for drinking, cooking and/or personal hygiene use as per agreed sector standard	5,000	45,524	Report from the National Institute of Hydraulic Resources and UNICEF monitoring visit to the pumping station in Pinar del Río.
Explanation of output and indicators variance:		The competitive bids received for the procurement of water treatment plants and other WASH supplies enabled the additional procurement of 2 pumping units for the <i>Espinela-Troncoso</i> station. This intervention made it possible to extend the scope of the intervention to an additional community affected by the water supply in the municipality of Pinar del Río.		
Activities	Description	Implemented by		
Activity 3.1	Procurement and transport of basic supplies: motor pumps portable water purification plants	UNICEF Cuba		
Activity 3.2	Delivery of basic supplies to the National Institute of Hydraulic Resources	UNICEF Cuba		
Activity 3.3	Distribution of basic supplies to the beneficiaries	National Institute of Hydraulic Resources		

Output 4	25,088 girls and 26,655 boys of 0 to 18 years of age in the 8 most affected municipalities resume their learning activities in safe and protective environments.			
Was the planned output changed through a reprogramming after the application stage? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				
Sector/cluster	Education			
Indicators	Description	Target	Achieved	Source of verification
Indicator 4.1	Number of children accessing formal or non-formal education	51,744	51,744	Report by Ministry of Education and UNICEF field monitoring visit

				results in February and June.
Indicator 4.2	Number of temporary learning spaces and/or centres established and/or rehabilitated	331	331	Report by Ministry of Education and UNICEF field monitoring visit results in February and June.

Explanation of output and indicators variance:

Activities	Description	Implemented by
Activity 4.1	Procure waterproof roof covers for day-care centers and schools	UNICEF Cuba
Activity 4.2	Delivery waterproof covers to the Government of Cuba	UNICEF Cuba
Activity 4.3	Distribution waterproof covers in day-care centers and schools	Municipal Directorate of Education in Pinar del Río

Output 5 2016 girls and – 2184 boys from 0 to 5 years in the 8 most affected municipalities resume their learning activities in safe and protective 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 5.1	No. children from 0 to 5 years old who receive ECD Kits for early stimulation.)	4200	11,500	Report by Ministry of Education and UNICEF field monitoring visit results in February and June.
Indicator 5.2	No. ECD kits distributed	84	214	Report by Ministry of Education and UNICEF field monitoring visit results in February and June.

Explanation of output and indicators variance: With the availability of the budget earmarked for the purchase of school kits (output 6), the number of early childhood kits was increased, so that 7,300 additional children from 0 to 5 years returned to protective learning spaces with materials appropriate for their development.

Activities	Description	Implemented by
Activity 5.1	Purchase ECD Kits	UNICEF Cuba
Activity 5.2	Delivery ECD Kits to the Government of Cuba	UNICEF Cuba
Activity 5.3	Distribution ECD Kit providing early childhood education	Municipal Directorates of Education in Pinar del Río

Output 6 17,457 girls and 18,686 boys from the 8 most affected municipalities resume their learning activities in safe and protective temporary environments

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
Indicator 6.1	Number of people (teachers and/or children) accessing teaching, learning and/or recreational materials	36,143	36,143	Report by Ministry of Education and UNICEF field monitoring visit results in February and June.
Indicator 6.2	No. schools Kits	140	0	Report by Ministry of Education and UNICEF field monitoring visit results in February and June.
Indicator 6.3	No. Recreation Kits	154	230	Report by Ministry of Education and UNICEF field monitoring visit results in February and June.
Explanation of output and indicators variance:		Due to UNICEF's global response to the war in Ukraine and then the earthquake in Turkey, the school-in-a-box kit was not available to respond to this emergency. To maintain the planned scope, additional quantities of recreation kits and Early Childhood Development kits were procured to enable 36,143 children from the 8 most affected municipalities resumed their learning activities with materials that also contribute to their psycho-emotional recovery.		
Activities	Description	Implemented by		
Activity 6.1	Purchase school material and recreation Kit	UNICEF Cuba		
Activity 6.2	Delivery school materials and recreation Kit to the Government of Cuba.	UNICEF Cuba		
Activity 6.3	Distribution school materials and recreation Kit to schools.	Municipal Directorates of Education in Pinar del Rio		

7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas⁸ often lacking appropriate consideration and visibility: women and girls, people with disabilities, education and protection. **The following sections demonstrate how cross-cutting issues and the ERC's four underfunded priority areas have been addressed through project activities and should highlight the achieved impact wherever possible.**

⁸ These areas include: support for women and girls, including tackling gender-based violence, sexual and reproductive health and empowerment; programmes targeting people with disabilities; education in protracted crises; and other aspects of protection. The ERC recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and UNCTs/HCTs when prioritizing life-saving needs for inclusion in CERF requests. While CERF remains needs-based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the Questions and Answers on the ERC four priority areas [here](#).

a. Accountability to Affected People (AAP)⁹:

Project design and planning was based on government assessments and response requests. These included data reported by the local governments in the affected communities and incorporates a child protection and a gender equality approach. National, provincial, and municipal authorities lead the implementation with their sectoral specialists in close coordination with UNICEF. Involvement of community members in the response was achieved through existing governance mechanisms at the municipal and local levels. During exchanges with authorities and meetings with affected families and individuals, UNICEF ensured that key humanitarian needs were incorporated into its response. UNICEF is working to strengthen communication mechanisms and work locally in the affected communities.

b. AAP Feedback and Complaint Mechanisms:

The communication and feedback mechanism currently established with the affected communities was through direct exchange during field visits to the affected communities, as well as the feedback mechanisms that UNICEF has established for its work in the country (social networks, telephones, email). During the field visits, information was shared with the affected people on the principles of the organization and the objectives and implementation of the project. Direct dialogue with beneficiaries and local authorities confirmed the appropriateness and use of the supplies received and allowed UNICEF to identify further needs. This feedback will be taken into account in future response actions.

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

As part of its commitment to the prevention of sexual exploitation and abuse, UNICEF supported capacity building for its staff and partners on issues related to PSEA. It also contributed to the training and preparation of people in charge of dealing with SEA cases, specifically dealing with victims.

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

UNICEF's response led to improved access to water, sanitation and hygiene services in shelters, communities, and health centers, which involves addressing the needs of women from vulnerable families, such as improving access to safe water, storage capacity in their homes and improving their hygiene conditions, including menstrual hygiene management.

The project facilitated the return of children to school, which helped mitigate protection risks, as parents are key actors in recovery efforts in their communities. Supporting the return of children under five to school allowed working mothers the time needed to get food and water and return to work.

e. People with disabilities (PwD):

The UNICEF response was inclusive for people with disabilities. In the identification of vulnerable families together with local authorities, emphasis was placed on the care of families with people with disabilities who are in vulnerable conditions.

The Project also included the improvement of the educational conditions of children with disabilities studying in regular and special schools.

f. Protection:

UNICEF's response helped reduce the protection risks associated with the lack of basic water and hygiene services. The project also contributed to guaranteeing the right of access to education services for girls and boys in affected communities. The actions supported by CERF contributed to the socio-emotional recovery of affected children after an emergency.

⁹ 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](#).

g. Education:

Hygiene promotion and education were conducted at the communities and evacuation centers for local and health authorities, including schools and learning spaces for children. Joint WASH and Education actions helped to ensure that the WASH services provided are durable and benefit the school after the emergency. Attending safe and functional learning spaces promoted the empowerment of children within their communities in leadership roles. Promoting hygiene practices in schools and communities after a hurricane is critical to prevent the outbreak of water-borne and vector-borne diseases.

8. Cash and Voucher Assistance (CVA)

Use of Cash and Voucher Assistance (CVA)?

Planned	Achieved	Total number of people receiving cash assistance:
No	No	0

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.

Cash transfer programming is not an implementation modality in Cuba. Social protection mechanisms in Cuba are led entirely by the Government and are mostly in-kind.

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
N/A		US\$ 0		

9. Visibility of CERF-funded Activities

Title	Weblink
Visita de UNICEF a la provincia de Pinar del Río para intercambiar sobre el avance de la respuesta en temas de agua y recuperación de escuelas.	https://twitter.com/UNICEFCuba/status/1628770958268850178
Visita de UNICEF a la provincia de Pinar del Río para intercambiar sobre el avance de la respuesta en temas de agua y recuperación de escuelas.	https://www.facebook.com/UNICEFCuba/posts/pfbid0nXo8NENLa72bcx3vjPKFug9cFMGD2WuX3S3WAS4xkzqZCywTpCrY8tT6mLeMFjbKI
Intercambio con población afectada en la Coloma, Pinar del Río.	https://www.facebook.com/UNICEFCuba/posts/pfbid02USiu7R8D4NrcDmBisto9DAd4yq qwAFzPswp2j3R1SvDQ8MMYgm8VzMUpehWAwCzkl
Entrega de kit de higiene a familias vulnerables.	https://www.facebook.com/UNICEFCuba/posts/pfbid02gpzpP8Nq7CgF3GQj4Qu88vGjY hXTnhpSdum6Vp35VZ7BjJCzL8QdTtu3bBR27oHG1

Entrega de motobombas para abasto de agua de comunidades afectadas.	https://www.facebook.com/UNICEFCuba/posts/pfbid02hSvnm3KnP2AqNS436DncWPB-DH3tVtyALNkRYzsjZNZq4xjjMnrrUMLvKtXuWhBq2l
Arribo de planta potabilizadora (CASH Grant OCHA).	https://www.unicef.org/cuba/planta-potabilizadora-agua-pinar-del-rio-sistema-naciones-unidas
Resumen respuesta de UNICEF a Emergencias en 2022 (CERF y otros fondos).	https://www.facebook.com/reel/190898127316106

3.5 Project Report 22-RR-WFP-058

1. Project Information

Agency:	WFP	Country:	Cuba
Sector/cluster:	Food Security - Food Assistance	CERF project code:	22-RR-WFP-058
Project title:	Response to hurrican Ian		
Start date:	20/10/2022	End date:	19/04/2023
Project revisions:	No-cost extension <input type="checkbox"/>	Redeployment of funds <input type="checkbox"/>	Reprogramming <input type="checkbox"/>

Funding	Total requirement for agency's sector response to current emergency:	US\$ 10,000,000
	Total funding received for agency's sector response to current emergency:	US\$ 2,000,000
	Amount received from CERF:	US\$ 1,798,106
	Total CERF funds sub-granted to implementing partners:	US\$ 0
	Government Partners	US\$ 0
	International NGOs	US\$ 0
National NGOs	US\$ 0	
Red Cross/Crescent Organisation	US\$ 0	

2. Project Results Summary/Overall Performance

Of a total of 943.7 MT of food planned (rice, vegetable oil and yellow peas), the project was able to purchase 1,204.50MT since lower prices than those planned were obtained at the time of purchase. A total of 508,903 people were assisted, corresponding to the entire population of the 7 most affected municipalities of Pinar del Río (Consolación del Sur, La Palma, Los Palacios, Pinar del Río, San Juan y Martínez, San Luis and Viñales), Artemisa (Bahía Honda, Guanímar and Cajío), Mayabeque (Surgidero de Batabanó) and the Cocodrilo community in the Municipio Especial de Isla de la Juventud.

The increment in available food made it possible to increase the number of beneficiaries to 508,903, as well as, in the case of yellow peas, to extend the duration of assistance beyond the 30 days initially planned, to 56 days. As it the practice in Cuba, WFP assistance comes as a complement to the Government response to shocks, balancing the ration delivered to the beneficiaries.

Non-food items were delivered immediately: 94 tents that benefited a total of 94 families and 200 kitchen sets, one per family. As part of the replacement of these items and as a prepositioning strategy for immediate use in future emergencies, 200 tents and 550 kitchen sets were purchased. Likewise, 5 lighting towers and 865 pallets identified as part of the operational process for nighttime food distribution during the first two months of the emergency were purchased.

3. Changes and Amendments

With the urgencies and needs associated with the operationalization of the immediate response, the authorities sent a request to prioritize the tents as temporary facilities for the families who lost their homes. The change of use was advised and monitored by the WFP team. On the other hand, in response to the need for immediate distribution at night under difficult conditions during the first two months of

distribution, it was identified, together with the national and local authorities, the need to acquire 5 lighting towers with generators and 865 pallets that facilitated the logistical process of storage and distribution to allow immediate delivery to the beneficiaries.

Although it was possible to purchase more food and non-food resources at favourable prices, it was necessary to request an extension of the project because payment processes were delayed due to delays in the arrival of both resources. The reason for these delays was the complex maritime transport situation ex-Cuba. As a consequence, payments for external transport and inspections were delayed as they could only be made after receipt of the goods in Cuba. In the interim report, the WFP warned about this situation and requested an extension of the CERF grant. Thanks to the extension in time, the contribution was spent at 99.8%, leaving a small remnant of US\$3,670.49, expected to be returned to CERF.

4. Number of People Directly Assisted with CERF Funding*

Sector/cluster	Food Security - Food Assistance									
Category	Planned					Reached				
	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	195,853	193,602	44,776	47,227	481,458	204,029	205,476	48,105	51,293	508,903
Total	195,853	193,602	44,776	47,227	481,458	204,029	205,476	48,105	51,293	508,903
People with disabilities (PwD) out of the total										
	6,938	6,989	1,672	1,684	17,283	7,228	7,418	1,796	1,829	18,271

* 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 entire population - 615,866 people - of the provinces of Pinar del Río and the municipality of Bahía Honda in Artemisa, benefited indirectly through training on monitoring and good practices in food storage, which WFP provided as part of its assistance. Similarly, the delivery of pallets and lighting towers facilities in the Province of Pinar del Río contributed to the storage and distribution of the basic food basket for the entire population of the province.

6. CERF Results Framework

Project objective	To assist with foods and no food items the people of the municipalities most affected by the hurricane to avoid their nutritional deterioration while food production recovers in these territories.				
Output 1	Improved food access to people living at the hardest hit municipalities during on month as a complement to government's food distribution				
Was the planned output changed through a reprogramming after the application stage?				Yes <input type="checkbox"/>	No <input type="checkbox"/>
Sector/cluster	Food Security - Food Assistance				
Indicators	Description	Target	Achieved	Source of verification	
Indicator 1.1	FN.1a Number of people receiving in-kind food assistance	481,458	508,903	Reports from the Ministry of Domestic Trade (MINCIN) and field monitoring between WFP staff, MINCIN specialists and local authorities.	
Indicator 1.2	FN.1b Quantity of food assistance distributed in MT	943.658	1,204.50	Reports from the Ministry of Domestic Trade (MINCIN) and field monitoring between WFP staff, MINCIN specialists and local authorities.	
Indicator 1.3	SN.2b Number of in-kind NFI kits distributed(94 tents and 200 kitchen kit)	200	294	Reports from the Ministry of Domestic Trade (MINCIN) and field monitoring between WFP staff, MINCIN specialists and local authorities.	
Indicator 1.4	SN.2a Number of people receiving in-kind NFI assistance	1,000	1470	Reports from the Ministry of Domestic Trade (MINCIN) and field monitoring between WFP staff, MINCIN specialists and local authorities.	
Explanation of output and indicators variance:		More food was purchased than planned because at the time of purchase, prices were lower than planned. This made it possible to increase the number of days of attendance while maintaining the same rations of peas, vegatl oil and yellow peas.			
Activities	Description	Implemented by			
Activity 1.1	Procurement of food and no food items	WFP			

* 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.

Activity 1.2	Transporting, handling, and storing food commodities and NFI to beneficiaries	Ministry of Domestic Trade (MINCIN) and local governments entities
Activity 1.3	Distributing food commodities and NFI to beneficiaries	Ministry of Domestic Trade (MINCIN) and local governments entities
Activity 1.4	Provide training on monthly reports on food delivered to local authorities	WFP and Ministry of Domestic Trade (MINCIN)
Activity 1.5	Monitoring of food distribution	WFP and Ministry of Domestic Trade (MINCIN)

7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas¹⁰ often lacking appropriate consideration and visibility: women and girls, people with disabilities, education and protection. **The following sections demonstrate how cross-cutting issues and the ERC's four underfunded priority areas have been addressed through project activities and should highlight the achieved impact wherever possible.**

a. Accountability to Affected People (AAP)¹¹:

The design phase considered the priorities and characteristics of the affected territories based on consultations with government officials, which were maintained throughout the assistance as a feedback mechanism. As planned, the food was delivered through the mechanisms established by the government for the distribution of the basic food basket. In this sense, they were dispatched from the store food where they were located to the final distribution points (bodegas), based on the consumer registry as a control mechanism for distribution and delivery. Taking into account these mechanisms, WFP accessed the information systems to validate the planned focalization, verify the beneficiaries and the rations received. As part of the implementation, continuous monitoring was carried out with the distribution system personnel at the local level. As part of the implementation, continuous monitoring was carried out with the distribution system staff at the local level.

For monitoring and evaluation purposes, beneficiaries were consulted during the monitoring/supervision visits to verify the adequate receipt of food and non-food items according to the vulnerability of the people.

b. AAP Feedback and Complaint Mechanisms

In the framework of constant exchanges with the government, as well as with local authorities and distribution end points, during monitoring it was possible to access the mechanism for collecting beneficiaries' opinions and complaints in the affected communities where WFP provided food assistance. The mechanism consists of a mailbox at the final distribution point (bodega), where beneficiaries can deposit their complaints and comments on food assistance anonymously. This made it possible to gather opinions in order to make decisions to improve the delivery of food to the beneficiaries.

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

Although the WFP intervention considered gender and women's protection issues, the assistance did not address the dynamics related to gender-based violence, as there have been no reports on this issue during emergencies in Cuba.

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

¹⁰ These areas include: support for women and girls, including tackling gender-based violence, sexual and reproductive health and empowerment; programmes targeting people with disabilities; education in protracted crises; and other aspects of protection. The ERC recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and UNCTs/HCTs when prioritizing life-saving needs for inclusion in CERF requests. While CERF remains needs-based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the Questions and Answers on the ERC four priority areas [here](#).

¹¹ 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](#).

* 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.

The operation, as designed, considered the commitment to gender issues. As such, specific support to vulnerable children, women and men was based on WFP's commitment to ensure gender equality as part of the assistance. The specific vulnerabilities and needs of the most affected women were considered from the planning stage of the intervention and as part of its implementation. Food monitoring and distribution reports and data collected were disaggregated by sex and age.

e. People with disabilities (PwD):

WFP worked with local authorities to identify potential beneficiaries with disabilities to ensure that they were adequately informed about the benefits, as well as that they had access to them based on their disability, to avoid any risk of exclusion or inappropriate treatment, especially for women and girls.

f. Protection:

The protection of all affected and at-risk people was successfully integrated into the project implemented. The delivery of a food basket (rice, vegetable oil and grains), as a complement to the government's provision, contributed to the food and nutritional security of those affected. As an immediate way to saving lives, the delivery of tents for temporary shelters and kitchen sets for food preparation prevented a more complex context based on displacement. On the other hand, the use of lighting towers and pallets facilitated the logistical process of storage and distribution and allowed immediate delivery to beneficiaries.

g. Education:

During the food delivery, WFP worked with local authorities and food distribution end points (bodegas), to ensure that beneficiaries received educational messages about healthy eating, food safety and the need for equal participation of men and women in household food consumption decisions.

8. Cash and Voucher Assistance (CVA)

Use of Cash and Voucher Assistance (CVA)?

Planned	Achieved	Total number of people receiving cash assistance:
No	No	

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.

N/A

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
N/A		US\$ 0		

9. Visibility of CERF-funded Activities

Title	Weblink
Apoya recuperación en Pinar del Río el Sistema de Naciones Unidas - Periódico Guerrillero	http://www.guerrillero.cu/apoya-recuperacion-en-pinar-del-rio-el-sistema-de-naciones-unidas/

* 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.

Visitan Pinar del Río representantes del sistema de las Naciones Unidas en Cuba	http://www.acn.cu/cuba/110008-representantes-de-agencias-de-la-onu-visitacion-pinar-del-rio-fidel-rendon-matienzo-fotos
Visitan Pinar del Río representantes del sistema de las Naciones Unidas en Cuba	https://www.telepinar.cu/visitacion-pinar-del-rio-representantes-del-sistema-de-las-naciones-unidas-en-cuba/
	https://twitter.com/ONU_Cuba/status/1628436272216784896
	https://twitter.com/ONU_Cuba/status/1659166956065558533?s=20
	https://twitter.com/Mirelys71/status/1619727666013442051?s=20
	https://twitter.com/Mirelys71/status/1618751305362841600?s=2

* 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.

3.6 Project Report 22-RR-WHO-041

1. Project Information

Agency:	WHO	Country:	Cuba
Sector/cluster:	Health	CERF project code:	22-RR-WHO-041
Project title:	Health Response to the impact of Hurricane Ian in western provinces of Pinar del Rio and Artemisa, Cuba		
Start date:	28/09/2022	End date:	27/06/2023
Project revisions:	No-cost extension <input checked="" type="checkbox"/>	Redeployment of funds <input type="checkbox"/>	Reprogramming <input type="checkbox"/>

Funding

Total requirement for agency's sector response to current emergency:	US\$ 5,000,000
Total funding received for agency's sector response to current emergency:	US\$ 50,000
Amount received from CERF:	US\$ 899,997
Total CERF funds sub-granted to implementing partners:	US\$ 0
Government Partners	US\$ 0
International NGOs	US\$ 0
National NGOs	US\$ 0
Red Cross/Crescent Organisation	US\$ 0

2. Project Results Summary/Overall Performance

The CERF fund gave the possibility to support and follow the reply in the Health System, due to it was possible to reach the 176 entities foreseen in the project with one input or another, and it was achieved a population goal of more than 566 thousand affected people in these communities.

It should be noted that, among the international organizations, it was the first to get to the ground in order to exchange with local health authorities and provide a donation of more than eight tons to "Abel Santamaría Cuadrado" hospital, that contained 92 modules of emergency kits.

And through the fund, it was possible to replace those supplies to the PAHO subregional warehouses located in Panama. There had been no experience on this regard before, which represents a very positive lesson learned.

It was possible to carry out the planned training workshops in the areas of mental health and emergency response.

I must be pointed out that the impact of the hurricane in the western area significantly affected the electro-energy sector, so there was a great impact on health institutions on this regard. Twenty-seven beneficiaries, with the generators distributed, many of them were located in areas of difficult access or far from the provincial health centers.

Community satisfaction was continuously monitored through exchanges in the field, the feedback with the national authorities to validate technical progress, and implementation of planned activities in time. Two monitoring visits were made to the intervention areas, and it was determined that the equipment and supplies were properly used by the health personnel. Follow-up visits also made it possible to verify that all planned tasks were satisfactorily completed.

Highlight this comment that appears in the PAHO bulletin* "... According to Dr. Moya's words addressed to the hospital principal: "PAHO's support was impressive because it came too fast. When we were informed that container would arrive with help, we can hardly believe it, because the management had been carried out in a shorter period.

* 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.

3. Changes and Amendments

The free extension was requested for rapid test kits for E coli, leptospirosis and cholera. The international buy of these items has been seriously challenged by the ongoing operational and logistical complexities generated by the impact of the COVID-19 pandemic, disruptions in the global supply chain caused by the situation between Ukraine and Russia; as well as due to the important global market limitations in the case of cholera tests due to the current outbreaks in more than 29 countries worldwide, creating shortages of supplies. Added to the justification, that the acquisition of such tests is a key component in detecting and mitigating disease outbreaks and other health risks among vulnerable people who are living in affected communities, particularly in the context of the recent reborn of cholera in Haiti which has now spread to the Dominican Republic. The current cholera situation in La Española represents a tangible risk to the health of people and communities affected by the hurricane who live in vulnerable situations.

4. Number of People Directly Assisted with CERF Funding*

Sector/cluster	Health									
Category	Planned					Reached				
	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	229,493	229,247	52,610	55,525	566,875	229,493	229,247	52,610	55,525	566,875
Total	229,493	229,247	52,610	55,525	566,875	229,493	229,247	52,610	55,525	566,875
People with disabilities (PwD) out of the total										
	3,442	3,439	789	833	8,503	3,442	3,439	789	833	8,503

* 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

No applicable

6. CERF Results Framework

Project objective Ensure continuity and availability of life-saving health services to prevent disproportionate mortality and morbidity among vulnerable populations in the provinces of Pinar del Río y Artemisa most severely affected by Hurricane Ian

Output 1 176 health facilities have restored operational capacity to ensure continued access to essential health services to individuals in needs of healthcare in affected communities

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

Sector/cluster Health

Indicators	Description	Target	Achieved	Source of verification
Indicator 1.1	H.7 Number of functional health facilities supported (176	176	PAHO/WHO and MoH
Indicator 1.2	H.1a Number of emergency health kits delivered to healthcare facilities	176	176	PAHO/WHO and MoH

Explanation of output and indicators variance: No applicable

Activities	Description	Implemented by
Activity 1.1	Purchase of generator sets, water pumps and water tanks as well as electrical material to restore operations of damaged health services and facilities	PAHO/WHO
Activity 1.2	Purchase of equipment and supplies for monitoring and control of water quality in affected health areas	PAHO/WHO
Activity 1.3	Purchase of medicines and other essential medical supplies and equipment for emergency care delivery	PAHO/WHO
Activity 1.4	Provide operational and logistical support for the distribution of the procured relief materials	PAHO/WHO

Output 2 Increased disease outbreaks and other health risks among vulnerable individuals living in affected communities are mitigated and timely detected and responded to

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

Sector/cluster Health

Indicators	Description	Target	Achieved	Source of verification
Indicator 2.1	Number of affected health areas with active epidemiological surveillance and vector control coverage	25	25	PAHO/WHO and MoH
Indicator 2.2	Number of affected municipalities supported with health promotion and prevention interventions, with emphasis on individuals in situation of vulnerability	9	9	PAHO/WHO and MoH

Indicator 2.3	Number of health professionals trained in emergency care delivery and mental health and psychosocial support	500	500	PAHO/WHO and MoH
Explanation of output and indicators variance:		No applicable		
Activities	Description	Implemented by		
Activity 2.1	Purchase of rapid tests for the diagnosis of Cholera and E. Coli.	PAHO/WHO		
Activity 2.2	Purchase of mosquito nets impregnated with insecticide for healthcare facilities	PAHO/WHO		
Activity 2.3	Rapid training of local health workers in emergency care delivery care, including detection of acute diarrheal diseases, and mental health and psychosocial support	PAHO/WHO		
Activity 2.4	Development, reproduction and dissemination of educational, information and communication materials on health promotion and disease prevention, particularly risk conditions related to water-, food-, and vector-borne diseases and other noncommunicable diseases	PAHO/WHO		

7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas¹² often lacking appropriate consideration and visibility: women and girls, people with disabilities, education and protection. **The following sections demonstrate how cross-cutting issues and the ERC's four underfunded priority areas have been addressed through project activities and should highlight the achieved impact wherever possible.**

a. Accountability to Affected People (AAP)¹³:

From the emergency reports provided by the Civil Defense at the MoH

b. AAP Feedback and Complaint Mechanisms:

Non applicable

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

PAHO/WHO, they have a zero tolerance policy, however, during the implementation process no event related to the issue is reported.

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

¹² These areas include: support for women and girls, including tackling gender-based violence, sexual and reproductive health and empowerment; programmes targeting people with disabilities; education in protracted crises; and other aspects of protection. The ERC recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and UNCTs/HCTs when prioritizing life-saving needs for inclusion in CERF requests. While CERF remains needs-based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the Questions and Answers on the ERC four priority areas [here](#).

¹³ 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](#).

From the planning of the project, the information was disaggregated by gender and it was highlighted that the country's health system is universal and accessible at all levels of care, which is why these groups are included.

e. People with disabilities (PwD):

From the planning of the project, the information was disaggregated by gender and it was highlighted that the country's health system is universal and accessible at all levels of care, which is why these groups are included.

f. Protection:

The protection of the population within the health services was guaranteed. The patients who were hospitalized at the time of the impact were transferred to areas that were not affected and in a safe manner in order to guarantee the continuity of services, and no damage was reported to people in the health institutions, according to the defense reports. civilian and the Ministry of Health. It was also explained by the local authorities during the field visits carried out.

g. Education:

From the design of the project, they organized training (Psychoeducational training for different social actors in response to emergencies due to Disaster Emergencies and Accidents in the Pinar del Río province, with the authorities of the Provincial Health Directorate and the PROSALUD Unit and another directly with the community of La Coloma, seriously affected by Hurricane Ian), for psychosocial support and mental health care. Support materials were shared, including communication and prevention messages against stigma in mental health and work with vulnerable populations such as children, pregnant women, the elderly, etc.

8. Cash and Voucher Assistance (CVA)

Use of Cash and Voucher Assistance (CVA)?

Planned	Achieved	Total number of people receiving cash assistance:
No	Choose an item.	0

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.

N/A

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
N/A	0	US\$ 0		

9. Visibility of CERF-funded Activities

Title	Weblink
Delivery of supplies at the Provincial Hospital of Pinar de Río	OPS apoya a Cuba con envío de equipos médicos y medicinas para la respuesta al impacto del huracán Ian. - OPS/OMS Organización Panamericana de la Salud (paho.org)

Working visit to the province of Pinar with the objective of specifying damages and needs	Equipo de OPS/OMS en Cuba visita Pinar del Río, provincia más afectada por el huracán Ian - OPS/OMS Organización Panamericana de la Salud (paho.org)
Story to tell: Hurricane Ian's impact on Pinar del Río: how did they experience it at the Provincial Hospital and how did PAHO support?	https://iris.paho.org/handle/10665.2/57156