CERF ALLOCATION REPORT ON THE
USE OF FUNDS AND ACHIEVED RESULTS

MONGOLIA
RAPID RESPONSE
HEAT/COLD WAVE
2024

24-RR-MNG-64493

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PART I – ALLOCATION OVERVIEW

Reporting Process and Consultation Summary:	
Please indicate when the After-Action Review (AAR) was conducted and who participated.	2nd October 2024
The After-Action Review was conducted on 2nd October 2024 with participation from National Emergency Management Agency, Ministry of Food, Agriculture and Light Industry, Ministry of Social and Labor Protection, Ministry of Education, General Authority of Child and Family Development, General Department of Veterinary Medicine, National Center for Public Health, National Center for Mental Health, UN Resident Coordinator's Office, FAO, UNFPA and UNICEF.	
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 ☐
Yes, it was discussed among Humanitarian and/or UN Country Team.	
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 ☐
Yes, it was circulated on 20th December 2024 among in country all stakeholders, as well as OCHA's regional office for Asia and Pacific (ROAP).	

1. STRATEGIC PRIORITIZATION

Statement by the Resident/Humanitarian Coordinator:

The generous support of $1.55 million from the CERF Rapid Response (RR) allocation enabled timely humanitarian assistance for 25,000 individuals. CERF RR played a pivotal role in the humanitarian response in Mongolia by:

1. **Setting a New Standard for Multi-Sectoral Assistance**: Traditionally, humanitarian assistance in Mongolia has focused on addressing isolated needs. In contrast, the UN Joint Intervention, supported by CERF RR, set a benchmark by delivering a comprehensive, multi-sectoral approach to each household. This approach included the distribution of $192 in multipurpose cash assistance (second tranche), enabling children to continue their education, combating malnutrition risk among pregnant, lactating mothers and children, and ensuring women's specific needs. Additionally, the intervention emphasized protection from sexual exploitation and abuse (PSEA) and gender-based violence (GBV). As a result, the CERF RR responded to the needs of over 8,000 people (2000 households) through a coordinated, multi-sectoral strategy.
2. **Catalyzing Resource Mobilization**: At the time of CERF application, only $5.4 million of the required $13.7 million had been mobilized (39% of the target). CERF RR played a critical role in attracting additional funding from diverse sources. By the end of the operation, the response had raised $10.6 million, meeting 77% of the funding target.
3. **Supporting Localization**: CERF RR contributed to the restoration and improvement of local public services, including child protection mechanisms, mental health support, and protection from SEA/GBV. This ensured that the local government continued to provide essential services, fostering sustainability and local ownership of the response.

CERF's Added Value:

CERF's rapid and flexible funding enabled a holistic, multi-sectoral response to the urgent needs created by the dzud, filling critical gaps in Mongolia's traditional siloed humanitarian approach. Humanitarian actors in Mongolia typically provide support in a single support, such as food assistance, without addressing other critical needs like education, protection, health etc as a whole. However, the Joint UN intervention took a more holistic approach directly supporting 2,000 households across multiple sectors, including food security and agriculture, education, nutrition, and protection (child and gender-based violence). This intervention set an example for other humanitarian organizations in Mongolia and effectively met the diverse needs of beneficiaries. As an example: One such family, Bold Enkhbaatar (26) and Galbayar Altantungalag (28), a young herding couple from Sumber soum in Govisumber province, benefited from this integrated approach. After the severe dzud devastated their livestock, the family received much-needed support. Galbayar, who is pregnant and expecting their third child, shared, "We received cash assistance from FAO, which helped us recover from our livestock losses. UNFPA provided dignity kits with hygiene products, which are especially useful now as I prepare for birth. UNICEF also gave us prenatal supplements and nutritional support for our children. This assistance has truly made a difference in our lives." This comprehensive support allowed them to meet immediate needs and begin rebuilding their livelihoods. The integrated approach, supported by CERF, not only met the family's immediate needs but also enabled them to begin rebuilding their livelihoods. It exemplifies CERF's value in catalyzing coordinated, multisectoral interventions that address diverse needs and deliver timely, life-saving assistance to the most vulnerable populations.

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

Yes ☒ Partially ☐ No ☐

CERF funds played a crucial role in providing rapid and flexible support to UN agencies by facilitating the swift procurement of in-kind assistance. This mechanism ensured that essential non-food items could be sourced and delivered without delays, helping meet the immediate needs of affected communities.

Additionally, the provision of multipurpose cash assistance allowed beneficiaries the autonomy to purchase the most pressing items they required, based on their individual needs and priorities. This flexibility ensured that aid was tailored to the specific circumstances of each household, rather than being restricted to predetermined in-kind goods. This approach not only provided immediate relief but also supported local markets, boosting the local economy.

Did CERF funds help respond to time-critical needs?

Yes ☐ Partially ☒ No ☐

A Joint UN monitoring mission was conducted throughout the project implementation period, and an After-Action Review was held on October 2, 2024, to evaluate the response. The interventions received positive feedback from the government, beneficiaries, and partners, as they successfully addressed time-critical needs. However, it was noted that if the CERF allocation had been made earlier, during the anticipatory action period in the early winter, it would have been even more effective in mitigating the impact of the crisis.

Did CERF improve coordination amongst the humanitarian community?

Yes ☒ Partially ☐ No ☐

The Joint UN intervention significantly improved coordination within the humanitarian community. One key aspect of the CERF intervention was the provision of a second cash transfer to beneficiaries who had already received initial cash support from other organizations, such as the Mongolian Red Cross Society, Save the Children, ADRA, and FAO. This facilitated the exchange of beneficiary lists among humanitarian actors, helping to prevent duplication of assistance. Moreover, the joint intervention set an important example for other humanitarian actors, demonstrating that beneficiary needs should be addressed through a multi-sectoral approach to ensure comprehensive support.

Did CERF funds help improve resource mobilization from other sources?

Yes ☒ Partially ☐ No ☐

At the time of CERF application, the response had raised a total of 5,427,732 USD, which accounted for 39% of the total funding required (13,658,011 USD). Ultimately, the response successfully mobilized a total of 10,603,757 USD, representing 77% of the required funding. This demonstrates that CERF played a crucial role in mobilizing resources from various funding sources.

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

The CERF allocation prioritized the ERC's underfunded priority areas. The beneficiary selection criteria for the Joint UN programme focused on herder households, with specific consideration for individuals facing critical vulnerabilities, such as people with disabilities, young children, pregnant or lactating women, and those with long-term health conditions. As a result, the programme directly supported 13,037 women and girls, 2,237 people with disabilities, and provided education support for 4,000 children. PSEA (Protection from Sexual Exploitation and Abuse) and GBV (Gender-Based Violence) prevention measures were integrated into all activities. The intervention required a multisectoral approach, uniting the efforts of the UN to address the needs across all areas with equal priority.

Table 1: Allocation Overview (US$)

Total amount required for the humanitarian response	**13,658,011**
CERF	1,550,025
Country-Based Pooled Fund (if applicable)	0
Other (bilateral/multilateral)	9,053,732

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

Total funding received for the humanitarian response (by source above)	10,603,757

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

Agency	Project Code	Sector/Cluster	Amount
FAO	24-RR-FAO-011	Food Security - Agriculture	700,000
UNFPA	24-RR-FPA-007	Protection - Gender-Based Violence	350,000
UNICEF	24-RR-CEF-021	Nutrition	225,011
UNICEF	24-RR-CEF-021	Protection - Child Protection	145,007
UNICEF	24-RR-CEF-021	Education	130,007
Total			**1,550,025**

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

Total funds implemented directly by UN agencies including procurement of relief goods	**1,356,824**
Funds sub-granted to government partners*	193,201
Funds sub-granted to international NGO partners*	[Fill in]
Funds sub-granted to national NGO partners*	[Fill in]
Funds sub-granted to Red Cross/Red Crescent partners*	[Fill in]
Total funds transferred to implementing partners (IP)*	**193,201**
Total	**1,550,025**

* 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:

Mongolia experienced one of its harshest winters in fifty years during the 2023/2024 winter season. During at the peak of the dzud, 58 soums (17 per cent of the total) were affected by iron dzud condition, while 139 soums (41 per cent of the total) faced white dzud condition, totalling 58 per cent of the country were severely affected by dzud. The country predicted the loss of 20 million livestock and that 10,000 herder households might lose their entire livestock.

To support the Government of Mongolia response, The Humanitarian Country Team revised Mongolia Dzud Response Plan, launched on 25 March 2024, identified 76,000 people as the most vulnerable people targeted, mostly vulnerable herders depending entirely on livestock for their livelihoods. The sectors identified as the most urgent for support are food security (including agriculture/livestock), health, protection (psychological support, gender-based violence and child), nutrition and education. By the end of the response, 66,685 people had received direct assistance, and $10.6 million had been raised toward a goal of $13.7 million.

As a result of the freezing cold conditions, Mongolia lost a total of 8.1 million livestock, or 11.1 per cent of the total. This loss caused over 4,957 households to lose more than 70 per cent of their livestock, effectively eliminating their primary source of income. Thanks to the combined efforts of the Government of Mongolia and the Humanitarian Country Team, the damage was mitigated by 50 per cent.

Operational Use of the CERF Allocation and Results:

In response to the urgent humanitarian needs triggered by the dzud, the UN Joint Intervention successfully supported by the CERF Rapid Response (RR) allocation, provided timely, livelihood-saving assistance to over 25,000 individuals (of whom 8,085 women, 7804 men, 3403 girls and 3297 boys) including 2,316 people with disability, surpassing the initial target. CERF's rapid funding enabled a coordinated, multi-sectoral response across food security and agriculture, education, nutrition, and protection (gender-based violence and child).

The multi-sectoral response ensured that the most vulnerable populations received comprehensive support. Over 8,000 people were provided with multipurpose cash assistance to meet their immediate needs, while 10,000 pregnant women, children, and lactating mothers were supported with nutritional assistance, combating the risk of malnutrition. Educational opportunities were restored for over 4,000 children, and 16,000 household's livestock—critical to livelihoods—were safeguarded. 4,000 girls and women received protection services and essential supplies (dignity kits), while more than 8,500 individuals accessed psychological support, with CERF funding also contributing to the establishment of local government-run mental health services. Furthermore, all UN Joint Interventions incorporated a strong focus on Protection from Sexual Exploitation and Abuse (PSEA), as well as gender-based violence (GBV) prevention. This was vital in ensuring that the humanitarian response adhered to the highest standards of safeguarding, ensuring the dignity and rights of the affected population, especially women and children, were upheld.

Throughout the entire response, these efforts were carried out in close collaboration with the Government of Mongolia, ensuring a coordinated, national-level response.

People Directly Reached:

The CERF allocation has enabled direct support to 25,587 individuals. This figure was derived by selecting the highest number of people reached in each sector, disaggregated by gender. The total beneficiary number was doubled due to the following factors and mainly from Food Security and Agriculture sector as table 4 below shows as well:

1. The direct support reached more people than initially planned due to an increase in the vaccination dosage from 2 million to 3.3 million (for sheep pox). These vaccinations were distributed to different households/ locations than the initial plan due to potential Capripoxvirus disease outbreak by the General Authority of Veterinary Services.
2. UN agencies were able to reduce procurement costs for in-kind items, ensuring value for money while maintaining the quality of the items.
3. By localizing mental health support and training local staff, more people were reached than originally planned.

People Indirectly Reached:

The CERF Allocation benefited indirectly total of 744,825 number in following sectors:

1. Gender based violance: CERF Allocation indirectly supported 39,825 people such as 12,438 people used dignity kits items distributed to 4000 people; 27,387 women and girls in local communities benefited from women and girls safe spaces; over 8,000 community people gained PSEA awareness and psychosocial support.
2. Food security and agriculture: CERF Allocation indirectly increased economic activities for 300,000 community members via boosting demand for goods and services by 300 shop owners. In addition, 3.3 million doses of vaccination safeguarded livestock health and preserving communities livelihoods by preventing livestock diseases among 16,313 herder households.
3. Nutrition: Through malnutrition screening in target communities, 856 local health service providers were equipped with refresher up-to-date knowledge and experience to increase community awareness on maternal, infant, and young child feeding in emergencies. 45,000 children and mothers benefited from the increased capacity of the health service providers.
4. Child Protection: Increasing local capacity benefited 60,000 children and parents from child protection service. In addition, National Center for Mental Health expanded its hotline and online counseling service which continued its post project and supported 300,000 children, youth and people at nationwide.

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

	Planned					Reached				
Sector/Cluster	**Women**	**Men**	**Girls**	**Boys**	**Total**	**Women**	**Men**	**Girls**	**Boys**	**Total**
Education	0	0	1,002	998	**2,000**	0	0	2173	2,047	**4,220**
Food Security - Agriculture	2,560	2,050	1,850	2,340	**8,800**	8,085	7,804	3,792	4,561	**24,242**
Nutrition	3,300	0	3,403	3,297	**10,000**	3,300	0	4,952	4,746	**12,998**
Protection - Child Protection	0	0	3,006	2,994	**6,000**	1,165	1,262	2,003	1,850	**6,280**
Protection - Gender-Based Violence	2,000	0	2,000	0	**4,000**	2,197	1,104	2,016	0	**5,317**

* 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	0	[0]
Host communities	0	[0]
Other affected people	12,050	**25,587**
Total	**12,050**	**25,587**

Table 6: Total Number of People Directly Assisted with CERF Funding*			**Number of people with disabilities (PwD) out of the total**	
Sex & Age	**Planned**	**Reached**	**Planned**	**Reached**
Women	3,300	8,085	460	424
Men	2,050	7,804	80	493
Girls	3,403	4,952	841	790
Boys	3,297	4,746	856	609
Total	**12,050**	**25,587**	**2,237**	**2,316**

PART II – PROJECT OVERVIEW

3. PROJECT REPORTS

3.1 Project Report 24-RR-FAO-011

1. Project Information					
Agency:	FAO		**Country:**	Mongolia	
Sector/cluster:	Food Security - Agriculture		**CERF project code:**	24-RR-FAO-011	
Project title:	Life and livelihood-saving assistance to dzud-affected vulnerable herder households				
Start date:	20/03/2024		**End date:**	19/09/2024	
Project revisions:	No-cost extension ☐	Redeployment of funds ☐		Reprogramming	☐

Funding		
	Total requirement for agency's sector response to current emergency:	**US$ 1,500,000**
	Total funding received for agency's sector response to current emergency:	**US$ 986,000**
	Amount received from CERF:	**US$ 700,000**
	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

Through the CERF allocation, 2,000 vulnerable herder households (8,042 people) severely affected by the dzud in 62 districts across 9 provinces received a second round of multipurpose cash transfers. Additionally, 3.3 million sheep owned by 16,313 herder households in 43 districts across 6 provinces were vaccinated against the sheep poxvirus.

The multipurpose cash transfers of MNT 660,000 per beneficiary household—equivalent to the minimum monthly wage set by the Government as of 1 January 2024—provided critical financial support to 2,000 herder households. These funds enabled households to address urgent needs, including purchasing food, accessing healthcare, and repaying loans and credits. This assistance alleviated financial burdens, allowing households to start rebuilding their livelihoods and enhance their capacity to recover from the crisis. The transfers also enabled herders to purchase essential resources, including food and construction materials for livestock shelters, helping them prepare for the challenges of the coming winter. Furthermore, the cash assistance played a significant role in improving food security, helping households restore access to adequate nutrition and stabilize their overall well-being.

The vaccination of 3.3 million sheep was a crucial intervention to protect livestock health in the recovery phase, preventing the spread of sheep pox and minimizing the risk of further economic losses for herder households. By ensuring that livestock remained healthy, this intervention supported the recovery of herders' primary income sources, allowing them to restore their herds and reduce the impacts of dzud-related losses. The vaccination campaign strengthened the resilience of herds, helping them withstand the harsh recovery conditions and recover more effectively. Moreover, by limiting the spread of sheep pox across affected regions, the vaccination efforts contributed to the overall stability of livestock populations, supporting long-term recovery for herder communities.

3. Changes and Amendments

The project was successfully implemented as originally proposed, without any deviations or amendments.

The Project implemented as originally proposed.

4. Number of People Directly Assisted with CERF Funding*

Sector/cluster	Food Security – Agriculture									
	Planned					Reached				
Category	**Women**	**Men**	**Girls**	**Boys**	**Total**	**Women**	**Men**	**Girls**	**Boys**	**Total**
Refugees	0	0	0	0	**0**	0	0	0	0	**0**
Returnees	0	0	0	0	**0**	0	0	0	0	**0**
Internally displaced people	0	0	0	0	**0**	0	0	0	0	**0**
Host communities	0	0	0	0	**0**	0	0	0	0	**0**
Other affected people	2,560	2,050	1,850	2,340	**8,800**	8,085	7,804	3,792	4,561	**24,242**
Total	**2,560**	**2,050**	**1,850**	**2,340**	**8,800**	**8,085**	**7,804**	**3,792**	**4,561**	**24,242**
People with disabilities (PwD) out of the total										
	60	80	45	120	**305**	**430**	**380**	**65**	**60**	**935**

* 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 delivered substantial indirect benefits to communities beyond the direct beneficiaries. Through cash transfers to 2,000 vulnerable herder households in 62 soums across 9 aimags, the project stimulated local economies, indirectly benefiting approximately 300 shop owners by boosting demand for goods and services. This economic activity had a ripple effect, revitalizing local markets and indirectly supporting an estimated 300,000 community members during the critical post-dzud recovery period.

Additionally, the emergency vaccination campaign protected livestock from sheep and goatpox for 16,313 herder households in 6 aimags. By preventing the spread of disease, the campaign indirectly benefited the broader herding community by safeguarding livestock health and preserving livelihoods. This intervention not only supported herders in maintaining income through livestock sales but also strengthened the country's export potential by ensuring the health and quality of livestock. Healthy herds are critical for meeting international veterinary standards and sustaining Mongolia's position in livestock product export markets, contributing to the broader economic stability of the agricultural sector.

6. CERF Results Framework

Project objective	Contribute to improved dignity and protecting the livelihoods of dzud-affected herder communities in regions prone to spring catastrophic hazards and experiencing outbreaks of transboundary animal diseases
Output 1	Priority needs of 2000 vulnerable herder households in dzud-affected 62 soums across 9 aimags are satisfied by timely cash assistance

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

Sector/cluster	Food Security - Agriculture			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 1.1	Cash.1a Number of people receiving multi-purpose cash - (Number of vulnerable herder households benefiting from sector-specific unconditional cash transfer)	2000	2000	A list of identified cash recipient herder households by FAO shared with UNICEF and UNFPA
Indicator 1.2	Cash.1b Total value of multi-purpose cash distributed in USD	392,160	391,842	Cash transfer list to beneficiaries by the Financial Service Provider – the State Bank of Mongolia
Explanation of output and indicators variance:		*The variance is due to currency exchange rate differences		

Activities	**Description**	**Implemented by**
Activity 1.1	Compile and verify list of beneficiaries with member organizations of the Food Security and Agriculture humanitarian sector	FAO
Activity 1.2	Project inception workshop at 9 province level	FAO, UNFPA, and UNICEF
Activity 1.3	Conduct baseline data collection up to 30% beneficiaries before the cash transfer	FAO
Activity 1.4	Process cash transfer through the State Bank	FAO
Activity 1.5	Collect impact assessment data collection from the same beneficiaries interviewed for the baseline study in 30 days after cash transfer	FAO

Activity 1.6	Carry-out post distribution monitoring (PDM) for UCT	FAO
Activity 1.7	Process data collected from impact assessment and post distribution monitoring	FAO
Activity 1.8	Prepare impact assessment report and present to relevant stakeholders/partners and donor	FAO, and Center for Policy Research NGO

Output 2	The risk of sheeppox and goatpox outbreaks is mitigated through the provision of 2 million doses of capripoxvirus vaccine as part of the ongoing emergency vaccination campaign

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

Sector/cluster	Food Security – Agriculture			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 2.1	Provision of capripoxvirus vaccine to support the ongoing emergency vaccination campaign against sheep and goat pox outbreaks, which is facing a financial shortage to procure 3 million doses out of the total required 6.9 million doses.	At least 2.0 million sheep and goats are vaccinated	*3.3 million doses of sheep pox vaccine procured.	1. Purchase Order 9573385 issued with DOLLVET BIYOTEKNOLOJI AS on vaccine supply; 2. Purchase Order 9573404 issued with BALTIC CONTROL AS on Vaccine loading inspection
Indicator 2.2	With timely vaccination support, herder households will benefit, alleviating immediate suffering and facilitating recovery.	Minimum 8,000 herder households benefiting from the vaccination	*16,313 herder households benefited from the vaccination	Vaccination report of the General Agency of Veterinary Services, Mongolia
Explanation of output and indicators variance:		*The opportunity arose to procure 3.3 million doses of vaccine from a WOAH-certified vaccine manufacturer at a lower price than planned. By order A/275 of the Head of the General Agency for Veterinary Service who is also the Chief Veterinary Officer of Mongolia, 3.3 million sheep from 16,313 herder households in 43 soums of 6 aimags in the central and western regions where the risk of sheep pox is high have been vaccinated.		

Activities	**Description**	**Implemented by**
Activity 2.1	Procurement of at least 2 million doses of vaccine ensuring the procurement process in line with emergency procurement guidelines of FAO	FAO
Activity 2.2	Timely delivery of procured vaccines to relevant authorities for the smooth emergency vaccination campaign	FAO
Activity 2.3	Conduct the progress of the emergency vaccination campaign and the impact of the vaccine provision	FAO
Activity 2.4	Prepare report on vaccination support intervention and present to relevant stakeholders/partners and donor	FAO and GAVS

7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas[2] 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]:

Dzud-affected herder households were extensively engaged throughout the project. During the design phase, needs- assessments and lessons learned from similar interventions informed planning. Field missions in May introduced Joint UN dzud response interventions to local authorities who later informed dzud-affected vulnerable herder households in Zavkhan, Arkhangai, Khentii, Dornod, and Sukhbaatar aimags, engaging local officials to ensure alignment with local needs. During the field missions, spot-check monitoring visits gathered direct feedback from target beneficiaries benefiting from cash transfers. In August, comprehensive field missions assessed the dzud's impact, the benefits of cash assistance, and herders' recovery needs. Using Android tablets, the project team conducted in-person household interviews and group discussions, while larger gatherings facilitated collective feedback. Feedback from these missions and monitoring visits, including baseline and impact assessments via KoBo Toolbox, guided project adaptation to ensure it effectively assessed the herders' evolving needs and priorities.

b. AAP Feedback and Complaint Mechanisms:

During the project implementation period, a feedback and complaint mechanism was established to ensure beneficiaries could easily provide feedback or raise complaints. Accessibility was guaranteed through dedicated telephone numbers and email addresses, shared widely with targeted groups, including vulnerable populations. Confidentiality was carefully managed, even with data sharing between the humanitarian organizations involved. Strict protocols were followed to ensure that personal information was protected, with data shared only when necessary. Follow-up was provided as all feedback and complaints were logged and addressed promptly, with updates given to the complainants on the outcome. This mechanism was also accessible to herder households with additional face-to-face engagement during field missions to gather feedback from them. The project team actively used these mechanisms to ensure transparency and accountability, making sure beneficiaries' concerns were addressed in a timely and effective manner, and that all parties remained informed throughout the process.

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

During the project, FAO implemented a confidential and accessible mechanism for handling Sexual Exploitation and Abuse (SEA)-related complaints. Beneficiaries were provided with contact information during sensitization. All project team members were tasked with addressing any complaints, ensuring confidentiality and timely follow-up. Staff also completed mandatory Prevention from SEA (PSEA) courses. Although no SEA-related complaints were received, the mechanism remained in place to ensure that beneficiaries could safely report concerns if needed.

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

The project contributes to gender equality by prioritizing the empowerment and protection of women, girls, and sexual and gender minorities. Women-headed households were given priority in beneficiary selection. (21.95% of the total 2,000 herder households) 439 herder households with pregnant or lactating mothers were identified and selected for the cash assistance. The project's approach ensured equitable access to resources and services for all genders. As a result, around 50 percent of the beneficiaries were women. The project

[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.

also made sure that the needs of women and girls were considered at every stage of implementation. By prioritizing the participation of women in decision-making, the project fostered gender equality and empowered these groups, enhancing their protection and well-being.

e. People with disabilities (PwD):

The project prioritized the inclusion of persons with disabilities (PwD), benefiting a total of 464 individuals with disabilities across 420 households, which represent 17% of the 2,000 households that received multipurpose cash assistance. Efforts were made to ensure accessibility for PwD to both cash transfers and livestock vaccination services. According to the General Authority for Veterinary Services (GAVS), the vaccination campaign reached 16,313 herder households, including 625 households with PwD, resulting in the vaccination of 3.3 million sheep.

f. Protection:

While the project mainly focused on cash transfers and vaccine delivery, it incorporated protection measures by prioritizing vulnerable groups, such as women-headed households and persons with disabilities, in the beneficiary selection process. The inclusion of persons with disabilities and ensuring equitable access for women to resources helped address protection concerns. Additionally, ensuring the accessibility of both cash assistance and sheep pox vaccination campaign indirectly supported the safety and protection of vulnerable groups during the recovery period.

g. Education:

While the project primarily focused on cash assistance and livestock vaccination, educational elements were integrated through awareness-raising during meetings with herder households, group discussions, and post-distribution monitoring visits. These sessions conveyed critical information on disaster preparedness and livestock management, emphasizing the increasing frequency of dzud and drought, the importance of preparedness, warm shelters, vaccination, and destocking to maintain manageable livestock numbers. Local authorities and community leaders were also briefed to align their understanding with project objectives and enable them to disseminate information effectively. These efforts enhanced the project's impact, supporting sustainable recovery and promoting resilience among affected communities by fostering awareness and practices that mitigate the effects of recurring natural disasters.

8. Cash and Voucher Assistance (CVA)

Use of Cash and Voucher Assistance (CVA)?

Planned	Achieved	Total number of people receiving cash assistance:
Yes, CVA is a component of the CERF project	Yes, CVA is a component of the CERF project	8042

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 project used Cash and Voucher Assistance (CVA) through Multipurpose Cash (MPC) transfers to 2000 vulnerable herder households across 62 soums in 9 aimags. This allowed beneficiaries to address urgent needs such as food, hygiene products, and animal feed. Due to the lack of an integrated database on Dzud-affected households and limitations in existing social protection systems, direct cash transfers were the most effective approach. Beneficiaries were selected based on criteria developed by humanitarian actors, in consultation with local emergency commissions. Cash transfers were made to beneficiaries' bank accounts, leveraging Mongolia's efficient banking system to ensure timely support.

Parameters of the used CVA modality:

Specified CVA activity	Number of people receiving CVA	Value of cash (US$)	Sector/cluster	Restriction

(incl. activity # from results framework above)				
Activity 1.4 Process cash transfer through the State Bank	8,042 people	US$ 391,842.21	Multi-Purpose Cash	Unrestricted
[Fill in]	[Fill in]	US$ [insert amount]	Choose an item.	Choose an item.
[Fill in]	[Fill in]	US$ [insert amount]	Choose an item.	Choose an item.

9. Visibility of CERF-funded Activities

Title	Weblink
After Action Review Roundtable	*https://www.facebook.com/share/p/19sCy7rtha/*
Beneficiary testimonial	*https://www.facebook.com/share/p/185AZ6Rsfy/*
Moments from Post Distribution Monitoring	*https://www.facebook.com/share/p/17nPJjZ1dX/*
Project inception workshop	*https://x.com/FAOMongolia/status/1797911061938729400*
Project inception workshop	*https://www.facebook.com/share/p/1KhFZGABXo/*
CERF Allocation to FAO Mongolia	*https://x.com/FAOMongolia/status/1784831624858730652*
UN assistance and the unforgettable lessons learnt from ice dzud	*https://bpress.mn/content/928*
Herders grateful for timely assistance from UN	*https://www.unuudur.mn/a/270890*
Herders: We received cash assistance from the UN and used it for our daily needs	*https://ugluu.mn/514706.html; https://serune.mn/read/988*
Beneficiary testimonial	*https://www.facebook.com/watch/?v=833070945621217*
News report about project inception workshop	*https://www.facebook.com/watch/?v=793098469209443*
News report about the project	*https://www.facebook.com/watch/?v=1175513120155403*
News report about the project	*https://www.facebook.com/watch/?v=447588191300944*
News report about the project	*https://www.facebook.com/watch/?v=3771667699767700&rdid=17b91HBZJE0RUXQU*
News report about project inception workshop	*https://www.facebook.com/watch/?v=25567239722921967&rdid=OMVXUL2uTXIp0mCi*
News report / interview with FAO Technical advisor about the project	*https://www.facebook.com/watch/?v=1117304716226384&rdid=03m9HeDADxCUIlkM*

3.2 Project Report 24-RR-FPA-007 (UNFPA)

1. Project Information

Agency:	UNFPA	**Country:**	Mongolia
Sector/cluster:	Protection - Gender-Based Violence	**CERF project code:**	24-RR-FPA-007
Project title:	Ensuring the physical and psychological safety of women and girls affected by the dzud in Mongolia		
Start date:	20/03/2024	**End date:**	19/09/2024
Project revisions:	No-cost extension ☐	Redeployment of funds ☐	Reprogramming ☐

Funding

Total requirement for agency's sector response to current emergency:	**US$ 712,194**
Total funding received for agency's sector response to current emergency:	**US$ 579,986**
Amount received from CERF:	**US$ 350,000**
Total CERF funds sub-granted to implementing partners:	**US$ 36,889**
Government Partners	US$ 36,889
International NGOs	US$ [0]
National NGOs	US$ [0]
Red Cross/Crescent Organisation	US$ [0]

2. Project Results Summary/Overall Performance

Through the provision of dignity kits and psychosocial support, the project directly assisted 4,213 girls and women and 1,104 men and boys across dzud-affected 72 soums in 9 provinces. An additional 12,938 individuals benefited indirectly through the ripple effects of these interventions.

UNFPA collaborated with the national and local partners to distribute dignity kits to 4,000 dignity kits to adolescent girls in school dormitories and herder women, along with informational materials on GBV and PSEA. The distribution of dignity kits had a positive impact on the broader family units, indirectly benefiting an estimated 12,438 family members.

Furthermore, 145 frontline workers were trained to provide basic psycholosocial support, reaching 2,164 individuals across 576 households. This psychosocial support not only aided the direct recipients but also contributed to strengthening families and empowering women within their communities.

In addition, five women and girls friendlyt safe spaces were established in target sites, with 24 local authority staff members were trained to ensure their effective operation. These safe spaces have provided support to 68 women and girls, offering them a haven and access to vital information and basic psychological support.

Finally, PSEA awareness efforts reached 500 government officials, equipping them with the knowledge and tools to protect vulnerable community members.

The project, implemented between March and September 2024, effectively addressed critical needs of vulnerable girls and women arising from the Dzud crisis. By providing essential supplies, psychosocial support, and safe spaces, the project fostered a sense of dignity, resilience, and empowerment among beneficiaries.

3. Changes and Amendments

During the implementation of the CERF project by UNFPA, following changes have encountered:

- As of 19 September, Women and Girls Safe Spaces have been established in five locations. A total of 68 women and girls have accessed these spaces so far, which is below the target indicator of 150. But the service is localized which will lead to reach target indicator.
- UNFPA financial system was renewed during project implementation period and was not allowed to track down the system, UNFPA has a remaining balance of $2388 and ready to return.

4. Number of People Directly Assisted with CERF Funding*

Sector/cluster	Protection - Gender-Based Violence									
	Planned					Reached				
Category	**Women**	**Men**	**Girls**	**Boys**	**Total**	**Women**	**Men**	**Girls**	**Boys**	**Total**
Refugees	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	2,000	0	2,000	0	**4,000**	2,197	1,104	2,016	0	**5317**
Total	**2,000**	**0**	**2,000**	**0**	**4,000**	2,197	1,104	2,016	0	**5317**
People with disabilities (PwD) out of the total										
	60	0	45	0	**105**	**105**	**100**	**0**	**0**	**205**

* 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

1. Dignity Kits:
   - Family members of girls in dormitories and herder women: 12,438 individuals indirectly benefited from the improved health and well-being of the women who received the kits.
2. Psychosocial Support:
   - Community members benefiting from empowered women: Mental health support strengthens families and empowers women, suggesting a positive impact on the broader community.
3. Safe Spaces:
   - Women and girls in the local communities: The safe spaces are expected to contribute to a more peaceful community environment, indirectly benefiting 27,387 women and girls in the surrounding areas.
4. PSEA Awareness
   - Community members: PSEA awareness equips the entire community to protect its most vulnerable members and may indirectly reach over 8,000 people in the community.

   In total of 39,825 will indirectly benefit from the CERF project under gender based violence sub-sector.

6. CERF Results Framework

Project objective	To ensure the physical and psychological safety of women and girls affected by the dzud in Mongolia through a comprehensive and collaborative approach

Output 1	Provision of 4,000 dignity kits containing essential protection and hygiene supplies to the most vulnerable women and girls in dzud affected 72 soums of nine provinces

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

Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 1.1	SP.1a Number of menstrual hygiene management kits and/or dignity kits distributed	4,000 (2,000 adolescent girls, 2,000 women)	4,000 (2,000 adolescent girls, 2,000 women	Distribution report with sheet with the beneficiary signature
Indicator 1.2	Monitor the project implementation through site visits	3 site visits	3	Field mission ToRs; field mission reports

Explanation of output and indicators variance:

Activities	**Description**	**Implemented by**
Activity 1.1	Procurement of 4,000 dignity kits	[UNFPA]
Activity 1.2	Provision of storage for the dignity kits	[UNFPA]
Activity 1.3	Delivery of the dignity kits to the target areas	[UNFPA, NEMA/LEMA and Ministry of Education and Science]
Activity 1.4	Organize 3 joint monitoring missions to the soums where CERF interventions will be implemented	[UNFPA, NEMA, UNRCO, UNICEF, FAO]

Output 2	Establishment of safe spaces for women and girls affected by dzud emergency

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

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

Indicator 2.1	PS.1a Number of people accessing women- and girl-friendly safe spaces and/or centres	150	68	[Operational reports from 5 sites]
Indicator 2.2	PS.1b Number of women- and girl-friendly safe spaces and/or centres constructed, rehabilitated and/or supported	5	5	[Operational reports from 5 sites]
Indicator 2.3	Number of the LEMA, which included the SOP for the Women and girls' safe spaces in their emergency response plan	5	5	[Approved SOP]
Explanation of output and indicators variance:		*The number of people accessing women and girl's friendly safe spaces has not met the target currently as of 19th September. The Safe space is still operating and will gradually provide support more than 150 people in time.		

Activities	**Description**	**Implemented by**
Activity 2.1	Organize series of meetings with the LEMA on establishment of women and girls' safe spaces in their communities	[UNFPA, target soums' governor offices]
Activity 2.2	Organize the procurement of necessary supplies to refurnish the Women and girl safe spaces	[UNFPA]
Activity 2.3	Organize the delivery of supplies for the Women and girls safe spaces	[UNFPA]
Activity 2.4	Develop standard operating procedures for running the Women and girls safe spaces that will be applied to all soums	[UNFPA]
Activity 2.5	Hire a local staff to run the women and girls safe spaces	[Local authorities: Local Family, Child Development and Protection Department, Local Health Department, Local Governor's Office]
Activity 2.6	Organize the training for the staff of the women and girls' safe space on how to run the facility	[UNFPA]

Output 3	Raising awareness on prevention from the risk of sexual exploitation and abuse (PSEA) in dzud response			
Was the planned output changed through a reprogramming after the application stage?			Yes ☐	No ☒
Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 3.1	Number of printed materials on PSEA targeted to the staff of implementing partners	500	500	[printed materials+ order to the printing company]
Indicator 3.2	[Number of printed materials on PSEA targeted to the local communities]	2,000	4000	[printed materials+order to the printing company]
Explanation of output and indicators variance:		Dignity kit distributed to 4000 women and girls contained PSEA brochure for beneficiaries-4000 copies		

Activities	**Description**	**Implemented by**
Activity 3.1	Develop the printed materials on PSEA targeted the staff of implementing partners	UNFPA
Activity 3.2	Develop the printed materials on PSEA targeted the local communities	UNFPA

Activity 3.3	Print the materials on PSEA	UNFPA
Activity 3.4	Deliver the printed materials on PSEA to targeted sites	UNFPA, National Emergency Management Agency and Ministry of Education and Science of Mongolia

Output 4	Organize capacity building for local front liners on providing basic mental health support to affected families.			
Was the planned output changed through a reprogramming after the application stage?			Yes ☐	No ☒
Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 4.1	Number of training curriculum developed on provision of basic mental health support to the local front liners	1	1	Printed training curriculum
Indicator 4.2	Number of trainings organized for the local frontliners	9	9	Training agenda, training reports
Indicator 4.3	Number of the local front liners attended the training	45	145*	Training agenda, training reports and attendance sheet
Explanation of output and indicators variance:		*Recognizing the logistical challenges of reaching 500 households across 72 dispersed soums with a limited number of frontline workers, UNFPA and NCMH strategically expanded the training program. By training frontline workers from all soums in the 9 target provinces, we significantly increased the pool of professionals equipped to provide essential mental health support, ensuring broader coverage and greater accessibility for dzud-affected families.		

Activities	**Description**	**Implemented by**
Activity 4.1	Develop the training curriculum on provision of basic mental health support to the local front liners	UNFPA, NCMH
Activity 4.2	Print the training materials	NCMH
Activity 4.3	Organize two-day training for the local front liners on basic mental health support in nine sites	NCMH

Output 5	Provide outreach mental health support to the dzud affected families through the trained local frontliners			
Was the planned output changed through a reprogramming after the application stage?			Yes ☐	No ☒
Sector/cluster	Protection - Gender-Based Violence			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 5.1	H.9 Number of people provided with mental health and/or psycho-social support services	500	576*	Household assessment sheet and a report received from NCMH
Indicator 5.2	Number of people referred to the National Center for Mental Health by the trained local frontliners	10	27*	Household assessment sheet and a report received from NCMH
Explanation of output and indicators variance:		*Thanks to the expanded pool of trained frontline workers, the project surpassed its initial target of providing psychosocial support to 500 households. We successfully reached 576 households, encompassing a total of 2,164 individuals, demonstrating a significant increase in the project's reach and impact. This broader coverage allowed us to identify and address		

	the mental health needs of a larger population affected by the dzud crisis, including 27 individuals who were referred for specialized psychiatric care.	
Activities	**Description**	**Implemented by**
Activity 5.1	Organize mobile mental health services to affected families	NCMH and trained local front liners

7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas[4] 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]:

UNFPA has communicated regularly with the National Emergency Management Agency, and the local education and health centers for the updated information on the needs of the affected population, especially women and girls. This communication has helped to ensure that psychosocial support was incorporated in the proposal and some items were included in the dignity kits (e.g. warm socks, stationery suppy), along with the information materials and establishment of women and girls' safe spaces.
The post distribution monitoring with the beneficiaries was carried out using in-person and online modalities, and the findings highlighted the most needed items in the dignity kits. The findings also help to modify the items in the dignity kits.

b. AAP Feedback and Complaint Mechanisms:

UNFPA used the distribution of dignity kits as an entry point for sharing/disseminating the information on the dignity kits' purpose, its contents and usage, GBV prevention and response, PSEA awareness, menstrual health and hygiene, and mental health. All information materials have included contact information on where to reach for complain.

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

Information materials on PSEA have included the messages on SEA, on its prevention and complain mechanism. Prior the distribution of the emergency support, UNFPA has organized series of sessions for the local government staffs and one of the topics of these sessions was on PSEA.

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

The project's specific activities on prevention from GBV have focused on distribution of the dignity kits with information and education materials on GBV prevention and response along with messages on SEA awareness. The information materials on the access of sexual and reproductive health services were distributed as among the affected population, including women and girls. In addition, the project has focused on establishment innovative intervention on GBV prevention – the establishment of women and girls' safe spaces. The safe spaces provide a supportive environment where women and girls can receive relevant knowledge and information, network with others and express themselves freely, and enhance their well-being. A training program for 15 local government officials from these provinces focused on establishing and managing women and girls' safe spaces, resulting in a 27.86% average increase in their understanding of GBV risks, safe space operations, and psychosocial support.

e. People with disabilities (PwD):

[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.

UNFPA prepared the dignity kits which included the items to meet the personal hygiene and sanitation needs of the people with disability. These items were selected based on the prior experiencing of support the PwD with the dignity kits during COVID-19 pandemic.

f. Protection:

UNFPA has greatly contributed to the design of the project to ensure the GBV prevention interventions. These include the distribution of the dignity kits with information materials on GBV prevention, on PSEA prevention, on psychosocial support and mental health.

g. Education:

The project design included the capacity building component for the local government officials and local community. Some topics taught at these training sessions included new education topics, such as establishment of women and girls' safe spaces, basic psychosocial support and mental health, knowledge on GBV, SEA and its prevention and responses. UNFPA has closely collaborated with the specialists from the National Center for Mental Health (NCMH), who designed the tailored education modules for the local frontliners. These education modules have equipped them with essential skills to assist the dzud-affected people with psychosocial support and offer referral services to the NCMH for the most needed.

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.	[Fill in]

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.

[Fill in]

Parameters of the used CVA modality:

Specified CVA activity (incl. activity # from results framework above)	**Number of people receiving CVA**	**Value of cash** (US$)	**Sector/cluster**	**Restriction**
[Fill in]	[Fill in]	US$ [insert amount]	Choose an item.	Choose an item.
[Fill in]	[Fill in]	US$ [insert amount]	Choose an item.	Choose an item.
[Fill in]	[Fill in]	US$ [insert amount]	Choose an item.	Choose an item.

9. Visibility of CERF-funded Activities

Title	Weblink
Distribution of the Dignity kits	https://www.facebook.com/UNFPA.Mongolia/posts/pfbid0W5WrpZNZr4KQPf67kiihjsTP4TdFTg1A5ZQhfQypXrrtxRjcx9YaP5w4hwEP1RFrl https://www.facebook.com/UNFPA.Mongolia/posts/pfbid024uWDfwDRJXFt1jjv9kLKzPGR7TKUSWjwFPbpCqbN3jr5ECP3m1RhCfHsAVCTQdFl
Post monitoring mission of the dignity kit distribution	https://www.facebook.com/UNFPA.Mongolia/posts/pfbid02tY4fVnqUvBgHDtHK4ntDYnoFhwbfM7UJwyamkAKq3G9pADo44KSccgUuq9fCjVEql

"Setting up the Women and Girls Safety Space."	https://www.facebook.com/UNFPA.Mongolia/posts/pfbid04XCySyzevdQKCK9kNUwyRFA7cvyod8UXEuqj23uoymWBMz1aHM69phr6KGUxondrl https://www.facebook.com/UNFPA.Mongolia/posts/pfbid028GrvUSeDti1VJR6o4xRV6cJ5kWEcywmjzhjzu2UtLeY1xeKYxuz3hCcwLpGVsVCjl

3.3 Project Report 24-RR-CEF-021

1. Project Information

Agency:	UNICEF	**Country:**	Mongolia
Sector/cluster:	Nutrition Protection - Child Protection Education	**CERF project code:**	24-RR-CEF-021
Project title:	Provision of life saving nutrition, child protection and education assistance to children of vulnerable herder households affected by Dzud		
Start date:	25/03/2024	**End date:**	24/09/2024
Project revisions:	No-cost extension ☐ Redeployment of funds ☐ Reprogramming ☐		

Funding

Total requirement for agency's sector response to current emergency:	**US$ 3,924,000**
Total funding received for agency's sector response to current emergency:	**US$ 1,054,000**
Amount received from CERF:	**US$ 500,025**
Total CERF funds sub-granted to implementing partners:	**US$ 156,312**
Government Partners	US$ 156,312
International NGOs	US$ 0
National NGOs	US$ 0
Red Cross/Crescent Organisation	US$ 0

2. Project Results Summary/Overall Performance:

Inter-Agency team of UNRCO, UNICEF, UNFPA and FAO have utilized the CERF allocation to provide integrated and coherent dzud response. UNICEF addressed nutrition, child protection, and education needs of the affected population.

UNICEF and its partners including National Centre for Mental Health and Local health centres of 9 target provinces provided nutritional screening to 9,698 (out of 6700 planned) children under five (4746 boys, 4952 girls, and 875 children with disabilities), referred 302 malnourished children for treatment, trained 63 staffs in management of severe malnutrition, provided nutritional supplies benefiting 6700 children and 3300 pregnant and lactating women, provided education on nutrition to 3300 pregnant and lactating women, and sensitized 856 community health workers on infant feeding practices.

UNICEF and its partners including General Authority of Child and Family Development, and Protection and its local branches in targeted 9 provinces provided child protection and violence prevention services including awareness building activities, home visits, protection, and referral service to 6280 children (out of 6000 planned) and parents (1850 boys, 2003 girls, 1262 men, 1165 women, 440 Persons with Disabilities) and trained 114 local staff in management of child protection services in emergencies. To increase the efficiency of the child protection services, UNICEF provided equipment for 72 soum level multi-disciplinary teams to facilitate rapid needs assessments in emergencies and deliver immediate case management and referral assistance. Between April and September 2024, 177 cases have been identified and addressed with the required steps.

UNICEF and its partners provided Mental Health and Psychosocial Support (MHPSS) through home visits and focus group discussions to 4240 children (out of 3000 planned) and herders (1635 boys, 1672 girls, 477 men, 456 women, 482 persons with disabilities). UNICEF also supported National Centre for Mental Health in expanding its distance counselling platform services (24/7 hotline service and counselling mobile application) to further increase the availability of MHPSS to children and affected herders. Between June and November 2024, 2560 people (410 boys, 645 girls, 610 men, 895 women) received counselling through these platforms.

UNICEF and its partners including local education departments of target 9 provinces and local emergency management departments delivered 2 types of learning kits (constitute of backpack, pre-loaded audio lessons, exercise books, notepads, pens, pencils, colouring books and tools) to 4220 children (out of 2000 planned) from vulnerable households in rural soums to support their continuous learning: 2080 children age of 5-6 (953 boys, 1,127 girls, 149 children with disabilities) and 2140 children of age 6-8 (1094 boys, 1046 girls, 274 children with disabilities).

Overall, UNICEF and its partners provided direct support to 17,218 individuals, addressing key sectors of nutrition, child protection, mental health, and education.

3. Changes and Amendments

No modifications and amendments have been made from the original plan. No unspent balance left.

4. Number of People Directly Assisted with CERF Funding*

Sector/cluster	Education									
	Planned					Reached				
Category	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	0	0	0	0	**0**	0	0	0	0	**0**
Returnees	0	0	0	0	**0**	0	0	0	0	**0**
Internally displaced people	0	0	0	0	**0**	0	0	0	0	**0**
Host communities	0	0	0	0	**0**	0	0	0	0	**0**
Other affected people	0	0	1,002	998	**2,000**	0	0	2,173	2,047	**4,220**
Total	**0**	**0**	**1,002**	**998**	**2,000**	**0**	**0**	**2,173**	**2,047**	**4,220**
People with disabilities (PwD) out of the total										
	0	0	103	101	**204**	**0**	**0**	**224**	**199**	**423**

Sector/cluster	Nutrition									
	Planned					Reached				
Category	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	0	0	0	0	**0**	0	0	0	0	**0**
Returnees	0	0	0	0	**0**	0	0	0	0	**0**
Internally displaced people	0	0	0	0	**0**	0	0	0	0	**0**
Host communities	0	0	0	0	**0**	0	0	0	0	**0**
Other affected people	3,300	0	3,403	3,297	**10,000**	3,300	0	4,952	4,746	**12,998**
Total	**3,300**	**0**	**3,403**	**3,297**	**10,000**	**3,300**	**0**	**4,952**	**4,746**	**12,998**
People with disabilities (PwD) out of the total										

* 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.

	340	0	340	330	**1,010**	**248**	**0**	**533**	**342**	**1,123**

Sector/cluster	Protection - Child Protection									
	Planned					**Reached**				
Category	**Women**	**Men**	**Girls**	**Boys**	**Total**	**Women**	**Men**	**Girls**	**Boys**	**Total**
Refugees	0	0	0	0	0	0	0	0	0	**0**
Returnees	0	0	0	0	0	0	0	0	0	**0**
Internally displaced people	0	0	0	0	0	0	0	0	0	**0**
Host communities	0	0	0	0	0	0	0	0	0	**0**
Other affected people	0	0	3,006	2,994	**6,000**	1,165	1,262	2,003	1,850	**6,280**
Total	**0**	**0**	**3,006**	**2,994**	**6,000**	**1,165**	**1,262**	**2,003**	**1,850**	**6,280**
People with disabilities (PwD) out of the total										
	0	0	308	305	**613**	**28**	**13**	**192**	**207**	**440**

* 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

Nutrition: Through malnutrition screening in target communities, 856 local health service providers were equipped with refresher up-to-date knowledge and experience to increase community awareness on maternal, infant, and young child feeding in emergencies. 45,000 children and mothers will indirectly benefit from the increased capacity of the health service providers.

Child protection: Through community-based child protection mechanisms strengthening interventions, capacity of 650 local multi-disciplinary child protection team members to monitor, assess and address child protection issues including GBV were increased. Child protection rapid needs assessment and referral system have been tested and strengthened through the project and 60,000 children and parents will benefit from the increased child protection service delivery capacity.

With project support, National Centre for Mental health expanded its hotline services and online counselling capacity which will be sustained beyond project implementation and will assist adolescents and children with MHPSS. 300,000 children, youth and people nationwide will benefit from the increased availability of psychosocial support both through the locally trained staff and through distance counselling platforms.

6. ERF Results Framework

Project objective	Deliver lifesaving nutrition, child protection and education assistance to children of vulnerable herder households affected by Dzud
Output 1	Children, pregnant and lactating women affected by dzud are provided with lifesaving nutrition assistance

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

Sector/cluster	Nutrition			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 1.1	N.4 Number of people screened for acute malnutrition	10,000	12,998*	Report by National Center for Public Health
Indicator 1.2	N.5 Number of people receiving vitamins and/or micronutrient supplements	6,700	6,700	Report by National Center for Public Health
Indicator 1.3	Number of pregnant and lactating women receiving vitamins and/or micronutrient supplements	3,300	3,300	Report by National Center for Public Health
Indicator 1.4	Number of affected people receiving training and/or community awareness sessions on maternal, infant, and young child feeding in emergencies	1,000	12,000**	Report by National Center for Public Health
Explanation of output and indicators variance:		* number of children screened increased due to pre-screening announcements and knowledge sharing ** maternal, infant, and young child feeding sessions have been provided to each screened parent, pregnant and lactating women.		

Activities	**Description**	**Implemented by**
Activity 1.1	Organization of screenings and surveillance for time-critical information for deterioration in the nutritional situation, and for identification of cases of acute malnutrition for referral for lifesaving treatment	National Center for Public Health, Province health center and Primary health centers of target 9 provinces

Activity 1.2	Provision of micronutrient supplementation and vitamin D for children of 6-59 months of age	National Center for Public Health, Province health center and Primary health centers of target 9 provinces
Activity 1.3	Provision of micronutrient supplementation for pregnant and lactating women	National Center for Public Health, Province health center and Primary health centers of target 9 provinces

Output 2	Children in dzud affected areas are protected from abuse, neglect, exploitation, and violence.

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

Sector/cluster	Protection - Child Protection			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**
Indicator 2.1	CP.3 Number of children receiving protection support (e.g. family tracing, reunification, reintegration, case management services, etc)	6,000	6280*	Report by General Authority of Child and Family Development and Protection
Indicator 2.2	Number of local child protection responders (multiple disciplinary team) trained on ensuring child protection minimum standards in emergencies	120	124	Report by General Authority of Child and Family Development and Protection
Indicator 2.3	Number of children receiving PFA services	3,000	4240**	Report by National centre for Mental health
Explanation of output and indicators variance:		* Number of children reached with child protection services increased due to increased availability of local child protection practitioners ** Number of people reached include both children and herders affected. Due to availability of trained local health service providers additional sessions were provided for affected herders.		

Activities	**Description**	**Implemented by**
Activity 2.1	Organization of community-based child protection mechanisms strengthening intervention to monitor, assess and address child protection issues including GBV.	General Authority of Child and Family Development and Protection and its local branches in target 9 provinces
Activity 2.2	Organization of awareness raising advocacy sessions to affected communities in support of children affected by dzud	General Authority of Child and Family Development and Protection and its local branches in target 9 provinces
Activity 2.3	Provision of psychological first-aid services to children in affected areas	National Centre for Mental Health, Province health centre and Primary health centres of target 9 provinces

Output 3	Children with limited access to education provided with learning tools

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

Sector/cluster	Education			
Indicators	**Description**	**Target**	**Achieved**	**Source of verification**

Indicator 3.1	Number of children provided with learning materials	2,000	4220*	Report by local education departments
Indicator 3.2	Ed.1 Number of children accessing formal or non-formal education	2,000	4220*	Report by local education departments
Explanation of output and indicators variance:		* 2 sets of learning materials (constitute of backpack, pre-loaded audio lessons, exercise books, notepads, pens, pencils, colouring books, and tools) have been provided to 2 age groups (5-6 and 6-8).		

Activities	**Description**	**Implemented by**
Activity 3.1	Provision of audio devices to children with limited access to school and online learning	UNICEF, Local education department and local emergency management agencies of target 9 provinces
Activity 3.2	Provision of learning materials to children with limited access to school and online learning	UNICEF, Local education department and local emergency management agencies of target 9 provinces

7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas[6] 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]:

Prior to the project development, UNICEF together with National Emergency Management agency and UN inter-agency teams conducted several field missions in each affected provinces to hold discussions with the affected communities and local authorities to design and implement the response. To ensure continuous feedback collection, UNICEF mobilized 9 community coordinators in each target 9 provinces during the service delivery period (June – September 2024). To further strengthen its accountability to affected population, UNICEF operated field offices in 2 severely affected provinces Sukhbaatar and Zavkhan for duration of 1 month to engage and listen to communities, to collect feedback and involve communities in the implementation and monitoring of the project. Joint monitoring teams with National Emergency Management Agency and UN inter-agency teams worked in each 9 target provinces to monitor and capture findings and lessons learnt of the project. The main observation and findings on the UNICEF assistance have been:

- Fit for purpose: Interventions (nutrition, education, child protection, MHPSS) were deemed fit for purpose and met community needs.
- Timeliness: Assistance was effective but would have more impactful if provided earlier during the winter peak time.
- Scope and coverage: 17,218 people were reached, surpassing the target of 10,000. Unfortunately, MHPSS services still require a long-term support.
- Implementation and delivery: UNICEF's strong coordination with local authorities ensured efficient service delivery.

b. AAP Feedback and Complaint Mechanisms:

[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.

Community coordinators from the local governor's office in target provinces were trained on UNICEF' Accountability for Affected Population tool to collect and respond to feedback regarding UNICEF assistance. 14 enquiries have been received through community coordinators at local governors' office regarding beneficiary selection criteria', duration of the assistance and request for other in-kind assistances (medicines, cash support for treatment of one children) and addressed accordingly.

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

UNICEF is fully committed to improving protection from sexual exploitation and abuse (PSEA) and takes a leadership role in addressing outstanding challenges. All personnel including UN staffs and external partners engaged in response activity is required to strictly uphold UNICEF's PSEA policy to prevent, report, assist and investigate any misconduct and to ensure prompt and confidential reporting, and follow up. UNICEF ensured continuous engagement with beneficiaries and local communities in all PSEA efforts, given that they are most directly affected by these abuses and have unique knowledge and skills. IEC material on PSEA prevention have been developed by UNFPA and had been delivered to all beneficiaries. Child protection trainings and MHPSS trainings have included PSEA components, and all local staff mobilized were introduced to the PSEA policy and guidelines.

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

UNICEF works worldwide to prevent and respond to gender-based violence in emergencies. The project focused on needs of girls and women – recognizing their systemic exposure to gender-based violence – while helping to ensure that support is available for all survivors of sexual violence, including boys. In coordination with the Government, UN Agencies and civil society partners, the project focused on ensuring proper case management pathways, psychosocial support, and accessibility to safe spaces for care and protection.

e. People with disabilities (PwD):

As agreed among HCT members, each implementing agency ensured herder households with persons with disabilities in severely affected areas are prioritized for all planned response. Project reached 1986 persons with disabilities, covering 11,5% of all beneficiaries.

f. Protection:

As a child protection sub-sector lead, UNICEF Mongolia continuously focused on ensuring children in dzud affected areas are protected from abuse, neglect, exploitation, and violence. To ensure the integration of minimum standards on child protection in emergencies and adoption of child protection multi-disciplinary approach in dzud response, UNICEF Mongolia organized "Child Protection in Emergencies" cascaded training for 320 local responders. To address and prevent gender-based violence, UNICEF Mongolia provided refresher capacity building sessions to child protection rapid response teams and local emergency management staff.

g. Education:

UNICEF continuously advocated for undisrupted education service during dzud with Ministry of Education and Science. To ensure the accessibility to education and basic services in severely affected areas, UNICEF Mongolia provided road clearing support to 10 provinces. Through CERF funded assistance, UNICEF delivered learning tools to children with limited access to classroom and online learning. To capture the challenges faced and lessons learnt from dzud response, UNICEF though its own resources, together with Mongolian National Institute of Education Research, and Institute of Disaster Research conducted "Access to education service and key issues and challenges during disaster" assessment.

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.

Through the UN-wide joint dzud response, UNICEF focused on delivering high-quality in-kind assistances and services that were not available in the local markets. Only FAO provided CVA to affected communities for the purposes of this CERF allocation.

9. Visibility of CERF-funded Activities

Title	Weblink
News on CERF assistance	https://montsame.mn/mn/read/349353
Post on UNICEF social media	https://www.facebook.com/story.php/?story_fbid=866484002187476&id=100064776515661&_rdr
Video coverage on CERF assistance on Mongolian National Broadcast	Video_interview_CERF_dzud
News on CERF assistance	https://bpress.mn/content/931
News on CERF assistance	https://newswall.mn/?p=86864
News on CERF assistance	Зун ч зудын айдастай
News on CERF assistance	https://www.cfga.gov.mn/website/news.aspx?id=9329
CERF After action review news on National Emergency Management Agency website	https://nema.gov.mn/post/160185

ANNEX: CERF FUNDS DISBURSED TO IMPLEMENTING PARTNERS

CERF Project Code	Cluster/Sector	Agency	Partner Type	Total CERF Funds Transferred to Partner US$
24-RR-CEF-021	Nutrition	UNICEF	GOV	$6,367
24-RR-CEF-021	Nutrition	UNICEF	GOV	$7,508
24-RR-CEF-021	Nutrition	UNICEF	GOV	$2,701
24-RR-CEF-021	Child Protection	UNICEF	GOV	$37,350
24-RR-CEF-021	Education	UNICEF	GOV	$3,863
24-RR-CEF-021	Nutrition	UNICEF	GOV	$3,318
24-RR-CEF-021	Nutrition	UNICEF	GOV	$10,758
24-RR-CEF-021	Education	UNICEF	GOV	$2,962
24-RR-CEF-021	Child Protection	UNICEF	GOV	$27,184
24-RR-CEF-021	Education	UNICEF	GOV	$17,873
24-RR-CEF-021	Child Protection	UNICEF	GOV	$9,306
24-RR-CEF-021	Child Protection	UNICEF	GOV	$5,763
24-RR-CEF-021	Nutrition	UNICEF	GOV	$7,434
24-RR-CEF-021	Education	UNICEF	GOV	$5,012
24-RR-CEF-021	Child Protection	UNICEF	GOV	$4,457
24-RR-CEF-021	Education	UNICEF	GOV	$4,456
24-RR-FPA-007	Gender-Based Violence	UNFPA	GOV	$21,328
24-RR-FPA-007	Gender-Based Violence	UNFPA	GOV	$14,569
24-RR-FPA-007	Gender-Based Violence	UNFPA	GOV	$992