

# ANNUAL REPORT OF THE HUMANITARIAN/RESIDENT COORDINATOR ON THE USE OF CERF GRANTS

Country	Peru
Humanitarian / Resident Coordinator	Jorge Chediek
Reporting Period	January-December 2007

#### I. Executive Summary

A powerful earthquake struck Peru in the early evening, of August 15<sup>th</sup>, 2007, registering 7.0 ML on the Richter scale. Nearly 600 people were killed, and another 1300 were injured. Some 460,000 were directly affected with more than 90,000 homes left unusable. Public infrastructure and basic services were either destroyed or partially damaged across the four affected regions. Locations recording the most damage were found in the Ica provinces of Pisco, Ica, and Chincha and the Lima province of Cañete along the Peruvian coastline with some damage being recorded in highland communities in the regions of Huancavelica and Ayacucho.

Overall damage was difficult to assess during the first hours after the disaster because communications had been disrupted, and destruction in some areas was such that it totally paralyzed coordination among institutions, turning access to timely and relevant information into one of the main challenges facing the entire response. The United Nations Disaster Management Team (UNDMT) tried to overcome this through interagency teams to perform needs assessments in the affected locations. These, combined with the national coordination work (at the ministry level), made establishing humanitarian intervention priorities possible. Throughout the entire process, the UNDMT was in continuous communication with government institutions, namely the National Civil Defence Institute (INDECI) and the ministries of housing, health, women and social development, education, and energy, and coordinated closely with bilateral donors, international NGO's and the International Federation of the Red Cross to avoid overlaps.

The UNDMT focused the majority of its humanitarian effort in the Ica Region, basing this on the reliable information gathered there by interagency assessment missions that indicated around 35,000 families' required immediate assistance in terms of shelter, medical care, food aid, and water and sanitation. After consulting with national ministries, international NGO's, and donors, CERF funds were prioritized around the following sectors: shelter, food, health, water and sanitation, education, coordination, and emergency employment. Furthermore, to ensure delivery of aid, the UNDMT stressed logistics and stakeholder agreement, and, to ensure covering shelter needs, it focused on temporary camp establishment and management.

The UNDMT, in general, and the UN Humanitarian Coordinator (Resident Coordinator), in particular, played major roles in facilitating the coordination and the information management among governmental institutions and international cooperation agencies. Moreover, the government welcomed the sectoral approach since all concerned ministries would lead their sector.

The request to the United Nations Central Emergency Response Fund (CERF) grants followed the guidelines issued by the Secretariat, and the UNDMT consulted the proposal with national authorities, donors and other stakeholders to avoid duplication of efforts as much as possible,

Total amount of humanitarian	
funding required and received	<b>Required:</b> \$9,960,201

(per reporting year)	Received: \$9,	<b>Received:</b> \$9,591,713				
Total amount of CERF funding received by funding window	Rapid Response:       \$9,591,713         Grand Total:       \$9,591,713					
Total amount of CERF funding for direct UN agency/IOM implementation and total amount forwarded to implementing partners	Total UN agencies/IOM: \$9,152,286  Total implementing partners: \$439,427					
Approximate total number of beneficiaries reached with	Total	under 5 years of age	Female (If available)	Male (If available)		
CERF funding (disaggregated by sex/age if possible)	300,000 <sup>1</sup>	15,000 <sup>2</sup>	153,000 <sup>3</sup>	147,000		
Geographic areas of implementation	Pisco, Ica, and Chincha provinces in Ica region. Yauyos, and Canete provinces in Lima region Huaytara and Castrovirreyna provinces in Huancavelica region. Paucar del Sara Sara, and Parinacocha provinces in Ayacucho region					

### II. Coordination and Partnership-building

#### (a) Decision-making process:

Immediately after the earthquake, the UN Resident Coordinator and his team prepared the first situation report and dispatched it to OCHA hours after the event. The UNDMT held a meeting early the next morning and deployed the UNETT, which established a 24 hour Emergency Operations Centre that remained in place for 10 days. The latter began implementing its Emergency Response Plan and, given the limited information available, decided to send out interagency assessment missions to the four affected regions during the first 10 days.

The government agreed with the Resident Coordinator's decision to call for the United Nations Disaster Assessment and Coordination (UNDAC) support on the second day, and the first team arrived immediately to assist in performing needs assessment and coordination. Since Peru is a non-CAP country, needs assessment was crucial for designing a humanitarian response plan. Meanwhile, accurate data was beginning to be compiled through the efforts of different humanitarian aid organizations, INGO's, government institutions, and interagency teams, and, once stakeholder's had been consulted, it became the backbone of a CERF request to meet the most pressing of needs. The UNDMT sent the request on 21 August to the Office for the Coordination of Humanitarian Affairs (OCHA), which approved it that same day. One week later, a more detailed Flash Appeal was completed.

The CERF request was mainly focused on the three most affected provinces, Pisco, Chincha, and Ica in the Ica Region, and to a lesser extent on the provinces of Canete and Yauyos in the Lima Region, Castrovirreyna and Huaytara in the Huancavelica Region, and Parinacochas and Paucar del Sara Sara in the Ayacucho Region.

#### (b) Coordination amongst the humanitarian country team:

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<sup>&</sup>lt;sup>1</sup> Percentage of the affected population in Pisco (99 percent), Chincha (40 percent), and Ica (40 percent) provinces, where most of the projects were focused, and less percentage (20 percent) of the affected population in Canete, Yauyos, Paucar del Sara Sara, Parinacochas, Huaytara and Castrovirreyna provinces where some components of the projects were implemented. The detail for each project is presented in part V of the report.

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National percentage for children under 5 ys old is approximately 5 percent

<sup>&</sup>lt;sup>3</sup> Calculation was made with 51 percent for women and 49 percent for men

The Emergency Operations Centre, headquartered on the United Nations Development Programme (UNDP) premises, enabled most of the humanitarian actors to meet, coordinate, and exchange information in order to improve their action plans.

During the first two weeks, the Resident Coordinator led four donor and INGO's meetings, in which all 60 institutions participated. Moreover, the UNETT prepared 21 situation reports, the final one produced at the end of August.

The Emergency Response Plan facilitated interagency coordination. As well, the UNDMT met with the President, Prime Minister, and Sector Ministry and National Civil Defence Institute (INDECI) representatives, briefing them as required on UN humanitarian aid mechanisms.

UN leadership was recognized by donors, who expected it to continue after the emergency phase.

From the first week of the emergency, the UNDAC team led working groups in the field, using the On Site Operations Coordination Centre (OSOCC) structure, and once it had fulfilled its mission, the CERF Coordination programme continued promoting technical meetings in the Pisco Province.

#### (c) Partnerships:

Although the UNDMT sought to maintain close coordination with all stakeholders, the speed of the CERF request preparation made it so most of the programmes were intended to be directly implemented by the UN agencies. Information was weak and fragmented at the beginning, so UN agencies focused initial efforts on gathering sufficient information for immediate proposal design.

During programme implementation, UN agencies carried out all activities in conjunction with appropriate public sector agencies and participated in OSOCC meetings in the field. They likewise met with provincial Civil Defence Committees, once these had been set up, which took some time.

Collaboration with government counterparts was established quickly. For example, the National Food Assistance Programme (PRONAA) and the cities took an active part in food, tent, and NFI distribution, health and water and sanitation services were supported by CERF funded programmes in close coordination with the Ministry of Health (MoH) and its local level units, the education programme was made possible through positive coordination with the Ministry of Education (MoE), and the emergency employment programme was implemented through the Ministry of Labour (MoL). As well, UN agencies worked closely with NGO's and amongst themselves.

#### (d) Prioritization process:

The UN response was prioritized on data gathered from the needs assessment missions and on systematic consultations with government authorities (ministries were requested to provide identified needs) and NGO's, including the International Federation of Red Cross and Red Crescent Societies (IFRC).

#### III. Implementation and Results

#### Rapid Response projects

CERF funding was key in support of immediate humanitarian aid. It prevented further damage and helped to avert many of the negative consequences associated with the aftermath of a disaster. The funds also contributed significantly to procuring such critically needed resources as temporary housing (INDECI reported a shortage of tents, a need that was quite evident during the first phase of the emergency), food, and water and sanitation (projects that neither the State nor NGO's present in the emergency areas could finance adequately to meet the need). Education and health were also fundamental aspects for assistance so that rights are protected and that conflicts and outbreaks were prevented. And another

critical need was emergency employment, so affected families could generate income, seeing that the earthquake had more or less devastated the labour infrastructure. Implementing CERF funds for coordination among stakeholders assured a timely response and halted duplication. The N GO's especially valued the technical groups supported by Coordination Centre.

The following is a rundown of the most pertinent actions by each UN agency:

- WFP responded immediately to the urgent food needs of the affected population. Over 80,000 people have continuously received food aid since September 2007, preventing them from falling into severe food insecurity. The programme also helped prevent acute malnutrition in children under five years of age in the worst earthquake affected areas. The people are receiving between 85 percent and 100 percent of their recommended caloric and protein daily allowance, which has taken the pressure off families to allocate their limited money to buying food so now they can begin rebuilding their homes. Moreover, 3,400 families received Non food items (NFI's), including kitchen kits and stoves.
- The Food and Agriculture Organization (FAO) executed its agricultural and fishing aid programme to help affected families recover food security, placing special emphasis on repairing irrigation systems, 500 of which had been seriously affected to the detriment of more than 13000 Ha of farmland. At the moment, repairs are being made on 287 irrigation ditches with FAO distributed tools. It handed out vegetable, grain, and legume seeds for 3,500 families and gave supplies and training to 750 families to start peri-urban farming. It has planned to supply fishing equipment to 203 fishermen.
- The shortage of tents for emergency shelter required prompt response. The International Organization for Migration (IOM) executed its shelter intervention in three provinces (Ica, Chincha, and Pisco), aiding an estimated 137,196 people, a figure which represents almost half of the population whose homes were destroyed or severely damaged in the Ica Region. This support included 13,000 tents, 17,000 cots, 35,500 blankets, 32,500 mattresses, 19,000 kits for kitchen and personal hygiene, as well as 14,720 sheets. They were directly delivered to the affected families through a major operation carried out by IOM in the three provinces, and a smaller amount was delivered to provincial and district governments and distribution supervised by IOM. The INDECI, in coordination with local Civil Defence Committees, decided that cleaning lots would be a way of facilitating the reconstruction process and of supporting affected families' strategy of protecting their lots and remaining assets. Also foreseen in the INDECI decision was the progressive reestablishment of basic services.
- Pan American Health Organization (PAHO) / World Health Organization's (WHO) use of CERF funds, especially those allocated to the San Juan de Dios Hospital enabled the quick restoration of emergency, maternal, and child health care in the city of Pisco. With the next closest hospital located more than 30 minutes away; it is the only health centre for approximately 80,000 people, most living in poverty. As well, basic infrastructure for epidemiologic surveillance was lacking for which PAHO outfitted Situation Monitoring Rooms in Ica, Pisco, and Chincha and gave technical support. The severe impact on mental health was tackled through a community approach centered on the temporary shelters. 10,000 families received advice on healthy habits in a house to house strategy, complemented by reinforcing messages broadcast on the radio.
- The United Nations Population Fund (UNFPA) health programme reached 28 settlements in the earthquake affected areas, and, in coordination with the MoH and local authorities, of which 14 settlements were selected for a rapid evaluation. The programme trained 101 healthcare providers on use and distribution criteria of UNFPA-donated kits: SRH, clean child birth care, sexual violence care, hormonal contraception, and pregnancy complication. Likewise, 85 percent of the rooms set aside for reproductive health in the establishments were damaged in some way. Almost 50 percent of the settlements suffered RH supplies shortage, mainly injectables and pills. At the end of the emergency period, kit distribution was as follows: 13,600 clean child birth care, 18 sexual violence care for 250 victims (including boys and girls), 20 hormonal contraception (including

injectables, combined pills, and emergency pills for 760 women of child bearing age), and 4 pregnancy complication.

- Timely water and sanitation activities were made possible in UNICEF and PAHO/WHO implemented projects in a context where water systems collapsed, mainly in Pisco Province. PAHO/WHO provided equipment to repair the water system in Pisco and gave technical advice to monitor water quality. UNICEF gave support through with water points, water connections of water distribution networks to temporary shelters, water pumps, tank trucks to improve distribution, water containers and purification tablets, covering safe water needs for 40,000 people. It further rehabilitated sanitary facilities in 26 schools in three provinces for approximately 23,000 students and promoted hygiene practices through recreational activities in 45 locations with direct impact on 12,000 beneficiaries.
- A rapid employment survey carried out by ILO showed that nearly 16,000 jobs were lost due to the destruction caused by the earthquake. In addition, markets and small business had been severely disrupted and needed to be re-initiated. The ILO survey pointed out that 20 percent of destroyed houses (17,000) were home industries or shops run mostly by women. Emergency employment funds contributed to providing immediate income generating activities for affected families. They also assisted in overcoming one of the main problems, i.e. debris removal, and in opening up employment in small infrastructure works. For the emergency employment, ILO targeted 14 districts that had experienced the most job and housing losses.
- The United Nations Educational, Scientific, and Cultural Organization's (UNESCO's) use of CERF funds prompted the Ministry of Education to complement them for temporary classroom installation in order that four schools be used as models of comprehensive. participatory, educational spaces that enable immediate recovery of children and teacher's psycho-emotional states resulting from post-earthquake stress. The temporary schools installed by UNESCO with CERF funds are rallying points around which other UNCT members can contribute to their overall operation and sites where teachers are directly working with children and family members to overcome their disaster driven emotional stress. The United Nations Children's Fund (UNICEF) provided assistance for installation of sanitary facilities in each of the schools, PAHO/WHO provided assistance for teachers and student psycho-emotional activities, IOM provided tents and supplies for teachers who had lost their homes, and UNLIREC assisted in the community events that UNESCO organized in order to reach out to the students' families and neighbours and to work on issues related to conflict management. The reactivation of school services served as a means for providing children with a safe environment, a food assistance programme, and psycho-emotional recovery. Hence, 76 temporary, pre-fabricated, furnished classrooms were installed in four model-emergency schools, two in the city and two in the country. The construction itself has many advantages, such as speed and ease of installation and dismantling (in the event that they are needed elsewhere at some other time). UNESCO also assisted the MoE, regional and city authorities, and education staff in designing and implementing a psycho-emotional healing programme for teachers and students.
- After the departure of the UNDAC team, the United Nations, led by the UNDP, used CERF funds to establish a Coordination Centre in the city of Pisco which has contributed to the international community and government effectively responding to the emergency, opened up a discussion and coordination space, and provided a base of operations for the UN agencies. The centre had the necessary means and technology to facilitate field evaluation, information systematization, and promotion of the coordination of the international cooperation and the national entities responding to the emergency. It also constituted a temporary governing site for the mayor of Pisco, since the city hall had been destroyed.

#### (a) Monitoring and evaluation

Each agency was responsible for their monitoring and evaluation systems. Information sharing was made possible through UNETT and the Coordination Centre.

The FAO Emergency Division in Rome supervised its intervention and approved all expenses and technical proposals. In the field, three coordinators oversaw the agriculture and fishing components, and a team of 4 assistants supervised the distribution process implemented by the cities. For the urban agriculture component, FAO worked with two implementing partners, NGO's DRIES and RED. Local oversight was taken care of by the FAO's Emergency Division country team.

The WFP performed an Emergency Food Security Assessment (EFSA) to obtain an emergency operation baseline and will likewise run a final evaluation at the end of the emergency operation. Regarding monitoring activities, 8 field monitors were hired to follow-up on food and non-food item distribution and to conduct post-distribution household visits. A simple household questionnaire was designed to conduct monitoring visits to a random sample of beneficiaries.

The UNDP Emergency Employment programme was implemented jointly with the MoL and local district mayors. Mayors had to provide needed projects or works and submit a participant list selected from their community. The hiring of women as a priority was stressed to the mayors. The MoL provided three provincial managers and brigade supervisors to the district level, and districts proposed their brigade leaders, as well. The MoL likewise reported on the process, and UNDP carried out field visits to district mayors. After three months, the MoL sent a report to UNDP. Attendance records and beneficiary lists are on file.

The UNDP Coordination programme was monitored directly by that agency through visits and sector meetings. UNDP hired a coordinator and a technical assistant for overseeing the centre and programme. The coordinator convened sector meetings, prepared minutes, kept attendance lists as a regular procedure, and sent weekly activities reports to UNDP offices in Lima.

UNICEF monitored its programme using the tool, Core Commitment for Children, which assessed a list of indicators at the 8<sup>th</sup> and 16<sup>th</sup> week, and will realize a post-monitoring review in April 2008.

The UNESCO Education programme was monitored and evaluated by UNESCO Lima specialists, yet the participatory activities had to meet with the approval and involvement of the Ministry of Education's School Infrastructure Office (OINFE,) and the Ica Region Department of Education. Temporary classroom construction supervision was accomplished on site by UNESCO appointed engineers, one at each school. Directly sharing in the duties were the principals and presidents of the Parent Associations. Likewise, a Lima based Programme Coordinator oversaw all engineers, visiting regularly each school site. The Head of OINFE and UNESCO Lima specialists also regularly visited the sites. As for psychoemotional recovery, UNESCO constantly accompanied the teacher assistance process through prior coordination meetings and subsequent evaluation meetings with the school principals and other regional and local representatives of the education sector. Meeting participants filled out an evaluation form, indicating what they had learned and the quality of the training. Furthermore, an international consultant monitored the schools in the use of materials they received and in the application of psycho-emotional related activities. Education officials as well as regional and local authorities took part in the community events. The UNESCO Head of Office with her team of professionals also visited the affected area periodically in order to verify the progress in terms of quality of work and schedule compliance.

#### (b) Initiatives Complemented CERF- funded projects:

The Flash Appeal was completed a week after CERF request approval, and all agencies continued to complement the most urgent CERF financed programme components. Almost all programmes were part of a larger programme, complemented by other initiatives funded by the different UN agency headquarters and bilateral and multilateral donors, such as the European Community Humanitarian Office (ECHO).

What needs to be stressed here is that the humanitarian assistance was not a disjointed effort but combined initiatives from the State, civil society, private sector, international community, and UN. In the context of this emergency, it was the Peruvian government that took the lead and the rest of the stakeholders complemented its actions with their own in order to meet the immediate needs of the affected population.

#### IV. Lessons learned

#### Coordination

- Coordination is a critical support function that needs to continue after the first emergency phase to ensure the rehabilitation process.
- Close collaboration with the public sector is the best way to ensure state commitment with demonstrative strategies to attend basic needs.
- Effective communication and coordination among UN agencies facilitate immediate response, in particular areas like mental health, health promotion, and social communication.
- Adequate coordination among UN agencies, NGO's, sector partners, and local and regional authorities makes it possible to develop synergies. Such was the case in water and sanitation.

#### **Funding**

 Having in place an efficient means for completing a CERF request enabled urgent needs to be met while preparing a more complete Flash Appeal

#### Preparedness

- The UNETT was a key mechanism to facilitate coordination and to carry out joint needs assessments that made it possible to quickly compile the emergency proposal. The Emergency Response Plan was important to guide the first steps of the response. This mechanism needs to be reinforced and to include participation of NGO's to ensure additional capacities in future humanitarian responses.
- Sustained efforts are needed for Civil Defense Committee capacity building, which is the basic structure of the Civil Defense System in Peru, and should be made in conjunction with the National Civil Defence Institute, NGO's, and all relevant public sectors Improved information systems, based on a more detailed, locally generated needs assessment, are vital in a relief effort.
- Improved customs regulations ease reception of aid, guaranteeing relief to affected populations in a timely manner.

#### Intervention strategy

- The "Clean Lot" approach met the needs of debris removal, access to water and sanitation, and security for family property more effectively than a temporary camp.
- Cross checking beneficiary lists is an effective means of avoiding duplication, especially during the immediate phase of an emergency
- Existing institutional settings established through development initiatives are effective in life saving programme implementation and in response strategy and support methodology design
- Regional and local participation in preliminary and complementary needs assessments enables establishment of immediate assistance and subsequent monitoring and follow up commitments.
- Timely identification and solution of small problems stave off larger impacts on recovering service capacity. For example, evaluating and calibrating biomedical equipment in affected areas impacts the functionality and sustainability of care provided to the population.
- Flexibility is important to assume tasks that are not traditionally part of the organization's action plans but are necessary for project execution. For instance, PAHO assumed the tasks of building demolition and debris removal for the San Juan de Dios Hospital in the city of Pisco, work that regional and local governments generally are responsible for but were unable to complete due to coordination problems and funds availability. Without this flexibility, demolition and clearing would not have been completed.
- A community approach to mental health training works better than a clinical approach.
- Grassroots organizations such as women's organizations, soup kitchens, food programme organizations, neighbourhood committees, parishes, etc, are a good basis for delivering humanitarian activities.
- Recreational activities are effective means for delivering hygiene promotion messages and have good impact when carried out in community contexts.
- Reproductive health services are not prioritized during emergency and post-emergency periods and lack supplies and trained staff to meet population needs.

- Sexual and reproductive health, including STI, HIV, and AIDS prevention, is important in crisis situations and should be an integral part of primary health care services in the disaster affected regions.
- Although it is important for children to return to classes as soon as possible for them to have a
  sense of normalcy and not to loose the school year, facilities first must be made safe and secure.
  This will provide them a healthy environment for overcoming emotional stress and for playing with
  peers under the supervision of trained teachers, thus offering parents the opportunity to return to
  work or to rebuild homes and giving them peace of mind.
- Restoring schools is not only about installing classrooms. It implies possible relocation, available
  basic services, children having recreation space (meaning temporary classrooms not installed on
  only open space left on school grounds), swift debris removal for a safe environment, and rapid
  yet precise structural appraisals to make sure facilities left standing are safe.
- Family and community involvement in school rehabilitation assists in their emotional recovery, granting them knowledge that they are part of something larger than themselves and helping them better understand their children's situation.
- More accurate information on affected schools, disaster impact on their infrastructure, and availability of basic services is critical in the aftermath of a disaster in order to direct international community assistance efforts and even national direction.
- Schools should be a focal point for post-earthquake intervention organization. Schools could be used as a means to better organize humanitarian assistance in emergencies, providing, among others, food aid with parent/teacher supervision, tents and supplies to those who lost their homes, and health services. It is safer for children to live in a shelter managed by the educational community than in a general shelter where the majority are strangers. The experience with the implementation of the CERF funding in the Ica Region allowed UN agencies to coordinate joint assistance to schools, reflecting the UN's Delivery as One approach.
- Timely conflict, crisis, and violence management reduces stress and allows a smoother transition
  to daily routines. Internal conflicts in the educational community, commonly provoked by
  uncertainties and pressure resulting from the disaster, affect member relations: domestic violence
  increases, teachers' disaster provoked stresses impact their capacity to relate to children,
  parents, and other staff, etc.
- Transparency throughout the entire process simplifies aid efforts since it builds trust between agencies and communities. For example, UNESCO and the schools together formed donation registration committees (school staff and parents with UNESCO advisement) that recorded all donations.

## V. Results

Sector/ Cluster	CERF projects per sector (Add project nr and title)	Amount disbursed (\$)	Number of Beneficiaries (by sex/age)	Implementing Partners	Expected Results/Outcomes	Actual results and improvements for the target beneficiaries
Shelter	07-IOM-014  Establish temporary camps and assist government of Peru (GOP) in their management and local populations in three main camps with shelter and non-food items	4,419,100	137,196 people (65,553 males and 71,643 females) who had lost their houses	Total expenditure implemented by IOM.  Relevant collaborators: Ica Region provincial and district governments  INDECI	In coordination with international and governmental partners, to provide 12,000 immediate shelters (winterized tents, essential household items, and cooking sets, mattresses) to provide protection from the elements.  To provide technical assistance to the government of Peru for temporary camp management, immediate shelter set up, and NFI distribution to affected population.	Delivered 13,000 tents, 17,000 cots, 35,500 blankets, 32,500 mattresses, 19,000 kitchen and hygiene kits, and 14,720 sheets to sites in Ica, Pisco, and Chincha provinces.  Changed strategy to support "Clean Lot" government plan that promoted debris removal and supported decision of most families to stay on their property when possible. Technical assistance to manage temporary camps was not necessary.
Food	07-WFP-045  Emergency food aid to earthquake affected populations	2,194,504	47,200 food insecure people (25,960 females and 21,240 males)	Total expenditure implemented by WFP.  Relevant collaborators: PRONAA (National Food Assistance Programme)	To maintain minimum food intake and prevent further deterioration of nutritional state of affected population; special attention given to children under five years of age and pregnant and breast feeding women.  To prevent weight loss and to increase micronutrient deficiency through supplementary feeding in children under five years of age and pregnant and breast feeding women.	Distributed a balanced food ration to 47,200 severely and moderately food insecure people, covering 85-100 percent of their daily caloric and protein requirements  Provided 4,400 children under five years of age and 1,800 pregnant and breast feeding women a specific food ration according to their nutritional requirements.  Distributed kitchen kits, stoves, and water tanks to approximately 4,500 affected families.

	07-FAO-32 Food production in affected urban areas	1,032, 550	3953 families (roughly 19,765 people (10,278 females and 9,487 males)	Total expenditure implemented by FAO, except for two agreements with local NGO's (DRIS and REDE) for urban agriculture work.  Relevant collaborators: City governments  PRONAMACHCS (National Programme for the Management of Water Basins and Soil Conservation)  FONDEPES (National Fishing Development Fund)	To re-establish population's self-sufficiency in food production	Re-established food security of 3500 farm families from highland areas in the Lima provinces of Yauyos and Cañete, the Ica provinces of Pisco and Chincha, the Huancavelica provinces of Castrovirreyna and Huaytara, and the Ayacucho provinces of Parinacochas and Paucar Del Sara Sara via emergency support for distributing seeds and tools and for providing essential supplies and technical support that assisted in the recovery of damaged agricultural assets and community-based irrigation systems.  Distributed inputs for peri-urban farming and trained 750 families on how to begin those activities.  Identified inputs and basic equipment for 2008 distribution that would aid in restarting activities for 203 fishermen in Callao, Cero Azul, Tambo de Mora, and Pisco; 10 fishing boats constructed, 9 outboard engines, 582 nets, lines, and hooks, 6 air compressors with diving equipment, generators, basic communication sets, and security equipment supplied.
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	07-WHO-036  Outbreak Prevention, Disease Surveillance, and Early Warning System.  Restoring health services.  Coordination and technical support in public health.  Humanitarian assistance management	895,590	180,000 people in the provinces of Ica, Chincha, and Pisco (roughly 52 percent females and 48 percent males)	Total expenditure implemented by PAHO/WHO  Relevant collaborators:  Ministry of Health	To prevent outbreaks, perform disease surveillance, and set up early warning systems  To restore health facilities  To assist in public health coordination and technical support  To aid humanitarian aid management	Delivered directly information on healthy habits to 10,000 families, going house by house and broadcasting on the radio (radio guidelines)  Relayed healthy habits in food and solid waste management and personal hygiene in temporary shelters  Re-established water supply, repaired sources, ran water quality control and leak control  Diagnosed preliminary and complementary threats to and evaluated immediate needs of health services infrastructure  Supported restoring working capacity of primary care network and hospital health  Supported restoration of Ica Region hospitals' working capacity  Diagnosed damages and formulated cost effective solutions for reopening health service  Restored working capacity of San Juan de Dios hospital through providing a temporary hospitalization module.  Strengthened health system response capacity health workers' abilities during response and facilitated emergency care process.  Strengthened institutional development for improved response to emergencies  Trained 300 teachers and 90 health care professionals on stress management techniques and other mental health problems  Improved humanitarian aid management through implementation of LSS/SUMA (Logistics Support System)
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	07-FPA-019 Revitalize capacity of the local primary health services to provide reproductive health services	49,969	14,360 people (13,600 females and 760 males)	Total expenditure implemented by UNFPA  Relevant collaborators:  Ministry of Health	To ensure availability of sexual and reproductive health services, including health prevention and assistance for people in Peru's earthquake crisis.	Selected 14 settlements, in coordination with the MoH and local authorities, for a rapid evaluation.  Trained 101 healthcare providers on use and distribution criteria of UNFPA-donated kits: SRH, clean child birth care, sexual violence care, hormonal contraception, and pregnancy complication  Distributed the following kits: 13,600 clean child birth care, 18 sexual violence care for 250 victims (including boys and girls), 20 hormonal contraception (including injectables, combined pills, and emergency pills for 760 women of child bearing age), and 4 pregnancy complication.
Emergency employment	07-UDP-020-A  Cash For Work –  Emergency  Repairs	200,000	1190 temporary jobs created for three months (833 females and 357 males)	Implementing partner: Ministry of Labour  Relevant collaborators:  Ministry of Housing, Construction, and Sanitation provincial government of Pisco  ILO	To assist national, regional, and local governments in offering temporary jobs and income to families  To support actions for rapid rehabilitation of key roads through temporary employment and income generation	In alliance with the Ministry of Labour, created 1190 temporary debris removal and small rehabilitation works, jobs in 14 districts in the provinces of Pisco, Chincha, and Ica. Main beneficiaries were women (70 percent).  Performed rapid assessment to determine earthquake impact on employment and the most affected areas and groups for better programme direction.  Procured basic tools (shovels, wheel barrows, and pick axe) and protective gear (helmets and masks).
Coordination	07-UDP-020-B  Coordination of UN response and humanitarian action addressed to families and areas affected by the earthquake occurred in Peru on 15th August 2007	100,000	109,000 affected people in the province of Pisco, indirect beneficiaries of the UN response and humanitarian action coordination (48 percent males and 52 percent females)	Total expenditure implemented by UNDP  Relevant collaborators:  Provincial government of Pisco  OCHA	To coordinate UNCT actions and to ensure a coherent and efficient humanitarian and early recovery intervention strategy through the following activities:  Providing effective coordination, guidance, and support for emergency response, advocacy, communications, and operations in the earthquake-affected areas at the central and city level.	Facilitated, convened, and monitored the continuation of sectoral coordination among government, NGO's, and UN in the areas of:  • Health • Education and protection • Water and sanitation • Logistics • Shelter and infrastructure • Agriculture • Nutrition  Improved linkage between national sector and international community efforts in the different response components via meetings led by the national and local authorities.

					Leading field coordination for different sectors of the national government, UN agencies, national institutions, civil society, NGO's, and other stakeholders  Providing support to UN missions to the earthquake affected areas  Providing support for ongoing monitoring and evaluation of UN-assisted response.	Set up a website to coordinate international and national support:  http://www.onu.org.pe/Publico/infocus/sismoperu.asp x (Click on link "Sistema de Información - Coordinación y Transición")  Held or facilitated 112 coordination meetings with different stakeholders:  • 33 meetings and activities with district and provincial mayors  • 9 meetings with ministers and central and regional government officials.  • 20 meetings with international agencies and NGO's  • 30 sectoral meetings on Health, Shelter, Education, and Water and Sanitation.  • 5 UN interagency meetings  • 15 meeting with information focal points from UN agencies, NGOs, and other participating institutions.
Water and Sanitation	07-CEF-053 Water, hygiene, and sanitary blocks for schools	200,000	91,100 beneficiaries (43,728 males and 47,372 females)	Implementing partners: Ica Region Directorate of Health, Ica Region Department of Education (DREI), and Kallpa  Relevant collaborators:  Chincha and Pisco Health Network  Pisco Water Authority (EMAPISCO)  Italian NGO COOPI - Cooperazione Internazionale	To provide water, hygienic conditions, and sanitary blocks for schools in selected districts to assist in restarting classes  To provide clean water to 40,000 people, particular emphasis placed on women and children in shelters.  To promote healthy habits with the women and children living in camps and temporary shelters in two districts for disease prevention.	Rehabilitated and constructed sanitation facilities in 26 schools in the provinces of Pisco, Ica and Chincha for approximately 23,000 students.  15,000 people in temporary shelters (41.9 percent of the total population in shelters) had access to clean water through a connection to the urban water network provided for UNICEF.  Intallated 9 water points at shelters, providing clean water for approximately 14,000 people.  Installed 3 water pumps on tank trucks, improving water distribution efficiency for 10,000 people living in shelters and shanty towns in the city of Pisco.  12,000 people received 2,400 water containers, and 5,000 people in temporary shelters received 1,000 water purification tablets in Pisco and Chincha.  Promoted healthy habits in 45 shelters and in the provinces of Pisco and Chincha.  Trained 96 temporary shelter leaders, 56 health workers, 29 sanitary inspectors, and 15 members of various NGO in basic sanitation.

Education	07-ESC-001  Safe educational environments for school children in the post-earthquake emergency period	500,000	10,378 beneficiaries 5,595 males and 4,783 females Under 5 years of age: roughly 1,200	Total expenditure implemented by UNESCO  Relevant collaborators:  Ministry of Education  Ica Region Department of Education  City of Chincha  City of Independencia  Chincha Local Education  Management Unit	To provide basic classroom supplies and educational materials for students  To provide authorities with classrooms and educational materials	Installed temporary comprehensive educational facilities on existing school grounds or new plots for four devastated schools selected jointly with the MoE. This included 76 pre-fabricated classrooms and complementary areas such us a cafeteria, playground, infirmary, psychological counselling, and art / science / physical education classrooms. Sanitary services were included, provided by UNICEF.  The government of Peru contributed to the cost of the transportation and installation of the schools.  Additional results: a. A new, more cost-effective and climate adapted design for temporary pre-fabricated classrooms was prepared jointly with the MoE School Infrastructure Office. b. The MoE adopted the concept of comprehensive educational facilities versus the former concept of "classrooms". c. Soothing classroom colors and colorful recreational facilities improved children's and teacher's emotional states. d. Comprehensive facilities are more efficient in following up on use of donated materials and supplies and are better equipped to meet the integral needs of the children in terms of psychological, emotional, educational, nutrition, safety, among others.  Supplied materials, equipment, and basic furniture according to the different levels (pre-school, primary, and secondary) to the 76 classrooms. Materials included books, educational games, soothing toys, and materials for science experiments, art, math, and sports.  Established resource classrooms for each level.  Distributed to teachers and school principals materials and guidebooks on psycho-emotional intervention, school and community violence resulting from the earthquake, conflict management, basic rights, reading skills for use with the children and parents, books for teacher use with children on emotional recovery, crafts for children, encyclopaedias, games, etc.
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			Additional results:
			Provided assistance to 150 teachers and school staff on using tools for psycho-emotional recovery and conflict management that involve parents and encourage reading skills and other related topics as well as for managing emergency curriculum.
			Jointly produced a guidebook on post-earthquake psycho-emotional recovery with the MoE and the Ica Region Department of Education, with several other agencies participating. Teachers helped validate the materials.
			Sponsored the writing of a short story on the earthquake by a teacher that was illustrated by children from affected schools to help other children in their recovery.
			Encouraged teacher and parent participation in the food programme in the four schools (provided by WFP).
			Promoted parent involvement in refurbishing school furniture and community member participation in mass events for preparing and constructing the temporary schools.

VI.	CERF IN ACTION: Success stories with photographs sector/cluster; 500 – 1000 words in word format)	(Approximately a half to one page per
	Please find attached separate documents.	

## CERF Funding by Country (2006) - Project Detail Peru (01-03 to 02-10-2008)

CERF Project	Agency	Sector	Window*	Approved Amount USD	Disbursement Date
07-FAO- 032	FAO	Agriculture	RR	1,032,550	02.10.2007
07-IOM- 014	IOM	Shelter and non-food items	RR	4,419,100	19.09.2007
07-WFP- 045	WFP	Food	RR	2,194,504	19.09.2007
07- WHO- 036	WHO	Health	RR	895,590	05.09.2007
07-ESC- 001	UNESCO	Education	RR	500,000	05.09.2007
07-FPA- 019	UNFPA	Health	RR	49,969	05.09.2007
07-UDP- 020-A	UNDP	Economic Recovery and Infrastructure	RR	200,000	04.09.2007
07-UDP- 020-B	UNDP	Coordination and support services	RR	100,000	04.09.2007
07-CEF- 053	UNICEF	Water and sanitation	RR	200,000	31.08.2007
Total				9,591,713	

<sup>\*</sup> RR - Rapid Response; UFE - Under-Funded Emergency

#### **List of Acronyms:**

CERF- Central Emergency Response Fund

ECHO- European Community Humanitarian Office

Emergency Food Security Assessment (EFSA)

FAO- food and agriculture organization

**HC-** Humanitarian Coordinator

IFRC- International Federation of Red Cross and Red Crescent Societies

INDECI (National Civil Defense Institute)

INGO- International Non governmental Organization

**IOM-International Organization for Migration** 

Ministry of Education's School Infrastructure Office (OINFE,)

Ministry of Labour- MoL

MoE -Ministry of Education

MoH -Ministry of Health

Mw- Momentum magnitude

OCHA- Office for the coordination of Humanitarian Affairs (United Nations)

OSOCC- on Site operations coordination Centre

PAHO- Pan American Health Organization (WHO)

PRONAA (National Food Assistance Programme)

**RC- Resident Coordinator** 

UNDAC- United Nations Disaster Assessment and Coordination

UNDMT- United Nations Disaster Management Team

UNFPA- United Nations Population Fund

UNICEF- United Nations Children's Fund

WFP- world food programmeme

WHO- World Health Organization