



ANNUAL REPORT OF ON THE USE OF CERF GRANTS IN BOLIVIA FOR DROUGHT, FLOODING AND LANDSLIDE

COUNTRY	Bolivia
RESIDENT/HUMANITARIAN COORDINATOR	Yoriko Yasukawa

I. Summary of Funding in 2011 – US\$

	1. Total amount required for the humanitarian response		22,137,001		
	2. Breakdown of total response funding received by source	2.1 CERF: DROUGHT CERF: FLOODS		2,002,341 2,584,669	
		2.2 COMMON HUMANITARIAN FUND/ EMERGENCY RESPONSE FUND		N/A	
		2.3 OTHER (Bilateral/Multilateral)	<u>DROUGHT</u> FAO: 2,115,000 ¹ UNICEF (Health and Nutrition): 1,000,000 UNICEF (WASH): 700,000 PAHO: 50,207		
			<u>FLOODS</u> FAO: 1,412,100 ² WFP: 483,987 UNICEF: 22,000 TOTAL: 5,783,294		
	2.4 TOTAL 2011:		10,370,504		
	3. Breakdown of funds received by window	<input type="checkbox"/> Underfunded		N/A	
		1. First Round		N/A	
		2. Second Round		N/A	
		<input checked="" type="checkbox"/> Rapid Response		4,587,210	
	4. Please provide the breakdown of CERF funds by type of partner	4.1 Direct UN agencies/IOM implementation		3,921,177.53	
		4.2 Funds forwarded to NGOs for implementation		543,731.33	
		4.3 Funds forwarded to government partners		122,301.14	
4.4 TOTAL			4,587,210		

¹ = EUR 1,500,000

² = EUR 1,000,000

II. Summary of Beneficiaries per Emergency

Drought		
Total number of individuals affected by the crisis	Individuals	97,500
Total number of individuals reached with CERF funding	Female	31,709
	Male	24,587
	Total individuals (Female and male)	56,296
	Of total, children <u>under</u> 5:	9,102

Flooding		
Total number of individuals affected by the crisis	Individuals	88,825
Total number of individuals reached with CERF funding	Female	21,333
	Male	20,497
	Total individuals (Female and male)	41,830
	Of total, children <u>under</u> 5:	6,274

III. Geographical Areas of Implementation

DROUGHT							
Municipality	Department	Wash	Nutrition	Protection	Agriculture	Health	Food
Huacareta	Chuquisaca	yes	Yes	Yes	Yes	Yes	Yes
Huacaya	Chuquisaca	Yes	Yes	Yes	Yes	Yes	Yes
Machareti	Chuquisaca	Yes	Yes	Yes	Yes	Yes	Yes
Villa Vaca Guzmán	Chuquisaca				Yes		Yes
Muyupampa	Chuquisaca		Yes	Yes		Yes	
Camiri	Santa Cruz			Yes	Yes	Yes	Yes
Choreti	Santa Cruz			Yes			
Charagua	Santa Cruz		Yes		Yes	Yes	Yes
Boyuibe	Santa Cruz		Yes	Yes	Yes	Yes	Yes
Cuevo	Santa Cruz		Yes	Yes	Yes	Yes	Yes
Lagunillas	Santa Cruz			Yes	Yes	Yes	Yes
Gutierrez	Santa Cruz		Yes	Yes	Yes	Yes	Yes
Villamontes	Tarija		Yes		Yes	Yes	Yes
Entre Ríos	Tarija		Yes		Yes	Yes	
Yacuiba	Tarija				Yes	Yes	Yes

FLOODING									
Municipality	Department	Wash	Nutrition	Education	Protection	Agriculture	Health	Food	Shelter
Apolo	La Paz					Yes			
Ixiamas	La Paz					Yes		Yes	
Charazani	La Paz					Yes			
La Paz	La Paz	Yes		Yes	Yes		Yes	Yes	Yes
La Asunta	La Paz								Yes
Palos Blancos	La Paz					Yes			
San Buenaventura/ takanas	La Paz			Yes	Yes		Yes	Yes	
Chipayas	Oruro		Yes	Yes					
Omereque	Cochabamba							Yes	
Colomi	Cochabamba							Yes	Yes
Villa Tunari	Cochabamba	Yes	Yes	Yes	Yes		Yes	Yes	Yes
Puerto Villarroel	Cochabamba		Yes	Yes				Yes	
Chimore/Yuracarés	Cochabamba	Yes	Yes	Yes				Yes	
Quillacollo	Cochabamba	Yes		Yes	Yes	Yes	Yes		
Vinto	Cochabamba				Yes		Yes		
San Ignacio de Moxos/Mojenos	Beni	Yes	Yes	Yes	Yes				
Riberalta	Beni		Yes		Yes		Yes	Yes	
Rurrenabaque	Beni	Yes		Yes	Yes	Yes	Yes	Yes	Yes
Reyes	Beni	Yes			Yes	Yes	Yes	Yes	Yes
San Borja	Beni				Yes		Yes	Yes	
San Ignacio - (TIMI& TIM- TIPNIS=	Beni				Yes		Yes	Yes	
Santa Ana	Beni							Yes	
Santa Rosa	Beni						Yes	Yes	
Trinidad	Beni				Yes				
El Torno	Santa Cruz				Yes				
El Puente	Santa Cruz				Yes				
Fernandez Alonso	Santa Cruz							Yes	
San Julián	Santa Cruz						Yes	Yes	
Cobija	Pando				Yes		Yes		Yes
San Lorenzo	Pando							Yes	
Villanueva	Pando		Yes					Yes	
Gonzalo Moreno	Pando		Yes					Yes	Yes

IV. Process and Consultation Summary

- I) Was the CERF report discussed in the Humanitarian and/or UN Country Team and by cluster/sector coordinators?
YES NO

Remarks:

Advances on the implementation of CERF funds were reported during the response phase with the Food, Health, Shelter, Education, Protection sectors and also a preliminary report was shared with the local authorities and the Ministry of Rural Development and Lands. The final report has not yet been shared with the governmental cluster coordinators, however, during regular WASH cluster meetings there have been extensive time to review the lessons learned and experiences obtained during the response, through a presentation conducted by UNICEF and involucrated actors. Similar actions were taken in the Education Cluster and other clusters were United Nations Emergency Technical Teams (UNETT) is co-leading or participating. Additionally, government actors were informed extensively and involved before, during and after the response implemented with this CERF funding.

- II) Was the final CERF report shared for review with in-country stakeholders (i.e. the CERF recipient agencies, cluster/sector coordinators and members and relevant government counterparts)?
YES NO

This report is the result of consultations and joint work with technical/sectoral counterparts from the Government, intermediate reports have also been shared with the government, in order to coordinate some activities and to share information about the progress of the activities.

The report was also elaborated based on the final reports sent by the Departmental Health Services (SEDES) Santa Cruz, Pando, La Paz, Cochabamba y Beni and also with the information compiled by hired consultants and field visits. The results of the food sector have been shared with Government authorities of the Civil Defence and the Ministry of Rural Development and Land.

The final report will be shared officially with the head of the Civil Defence, as soon as the document is finalised and translated. This could take a few extra days and funds (i.e. probably after 15 March). Therefore, the document will be shared with the Government, but this is an ongoing task by the time this report is submitted.

V. ANALYSIS - DROUGHT

1. The humanitarian context

CERF implementation was made in a context of critical and acute human suffering for the affected families in the Chaco region. The Chaco, which comprises areas in the departments of Santa Cruz, Tarija, Chuquisaca has an extension of 128,000 km², and a population of 370,000 people. For the third consecutive year, a 32 to 71 per cent deficiency of precipitation had caused considerable damage to agricultural production and water supply (for human and animal consumption). This situation affected the lives of several communities, which faced food insecurity as well as health, nutrition and education problems. The need for water forced families to leave their communities and to temporarily migrate to regions where water distribution was available.

An initial damage assessment performed by the Government, with support from UN agencies and NGOs in May 2010, revealed the first consequences of the drought. Approximately 19,500 families were already facing some sort of shortage of water and food, with a potential of affecting health and nutrition standards, especially among children.

A rapid assessment carried out by WFP was presented to the HCT and government actors in September 2010. The assessment confirmed the humanitarian impact of drought, particularly in relation to food security, nutrition, agriculture, WASH and health sectors. The particularities of drought in the Chaco region, turned into a slow and increased affect it had on the families during a relatively extended period. Additionally, the lack of a clear understanding of potential local, departmental and national response actions, impeded the precise identification of priorities and needs, which were only recognized once the results of the WFP rapid assessment was released and the requests for humanitarian aid from affected municipalities and departments were made. As verified by the Government and WFP, the most critical consequence of the drought was the deterioration of the nutritional situation of children in El Chaco. The results of the WFP EFSA of September 2010 revealed an acute malnutrition prevalence of children under 5 years (-2SD) which reached 12.2 per cent. The National Food and Nutrition Council (NFNC) confirmed - from other sources - that the acute malnutrition situation of children under 2 years (2SD) in El Chaco has increased in seven of 16 municipalities.

Following the results of this rapid assessment, two sectors were prioritized, namely water supply and small children's nutrition (children younger than 5 years old).

Even though the number of health posts, health centres and hospitals were adequate in terms of population coverage, the health sector was also prioritized, mainly because of population dispersion in the area, poor road condition and scarce transportation to connect remote communities, which impeded access to healthcare facilities.

The United Nations Emergency Technical Teams (UNETT) decided to apply for CERF funding, together with government, especially Vice ministry of Civil Defence (VIDECI), cluster leaders and in close coordination with the Guaraní Peoples Assembly (APG), the main indigenous representative organization in the Chaco region.

Once the CERF funding was approved, WASH, Food, Protection and Agriculture sectoral working groups conducted specific field missions that confirmed and specified the humanitarian context. i.e. in the case of the WASH sector, field missions were carried out by the cluster leader and co-leader (UNICEF) together with various NGOs with presence and activities in the affected municipalities in order to formulate the project in a jointly manner.

2. Provide brief overview of CERF's role in the country

CERF turned out to be one of the most important resources for the UN agencies and the Government to respond to emergencies. It provides the chance to access immediate response resources while other

funds are being mobilised. Moreover, due to its requirements, it encourages an integral and coordinated response from the UN agencies in collaboration with the Government.

The possibility to complement CERF with other sources in order to fill the gap between CERF funds and the total project needs is closely related to the impossibility of generating a flash appeal. There were two reasons why the development of a flash appeal was not been possible during the last years. The first one was because of the government's reluctance to allow the HCT to develop a flash appeal. Even if the Government would accept this option, Bolivia's emergency conditions are mainly related to disasters associated with a variety of disperse, highly recurrent hazards, that slowly and repeatedly undermine the national capacity to respond. Donors do not easily perceive generating slow onset emergencies and it is highly possible that under such conditions, a flash appeal would not be successfully funded.

Nevertheless, CERF had been of special importance in leveraging some additional funding. UN agencies, INGOs and the Red Cross have done some significant work to complement the national capacities and CERF funds, firstly with their own resources and then with some bilateral sector oriented support.

Another important contribution of CERF to the country was the establishment of sectoral working groups in Bolivia. This process has been key for the enhancement of coordination with governmental and non-governmental actors in terms of emergency response and preparation. The working groups were crucial in the decision making process related to the call for external funding (e.g. CERF). In that sense, CERF has become an important incentive for the strengthening of such mechanisms. During both emergencies in 2011, coordination mechanisms were operationalised at the time of information gathering (formulation of Situation Reports), rapid assessments, coordination with the Government and during important decision-making processes.

The cluster approach is currently reflected in the Government response (mostly at the national and departmental levels and in some cases at municipal level), and within the HCT and United Nations Emergency Technical Teams (UNETT), which enhanced coordination substantially.

The WASH, Education, Child Protection and Food Security (subgroup Nutrition) clusters met on a regular basis in order to analyse and complement the information in each sector and, in some cases, to implement rapid field assessments. Once sectoral working groups verified and complemented the information, a CERF proposal was developed in coordination with cluster leaders, National Ministries, UN Agencies and cluster members. The proposal was included in the final proposal developed by United Nations Emergency Technical Teams (UNETT) with the support of OCHA.

3. What was accomplished with CERF funding

As stated below, the main achievements of CERF funding for each sector are related to positive concrete changes in the humanitarian gap identified in the projects. Even though it was not possible to show the direct impact of every CERF project, especially in the case of nutrition and health, where a specific assessment would be needed to establish the exact measure in which the projects impacted an outcome level. It is definitely possible to confirm that the general objective of saving lives and reducing people's suffering has been successfully achieved. Without this financial tool, a critical humanitarian situation with special impact on children and women would still be pending, and some inadequate people's coping strategies would have left a negative print on the communities involved.

WASH AND NUTRITION

In the WASH sector, 1,779 families (99 per cent) were given hygiene kits, 3,131 with 20 litre jerry cans. Additionally, 6,000 children (100 per cent) received supplementary food. This assistance allowed 3,131 families (44 per cent) to have safe water and the supplementary food for children younger than 5 years.

The response to the drought crisis in the Chaco region improved the humanitarian situation of affected communities. This was evidenced during monitoring activities after the intervention. For instance, after an initial assessment, it became clear that families were using supplies in an adequate way. In that context, it

was evident that additional hygiene promotion activities during the distribution of supplies were key when it comes to obtaining adequate results and improved impacts.

The response to the flooding indirectly strengthened Municipal capacities in order to improve their preparedness for future events. This is a relevant outcome considering the frequency of disasters in Bolivia.

FOOD

The food sector response was closely coordinated with the Food/Nutrition Sector Group. WFP, UNICEF, WHO/PAHO and World Vision (WV) implemented nutrition educational trainings among affected communities region to accompany the complementary feeding process. WFP, Acción Contra el Hambre (ACH), UNICEF and COOPI implemented a joint food and nutrition assessment to determine the situation. WFP and UNICEF distributed Fortified Complementary food for children under 2 years (Nutribebe). More than 6,000 pregnant and lactating women were assisted with complementary nutritional supplies.

CERF allowed the UN system to jointly implement an integrated nutritional educational campaign that trained more than 600 staff of the health centres and more than 1,200 mothers. Several training sessions implemented along with the Government were carried out throughout the region. Governmental methodologies, tools and materials were used in these trainings.

Simultaneously, WFP and UNICEF distributed fortified complementary food for (i) children 6 to 23 months, using Governmental official product Nutribebe; and (ii) Fortified Corn-Soya-Blend (CSB) and fortified vegetable oil for children 2 to 6 years and lactating and pregnant women.

Integrated intervention with CERF funds allowed the reduction of acute malnutrition prevalence among children under 5 years (-2SD) from up to 12.2 per cent to normal levels. According to post-intervention assessment in April 2011, the wasting levels showed a prevalence of 1.5 per cent. In addition, children's mortality rate remained at normal levels. The intervention prevented its increase.

WFP and the NGO Acción contra el Hambre (ACH) implemented a joint ex-post disaster assessment to evaluate the nutritional and food security situation. Both agencies combined two methodologies (SMART of ACH and the EFSA of WFP) to collect anthropometric, anaemia and food security information of a representative sample of households. UNICEF and COOPI supported the assessment.

On the other hand, food-for-work (FFW) activities allowed the incorporation of an important added value to the food assistance intervention. Families could stay in their communities to construct and protect their livelihoods and social assets. Irrigation channels, drinking water systems, latrines, water reservoirs could be constructed. Community productive land could be prepared for planting or cattle raising, trees could be nursed for forestation, and roads could be improved.

HEALTH

Fund implementation was conducted in coordination with the Ministry of Health and Sports (MSD), the Departmental Health Services (SEDES) and the Decentralized Technical Cooperation of PAHO, the Guarani People's Assembly (PGA). PAHO also worked with the Epidemiology and Disaster Program in 13 affected municipalities of the Chaco.

Because of the risk of non-safe water consumption in drought-affected communities, WHO performed a sanitary risk assessment. An institutional and technical analysis related to surveillance and control of drinking water was performed. A proposal to create a "System of Water Quality Surveillance in relation to human consumption" and Conclusions/Recommendations was shared with the Governorates, municipalities and the cooperation.

An immunization coverage diagnosis at health centres in the affected municipalities, determined the existence of a low coverage and the urgent need for attention. In addition, a database was developed as a tool for information management on health care institutions.

Among the strategic alliances made by WHO, there was the coordination with “Acción Contra el Hambre”, in order to carry out a nutritional survey with the SMART methodology. Participants in this survey were ACH, WFP, UNICEF, COOPI, The Governor of Santa Cruz and SEDES Santa Cruz.

Health personnel were able to prioritize health care services among most vulnerable affected groups, namely children and pregnant women. Moreover, they recognized, the importance of a health emergency operations centres in coordination with the municipality and social actors, prioritising specific actions such as epidemic control, drinking water quality controls. A special reserve was made for those purposes in the Municipal Operative Annual Budget Programmes.

Besides the scheduled activities, CERF funds allowed the arrangement of Health Emergency Operations Centres at the municipal level, with the participation of municipal officers, health services staff and community leaders.

Even though it is not possible to perform a post-intervention detailed assessment with CERF funds, it can be stated that municipalities acquired new capacities in the trainings implemented with CERF funding support.

AGRICULTURE

Productive capacity in affected areas was restored and the livestock mortality reduced considerably in order to prevent food insecurity among vulnerable populations in the Chaco region as affected families recovered successfully from drought:

- 2,400 families affected by drought recovered their basic capacity for staple food production.
- The beneficiaries had access to a higher availability of innocuous, parasite and pest free grains as a result of the distribution of 1,770 silos, 20 communal silos and 1,750 familiar silos.
- Nutrients were provided to livestock, which meant the distribution of 60 tons of mineral salt, and protecting animals from diseases. Economic losses were significantly reduced.
- 75.8 tons of beans were successfully distributed to beneficiaries. Complementary, 70 kilograms of vegetable seeds and seven kits of agricultural tools were distributed for the rehabilitation of domestic green houses.

HEALTH

Capacities at the community level were strengthened in order to attend to high-risk pregnancies including health promoters, midwives, health service staff (nursing auxiliaries of health services), female members of the municipality and female leaders.

Information and social communication was provided to improve the health of the affected population. Priority was given to vulnerable groups (pregnant women, children and the elderly).

Health centres were provided with different emergency kits (dignity kit, 2A kit, 2B kit, 8 kit, the basic assistance kit and the social control kit) in order to prevent obstetrics risks and to provide safe deliveries.

The achievement of such actions was the support to reduction of maternal and newborn mortality and morbidity rates in the affected municipalities, increasing health system personnel’s response capacity to provide life saving care by building up adequate skills for health staff and by providing appropriate drugs and equipment.

4. An analysis of the added value of CERF to the humanitarian response

a) Did CERF funds lead to a fast delivery of assistance to beneficiaries? If so how?

YES NO

Yes. Even though, and mostly for political reasons, there was a need to reach an agreement with the Government prior to the submission of CERF request and also in order to ease the implementation of the projects, all of which represented an obstacle for a timely response, CERF funds allowed the means to rapidly and effectively attend the affected families. UN agencies, sectoral working group

members as well as the HCT were able to purchase and distribute emergency supplies in a timely manner, which simplified the process.

b) Did CERF funds help respond to time critical needs?

YES NO

Yes, once the RC reached an official approval, the implementing agencies could respond relatively quickly to the needs of the affected families. Along the process, the Country Team learned the importance of pre-positioning certain supplies mostly because their purchase takes more time than foreseen and also because some needed to be imported or produced in the country (kits and packages).

Fortunately, in this particular case acute children's malnutrition could be reduced from critical to normal levels. Children's mortality was prevented and safe water was successfully provided. Health and protection issues were also attended.

c) Did CERF funds result in other funds being mobilized?

YES NO

We are aware of the need to design and implement a humanitarian country team strategy to better integrate UN and non-UN actors to improve the mobilization and execution of other emergency funds. Nevertheless, it is worth mentioning that additional funds from the Department of Humanitarian Aid of the European Commission have been mobilized by FAO and some INGOs. These funds (Euros 1 million) for the same 13 municipalities prioritised in the Emergency Declaratory Resolution, were used to complement the activities initiated by CERF under a risk reduction management approach to minimize the effects of future adverse climatic events. As a result, a balance between life-savings interventions funded by CERF and other midterm actions implemented by FAO, ACH and COOPI was achieved, maximizing their impact particularly in the WASH and agriculture sectors.

In the case of UNICEF, WASH working group's counterparts were able to complete the agency's initial projects and to mobilize additional funds.

WFP complemented immediate response projects with resources from its project PRRO 108360.

INGOs such as World Vision, established programmes in several municipalities of the Chaco region financed with their own resources, while others contributed to the intervention through DIPECHO Projects.

d) Did CERF improve coordination amongst the humanitarian community?

YES NO

Yes. As it was stated in the second paragraph, sectoral working groups held frequent meetings, under the leadership of sectoral Ministries (e.g. Education Ministry), in order to work in a coordinated manner. This approach resulted in an improved coordination and in better results in terms of joint humanitarian response. Such approach needs to be replicated at departmental and municipal levels.

Furthermore and mainly because of CERF funds characteristics and requirements, an integrated intervention among the UN agencies, the Government and some NGOs was possible. In that scenario, the Government, UN agencies, and NGOs at working sectoral groups jointly decided response strategies, from the design through the implementation phase. Such process strengthens an integral and coordinated approach.

ANNEX I. INDIVIDUAL PROJECT RESULTS BY AGENCY - DROUGHT

UNICEF - WASH						
CERF PROJECT NUMBER	10-CEF-067-A	Total Project Budget	\$2,390,690	Beneficiaries		Gender Equity
				Targeted	Reached	
PROJECT TITLE	Safe water for rural communities and families affected by drought	Total Funding Received for Project	\$ 424,329	Individuals	9,000	Children and families located in three municipalities of El Chaco in Chuquisaca. Women, girls, boys and men benefited equally.
				Female	4,500	
STATUS OF CERF GRANT	Concluded	Amount disbursed from CERF	\$ 424,329	Male	4,500	
				Total individuals (Female and male)	9,000	
				Of total, children <u>under 5</u>	1,800	
				TOTAL	9,000	15,655
OBJECTIVES AS STATED IN FINAL CERF PROPOSAL		ACTUAL OUTCOMES				MONITORING AND EVALUATION MECHANISMS

To provide safe water in quantity (15 litres/person/day) and quality, for approximately 1,800 rural families in three most affected municipalities of El Chaco-Chuquisaqueño: Huacaya, Machareti and Huacareta, through coordinated work with national, departmental, and local authorities (municipalities and association of municipalities), the Assembly of the Guarani People (APG) and WASH cluster NGOs.

At least, 1,800 families and children have their rights for minimal amounts of safe water during the emergency met according to the Sphere Standards.

- 20 wells and pumps
- 26 water tanks 5,000 litres
- Tankers and trucking rent

1800 families are provided with adequate hygiene supplies. Communities are trained in the O&M of the water systems and supplies (filters).

WASH intervention is coordinated with national, departmental, local governments and APG as well as with cluster partners in the area

1,575 families (88 per cent) had safe water in 31 most affected communities of the municipalities of Huacareta, Huacaya and Machareti.

Wells and pumps:

- Huacareta: Three communities, 105 families
- Huacaya: Five communities, 83 families
- Machareti: Eight communities, 524 families
- **Total: Sixteen communities, 712 families**

Water tanks 5.000 litres:

- Huacareta: Three communities, 15 families
- Huacaya: Six communities, 162 families
- Machareti: Fifteen communities, 686 families
- **Total: Twenty-four communities, 863 families**

Tankers and trucking rent:

- According to the situation at the moment of implementation, the municipalities requested to spend this amount in the wells and pumps budget line

1,779 families (99 per cent) in the three most affected municipalities of Chuquisaca were attended with hygiene supplies

Supplies provided

	Water containers 20 litres		Water filters		Family hygiene kits	
	Number	Number Family Beneficiaries	Number	Number Family Beneficiaries	Number	Number Family Beneficiaries
Huacareta	1000	486	250	237	250	242
Huacaya	1800	711	450	435	450	450
Machareti	4400	1934	1100	1047	1100	1087
TOTAL	7200	3131	1800	1719	1800	1779

Training in O&M (operation and maintenance) water systems:

- Huacareta: Six communities, 248 persons trained
- Huacaya: Five communities, 94 persons trained
- Machareti: Eight communities, 151 persons trained
- **Total: Nineteen communities, 493 persons trained**

Training in use of supplies:

- Huacareta: Eleven communities, 486 persons trained
- Huacaya: Twenty one communities, 711 persons trained
- Machareti: Forty-three communities, 1934 persons trained
- **Total: 75 communities, 3131 persons trained**

The WASH intervention was coordinated with the Ministry of Water and Environment (national level) plus the Unit of WASH and Environment in the Government of Chuquisaca, and the municipal governments of Huacareta, Huacaya and Machareti. The local association of the Guarani People was also informed and approved the intervention.

Base line data on water, sanitation and hygiene practices in the region facilitated the measurement of the project impact. Regular field visits were made to make adjustments to the project during the implementation.

UNICEF - NUTRITION

CERF PROJECT NUMBER	10-CEF-067-B	Total Project Budget	\$4,000,000	Beneficiaries			Gender Equity
				Targeted	Reached		
PROJECT TITLE	To reduce the impact of drought on the nutritional status of children	Total Funding Received for Project	\$ 153,545	Individuals	6,000	8,502	Children younger than 5 years affected by the drought in 10 municipalities of the Chaco area. Boys and girls benefited equally.
				Female	3,000	4,251	
STATUS OF CERF GRANT	Concluded	Amount disbursed from CERF	\$ 153,545	Male	3,000	4,251	
				Total individuals (Female and male)	6,000	8,502	
				Of total, children under 5	6,000	7,477	
				TOTAL	6,000	8,502	
OBJECTIVES AS STATED IN FINAL CERF PROPOSAL		ACTUAL OUTCOMES				MONITORING AND EVALUATION MECHANISMS	
<p>To reduce the impact of drought on the nutritional status of children under 2 years old.</p> <p>To reduce morbidity and mortality of severe malnutrition</p> <ul style="list-style-type: none"> ▪ To ensure the food and nutritional of 6,000 boys and girls less than two years of age facing an unsafe food and nutrition situation. ▪ To get local promoters to develop skills for the correct preparation of Nutribebé and CSB flour, and to programme immediate activities at community level to support the distribution of the previously mentioned products 		<ul style="list-style-type: none"> ▪ 6,000 boys and girls (100 per cent) received two monthly bags of Nutribebé for a period of three months. ▪ 14 sachets of PumpyNut were delivered to 1,477 boys and girls with some degree of malnutrition, without complications, for ambulatory treatment. ▪ Seven health facilities were prioritised because of their large number of children monitored in their application of the IMCI Nut as therapeutic food. ▪ 100 promoters (male and female) (100 per cent) received training in a workshop on basic children nutrition and food, acquire skills to replicate this knowledge placing emphasis on the correct preparation and consumption of Nutribebé and CSB. ▪ This workshop was replicated 37 times at community level, with the participation of 925 parents who developed skills for the correct preparation of Nutribebé and CSB flour. 				<p>The project implementation was coordinated with the Ministry of Health through the National Secretary for Food and Nutrition (CT CONAN) and the Unit of Nutrition, at departmental level through departmental Health Services and at municipal level with the Food and Nutrition Commissions (COMANs) community organizations. The nutritional monitoring was held through the community organizations and other partners like ACOBOL. This commission made follow up of activities and supervision of results through monthly meetings.</p> <p>The distribution of supplementary food was done through the established health networks, which distribute monthly two bags of Nutribebé (of 750 grams each) for each child between 6 and 23 months. The foreseen daily dose is 25 grams/day two times. The information was written in the notebook number four of health attention to children, the infant health ID and the family booklet in the municipalities where SAFCI was implemented.</p>	

WFP - FOOD

CERF PROJECT NUMBER	10-WFP-081	Total Project Budget	\$ 846,070	Beneficiaries			Gender Equity
				Targeted	Reached		
PROJECT TITLE	Targeted Food Assistance to Drought Affected Families, children and mothers in El Chaco Region	Total Funding Received for Project	\$ 846,070	Individuals	44,500	56,296	34 per cent of the leadership positions of the distribution committees were occupied by women 53 per cent of the FFW participants were women Most of the total beneficiaries were women.
				Female	25,145	31,709	
				Male	19,355	24,587	
				Total individuals (Female and male)	44,500	56,296	
				Of total, children under 5	7,195	9,102	
STATUS OF CERF GRANT	Completed	Amount disbursed from CERF	\$ 846,070	TOTAL	44,500	56,296	
OBJECTIVES AS STATED IN FINAL CERF PROPOSAL		ACTUAL OUTCOMES				Monitoring and Evaluation Mechanisms	
<p>To prevent child mortality and reduce acute malnutrition caused by the drought</p> <p>To protect livelihoods and enhance self-reliance</p>		<p>Reduction of the acute malnutrition</p> <ul style="list-style-type: none"> ▪ Nutritional education for more than 600 staff of the health centres and more than 1,200 mothers ▪ Distribution of 183 metric tonnes of fortified complementary food to 10,938 children 2 to 6 years and 6,118 pregnant and lactating mothers ▪ Reduction of the acute malnutrition of children younger than 5 years (-2SD) from 12,2 to 1,5 ▪ Prevention of children mortality <p>Implementation of food-for-work (FFW) activities</p> <ul style="list-style-type: none"> ▪ Distribution of 583 metric tons of food to 7,848 participants (39,240 beneficiaries)³13 municipalities with 244 communities assisted ▪ 182 projects implemented ▪ Some outputs of the FFW activities achieved: <ul style="list-style-type: none"> ○ 17 drinking water systems constructed ○ 157 latrines constructed ○ 50 primary schools improved ○ 54 km of roads improved ○ 2,000 m of irrigation channels constructed ○ 13 water ponds constructed ○ 1,948 hectares of land prepared/protected ○ 4,000 tree plants produced 				<p>WFP/Government monitoring system</p> <p>Emergency Food Security Assessment (EFSA) pre-crisis (October 2010) and EFSA/SMART assessments post-crisis (April 2011)</p> <p>Health centres information</p> <p>WFP/Government monitoring system</p>	

³The expected food quantity was affected , mainly because at the end of December 2010, the Government decided to increase the fuel, price by 73 per cent. Even though the measure was lifted it immediately impacted on most of the prices, and affected the procurement process.

FAO - AGRICULTURE

CERF PROJECT NUMBER	10- FAO-051	Total Project Budget	\$ 349 466	Beneficiaries			Targeted	Reached	Gender Equity
				Individuals	7500	11200			
PROJECT TITLE	Emergency Assistance for drought affected communities in Chaco	Total Funding Received for Project	\$ 349 466	Female	3825	5936	7500	11200	<p>Identified affected families were successfully reached. Intervention with active beneficiary participation was possible in Santa Cruz (six municipalities), Chuquisaca (four municipalities and Tarija (one municipality). Supply distribution was evenly performed to equally benefit all affected families. The project delegated responsibility regarding nutritional issues to women, through mother's clubs (clubs de madres) and female nutrition promotion leaders</p>
				Male	3675	5264			
STATUS OF CERF GRANT	Completed	Amount disbursed from CERF	\$ 349 466	Total individuals (Female and male)	7500	11200	8625	12619	
				Of total, children under 5	1125	1419			
				TOTAL	8625	12619			
OBJECTIVES AS STATED IN FINAL CERF PROPOSAL		ACTUAL OUTCOMES						MONITORING AND EVALUATION MECHANISMS	
<p>To mitigate the dramatic negative effects of the drought in the Bolivian Chaco, that produces food insecurity and an increased health risk for subsistence farmers and small livestock breeders</p> <p>To mitigate the negative effects of drought that produces food insecurity to small farmers in the Bolivian Chaco.</p> <p>Reduce the mortality of livestock in small breeders impacted by droughts in order to ensure food supplies and generate incomes.</p>		<p><u>Componente Agrícola:</u></p> <ul style="list-style-type: none"> 70.8 tons of vean sedes and 40 kg of vegetables seeds distributed in Charagua, Boyuibe, Camiri, Cuevo, Gutiérrez y Lagunillas (Santa Cruz), V. Vaca Guzmán, Huacareta, Machareti y Huacaya (Chuquisaca) and Entre ríos in Tarija. It was necessary to explain at the beginning of the project, that it was originally planned to distribute maize seeds, but at the time of the implementation and during the market research, maize seeds were not available. In coordination with the counterparts and beneficiaries, the second election of crop, was used for the implementation. 1,800 silos have been distributed in the mentioned municipalities (More than 260 per cent executed compared with the initial number of silos, the reason is that) 1,750 hectares were been planted to benefit to 2800 families that have reported serious damages in their livelihoods. Seven kits of agricultural tools were distributed to the responsible institutions and families that had implemented the green houses. <p><u>Livestock:</u></p> <ul style="list-style-type: none"> 60 tons of mineral salt distributed to 1892 families of small breeders permitted to rehabilitate 11000 animals. (300 per cent of progress more than the planned in the proposal). 						<p>Monthly reports were used to show the progress of the activities.</p> <p>The delivery of supplies was supported with documentation signed by each beneficiary.</p> <p>A detailed systematisation of the results was made in every municipality.</p> <p>Several follow up visits on field were made with the participation of Government and local authorities, social organisations and beneficiary families.</p> <p>Areas that have been sowed with the seeds distributed by the project were quantified to guarantee the correct use and application in every intervention area.</p>	

WHO - HEALTH

CERF PROJECT NUMBER	10-WHO-078	Total Project Budget	\$ 230,191	Beneficiaries			Gender Equity
				Targeted	Reached		
PROJECT TITLE	Integral Health sector response to drought in EL CHACO	Total Funding Received for Project	\$ 141,617	Individuals	21.898	25,528	Women and children benefited the most by the project, as are the people who attended more health services. Men visited the health services in less proportion, for different working reasons mainly.
				Female	7.459	9,257	
STATUS OF CERF GRANT	Completed	Amount disbursed from CERF	\$ 141,617	Male	9.499	10,151	
				Total individuals (Female and male)	16.958	19,120	
				Of total, children <u>under</u> 5	4.940	6,120	
				TOTAL	21.898	25,525	
OBJECTIVES AS STATED IN FINAL CERF PROPOSAL		ACTUAL OUTCOMES				MONITORING AND EVALUATION MECHANISMS	
<p>To restore the previous health and nutrition situation and monitor the nutritional status of the drought-affected families.</p> <p>Contribute to the reduction of maternal and newborn mortality and morbidity rates among the affected populations in the affected Municipalities by increasing the response capacity of health service providers to save lives through skilled medical staff and appropriate drugs and equipment.</p> <ul style="list-style-type: none"> ▪ Control of the hospitalized severe acute malnourished children under five years. ▪ Disease care and health promotion for affected populations and families located in camps. ▪ Provision of medicines and supplies. ▪ Reinforcement of vaccine-preventable diseases surveillance. ▪ Epidemiological and nutritional surveillance. ▪ Strengthening of the health networks for medical care of the affected people (populations). ▪ Reinforcement of the surveillance systems and quality control of the water and of risk factors for affected populations. ▪ Strengthening of the departmental COES of health and situation rooms (centres of liaison) <ul style="list-style-type: none"> ▪ Control of anaemia in pregnant women and infants and children under 5 years. 		<ul style="list-style-type: none"> ▪ The different activities mentioned in the outcome column, reached the established objectives in the CERF proposal. ▪ Control of the hospitalized severe acute malnourished children under 5 years, in the specialized health centres (Camiri, Villamontes, Yacuiba). ▪ It was distributed in these three hospitals, VMC (complex therapeutic), 10 cans per hospital. And ZINC 1,000 tablets. ▪ Shelters or camps were not implemented significantly. ▪ Provision of medicines and supplies. Delivery of three basic kits to care for 1,000 people for three months to the SEDES of Tarija, Chuquisaca and Santa Cruz and these SEDES sent these kits to the health services in the affected municipalities. ▪ A survey of data was performed to see the vaccination coverage in the different health services in the affected municipalities. ▪ A monitoring of nutritional epidemiological surveillance was conducted at the health services to establish the involvement of the health of the population by drought. Paediatric scales were delivered to the health services (15) and Stadiometers (156). The different health facilities of the affected municipalities were strengthened with supplies and medicines provided by the SEDES, with information material (Hygiene Habits (1500) and Risk Factors in shelters (1500). Stethoscopes (25) and stethoscopes (25) were provided. ▪ Reinforcement of the surveillance systems and quality control of the water and of risk factors for affected populations. ▪ Diagnoses of the different systems of water supply (private cooperatives or municipal) were performed in the municipalities affected by the drought and some major communities. Performing a quality control for drinking water and disinfection methods of cooperatives. ▪ Laptop computers were delivered for the water analysis to the SEDES offices in Tarija, the Camairi network health, the Chuquisaca SEDES, The Ministry of Health. All the necessary reagents for the analysis was delivered in the same way. In addition, 6,500 bottles of purification tablets were also delivered to the Santa Cruz, Tarija and Chuquisaca SEDES. ▪ Strengthening of the departmental COES of health and situation rooms (centres of liaison). ▪ Personnel of network managements were trained, health services and municipalities in the implementation of the Emergency Operations Centre health in the 13 municipalities intervened. ▪ Agers and supplies were purchased for the determination of anaemia in children, infants and pregnant women, conducted in a Guarani community in the Chaco region. 				<p>Monitoring and Evaluation mechanisms were through the PAHO/WHO decentralized technical cooperation in Santa Cruz and Tarija, with the responsible people of disasters of Chuquisaca, Tarija and Santa Cruz, as well with the respective area consultants.</p> <p>Another information resource were these the reports and photographs</p>	

UNFPA - HEALTH

CERF PROJECT NUMBER	10-FPA-048	Total Project Budget	\$ 334,719	Beneficiaries			Targeted	Reached	Gender Equity
				Individuals					
PROJECT TITLE	Integral Health sector response to drought in El Chaco	Total Funding Received for Project	\$ 87,514	Female		7.459	2.580		
				Male		9.499	23.040		
				Total individuals (Female and male)		16.958	25.620		
				Of total, children under 5		4.940	3.600		
				TOTAL		21.898	29.220		
STATUS OF CERF GRANT	Completed	Amount disbursed from CERF	\$ 87,514						
OBJECTIVES AS STATED IN FINAL CERF PROPOSAL		ACTUAL OUTCOMES						Monitoring and Evaluation Mechanisms	
<p>To restore the previous health and nutrition situation and monitor the nutritional status of the drought-affected families.</p> <p>Contribute to the reduction of maternal and newborn mortality and morbidity rates among the affected populations in the affected Municipalities by increasing the response capacity of health service providers to save lives through skilled medical staff and appropriate drugs and equipment.</p> <p>Achieve a reduction in mortality and morbidity rates of the affected population (mainly women of childbearing age, pregnant and breast-feeding, newborns and adolescents)</p> <p>Increase the response capacity of 160 health centres of the Ministry of Health to save lives through skilled medical staff and appropriate drugs and equipment</p> <p>Increase awareness and understanding by affected populations on maternal health risks during emergencies and how to carry out life saving interventions.</p>		<p>Achieve a reduction in mortality and morbidity rates of the affected population:</p> <p>Distributed provision of life saving maternal health supplies: 1798 Dignity kits, six units of kit eight, 190 kits 2-A, and 5 Kits 2-B, 160 Midwife kits, 12 social control kits, 160 kits 1 (masculine condoms) distributed in 13 municipalities. .</p> <p>Increase the response capacity of 160 health centres of the Ministry of Health:</p> <ul style="list-style-type: none"> ▪ Training provided of health personnel on the use of kits and attention of safe delivery. <p>Increase awareness and understanding by affected populations on maternal health risks during emergencies</p> <ul style="list-style-type: none"> ▪ Procured broadcasting through mass media (radio) of bilingual messages referring to life-saving maternal health interventions ▪ Educational material distributed: (99 maternal health brochures maternal, 175 maternal health cards, , 210 ITS/VIH brochures, 188 ITS/VIH cards, 41 copies of the "Plan Nacional de Salud Integral de la adolescencia y juventud") ▪ Implemented crash training of decision-makers to assure life saving measures to reduce maternal morbidity and mortality. 						<p>The monitoring was carried through:</p> <p>The discharge of the delivery of equipments and care were carried out through the presentation of signed receipts or printed digital documents provided by the recipient at each delivery.</p> <p>During the delivery of the equipments, training for the health staff of the concerned areas and social organisations were held.</p>	

V. ANALYSIS - FLOODING AND LANDSLIDE

1. The humanitarian context

In this case, the flooding situation was dissimilar than in previous years. In addition to the affects the flooding had on large rural areas, three major urban communities, La Paz (landslide), Quillacollo and Rurrenabaque were affected. Although, these events were related to a common natural phenomenon, the humanitarian response needed to be adapted to particular and different contexts.

In March 2011, a large-scale landslide affected several areas in the city of La Paz (Callapa, Pampahasi and Kupini), leaving around 1,000 families' homeless and in urgent need to seek shelter in camps and collective centres managed by City Hall and the Central Government as well as in improvised tents and self organized camps. Even though, no human casualties were registered, these shelters did not provide suitable protection or basic services, thus living conditions were deteriorating quickly. The lack of capacity to ensure an adequate flow of relief assistance to those in need of shelter and to those located in temporary shelters, resulted in serious and life threatening consequences.

Additionally, heavy rains caused flooding in four departments of the country (North of La Paz, Cochabamba, Beni and Pando). The flooding affected mainly those communities living on river shores. Rapid rising in water levels forced families to leave their homes and belongings behind. Some isolated indigenous communities were seriously affected, specially in the tropical regions of Cochabamba and Beni, as well as in the North of La Paz. In some cases, travel by river was necessary.

Since river flows continued to advance downstream, WFP and its partners carried out various assessments to newly affected areas during the implementation of the CERF-funded project. The assessment identified the deterioration of the food security situation in newly flooded areas. At the same time, the assessments reported food security recovery in other areas. Thus, the implementation area and the number of beneficiaries had to be extended to other municipalities that were not initially considered in the original project. Also, the number of feeding days were reduced in those areas in which food security was recovered. As a result, resources were relocated to assist the new areas. Due to the reduction of the price of the commodities after the project approval, a larger quantity of food items could be purchased, thus allowing the support to additional families.

It was clear that the extent and impact of the flooding (and landslides) were going beyond the response capacities of municipal, departmental and national governments, as aid support was requested by different public actors. The HCT called a meeting with the participation of UNETT, some NGOs with humanitarian mandate, the Red Cross as well as donors in order to evaluate the situation and decide if CERF funding would be necessary. The decision was taken afterwards by the HCT in coordination with the national government.

2. Provide brief overview of CERF's role in the country

As stated in the previous chapter, during both emergencies suffered in 2011 (drought and floods), CERF has become one of the most important resources for both UN agencies and the Government, supporting the response to emergencies. The fund provides the chance immediately respond while other necessary funding is mobilized.

3. What was accomplished with CERF funding

CERF fund's main accomplishments for the response in each sector are related to positive concrete changes in the humanitarian gap identified in the projects. In this case, and even though it is not possible to show the specific impact of CERF funding in the general objective of saving lives and reducing people's suffering, it is possible to affirm, that the objective was successful and that it had a significant importance in the relief of the critical humanitarian needs faced in La Paz. CERF implementation also brought important lessons for the whole HCT, related to the way organizations and agencies approached urban disasters, and solve political and management challenges when dealing and interacting with different governmental levels in order to support the same population.

The following highlights remark the main accomplishments achieved by sector:

NUTRITION

During the flooding and the so called “mega-landslide” 3,000 small children (98 per cent) received Nutribebe a supplementary foodstuff to strengthen their feeding, while additional 1,477 received ATLU with the same purposes.

WASH – PROTECTION

Some 4,094 out of 4,300 families (97 per cent) received hygiene kits while other 2,744 families out of 3,000 (92 per cent) were assisted with the installation of water filters, providing safe drinking water and maintaining appropriated hygiene standards to avoid child sicknesses.

EDUCATION

At least 4,150 school children (83 per cent) and 145 teachers (97 per cent) received backpacks with educational and school supplies as well as educational kits in order to ensure their adequate return to school.

PROTECTION

In addition, 1,000 children (100 per cent) received psychosocial support from 165 volunteers specifically trained for that purpose and 1,000 families (100 per cent) were sensitized on child rights and protection issues. As a result, effective psychosocial recuperation of children was achieved, especially among those severely affected by the mega-landslide in La Paz.

The response strategy supported the strengthening of Municipalities' disaster preparedness, an important aspect to, considering the frequency of damaging events in the country.

SHELTER

Families and individuals were provided with temporary shelters, kitchen kits, mosquito nets and other NFIs, which allowed to improve their living conditions and to meet their basic needs in the camps. The humanitarian situation was therefore improved and life-threatening elements were efficiently lessened.

FOOD

Thousands of families, whose livelihoods were completely destroyed were assisted with food in order to avoid the adoption of negative coping strategies. Instead of migrating to obtain some income to assure food, these families could stay in their communities and start the recovery process. Some community reconstruction activities could be implemented with food assistance.

On the other hand, children's nourishing (children below 6 years) could be assured in camps set up in landslide-affected areas of the city of La Paz. More than 1,500 families were installed in camps, which included nurseries in which alimentary supplies were provided.

The Government could also be involved in the response, mainly with the provision of transportation of food to the beneficiaries, and carrying out distributions.

HEALTH

Health projects were implemented through Departmental Health Services (SEDES), in close coordination with UNFPA, UNICEF, and WFP. The SEDES assumed the responsibility of providing health care to those families and individuals who lost their homes because of floods and landslide. In addition, the SEDES, with the assistance of a consultant specialised in water and sanitation, performed water quality controls to establish drinking water safety standards. Health Damage Evaluation and Needs Analysis (EDAN) trainings were conducted. In addition, health EOC levels were organized in the affected municipalities. There was a concrete recommendation for the inclusion of a special reserve in the municipalities Annual Budget Programs.

Although the goal was to assist 20,000 people, the project effectively reached more than 35,000 people. In addition to health care, water quality assessments and water distribution benefited entire communities - not only to the affected population.

AGRICULTURE

The intervention was successful as damaged agricultural areas were effectively recovered from floods. Areas, which had been destroyed by floods, are now able to be cultivated. Productivity capacity was restored and livestock mortality was considerably reduced in order to preserve food security and the generation of revenue for peasant families.

CERF definitely improved the humanitarian situation, especially in those areas in which local capacity was exceeded and where there were no other rapid response funds available to assist affected population. Some of the beneficiary communities allocated small funds and human labour as a counterpart.

All expected outcomes were successfully accomplished. Several exceeded initial goals. For instance:

- While the proposal covered productive capacity restoration of approximately 2,108 has, through the establishment of rice, corn and cassava crops, the project was able to restore 3,002 has for traditional crops and forage.
- Restoration of five municipal and school green houses in Cochabamba was considered in the proposal. The project was able to built 10 additional school green houses in Beni.
- Spread infection sources were detected and controlled in Beni and La Paz in close coordination with SENASAG.

In the whole area of intervention, 400 families have introduced to post harvest techniques through the use of small silos to safe seed supply for the next sowing season.

4. An analysis of the added value of CERF to the humanitarian response

a) Did CERF funds lead to a fast delivery of assistance to beneficiaries? If so how?

YES NO

Yes. CERF allowed a prompt assistance delivery to beneficiaries through a coordinated process for the identification, acquisition and transmission of supplies to respond to assessed humanitarian needs.

While a process of consultation with the Vice ministry of Civil Defence was taking place with the aim to facilitate a coordinated humanitarian response, some UN agencies such as WFP and UNICEF began to respond with their own resources. The projects initiated in that way were at that point complemented with CERF funds. Consequently, beneficiaries did not experience interruptions during the food assistance interventions.

b) Did CERF funds help respond to time critical needs?

YES NO

Yes, once implementing agencies received the official approval, they responded as quickly as possible to the needs of affected families. CERF facilitated a prompt respond to time critical needs in a post-disaster context of by providing items and services that could not have been ensured by public authorities.

Many families had to be temporarily evacuated and live in shelters. Those who could stay in their communities had lost most of their food and income sources. Timely food assistance prevented the deterioration of the nutritional conditions and the adoption of negative coping strategies.

CERF funds enabled municipal health services to cover the needs of the injured population in terms of medicines, water purification tablets and other supplies.

c) Did CERF funds result in other funds being mobilized?

YES NO

UN counterparts have been able to accomplish their plans and mobilize other funds. However, for some actors, CERF was the only joint fund mobilized. Other UN agencies, such as WFP were able to mobilize

funds from its Immediate Response Account. An IR-EMOP of almost \$500,000 was approved and implemented while the process of preparation of a CERF proposal was being organized.

Additionally, some aid agencies and NGOs (World Vision, Save the Children, Bolivian Red Cross, and UNICEF) mobilized their own resources as well as donations to cover some health needs.

d) Did CERF improve coordination amongst the humanitarian community?

YES NO

Yes definitely. CERF improved coordination by allowing the harmonization of emergency partner efforts, including NGOs and relevant public authorities.

Furthermore and mainly because of CERF fund characteristics and requirements, an integrated intervention among the UN agencies, the Government and some NGOs was possible. In that scenario, the Government, UN agencies, and NGOs at working sectoral groups jointly decided response strategies, from the design until the implementation phase. Such process strengthens an integral and coordinated approach.

In the case of the Health sector, coordination was enhanced mainly in terms of information and the coordination of actions on the ground, with greater involvement of health staff from SEDES.

The response in La Paz (landslides) was remarkable in terms of coordination, as the Municipal Government of La Paz was able to coordinate with a wide range of humanitarian actors. This coordination was necessary as multiple actors offered aid and initially many citizens were willing to provide supplies at camps. An example of the strong coordination led by the Municipal Government of La Paz was the organization of weekly meetings with all humanitarian actors involved in the response. Important inputs were given for the CERF projects at those meetings.

IV. LESSONS LEARNED

LESSONS LEARNED	SUGGESTION FOR FOLLOW-UP/IMPROVEMENT	RESPONSIBLE
Coordination and Decision making		
The cluster members should know the CERF process in particular the government so that the decision making process is shorter.	Designing a baseline and a damage and emergency scale, for each municipality at high risk, would allow the government to make quick decisions and make feasible a request of a CERF funding.	Civil Defence
In the case of droughts, the decision to submit a proposal takes too long. Even when there is progressive evidence of the deterioration of the humanitarian situation of the affected population, the information about the government response at different levels is not available. This delays the final decision to request rapid response CERF funds. These long processes threatens the lives of the affected people, and force them to adopt negative coping strategies	A protocol in cases of drought should be elaborated and agreed by the UNDMT. Once there is evidence, of humanitarian deterioration and lack of national resources or information about it, to cope with the emergency, the UNETE should start preparing the proposal in coordination with the sector thematic groups.	UNETE and UNDMT
In the Chaco region, the inclusion of non-traditional crop seeds - such as vegetables - as a link between response and encouraging livelihood restoration, was highly valued by the community.	Optimization of rural extension training for rural families led by municipal technicians increases the possibilities for stronger links with local markets.	FAO, Community leaders, school authorities and beneficiaries
The process to establish the CERF intervention areas and the activities that will be implemented	The CERF Proposals must be designed jointly with the counterparts but especially with the government in order to	FAO and MDRyT and local authorities

in this project, have been done jointly with the Contingence Unit of the Ministry of Rural Development and Lands based on a field evaluation. In this manner, the timely execution without changes or delays was guaranteed.	facilitate the implementation of the project and to avoid future obstacles. Socializing the proposal; defining all the activities and prioritizing the intervention areas, must be also considered to guarantee a successful implementation.	
CERF allows a better coordination between the humanitarian actors, systematizing information, avoiding duplication of efforts and resources and providing a better and effective response to the emergency.	Some instances of coordination must be formed through the cluster in order to facilitate de information, systematization and mobilization processes.	FAO and HCT
IOM worked with INGOs partners to coordinate with community leaders to establish selection criteria of beneficiaries and help with a fast and effective distribution. In the area of La Paz, IOM worked directly with the Emergency Operational Centres of the local government to establish the needs of affected communities living in camps. The strategy appears relevant given that geographical zones were broadly affected, encompassing all people living in these areas. The intervention also responded to a wide and multi-sectorial diagnosis.	Consider options to work on public capacities in the field of institutional communication, including capacity-building and participative investigations.	UNETE IOM and shelter working group
Information management		
Delays in obtaining information were observed both at the local and national public level. If such processes would have been faster, a prompter response to design each CERF project could have been possible.	Consider operational mechanisms for public actors to improve access to information, particularly based on complementary networks such as the media.	IOM and shelter working group
Public information should be more promptly shared	Consider options to work on public capacities in the field of disaster information management. Support the work of REDHUM in the task of helping publish HCT information globally.	Implementing agency UNETE /HCT
The lack of detailed information about the affected people (women, children) in Bolivia is an obstacle for a timely and adequate response, especially with the support of CERF funds.	Strengthen emergency operations committees of regional and local level, to collect appropriate information.	UNETE VIDECI, Health Ministry and SEDES
Procurement – supplies – standards		
Each UN agency and the cluster members should preposition enough quantity of humanitarian supplies to attend the affected families in the first week until CERF funds can be disbursed.	We should have a pre-positioned supply list until June according to past emergencies, shared with the cluster and Civil Defence	Civil Defence and cluster leaders
Implement the previous learned lesson at departmental and municipal levels (at least in the most risky municipalities)	The clusters should be replicated at departmental and municipal levels. We should have a working plan for this task	Civil Defence and cluster leaders
Coordination of the technical specificities of humanitarian aid should be constant.	Establish coordination and conflict resolution mechanisms since the beginning of the intervention	Implementing agency
Funding		
The existence of a strong State with financial available resources to cope with small and medium scale disasters, combined with increasingly limited humanitarian funding	Generate some sort of financial incentives to facilitate UN agencies and HCT to explore alternative initiatives to support more autonomous government response.	Donors in general. UNETE and UNDMT

generates an urgent need for the UNDMT to develop alternative solutions. Solutions such as effective advocacy and technical assistance that should allow the government at municipal, departmental and national level to effectively trigger its own internal resources and respond to humanitarian needs, reducing the need of CERF funds.		
Application of municipal rotating funds to manage and replace the basic veterinarian supplies allows the community to respond to some veterinarian diseases and emergency animal health situations.	In projects of livestock rehabilitation, it is possible to implement rotation funds to animal health campaigns, involving some municipalities in the administration of these funds. SENASAG and the Departmental Breeders Association had also participated. So, the veterinarian supplies provided by CERF, should be sustainable in time and in development projects at local level.	FAO in coordination with the municipalities of Ixiamas and Apolo, with the participation of SENASAG and Breeders Association.
The drought presented in the Chaco region should make us think of a long term structural strategy.	Create a working group with specialized technical capabilities and management, led by the government involving different sectors and international or national technical cooperation to find a long-term solution in the Chaco	Ministry of the Presidency and the CONARADE
Technical advises		
Diffusion of new varieties of rice seeds, with high performance had an excellent acceptance from the beneficiaries in North of La Paz and Sur of Beni.	The losses in rice crops and other traditional crops, permitted to disseminate and introduce new seed with high yielding. CERF indirectly allows to begin a process of improving technical production of rice in Beni and La Paz.	FAO coordinated with the affected municipalities.
Accountability and Impact Measurement		
In cases such as floods, where a rapid response is necessary it is not always possible to assess outcomes. For example, for the cases where the emergency can generate the deterioration of the nutritional status, it is necessary to carry out a survey to establish the baseline data and a post disaster assessment to establish the changes with the project implementation	Consider not to propose the achievement of results at an outcome level, but at output level for cases of sudden emergencies with an urgent need to respond.	CERF
For the preparation of a project, in which indigenous people, peasant migrants with different social customs have been identified, it is necessary to make a very close approach for the better identification of their needs.	Approach to indigenous communities in the company of leaders of indigenous organizations in the region, to strengthen the commitment and follow-up actions taken	UNETE VIDECI, Sector Leads and social organizations in the region

WHO - HEALTH

CERF PROJECT NUMBER	11-WHO-030	Total Project Budget	\$ 156,987	Beneficiaries		Targeted	Reached	Gender Equity
				Individuals	20,000	35,000		
PROJECT TITLE	Integrated Health sector response to the floods in Bolivia	Total Funding Received for Project	\$ 117,778	Female	10,000	16,378	Women and children at the end are the most benefited by the project, as are the people who attend more health services. Men attend to the health services in less proportion, for different working reasons mainly.	
				Male	9,000	14,066		
				Total individuals (Female and male)	19,000	30,444		
				Of total, children under 5	1,000	4,556		
STATUS OF CERF GRANT	Concluded	Amount disbursed from CERF	\$ 117,778	TOTAL		20,000	35,000	
				Although the goal was to reach 20,000 people, the project beneficiary population in the end exceeded 35,000 people. Medical care was given not only to the affected population. In addition to issues of water and sanitation (analysis of water sources and water supply) that benefited the entire community.				

OBJECTIVES AS STATED IN FINAL CERF PROPOSAL	ACTUAL OUTCOMES	MONITORING AND EVALUATION MECHANISMS
<p>Protect the health of the affected population, through actions like malnutrition monitoring and control in children less than 2 years, establishing surveillance mechanism in the affected area and regular monitoring of water quality in shelters and communities.</p> <ul style="list-style-type: none"> ▪ Health promotion and environmental health for the control of diseases in affected populations, as well as in families living in shelters and camps. ▪ Monitoring of malnutrition in children under 2 years (weight and height). ▪ Provision of supplies and drugs. ▪ Strengthen the epidemiological surveillance (Diarrhoeas, pneumonias, dermatologic diseases, ▪ Monitoring communicable diseases and vector control (dengue, leptospirosis, malaria) in La Paz, Beni and Cochabamba. (Pando y Santa Cruz). ▪ Psychosocial support to affected people in shelters and camps (La Paz and Cochabamba) ▪ Reinforcement of surveillance and control of water quality for human consumption and provision of supplies ▪ Control measures for sewage disposal. 	<p>The different activities mentioned in the outcome column: reached the established objectives in the CERF proposal.</p> <ul style="list-style-type: none"> ▪ The SEDES performed the attention of affected people in shelters installed in the city of La Paz and also an epidemiological control in the camps. The same activities were carried out in the different affected municipalities by the floods. A training was conducted on hand hygiene habits and risk factors in shelters. ▪ The different health services of the affected municipalities did a monitoring exercise in children under 2 years, controlling weigh and height ▪ Five medical kits were delivered to 1,000 people during three months, to the SEDES of Santa Cruz, Cochabamba Pando, La Paz and Beni to be distributed among the health services in the affected regions. ▪ At the health services an epidemiological surveillance was carried out in order the establish the level of health damage in the affected people. The study was into the expected ratios. ▪ Conducted a vectored control in the municipalities of the affected departments by the floods. Booklets were distributed in the shelters with information about risk factors and hygiene habits. ▪ In the installed shelters for the "mega glide", a training was carried out with health personnel, emotional support teachers post disaster, all activities in coordination with the Ministry of Health, "Visión Mundial", Ministry of Education. Mental health evaluation was carried out in all the camps. ▪ A diagnosis of the different water supply systems was carried out (with the private and public cooperatives), in the affected municipalities. Water analysis were carried out in different communities and also in the storage tanks in the city of La Paz. A training was carried out in the disinfection of drinking water. Laptop computers were delivered to the SEDES La Paz, the health network, and the city of Rurrenabaque in the Department of Beni. Also analysis reagents were delivered to the SEDES of the five affected departments ▪ 5,000 bottles of purified water and purifications tablets were also delivered to the SEDES of the five affected departments 	<p>Evaluation mechanisms were through the cooperation or partnership, PAHO/WHO decentralized professionals in Santa Cruz and Tarija, also responsible personnel of SEDES in the affected departments of Chuquisaca, Tarija and Santa Cruz, as well, with hired consultants.</p> <p>Other media were field visits, reports and photographs, which were done in five affected Departments and all the 11 affected municipalities, in the period of CERF implementation.</p>

UNFPA - HEALTH

CERF PROJECT NUMBER	11-FPA-025	Total Project Budget	\$ 798.000	Beneficiaries			Targeted	Reached	Gender Equity
				Individuals					
PROJECT TITLE	Security and protection to women, adolescents and young people, affected by floods in La Paz, Beni and Cochabamba.	Total Funding Received for Project	\$ 60.971	Female		6.500	8.166		
				Male		9.000	7.410		
				Total individuals (Female and male)		15.500	15.576		
				Of total, children under 5		1.000	2.600		
				TOTAL		16.500	18.176		
STATUS OF CERF GRANT	Completed	Amount disbursed from CERF	\$ 60.971						
OBJECTIVES AS STATED IN FINAL CERF PROPOSAL		ACTUAL OUTCOMES						MONITORING AND EVALUATION MECHANISMS	
<p>Contribute to the promotion and protection of sexual and reproductive health with a rights based approach of women, adolescents and young people, living in shelters and areas affected by the floods in three departments of Bolivia (La Paz, Cochabamba and Beni)</p> <ul style="list-style-type: none"> ▪ Promote the attendance of pre and post natal controls, timely reference and institutional labours of pregnant women that live in shelters and areas affected by the floods. ▪ Strengthen the capabilities of institutions that are responding to the emergencies in sexual and reproductive health, sexual and reproductive rights, gender based violence and masculinity. ▪ Provision of supplies in order to prevent STIs, VIH and unplanned pregnancy, including the provision of materials for gathering evidence in cases of sexual violence. 		<p>100 per cent of the selected camps of the three departments supported in the reduction of risk factors in sexual health and reproductive health;</p> <ul style="list-style-type: none"> ▪ 100 per cent of the selected camps supported in reduction of gender based violence. <ul style="list-style-type: none"> ○ 50 health facilities depending on the Departmental Health Services and Municipalities of three departments (La Paz, Beni and Cochabamba) have increased their capability of response in emergencies. ○ Educational material printed (3.000) related to risk management, SRH in emergency ○ Nine Institutional workshops to strengthen national capacities <p>200 health workers with strengthened response capacity in subjects related to sexual and reproductive health, sexual and reproductive rights and risk management</p> <ul style="list-style-type: none"> ▪ Capacity building for health personnel in camps and shelters to provide quality care and timely referral of pregnant women (pre and post natal checks and care delivery) <ul style="list-style-type: none"> ○ Subjects of sexual and reproductive health and rights incorporated in the departmental and municipal COE's agendas. <p>100 per cent of the health services that provide assistance in the shelters and the affected areas provided with equipment and supplies to attend labours, to offer methods of contraception and informational material.</p> <ul style="list-style-type: none"> ▪ 250 kits to attend labours without complications in the shelters ▪ Provision of 84 midwifery kits for basic attention in health centres, 9 Kit 2A / 2 B / Kit 8. <ul style="list-style-type: none"> ○ 4,500 women, adolescents and young people receive information on sexual and reproductive health, sexual and reproductive rights and risk management. ▪ Conduct workshops with volunteers in prevention, reporting and reference of cases of violence against women in emergencies. 						<p>The monitoring was carried through:</p> <p>Field visit were conducted during the implementation process in order to verify the results were duly achieved.</p> <p>The discharge of the delivery of equipments and care were carried out through the presentation of signed receipts or printed digital documents provided by the recipient at each delivery.</p> <p>During the delivery of the equipments, training for the health staff of the concerned areas and social organisations were held.</p>	

IOM - SHELTER						
CERF PROJECT NUMBER	11-IOM-016	Total Project Budget	\$ 3,518,532	Beneficiaries	Targeted	Reached
PROJECT TITLE	Providing and Improving Emergency Shelter and NFIs to displaced families	Total Funding Received for Project	\$ 353,742	Individuals		12,444
				Female		3,111
				Male	6,885	9,333
				Total individuals (Female and male)	12,750	12,444
				Of total, children under 5	2,168	4,994
STATUS OF CERF GRANT	COMPLETED	Amount disbursed from CERF	\$ 353,742	TOTAL		
				<p><i>Unexpected delays in the delivery process of wood caused the goals not to be met. Likewise, the approximate character of the initial data did not permit to establish an exact estimation of the real needs that could be covered at the moment the project would be executed. During the delivery process data were not exhaustively disaggregated which accounts for the lack of data regarding the quantity of minors. As regards the quantity of children, the criteria were not included in the cooperation agreements between IOM and its implementing partners.</i></p>		<p>Gender Equity</p> <p>During the delivery processes, more men than women have received NFI and as heads of families distributed them to their whole families.</p> <p>Besides, the Gender approach was less taken into account than the geographical methodology implying to work on all affected regions.</p>
OBJECTIVES AS STATED IN FINAL CERF PROPOSAL		ACTUAL OUTCOMES				MONITORING AND EVALUATION MECHANISMS
<p>Emergency Shelter including NFIs</p> <p>Provide Temporary Emergency Shelter and NFI to 1,000 homeless families in La Paz according to climate context and 1,550 affected families in the rural areas of La Paz, Beni, Pando and Cochabamba in a period of three months</p> <p>Camp coordination and Camp management: Technical and managerial assistance to train local and national authorities and community representatives in shelter Coordination and shelter Management to establish participatory management systems that ensure the immediate protection and assistance needs of affected populations are addressed. National authorities will remain in charge of shelter management Delivery of NFI in prioritized areas of La Paz, Cochabamba, Pando and Beni, Delivery of emergency temporary shelters in prioritized areas of La Paz, Cochabamba, Pando and Beni</p> <p>Providing of technical support for government authorities in the field of camp management</p>		<p>Supply of NFI in prioritized areas of La Paz, Cochabamba, Pando and Beni</p> <p>497 homeless families have been assisted, including 870 in La Paz and 1,627 families in rural areas, through the delivery of the following items:</p> <ul style="list-style-type: none"> ▪ In Beni NFIs, including 408 kitchen kits, 408 blankets and 393 mosquito nets were delivered ▪ In Pando NFIs, including 249 kitchen kits, 52 blankets and 127 mosquito nets were delivered ▪ In Cochabamba NFIs, including 248 kitchen kits 200 blankets were delivered ▪ In La Paz NFIs including 553 mosquito nets, 200 blankets, 30 lanterns, 238 kitchen kits, 20 tents, 30 mattresses were delivered ▪ The distribution of NFIs per family (kitchen sets, blankets, tents, flashlights, mosquito nets and mattresses) have helped the affected families by reducing their vulnerability and the access to basic survival items have reduced health and physical risks. <p>Supply of emergency temporary shelters in prioritized areas of La Paz, Cochabamba, Pando and Beni</p> <ul style="list-style-type: none"> ▪ .The provision of tents has permitted the installation of temporary shelters that meet international standards ▪ In La Paz 70 wooden modules were delivered <p>Provision of technical support for government authorities</p> <ul style="list-style-type: none"> ▪ In La Paz one workshop was held and 200 people therefore accommodated; amongst which public officials, supervisors, consultants, communicants, technical managers, social workers, administrators, directors, staff from NGOs, staff from international agencies including UN agencies. ▪ Training workshops have built up government capacity in the administration and management of shelters in coordination between the central government authorities, departmental and municipal levels. 				<p>It was agreed between IOM and its implementing partner CARITAS that weekly monitoring reports would be communicated so as to evaluate and identify field necessities. These reports were based on both governmental data and camp information.</p> <p>It was agreed between IOM and its implementing partner. FUNDEPCO, that weekly monitoring reports would be communicated so as to evaluate and identify field necessities. These reports were based on both governmental data and camp information.</p> <p>IOM carried out frequent evaluations on the field involving consultants who visited camps, coordinated with local implementers and identified strategic data.</p>

FAO - AGRICULTURE

CERF PROJECT NUMBER	11-FAO-019	Total Project Budget	\$1,715,600	Beneficiaries	Targeted	Reached	Gender Equity All affected families have been attended to with a participative identification in seven municipalities of the Project. The supplies have been distributed according the type of crop and animal, the region and the affected crops in the communities. There is no difference in the type of household beneficiaries (there is no difference between males and females).
				Individuals	9,217	11,495	
Female	3,034	3,793					
Male	5,271	6,897					
Total individuals (Female and male)	8,305	10,690					
Of total, children under 5	912	805					
TOTAL	9,217	11,495					
PROJECT TITLE	Agriculture and sanitarian support for vulnerable communities affected by La Niña in La Paz, Cochabamba and Beni	Total Funding Received for Project	\$ 380,635				
STATUS OF CERF GRANT	COMPLETED	Amount disbursed from CERF	\$ 380,635				

OBJECTIVES AS STATED IN FINAL CERF PROPOSAL	ACTUAL OUTCOMES	MONITORING AND EVALUATION MECHANISMS
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Restore the productivity capacity of the small rural producers in the areas affected by floods.	2,299 beneficiary families (115 per cent of advance respect the programmed beneficiaries. Restoring of productivity capacity of 299 additional families)	Monthly reports, under a physical implementation advancements format, were applied in every municipality. Supplies receipts were used in every municipality detailing the name of the community, number of beneficiaries and the approved reception signature. Results achieved in every municipality were systematized. Field visits were performed in all areas covered by the project. Visits were complemented with personal interviews with local authorities, community leaders and beneficiary families. Continuous monitoring of agricultural sowed areas was performed in order to verify the adequate use of seeds and other supplies distributed.														
	<p><u>Agricultural Component:</u> 3.002 hectares of crops planted (142 per cent of advance respect the programmed beneficiaries) as following details:</p> <table border="1"> <tr> <td>Corn Crop</td> <td>1359 hectare, Quillacollo, Charazani, P Blancos, Rurrenabaque and Reyes</td> </tr> <tr> <td>Rice Crop</td> <td>555 hectare, Palos Blancos, Apolo, Ixiamas and Reyes</td> </tr> <tr> <td>Beans Crop</td> <td>473 hectare, Ixiamas and Rurrenabaque</td> </tr> <tr> <td>Wheat Crop</td> <td>16 hectare, Charazani</td> </tr> <tr> <td>Potato Crop</td> <td>5 hectare, Charazani</td> </tr> <tr> <td>Barley Crop</td> <td>37 hectare, Charazani</td> </tr> <tr> <td>Forage Crop</td> <td>19 hectare, Palos Blancos and Ixiamas</td> </tr> <tr> <td>Vegetable Crop</td> <td>38 hectare, Quillacollo, Palos blancos, Ixiamas and Rurrenabaque</td> </tr> </table> <ul style="list-style-type: none"> ▪ Distribution of 249 post harvest Silos (prioritized action in Quillacollo, Charazani and Palos Blancos municipalities) ▪ 15 greenhouse school gardens has been established (5 in Cochabamba and 10 in Reyes) ▪ Kits of Agricultural tools <p><u>Livestock Component:</u> Rehabilitation of 66.037 animals (de-worming and concentrated food based in mineral salts), of 2215 small breeders (170 per cent of advance respect the programmed beneficiaries).</p> <ul style="list-style-type: none"> ▪ 24.986 animals (bovines) in Cochabamba, P. Blancos, Apolo and Reyes ▪ 4.944 animals (ovine) in Cochabamba ▪ 36.107 animals (Alpacas) in Charazani ▪ Distribution of 29 tons of mineral salts in Quillacollo, Charazani, Apolo and Ixiamas. ▪ Distribution 40 Veterinarian Treatment (Sets) in affected communities de Charazani y Apolo. ▪ Four Campaigns of de-worming and implementation of vaccines in affected communities of Apolo, Ixiamas, Charazani and Reyes. 		Corn Crop	1359 hectare, Quillacollo, Charazani, P Blancos, Rurrenabaque and Reyes	Rice Crop	555 hectare, Palos Blancos, Apolo, Ixiamas and Reyes	Beans Crop	473 hectare, Ixiamas and Rurrenabaque	Wheat Crop	16 hectare, Charazani	Potato Crop	5 hectare, Charazani	Barley Crop	37 hectare, Charazani	Forage Crop	19 hectare, Palos Blancos and Ixiamas
Corn Crop	1359 hectare, Quillacollo, Charazani, P Blancos, Rurrenabaque and Reyes															
Rice Crop	555 hectare, Palos Blancos, Apolo, Ixiamas and Reyes															
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Barley Crop	37 hectare, Charazani															
Forage Crop	19 hectare, Palos Blancos and Ixiamas															
Vegetable Crop	38 hectare, Quillacollo, Palos blancos, Ixiamas and Rurrenabaque															
Reduce the livestock mortality of the small rural producers in the areas affected by floods in order to preserve the food security and the generating sources of income																

UNICEF - NUTRITION

CERF PROJECT NUMBER	11-CEF-024-A	Total Project Budget	\$ 400,000	Beneficiaries			Gender Equity
				Targeted	Reached		
PROJECT TITLE	Contribute to reducing the impact of floods on the nutritional status of children	Total Funding Received for Project	\$ 99,022	Individuals	3,050	4,000	Mainly children under 5 years affected by the floods in Oruro, Cochabamba and Beni.
				Female	1,525	2,000	
				Male	1,525	2,000	
				Total individuals (Female and male)	3,050	4,000	
				Of total, children under 5	3,050	4,000	
STATUS OF CERF GRANT	Concluded	Amount disbursed from CERF	\$ 99,022	TOTAL	3,050	4,000	
OBJECTIVES AS STATED IN FINAL CERF PROPOSAL		ACTUAL OUTCOMES				MONITORING AND EVALUATION MECHANISMS	
<p>3,050 children under 2 experience reduced impacts from floods on their nutritional status with a supplementary food.</p> <p>Reduce morbidity and mortality from severe malnutrition</p> <p>3,050 boys and girls less than two years of age receive supplementary food during 3 months, two bags of supplementary food per month.</p> <p>Families of the most affected boys and girls, and who already show certain degree of malnutrition, receive kitchen utensils to ensure correct food preparation.</p> <p>Mothers and their families in shelters and with children less than two year of age receive information on the importance of Breastfeeding.</p>		<ul style="list-style-type: none"> ▪ 3,000 boys and girls (98 per cent) younger than 2 years of age received supplementary food - each boy or girl received two bags per month of Nutribebé for three months. ▪ 1,000 boys and girls (100 per cent) less than 2 years of age provided with feeding utensils. ▪ 1,070 families (100 per cent), received training on Breastfeeding (50 per cent of all families). Two workshops on breastfeeding were held for breastfeeding facilitators with the participation of Institutional and Community personnel. Thirty facilitators received training and in turn, each one visited and trained about 39 community families 				<p>The project implementation was coordinated with the Ministry of Health through the National Secretary for Food and Nutrition (CT CONAN) and the Unit of Nutrition, at departmental level through the Department of Health Services and at municipal level with the Food and Nutrition Commissions (COMANs) community organizations.</p> <p>The nutritional monitoring was held through the community organizations and other partners like ACOBOL. This commission made the follow up of activities and supervision of results through monthly meetings.</p> <p>The distribution of supplementary food was done through the established health networks, which distribute monthly two bags of nutribebé (of 750 grams each) for each child between 6 and 23 months. The foreseen daily dose is 25 gr/day two times.</p> <p>The information was written in the notebook and number 4 of health attention to children, in the infant's health ID and the family's booklet in the municipalities where SAFCI was implemented.</p>	

UNICEF - WASH							
CERF PROJECT NUMBER	11-CEF-024-B	Total Project Budget	\$ 2,300,000	Beneficiaries		Reached	Gender Equity
				Targeted	Reached		
PROJECT TITLE	Safe water, sanitation and hygiene for families affected by landslides and floods	Total Funding Received for Project	\$ 358,397	Individuals	6,125	21,500	Families affected by the mega landslide in La Paz and other families affected by floods in Beni, Cochabamba. The benefit was equal among women, girls, boys and men.
				Female	3,063	10,750	
				Male	3,062	10,750	
				Total individuals (Female and male)	6,125	21,500	
				Of total, children <u>under 5</u>	1,225	4,300	
				TOTAL	6,125	21,500	
STATUS OF CERF GRANT	Concluded	Amount disbursed from CERF	\$ 58,397				
OBJECTIVES AS STATED IN FINAL CERF PROPOSAL		ACTUAL OUTCOMES				MONITORING AND EVALUATION MECHANISMS	
<p>1,225 families affected by disasters due to landslides in the neighbourhoods of Kupini, Kallapa and neighbouring communities improve their living conditions by establishing and properly using new, appropriate sanitation infrastructure (toilets, showers, laundry areas, hygiene supplies), in line with SPHERE norms, in camps organized as a response to floods and landslides in urban areas, in coordination with municipal and departmental COEs in the city of La Paz. This will help to avoid the propagation of diseases like diarrhoea.</p> <p>4,225 families affected by floods in the rural areas of the municipality of San Ignacio de Mojos (Beni) Quillacollo (Cochabamba) and the Chapare in the north of Cochabamba Department improve their hygiene conditions. 3,000 of these have safe water in sufficient quality and quantity, with the aid of appropriate supplies, which have been provided in coordination with the municipal and departmental COEs. Training for heads of households has been provided on how to use these supplies and improve their hygiene situation despite the current conditions caused by emergency or disaster.</p> <p>1,225 families in camps have SPHERE-approved sanitary conditions</p> <p>4,225 families have sufficient/appropriate supplies for hygiene and are trained in key practices and use of hygiene supplies</p>		<p>Expected outcome 1: 1,225 families in camps have SPHERE-approved sanitary conditions;</p> <ul style="list-style-type: none"> All 1,225 families (100 per cent) in camps have SPHERE-approved sanitary conditions, with complementation of initiatives of municipal COE and other humanitarian organizations. With CERF funding, approximately 150 families were reached. <p>Expected outcome 2: 4,225 families have sufficient/appropriate supplies for hygiene and are trained in key practices and use of hygiene supplies;</p> <ul style="list-style-type: none"> 4,094 families (97 per cent) have sufficient/appropriate supplies for hygiene and are trained in key practices and use of hygiene supplies; <p>Expected outcome 3: 3,000 families have supplies to ensure access to sufficient quality and quantity of safe water;</p> <ul style="list-style-type: none"> 2,774 families (92 per cent) have supplies to ensure access to sufficient quality and quantity of safe water 3,116 families (74 per cent) were trained and improved their hygiene conditions in the municipalities of San Ignacio de Mojos, Quillacollo and Chapare. And 2,774 families (92 per cent) have sufficient water in quality and quantity (See tables below). <ul style="list-style-type: none"> 1,225 families (100 per cent) were reached with the Construction of 3 mobile sanitation modules in reorganized camps and the Reinstallation of 1 static sanitation module in reorganized camps 4,094 families (97 per cent) have been attended with hygiene supplies and 3,116 families (74 per cent) have received messages and training about key practices and use of the hygiene supplies. Supplies provided 				<p>Field visits and inspection of sanitary conditions, operation and maintenance plan of each sanitary module in the camps</p> <p>Official and signed receipt certificates.</p> <p>Field visits at community level to observe adequate use of supplies</p> <p>Official and signed receipt certificates. Field visits at community level to observe adequate use of supplies</p> <p>Base line data on water, sanitation and hygiene practices in the region facilitated the measurement of the project impact. Regular field visits were realized to be able to adjust the project during the implementation.</p>	

3,000 families have supplies to ensure access to sufficient quality and quantity of safe water

NOTE: 55 more schools were attended with filters, jerry cans and CI-tablets

		FAMILY HYGIENE KITS			SCHOLAR HYGIENE KITS		FAMILIES TRAINED
		Number	Number Family Beneficiaries	Number of Schools/ Scholars Beneficiaries	Number	Scholars Beneficiaries	Number
La Paz	La Paz	1,300	1,300	0	200	200	372 families / 25 teachers
Beni	San Ignacio de Moxos	600	538	0 / 0	600	600	538
	Rurrenabaque	350	260	11 / 191	450	450	260
	Reyes	550	496	20 / 689	300	300	496
Cochabamba	Quillacollo	500	500	0	950	950	450fam./36 teach/ 1490 school
	Villa Tunari	750	750	0	200	200	572fam. 77 teach/229 school
	Chimoré	250	250	0	350	350	428fam./33 teach/715 school
TOTAL		4,300	4,094		3,250	3,250	3,116

- 2,774 families (92 per cent) have been attended with supplies to ensure the maintenance of the quality and quantity of safe water.
Supplies provided:

		Water containers 10 litres			Water filters			Water purifying tablets			Families trained
		Nr	Nr Family Beneficiary	NR School/ Scholar Beneficiary	Nr	Nr Family Beneficiary	Nr Schools School Beneficiary	NR	Number Family Beneficiary	Number Schools / Scholars Beneficiaries	Number
Beni	San Ignacio de Moxos	600	538	25 / 742	600	538	25 / 742	600	538	25 / 742	538
	Rurrenabaque	350	260	10 / 191	350	260	10 / 191	350	260	10 / 191	260
	Reyes	550	496	20 / 689	550	496	20 / 689	550	496	20 / 689	496
Cochabamba	Quillacollo	500	500	0	500	450	0	0	0	0	450
	Villa Tunari	750	750	0	750	572	0	750	572	0	572
	Chimoré	250	250	0	250	428	0	250	428	0	428
TOTAL		3,000	2,794	55 / 1622	3,000	2,744	55 / 1622	2,500	2,294	55 / 1622	2,744

UNICEF - EDUCATION

CERF PROJECT NUMBER	11-CEF-024-C	Total Project Budget	\$ 550,000	Beneficiaries			Gender Equity
				Targeted	Reached		
PROJECT TITLE	Guarantee school access and continuity to children affected by floods and landslides in Beni, La Paz and Cochabamba	Total Funding Received for Project	\$ 199,020	Individuals	5,150	6,865	Mainly school girls/ boys and their teachers
				Female	2,575	3,433	
				Male	2,575	3,432	
				Total individuals (Female and male)	5,150	6,865	
				Of total, children <u>under</u> 5			
				TOTAL	5,150	6,865	
STATUS OF CERF GRANT	Concluded	Amount disbursed from CERF	\$ 199,020				

OBJECTIVES AS STATED IN FINAL CERF PROPOSAL	ACTUAL OUTCOMES	MONITORING AND EVALUATION MECHANISMS
<p>5,000 boys and girls restart their school activities and are provided with learning material, books and texts appropriate for the corresponding school grade and the level of curriculum development necessary. Some of them have school transportation to reach their new schools.</p> <p>150 teachers trained in workshops on a number of didactic techniques, psycho affective support and effective teaching strategies including appropriate school material.</p>	<p>Audiovisual and school material:</p> <ul style="list-style-type: none"> ▪ Distribution of 4,150 school backpacks (83 per cent), 145 docent kits (97 per cent) and 22 school tents in the municipalities of La Paz, Quillacollo, San Ignacio de Mojos, Villa Tunari, Consejo Educativo Yuracare (Chimore) and Puerto Villarroel, to reach 4,150 children. ▪ Learning DVDs for reading and writing in Spanish(L2) and native languages mojeño, tsimane', moseten and takana (L1): 600 units to reach 12,000 children who are in primary (NGO APCOB andNativOrganizations CEPOIM, CIPTA, CRTM, GCT) ▪ School texts in mojeño language 1st-2nd grades (3,000 exemplars for each grade), plus two texts of stories and mojeño tales (500 exemplars each) to reach 25,000 children (Agreement with Native Organization CEPOIM) <p>School Transport:</p> <ul style="list-style-type: none"> ▪ Renting of 24 buses for transporting 1,022 children out of 1,200 (85 per cent) from the emergency camps to their schools for 3 months, in the municipality of La Paz (direct transfer of resources) <p>Docent and Facilitators Training and technical assistance:</p> <ul style="list-style-type: none"> ▪ 23 municipal and departmental technicians trained in Development Policies for the first Infant as post-grade level; who now make advocacy, train educators and achieve services for the attention and education of 1,940 children below 6 years old in 4 municipalities in the Amazon area: San Andrés, San Ignacio, Loreto and San Javier (Agreement with the University NUR) <p>Training of 30 municipal authorities and technicians in development of child friendly spaces for the early childhood in six municipalities of Amazon area and Chaco work with 2,500 children below 6 years.</p> <ul style="list-style-type: none"> ▪ Systematization of the response and attention of children younger than 6 years in the mega-landslide in the municipality of La Paz, for a tool to develop protocols of risk prevention and attention of the early childhood in emergencies. 380 children below 6 years were attended in child friendly spaces, with psycho affective recuperation (withNGOs FODEI and World Vision) ▪ Training and development of emergency plans at departmental level in Santa Cruz, Pando, Beni y Cochabamba, through strengthening of the education cluster at national and departmental levels. 	<p>The monitoring and follow up was done by the education cluster, the Ministry of Education and UNICEF. Synergic actions with the NGOs and municipal and district working tables, plus native organizations.</p>

FOOD							
CERF PROJECT NUMBER	11-WFP-026	Total Project Budget	\$ 3,150,000	Beneficiaries	Targeted	Reached	Gender Equity 34 per cent of the leadership positions of the distribution committees were occupied by women 46 per cent of the Food recipients were women
PROJECT TITLE	Food assistance to floods-affected families Project to be implemented through the PRRO 108360 – Component 4 – Response to new emergencies	Total Funding Received for Project	\$ 1,328,975	Individuals	35,000	41,830	
				Female	17,850	21,333	
				Male	17,150	20,497	
				Total individuals (Female and male)	35,000	41,830	
				Of total, children under 5	5,250	6,274	
TOTAL	35,000	41,830					
STATUS OF CERF GRANT	Completed	Amount disbursed from CERF	\$ 844,988				
OBJECTIVES AS STATED IN FINAL CERF PROPOSAL		ACTUAL OUTCOMES				MONITORING AND EVALUATION MECHANISMS	
To save lives and prevent the deterioration of the food and nutrition security due to floods and landslides		General distribution of family food rations to the affected families <ul style="list-style-type: none"> 750 metric tons of food were distributed to 8,366 families (approximately 41,304 persons) Complementary feeding to children 2 - 6 years in camps <ul style="list-style-type: none"> Eight metric tonnes of fortified supplementary food were distributed to 526 children in the camps of La Paz through camp nurseries. 				WFP/Government monitoring system. The food distribution monitoring and evaluation system (SIMEVDA) tracks food from warehouse up to the beneficiary, records beneficiaries, outputs and some gender and nutrition indicators. WFP/Government monitoring system	

UNICEF - CHILD RIGHTS PROTECTION

CERF PROJECT NUMBER	11-CEF-024-D	Total Project Budget	\$350,000	Beneficiaries			Gender Equity
				Targeted	Reached		
PROJECT TITLE	Guarantee child rights protection during emergency situations	Total Funding Received for Project	\$ 77,557	Individuals	7,060	7,210	Mainly affected children who got a psycho social and affective support. Girls and boys benefited equal.
				Female	3,530	3,605	
STATUS OF CERF GRANT	Concluded	Amount disbursed from CERF	\$ 77,557	Male	3,530	3,605	
				Total individuals (Female and male)	7,060	7,210	
				Of total, children under 5	2,000	2,000	
				TOTAL	7,060	7,210	
OBJECTIVES AS STATED IN FINAL CERF PROPOSA		ACTUAL OUTCOMES				MONITORING AND EVALUATION MECHANISMS	
<p>At least 1,000 children in emergency situations that are housed in emergency shelters or tents feel safe and reduce risks and protect their rights during their stay in the camps.</p> <p>At least 1,000 families have their awareness raised about the culture of respect for children's rights, especially in affected areas, and give this new type of treatment to their children in the camps.</p> <p>In three months, 2,000 children who are at risk or in vulnerable situations receive psycho-affective support and return to normal school and home activities.</p> <ul style="list-style-type: none"> • 2,000 boys, girls and adolescents participate in psycho affective and social recovery in three departments in Bolivia. • 1,000 families from the three departments are aware of the rights of the child and adolescent. • The psycho affective and social recovery program is transferred to sixty volunteers. • At least two municipal services of rights protection are strengthened and provide services in encampments and prevent violence cases. • Administrators, families and children in camps trained on sex abuse prevention and with knowledge on how to report these cases to the proper authorities. State authorities participating in Work Table N°6 coordinate and are responsible for the protection of the rights of the child and adolescent during these emergencies. 		<ul style="list-style-type: none"> ▪ Systematization of the response experience applying the psycho affective and social recovery program to 1,000 affected boys and girls (100 per cent), in 22 encampments and shelters at the mega-landslide of La Paz, through a documental video. ▪ 1,000 families (100 per cent) are strengthened on sex abuse prevention by means of 60 play kits, 120 packages of complementary material, 120 "A New Sun for Community Wellbeing" backpacks, 3,000 posters, flyers, stickers and banners for the diffusion children rights, good treatment and the three golden rules. ▪ Nine Departmental Social Management services strengthened though the printing of 2,500 copies of the three instruments necessary to train on and to work with an approach based on risk management and the protection of the rights of the infant, boy, girl and adolescent during emergencies. ▪ 210 collaborators are trained in eleven workshops on the transference of the psycho affective and social recovery program for boys and girls affected by the emergency to the national level with the potential of benefiting 10,000 boys, girls and adolescents. ▪ 2,000 boys, girls and adolescents, 600 families and 120 volunteers participate in the program's application during five months, three times per week. 				<p>The monitoring organizations were the cluster number six, the Vice ministry of Civil Security, Departmental Social Services, municipalities and UNICEF</p> <p>Synergies were built by actions with NGOs, Universities and operative platforms.</p>	

UNFPA - PROTECTION

CERF PROJECT NUMBER	11-FPA-024	Total Project Budget	\$ 580.000	Beneficiaries			Gender Equity
				Targeted	Reached		
PROJECT TITLE	Security and protection to women, adolescents and young people, affected by floods in La Paz, Beni and Cochabamba	Total Funding Received for Project	\$ 92.559	Individuals			
				Female	6.500	4.892	
				Male	-	3.393	
				Total individuals (Female and male)	6.500	8.285	
				Of total, children under 5	-	3.000	
				TOTAL	6.500	11.285	
STATUS OF CERF GRANT	Completed	Amount disbursed from CERF	\$ 92.559				
OBJECTIVES AS STATED IN FINAL CERF PROPOSAL		ACTUAL OUTCOMES				MONITORING AND EVALUATION MECHANISMS	
<p>Prevent violence against women and promote reporting, attention and timely reference of violence cases in the shelters, with emphasis in sexual violence.</p> <p>Strengthen the capabilities of institutions that are responding to the emergencies in sexual and reproductive health, sexual and reproductive rights, gender based violence and masculinity in order to mitigate its effects.</p> <p>Provision of supplies in order to prevent STIs, HIV and unplanned pregnancy, including the provision of materials for gathering evidence in cases of sexual violence.</p>		<p>Prevent violence against women and promote reporting</p> <ul style="list-style-type: none"> ▪ 270 volunteers strengthened response capacity in subjects related to prevention, reporting and reference of cases of violence against women in emergency situations and in psychosocial restoration ▪ Information provided to adolescents and young people in sexuality education, sexual and reproductive rights, masculinity, pregnancy and prevention of gender based violence 100 per cent Shelters security improved with instalment of emergency luminaries in dark areas and conformation of protection brigades ▪ 100 per cent of the selected camps of the 3 Departments supported in reduction of gender based violence. ▪ 80 per cent of people in shelters that require replacement of their identification documents were attended. <p>Strengthen the capabilities of institutions that are responding to the emergencies in sexual and reproductive health</p> <ul style="list-style-type: none"> ▪ 200 Health workers with strengthened response capacity in subjects related to prevention and attention to gender based violence and risk management. ▪ Municipal and departmental COEs agendas incorporate subjects related to protection and prevention and care of gender based violence. ▪ 50 health facilities depending on the Departmental Health Services and Municipalities of 3 Departments have increased their capability of response in emergencies. <p>Provision of supplies in order to prevent STIs, HIV and unplanned pregnancy</p> <ul style="list-style-type: none"> ▪ 1.500 female heads of family receive Dignity Kit living in shelters ▪ Provision of 2 PEP kits to the health services and medical posts in the shelter ▪ Educational material printed (6.000) related to risk management, SRH in emergency ▪ 6 emergency luminaries and 15 light generators provided to the security of women in shelters. 				<p>The monitoring was carried through:</p> <p>Field visit were conducted during the implementation process in order to verify the results were duly achieved.</p> <p>The discharge of the delivery of equipments and care were carried out through the presentation of signed receipts or printed digital documents provided by the recipient at each delivery.</p> <p>During the delivery of the equipments, training for the health staff of the concerned areas and social organisations were held.</p>	

ANNEX 2. CERF FUNDS DISBURSED TO IMPLEMENTING PARTNERS – NATIONAL AND INTERNATIONAL NGOS AND GOVERNMENT PARTNERS

DROUGHT								
CERF PROJECT CODE	CLUSTER/ SECTOR	AGENCY	IMPLEMENTING PARTNER NAME	PARTNER TYPE	TOTAL CERF FUNDS TRANSFERRED TO PARTNER US\$	DATE FIRST INSTALLMENT TRANSFERRED	START DATE OF CERF FUNDED ACTIVITIES BY PARTNER	Comments/ Remarks
10-CEF-067-B	WASH	UNICEF	COOPI	NGO	294,420.00	14/03/2011	14/03/2011	
10-CEF-067-B	Nutrition	UNICEF	SEDES Chuquisaca	Government	7,913.92	17/03/2011	17/03/2011	
10-CEF-067-B	Nutrition	UNICEF	SEDES Santa Cruz	Government	6,382.21	18/03/2011	18/03/2011	
10-CEF-067-B	Nutrition	UNICEF	PMA	NNUU	101,080.00	15/03/2011	15/03/2011	
10-WFP-081	Food	WFP	-	-	-	-	-	
10-FAO-051	Agriculture	FAO	-	-	-	-	-	
10-WHO-078	Health	PAHO/WHO	Departmental Health Services (SEDES/Santa Cruz)	Health counterpart of the Governors Office (Former Prefecture) in Santa Cruz	6,435.40	02/02/2011	10/02/2011	The funds transferred through the decentralized technical cooperation were used in planned activities of the disaster office of the SEDES. These funds were for per diem, transportation and gasoline, also for communications and training in the affected municipalities, the hiring of a consultant.
10-WHO-078	Health	PAHO/WHO	Departmental Health Services (SEDES/Tarija)	Health counterpart of the governance of Tarija	3,198.73	02/02/2011	10/02/2011	
10-WHO-078	Health	PAHO/WHO	Departmental Health Services (SEDES/Santa Cruz)		19,452.10	(15/02/2011 (missing data)	10/03/2011	Materials, supplies and drugs were also sent.
10-WHO-078	Health	PAHO/WHO	Departmental Health Services (SEDES/Tarija)		26,861.92	(15/02/2011 (missing data)	10/03/2011	
10-WHO-078	Health	PAHO/WHO	Departmental Health Services (SEDES/Chuquisaca)	Health counterpart of the governance of Chuquisaca	19,181.41	(15/02/2011 (missing data)	10/03/2011	Materials, supplies and drugs were sent, they did not presented plan of activities.
10-WHO-078	Health	PAHO/WHO	PAHO/WHO		62,090.85			Hiring expenses, transportation expenses, purchases, communications and other expenses stated in the project document.
10-UNFPA-048	Health	UNFPA	-	-	-	-	-	

FLOODING

CERF PROJECT CODE	CLUSTER/ SECTOR	AGENCY	IMPLEMENTING PARTNER NAME	PARTNER TYPE	TOTAL CERF FUNDS TRANSFERRED TO PARTNER US\$	DATE FIRST INSTALLMENT TRANSFERRED	START DATE OF CERF FUNDED ACTIVITIES BY PARTNER	Comments/ Remarks
11-CEF-024-B	WASH	UNICEF	CRS	NGO	44,917.29	15/07/11	15/07/11	
11-CEF-024-B	WASH	UNICEF	SODIS	NGO	58,681.36	18/05/11	18/05/11	
11-CEF-024-B	WASH	UNICEF	FUNDEPCO	NGO	105,152.84	15/07/11	15/07/11	
11-CEF-024-C	Education	UNICEF	Education Ministry	Government	15,108.00	19/05/11	19/05/11	
11-CEF-024-C	Education	UNICEF	Cochabamba Departmental Education Office	Government	11,310.74	28/05/11	28/05/11	
11-CEF-024-C	Education	UNICEF	La Paz Municipality	Government	20,027.62	29/05/11	29/05/11	
11-CEF-024-C	Education	UNICEF	NUR University	Academic	17,296.51	15/07/11	15/07/11	
11-CEF-024-C	Education	UNICEF	FODEI	NNGO	9,096.51	15/07/11	15/07/11	
11-CEF-024-D	Protection	UNICEF	Aldeas Infantiles SOS	NNGO	22,463.33	15/07/11	15/07/11	
11-CEF-024-A	Nutrition	UNICEF	San Ignacio de Mojos Municipality	Government	4,789.55	21/06/11	21/06/11	
11-CEF-024-A	Nutrition	UNICEF	Riberalta Municipality	Government	10,552.33	28/06/11	28/06/11	
11-CEF-024-A	Nutrition	UNICEF	Villa Nueva Municipality	Government	6,705.37	19/06/11	19/06/11	
11-CEF-024-A	Nutrition	UNICEF	Gonzalo Moreno Municipality	Government	1,915.82	28/06/11	28/06/11	
11-CEF-024-A	Nutrition	UNICEF	Puerto Villarroel Municipality	Government	9,593.02	04/07/11	04/07/11	
11-CEF-024-A	Nutrition	UNICEF	Villa Tunari Municipality	Government	9,593.02	04/07/11	04/07/11	
11-CEF-024-A	Nutrition	UNICEF	Chimoré Municipality	Government	9,593.02	18/07/11	18/07/11	
11-CEF-024-A	Nutrition	UNICEF	Tarija Municipality	Government	3,052.33	26/07/11	26/07/11	
11-CEF-024-A	Nutrition	UNICEF	Oruro Municipality	Government	5,764.19	04/08/11	04/08/11	
11-WFP-026	Food	WFP	-	-	-	-	-	
11-IOM-016	Shelter	IOM	CARITAS	NGO	3,000.00 ⁴	31/08/2011	12/09/11	
11-IOM-016	Shelter	IOM	FUNDEPCO	NGO	6,000.00	08/08/2011	27/07/2011	
11-WHO-030	Health	PAHO/WHO	Departmental Health Services (SEDES/Santa Cruz)	Health counterpart in the Governorate of Santa Cruz	4,189.39	02/06/11	15/10/11	The funds transferred through the Decentralized Technical Cooperation were used in planned activities requested by the head of the disaster unit of the SEDES. These funds covered per diem

⁴This relatively low amount is accounted for the fact that IOM spent significant sums to buy prefabricated wooden modules (hence the 70 modules delivered whereas 50 were initially targeted) which resulted in low funding for the implementation through our NGO partners.

11-WHO-030	Health	PAHO/WHO	Departmental Health Services (SEDES/Beni)	Health counterpart in the Governorate of Beni	4,844.39	02/06/11	15/10/11	expenses, transportation, gasoline, communications in the affected municipalities and the hiring of one consultant.
11-WHO-030	Health	PAHO/WHO	Departmental Health Services (SEDES/Cochabamba)		5,151.12	02/06/11	15/10/11	
11-WHO-030	Health		Departmental Health Services (SEDES/Santa Cruz)		7,968.22	02/06/11	15/10/11	Supplies, drugs and other materials were sent to the affected municipalities.
11-WHO-030	Health	PAHO/WHO	Departmental Health Services (SEDES/Beni)		20,293.96	02/06/11	15/10/11	Supplies, drugs and other materials were sent to the affected regions.
11-WHO-030	Health	PAHO/WHO	Departmental Health Services (SEDES/Cochabamba)		16,138.33	02/06/11	15/10/11	
11-WHO-030	Health	PAHO/WHO	SEDES La Paz		17,941.40	02/06/11	15/10/11	Funds were transferred for programmed activities and also supplies and drugs were sent as requested.
11-WHO-030	HEALTH	PAHO/WHO	SEDES Pando	Health counterpart in the Governorate of Pando	10,223.84	02/06/11	15/10/11	Funds were transferred for programmed activities and the deliver of supplies, drugs and other materials.
11-WHO-030	HEALTH	PAHO/WHO	PAHO/WHO		31,719.42			Expenses for transportation, purchases, deliveries, communication and other including hiring of consultants were established un the project budget.
11-FPA-024	Protection	UNFPA	-	-	-	-	-	
11-FPA-024	Health	UNFPA	-	-	-	-	-	
11-FAO-019	Agriculture	FAO	-	-	-	-	-	

ANNEX 3: ACRONYMS AND ABBREVIATIONS (Alphabetical)

ACH	Acción Contra el Hambre
APG	Asamblea del Pueblo Guarani
CARE	
COE	Emergency Operations Committee
COE Salud	Centro de Operaciones de Emergencia en Salud
COOPI	Cooperación Italiana
CRS	Catholic Relief Services
CTD - OPS	Cooperacion Tecnica Descentralizada de la OPS
DC	Defensa Civil
DDE	Dirección Departamental de Educación
EDAN Salud	Evaluacion de Daños y Analisis de Necesidades en Salud
FUNDEPCO	Fundación para el Desarrollo de Comunidades
ID	Identification
INGO	International Non-governmental organization
IOM	International Organization for Migration
Kit 2A	Clean delivery kits for pregnant women to be used in house childbirth.
Kit 2B	Clean delivery kits for traditional midwives
Kit 8	Kit for management of miscarriage and complications of natural abortion
MDRyT	Ministry of Rural Development and Lands
MSD	Ministerio de Salud y Deportes
NFI	Non food items
NGO	Non-governmental organization
NUR	Universidad NUR
OMS	Organizacion Mundial de la Salud
OPS	Organizacion Panamericana de la Salud
PEP Kit	Post Exposure Prevention Kit
PRRO	Protracted Relief and Recovery Operation
SEDES	Servicio Departamental de Salud
SEDES	Departemental Health Services
SENASAG	National Animal Sanitarian Service
SODIS	Fundación SODIS
SOS Aldeas Infantiles	Aldeas Infantiles SOS
SRH	Sexual Reproductive Health
STI	Sexually Transmitted Infections
UCR	Rural Contingency Unit
UNETT	United Nations Emergency Technical Teams
VIDECI	Vice ministry of Civil Defence