



United Nations

**CENTRAL
EMERGENCY
RESPONSE FUND**



A SOUND HUMANITARIAN INVESTMENT

HUMANITARIAN COORDINATOR REPORT ON THE USE OF CERF FUNDS CENTRAL AFRICAN REPUBLIC RAPID RESPONSE CONFLICTRELATED EMERGENCY

HUMANITARIAN COORDINATOR

Ms. Claire Bourgeois

REPORTING PROCESS AND CONSULTATION SUMMARY

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

The After Action Review took place at two levels. On 03 February 2015, the inter cluster coordination forum discussed the impact of the CERF allocations. The result of this discussion was presented to the Humanitarian Country Team on 09 February 2015.

- b. Please confirm that the Resident Coordinator and/or Humanitarian Coordinator (RC/HC) Report was discussed in the Humanitarian and/or UN Country Team and by cluster/sector coordinators as outlined in the guidelines.

YES ☒ NO ☐

- c. Was the final version of the RC/HC Report shared for review with in-country stakeholders as recommended in the guidelines (i.e. the CERF recipient agencies and their implementing partners, cluster/sector coordinators and members and relevant government counterparts)?

YES ☒ NO ☐

The report was shared with cluster coordinators and member of the Humanitarian Country team which includes the recipient agencies and a representation of international and national NGOs.

I. HUMANITARIAN CONTEXT

TABLE 1: EMERGENCY ALLOCATION OVERVIEW (US\$)		
Total amount required for the humanitarian response: 555,425,562		
Breakdown of total response funding received by source	Source	Amount
	CERF	19,624,767
	COMMON HUMANITARIAN FUND/ EMERGENCY RESPONSE FUND (if applicable)	27,108,802
	OTHER (bilateral/multilateral)	359,165,061
	TOTAL	405,898,630

TABLE 2: CERF EMERGENCY FUNDING BY ALLOCATION AND PROJECT (US\$)			
Allocation 1 – date of official submission: 20 – Dec - 2013			
Agency	Project code	Cluster/Sector	Amount
UNICEF	13-RR-CEF-151	Protection/Human Rights/Rule of Law	379,557
UNICEF	13-RR-CEF-152	Water and sanitation	2,189,004
UNICEF	13-RR-CEF-153	Health	446,318
FAO	13-RR-FAO-044	Agriculture	500,000
UNHCR	13-RR-HCR-069	Protection/Human Rights/Rule of Law	450,032
UNHCR	13-RR-HCR-070	Shelter and non-food items	877,935
IOM	13-RR-IOM-044	Protection/Human Rights/Rule of Law	380,000
UNDP	13-RR-UDP-018	Security	296,750
WFP	13-RR-WFP-081	Food	2,493,466
WHO	13-RR-WHO-078	Health	487,632
UNFPA	13-RR-FPA-058	Protection/Human Rights/Rule of Law	250,018
WHO	14-RR-WHO-001	Health	246,101
UNICEF	14-RR-CEF-001	Health	213,914
UNFPA	14-RR-FPA-001	Health	601,343
Sub-total CERF Allocation			9,812,070
Allocation 2 – date of official submission: 18 – Feb -2014			
UNICEF	14-RR-CEF-016	Protection/Human Rights/Rule of Law	450,024
UNICEF	14-RR-CEF-017	Health Nutrition	250,065

UNICEF	14-RR-CEF-018	Water and sanitation	1,000,000
FAO	14-RR-FAO-002	Agriculture	1,313,091
UNHCR	14-RR-HCR-006	Protection/Human Rights/Rule of Law	500,000
UNHCR	14-RR-HCR-007	Shelter and non-food items	1,000,000
IOM	14-RR-IOM-008	Protection/Human Rights/Rule of Law	557,952
WFP	14-RR-WFP-008	Food	2,287,588
WFP	14-RR-WFP-009	Coordination and Support Services Logistics	987,963
WFP	14-RR-WFP-010	Health Nutrition	250,008
UNICEF	14-RR-CEF-019	Health	353,799
UNFPA	14-RR-FPA-004	Health	300,106
WHO	14-RR-WHO-009	Health	562,101
Sub-total CERF allocation			9,812,697
TOTAL			19,624,767

TABLE 3: BREAKDOWN OF CERF FUNDS BY TYPE OF IMPLEMENTATION MODALITY (US\$)	
Type of implementation modality	Amount
Direct UN agencies/IOM implementation	14,209,391
Funds forwarded to NGOs for implementation and Red Cross	5,204,681
Funds forwarded to government partners	200,905
TOTAL	19,624,767

HUMANITARIAN NEEDS

Following the breakdown of law and order, the collapse of State administration and public services resulted in the overthrow of the regime of former President Bozize in March 2013, the most concerning aspect of the situation has been the magnitude of the protection and security crisis as armed groups have committed gross violations of international human rights and international humanitarian law on a massive scale. The violations included indiscriminate attacks against civilians, sexual and gender based violence, recruitment of children, summary executions, forced disappearances and torture. Large displacements, destruction of properties and loss of livelihoods have exacerbated vulnerabilities of already very fragile populations.

Since August 2013, attacks against civilians and ethnic minorities soared in the northern and western regions causing fear, mistrust and hatred between the communities, and generating a very dangerous spiral of violence, marked by gruesome attacks committed by all armed groups and increased sectarian violence. Peulh minorities have increasingly been victims of attacks in several areas in the West, including in Bossangoa and Boali.

The situation has deteriorated further since 5 December 2013 when anti-Balaka militia attacked Bangui and Bossangoa. The fighting that ensued between them and ex-Seleka, and the numerous atrocities that continue to be perpetrated by both of them have dramatic consequences for the civilian population. In a little more than a week, the number of people killed in Bangui was more than 600 people; many others were injured and more than 214,000 people had fled to spontaneous Internally Displaced Person (IDP) sites (more than 50 sites). At this juncture, there was little hope that the massive and brutal violence, at a scale never experienced before by the Central African people, would end soon.

At the same time, there has been renewed violence in other parts of the country, including Bossangoa (Ouham province), Bozoum and Boua (Ouham Pende province) and Damara (Ombella Mpoko province). Overall, as of 19 December 2013, more than 637,000 people had been displaced, as opposed to 51,000 in early 2013.

Upon declaration of a Level 3 emergency, the Central African Republic Humanitarian Country Team (HCT) undertook a joint Multi-Cluster Initial Rapid Assessment (MIRA) in the most affected areas in late December 2013 to further define humanitarian needs in an effort to better target humanitarian response programming and to address critical existing gaps. The MIRA results highlighted an alarming and worsening humanitarian crisis requiring urgent life-saving assistance to avoid further deterioration and loss of human lives: collapse of the health system and less than half of the country's population have minimum access to basic health services and medicine; security and protection concerns expressed by all informant (murders, summary executions, gender based violence, children associated to armed groups, etc.); food security significantly decreasing (whereas most households consumed 2-3 meals a day before the crisis, 90 per cent of respondents reported that households are having one meal a day, food prices across the country soaring); widespread violence has adversely affected livelihood activities and resources; scarcity of basic shelter material for IDPs and populations that lost their houses; insufficient (or even absence in some areas) of Water, Sanitation and Hygiene (WASH) services. Humanitarian needs are immense in all sectors, protection being the most critical, followed by food, health and wash, shelter and Non-food Items (NFI).

The most affected people are the 637'000 IDPs, nearly half of them are currently living in spontaneous sites, schools, churches and mosques in Bangui, Bossangoa and Bozoum. The others are either with host families (included in the target populations) or fled to the bush. Children and women are particularly vulnerable. According to United Nations Children's Fund(UNICEF) nearly 6,000 children had been recruited into armed groups. There were also hundreds of minors separated from their families. Cases of Gender-based Violence (GBV) have been reported. As men have been generally targeted by attacks, the number of women left alone to care for the kids has increased dramatically. Ethnic minority groups such as the Peulh are also particularly vulnerable.

Early 2014, sectarian violence spread to almost all corners in the north-western, western, south- western and central regions. Killings are reported every day. Villages have been entirely looted and burnt; villagers flee to the bush and to neighbouring countries. Since 12 February 2014, Carnot and Berberati (south-west) have become new hotspots of violence. As a result, tens of thousands of people fled to Cameroon. Although in some instances (Kaga Bandoro, Bossangoa, Bozoum) mediation efforts led by local leaders and humanitarian partners have contributed to appease tensions, the spiral of brutal violence continues unabated.

Since the crisis erupted the humanitarian needs have continued to increase, particularly in the rural areas. According to the population movement commission estimates, by 11 February 2014 the total number of IDPs in Bangui was 289'000 living in 69 sites, this is an indication that the security conditions in some parts of the capital are somehow improving. However humanitarian

needs are by no means reducing as most of the IDPs lost their assets and have insufficient resources to meet their basic needs. Access to basic social services was extremely limited. Due to the total collapse of trade and the closure of the vital supply road from Cameroon to Bangui, food and basic commodities were scarce and prices are soaring. Outside of Bangui, the humanitarian situation has sharply deteriorated in the country since early January 2014. The needs continue to increase in all areas currently affected by violence, according to humanitarian actors present there.

In March 2014, more than 714,000 were displaced across the territory and more than 250,000 people fled the country. Over 65,000 Muslims were evacuated to neighbouring countries. Some 2.6 million people remained in need of immediate humanitarian assistance. With the rainy season set to begin in March-early April, immediate action was required in several areas: distribution of seeds and tools for planting to avert greater food insecurity and malnutrition, provision of shelter material and basic household items, pre-positioning of food and other relief items before the roads become impassable, and decongestion of, and improvement to, IDP sites. In-country food stocks have been running dangerously low due to underfunding and insecurity.

II. FOCUS AREAS AND PRIORITIZATION

The need for urgently scaling up the humanitarian response was apparent before December but became even more critical since then. The HCT defined a 100 day emergency plan that stipulated top priority actions aiming at rapidly scaling up the humanitarian response with the two following objectives:

- a) In line with the Strategic Response Plan (SRP), provide life-saving multi-sector assistance and protection in the most affected areas, with a specific focus on IDPs, host families, women and children, and other vulnerable groups such as ethnic minorities and resident populations. Initiate where possible recovery, livelihood and community stabilisation activities.
- b) Rapidly scale-up of the humanitarian response capacity in Bangui and in priority areas in other parts of the country, while strengthening coordination and communication.

The scope of this plan was defined in accordance with the geographic priorities as outlined in the Humanitarian Needs Overview (HNO), with a primary focus on the regions affected by the most recent crisis, including Bangui and the north western part of the country. The priority populations targeted include, in particular, IDPs and their host communities, particularly women and children and other vulnerable groups such as ethnic minorities.

The second CERF allocation focused on the following priorities:

- Urgently step up the humanitarian response in the north-western, western, central and south-western regions with life-saving multi-sector activities
- Put a specific emphasis on protection of civilians related activities, including activities aiming at appeasing tensions between communities, due to the widespread sectarian violence in all these regions that puts large number of people at very high risk.
- Provide strong attention to the food security sector, as timely provision of food and seeds and tools is very critical before the rains. Failing to do so would have dire consequences for the populations, as many lost all their agriculture assets and economic capacity.
- Reinforce access to health services and provision of shelter and NFI which was crucial for the IDPs and thousands of people whose houses were burnt (e.g. many villages along the road Bangui to Cameroon, around Bossangoa, etc.).
- Focus on activities supporting returns of IDPs and reestablishment of basic services.
- Increase logistic capacities to allow organisations to deploy and reach beneficiaries need to increase. On one hand, the security situation was very volatile and made the use of road transport difficult and sometimes impossible. Several projects of this CERF allocation do need the common air service to deploy people and material and as such be able to deliver assistance. On the other hand, the number of organisations in the countries has increased and as such the use of common logistic services.

The number of beneficiaries should be close to 1.6 million of people who will benefit in a way or another from protection and assistance activities defined in accordance with the aforementioned priorities. Specific attention has been paid to the communities at risk of attacks (more than 100,000 people, mostly Muslims), the IDPs and host communities, women and children, single headed households and elderly people. Locations prioritized in this second allocation are also in line with the sub-national humanitarian hubs that humanitarian agencies have established/are establishing (Paoua, Bouar, Bossangoa, Kaga Bandoro, Ndele and Bambari).

The complementarity of CERF funding with CHF funding was carried out for each respective CERF and CHF allocations. A number of mechanisms were used to ensure complementarity, as for instance a review to ensure that similar activities funded in the same locations were not duplicative and on the contrary would complement each other. Complementarity between the CERF and CHF is also illustrated when it comes to the funds' recipients: most of the funding allocated through the CHF went in large part to NGO partners who did not receive funding through a subgrant of CERF funding.

III. CERF PROCESS

With the declaration of the Level 3 system wide emergency in December 2013, the coordination structure was considerably reinforced. The Deputy Special Representative of the Secretary-General/Resident Coordinator/Humanitarian Coordinator (DSRSG/RC/HC function was split and a senior Humanitarian Coordinator arrived late December 2013. The number of clusters was expanded and experienced cluster coordinators reinforced the cluster mechanism. Decentralized coordination structures in the field were limited and remain hampered by difficulties to deploy teams in high insecure areas. The high turnover of surge staff was a challenge for coordination efforts.

As for the CHF, consultations with both the inter cluster and humanitarian country team were held during both allocations processes. While the humanitarian country team gave strategic orientations, the inter cluster coordination forum proposed life-saving activities among the highest priorities in the respective sectors and within the CERF life-saving criteria.

The two CERF allocations followed the same decision and coordination processes. In terms of focus, while the first allocation was focused on alleviating humanitarian needs in Bangui, the second CERF allocation came as a complement and focused as a result on supporting the scale-up of humanitarian activities in the rest of the country.

IV. CERF RESULTS AND ADDED VALUE

TABLE 4: AFFECTED INDIVIDUALS AND REACHED DIRECT BENEFICIARIES BY SECTOR				
Total number of individuals affected by the crisis: 2,500,000				
The estimated total number of individuals directly supported through CERF funding by cluster/sector	Cluster/Sector	Female	Male	Total
	Protection/Human Rights/Rule of Law	800,352	675,978	1,476,330
	Water and sanitation	211,905	203,595	415,500
	Health	796,534	713,810	1,078,461
	Agriculture	n/a	n/a	65,000
	Shelter and non-food items	28,050	22,950	51,000
	Security	n/a	n/a	n/a
	Food	129,034	126,474	255,508
	Health Nutrition	9,216	9,073	18,289
	Coordination and Support Services Logistics	n/a	n/a	n/a

Health figures have been reduced to 36% of the figures reported in order to exclude indirect beneficiaries.

BENEFICIARY ESTIMATION

TABLE 5: PLANNED AND REACHED DIRECT BENEFICIARIES THROUGH CERF FUNDING		
	Planned	Estimated Reached
Female	900,000	800,352
Male	700,000	675,978
Total individuals (Female and male)	1,600,000	1,476,330
Of total, children <u>under</u> age 5	74,677	327,847

The planned beneficiary figures correspond to the number of beneficiaries under the second allocation.

The estimated beneficiary summary figures in table 5 draws on the total of beneficiaries under the protection sector which covered a large geographical area and population. This methodology is the current best manner to provide a realistic estimate and avoid double counting of beneficiaries. The total figure includes 1,078,461 beneficiaries under the health sector, 415,000 under the water and sanitation sector, 65,000 under the agriculture sector, 51,000 have benefited from shelter and non-food items, 255,508 from food distribution activities and 18,289 from coordination activities.

CERF RESULTS

While the application for the first allocation targeted a large number of prefectures in the country, the December 2013 events have caused a concentration of efforts on the humanitarian situation in Bangui, on the one hand because of the evolution of needs in Bangui and on the other because of the security situation in the country. The second allocation has allowed humanitarian actors to re-launch activities inside the country.

Key achievements of the CERF funds in 2014 include:

Health: 34,238 medical consultations were realised through mobile clinics in IDP sites

NFI&Shelter: More than 135,000 long lasting insecticide treated nets (LLIN) were distributed to IDPs in Bangui which covers 270,000 beneficiaries.

Nutrition: 5,028 severely acute malnourished children benefited from Ready-to-use Therapeutic Food

Food Security and Livelihoods: 1,920 + 1,515 MT of food was distributed to the conflict affected population

279,400 kg of crop seeds (corn and rice) and 49,668 tools have been distributed to 13,000 households (approximately 65,000 individuals) to help them restart agricultural activities (ref 14-RR-FAO-002 but 13-RR-FAO-044 not included)

WASH: 415,000 IDPs were provided with clean water through emergency water systems, public town chlorinated water or through rehabilitated water points

Protection: 8,808 conflict affected people received psychological or social support

40 Child Friendly Spaces established in Bangui and the country provided access to 43,562 children

144 separated and unaccompanied minors were reunified with their families

6614 survivors of gender based violence received specialized cares and were registered in the GBV information management system

472,500 people affected by the conflict and armed violence were sensitized on favourable attitudes to non-violence and involved in community dialogue and social cohesion initiatives.

2 Regional Protection Clusters were established and strengthened in Bossangoa and Bouar covering 4 provinces

14 community-based protection committees established and trained on protection threat-response

CERF's ADDED VALUE

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

YES ☒ PARTIALLY ☐ NO ☐

Even though security and logistics constraints were prominent, both CERF allocations have allowed a fast delivery of response and have contributed to a rapid scale up of the ongoing response.

For example, from January to March 2014, Agence Nationale de l'EAU et de l'Assainissement¹ (ANEA) with CERF fund was able to provide safe water within 24 hours to newly displaced people in zone 2 and transit of M'poko airport, as well as to the population in pk12 that got only restricted access to water due to fighting and movement blockage.

b) Did CERF funds help respond to time critical needs²?

YES ☒ PARTIALLY ☐ NO ☐

Most of the response was focused on Internally Displaced People and the host community directly affected by the recent crisis. As such, CERF funding helped respond to time critical needs which erupted from the crisis at the end of 2013 in Bangui and outside as well, notably in camps and communities where people fleeing violence had taken refuge.

c) Did CERF funds help improve resource mobilization from other sources?

YES ☐ PARTIALLY ☒ NO ☐

CERF projects were in most sectors co-financed by other actors. The main reason for the big increase in resources mobilisation was probably due to the declaration of the Level 3 system wide emergency.

d) Did CERF improve coordination amongst the humanitarian community?

YES ☒ PARTIALLY ☐ NO ☐

Together with the Country based pooled fund (CHF), it is the only mechanism that really put together all actors in each sector around the same table to define needs, identify gaps, avoid duplication and define the projects needed.

According to the Financial Tracking System (FTS) (<http://fts.unocha.org/>), the largest bilateral and multilateral donors which support the response to the humanitarian crisis in CAR included, ordered according to the amount of their contribution: the United States, the European Commission, Germany, the Central Emergency Response Fund (CERF), the United Kingdom, the World Bank, Sweden, Norway, the Netherlands, Canada, Denmark and France.

e) If applicable, please highlight other ways in which CERF has added value to the humanitarian response

These CERF allocations have allowed putting in place data collection mechanisms in e.g. on GBV, which will stay in place and have a longer term impact. CERF also allowed for an improved follow up and monitoring of projects.

¹ Sanitation and Water National Agency

² Time-critical response refers to necessary, rapid and time-limited actions and resources required to minimize additional loss of lives and damage to social and economic assets (e.g. emergency vaccination campaigns, locust control, etc.).

V. LESSONS LEARNED

TABLE 6: OBSERVATIONS FOR THE CERF SECRETARIAT

Lessons learned	Suggestion for follow-up/improvement	Responsible entity
With CERF funding, it is difficult to respond to crises where there are not enough humanitarian actors present at field level or in country, because of the time required to set up operations or the higher support costs.	Take into account the coverage of humanitarian actors in the country at the beginning of the crisis, allowing flexibility on timing and budget (eg costs of setting up structures) to bring in new actors.	CERF secretariat

TABLE 7: OBSERVATIONS FOR COUNTRY TEAMS

Lessons learned	Suggestion for follow-up/improvement	Responsible entity
Envelopes are often too small to work with international NGOs.	As this comment originates from the cluster coordinators, the HCT recommends that the head of agencies has an increased role in how the allocation of funds to NGOs is done by the agencies. It is highlighted that indeed big envelopes of CERF funds can help. It is recommended that the programme officers have a meeting to harmonize some costs.	HCT
Need to increase the complementarity of other funding with the CERF funding as they cover only a small part of the whole response.	Need to put in place donor coordination mechanisms in CAR and with the many donors based outside the country.	HCT
The assessment is conducted at the end of the projects	An interagency assessment is ongoing in the first 6 months of the year 2015 and therefore will have an added value in the assessment of the CERF project. It has an advantage to have an interagency assessment as the decision for the allocation of CERF funds was.	IASC

VI. PROJECT RESULTS

Evaluations are pending for all projects as an Inter-Agency Humanitarian Evaluation is planned in the context of this L3 emergency. This evaluation will investigate results of the response undertaken including CERF projects.

TABLE 8: PROJECT RESULTS				
CERF project information				
1. Agency:		UNICEF		5. CERF grant period:
2. CERF project code:		13-RR-CEF-151		6. Status of CERF grant: <input type="checkbox"/> Ongoing <input checked="" type="checkbox"/> Concluded
3. Cluster/Sector:		Protection (Child Protection)		
4. Project title:		Child Protection in CAR		
7. Funding	a. Total project budget:		US\$ 631,570	
	b. Total funding received for the project:		US\$ 252,013	
	c. Amount received from CERF:		US\$ 379,557	
d. CERF funds forwarded to implementing partners:				
<ul style="list-style-type: none"> NGO partners and Red Cross/Crescent: US\$ 324,675 Government Partners: US\$ 00.00 				
Results				
8. Total number of <u>direct beneficiaries</u> planned and reached through CERF funding (provide a breakdown by sex and age).				
<i>Direct Beneficiaries</i>		<i>Planned</i>	<i>Reached</i>	<i>In case of significant discrepancy between planned and reached beneficiaries, please describe reasons:</i>
a. Female		19,300	12,535	Cost of services and limited access both due to the prevailing security situation contributed to a slightly inferior number of individuals reached, as we attained 73 per cent of the target. Project activities did not target children under 5 as this was mainly as Early Childhood Development interventions were managed by partners working in education sector.
b. Male		18,500	11,317	
c. Total individuals (female + male):		37,800	23,852	
d. Of total, children <u>under</u> age 5		27,800	N/A	
9. Original project objective from approved CERF proposal				
Objective(s) In order to save the lives of children displaced due to the conflict: <ol style="list-style-type: none"> Ensure registration, family tracing and reunification, interim care arrangements and follow-up of boys and girls that are at heightened risk with a focus on unaccompanied and separated, children without appropriate care. Provide psychosocial support to children affected by the emergency, e.g. through provision of child friendly spaces or other community-based interventions, advocacy for return to school or emergency education, mental health referrals where expertise exists. 				
10. Original expected outcomes from approved CERF proposal				
Expected Outcomes and Indicators (please use SMART3 indicators) <ul style="list-style-type: none"> Percentage of targeted sites with a functioning referral system for children at the community level³ Percentage of Child Friendly Spaces (CFS) where structured age appropriate CFS activities are implemented based on needs 				

³ SMART indicators are: specific, to avoid differing interpretations; measurable, to allow monitoring and evaluation; appropriate to the problem statement; realistic and able to achieve; time-bound indicating a specific period of time during which the results will be achieved. Indicators must be designed to enable you to identify the different impacts (intended and unintended) your project has on women, girls, boys, and men.

identified by girls, boys and families. • Percentage IDP sites that have functioning CFS activities. • Number of people reached by community level mine risk education.	
11. Actual outcomes achieved with CERF funds	
• 88 per cent, i.e. 23 of the 26 targeted IDP sites in Bangui had a functioning community-level referral system for children. • 67 per cent, i.e. 17 out of 26 Child Friendly Spaces where structured aged appropriate CFS psycho-social activities are implemented based on needs identified by girls, boys and families. • 38 per cent, i.e. 23 out of 60 of IDP sites have functioning CFS activities.	
12. In case of significant discrepancy between planned and actual outcomes, please describe reasons:	
Within the volatile security situation, no partner had the capacity to carry out mine risk education by the time the project was completed; this is why no activity was funded in this area. Although the project did not achieve 100% of the targets, the cost interventions did not make it possible to make savings on the funds received.	
13. Are the CERF funded activities part of a CAP project that applied an IASC Gender Marker code?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
If 'YES', what is the code (0, 1, 2a or 2b): 2a If 'NO' (or if GM score is 1 or 0):	
14. Evaluation: Has this project been evaluated or is an evaluation pending?	EVALUATION CARRIED OUT <input checked="" type="checkbox"/>
Evaluation of the project has not been carried out. This will be part of overall UNICEF emergency response evaluation planned for in November 2014.	EVALUATION PENDING <input type="checkbox"/>
	NO EVALUATION PLANNED <input type="checkbox"/>

TABLE 8: PROJECT RESULTS

CERF project information					
1. Agency:		UNICEF		5. CERF grant period:	16.12.13 – 15.06.14
2. CERF project code:		13-RR-CEF-152		6. Status of CERF grant:	<input type="checkbox"/> Ongoing <input checked="" type="checkbox"/> Concluded
3. Cluster/Sector:		WASH			
4. Project title:		Response to emergency WASH needs of internally displaced persons, and vulnerable population in CAR			
7. Funding	a. Total project budget:		US\$ 2,200,000		d. CERF funds forwarded to implementing partners: ■ NGO partners and Red Cross/Crescent: US\$ 893,907 ■ Government Partners: US\$ 5,677
	b. Total funding received for the project:		US\$ 2,202,569		
	c. Amount received from CERF:		US\$ 2,189,004		
Results					
8. Total number of <u>direct beneficiaries</u> planned and reached through CERF funding (provide a breakdown by sex and age),					
Direct Beneficiaries		Planned	Reached	In case of significant discrepancy between planned and reached beneficiaries, please describe reasons:	
a, Female		51,000	84,915	A larger number of internally displaced persons existed than initially targeted, which explains the higher number reached. Taking into consideration this fact, UNICEF reached a greater number of beneficiaries through: - Carrying out activities via a greater number of partners, as compared to the initially proposed project. - Considering the timeframe, water supply by water trucking was privileged over well drilling in order to reach a greater number of beneficiaries.	
b, Male		49,000	81,585		
c, Total individuals (female + male):		100,000	166,500		
d, Of total, children <u>under</u> age 5		17,300	28,800		
9, Original project objective from approved CERF proposal					
Objectives: Response to emergency WASH needs of internally displaced persons, and vulnerable population in Central African Republic Geographic area: Bangui, Bossangoa and provincial town depending on humanitarian access, UNICEF will respond to the immediate needs of potable water in the city, distribution of NFI WASH kit to the most vulnerable IDPs, access to sanitation and emergency management of solid waste generated during the conflict through Agency for Technical Cooperation and Development (ACTED), International Rescue Committee (IRC), Solidarités International, Action Contre la Faim (ACF), Premiere Urgence Aide Médicale Internationale (PU-AMI),					
10, Original expected outcomes from approved CERF proposal					
Expected Outcomes and Indicators (please use SMART ⁴ indicators)					

⁴ SMART indicators are: specific, to avoid differing interpretations; measurable, to allow monitoring and evaluation; appropriate to the problem statement; realistic and able to achieve; time-bound indicating a specific period of time during which the results will be achieved. Indicators must be designed to enable you to identify the different impacts (intended and unintended) your project has on women, girls, boys, and men.

Indicator	Disaggregation	Source	UNICEF Target	Cluster Target ⁵
Number of IDP's covered with public town providing chlorinated water		SODECA information	180,000	
Number of IDP's covered with emergency water system		Report from implementing partner,	100,000	
Number of IDP's having access to emergency sanitation		Report from implementing partner, filed monitoring visit	100,000	
Number of hygiene promoters in IDP's camps		Training report, report from implementing partners	200	
Number of people reached by mass media campaign focusing on hand washing with soap and latrines use and maintenance		Mass media report	200,000	
Number of IDP's living in a site with solid waste management organization		Report from implementing partner, filed monitoring visit	100,000	

11. Actual outcomes achieved with CERF funds

Number of IDP's covered with public town providing chlorinated water: 180,000
Number of IDP's covered with emergency water system: 166,500
Number of IDP's having access to emergency sanitation 124,500
Number of hygiene promoters in IDP's camps : 200
Number of people reached by mass media campaign focusing on hand washing with soap and latrines use and maintenance: 86,570
Number of IDP's living in a site with solid waste management organization : NA, the waste management was covered by ACTED with other funding, UNICEF focused on other WASH needs as reported above.

12. In case of significant discrepancy between planned and actual outcomes, please describe reasons:

Number of IDP's covered with emergency water system increased due to the multiplication of sites that were not connected to the town water system. The number of people reached by mass media campaign focusing on hand washing with soap and latrines use and maintenance decreased to avoid overlapping since some actors were already conducting similar activities.

13. Are the CERF funded activities part of a CAP project that applied an IASC Gender Marker code?

YES ☒ NO ☐

If 'YES', what is the code (0, 1, 2a or 2b): 1
If 'NO' (or if GM score is 1 or 0): Wash interventions were conducted in conformity with the "5 engagements minimums WASH et genre CAR" defined and agreed by all the partners. The engagements ensured that the views of girls, boys, women and men are taken into account during all the steps of the project, from the design to the implementation and monitoring. They also ensured the data are gender desegregated and that cultural concerns were well integrated.

⁵Note: the waste management targets are new for the cluster as this is a new urgent need for the cluster to address.

14. Evaluation: Has this project been evaluated or is an evaluation pending?	EVALUATION CARRIED OUT <input type="checkbox"/>
<p>Due to the timeframe of the project within the volatile context, an evaluation cannot be objectively conducted. Some of the sites have closed and IDPs have returned home. Most of the activities were punctual activities that are difficultly traceable. Nevertheless during project implementation, UNICEF has ensured proper monitoring through field visits. Despite the fact that a former evaluation was not conducted, some findings and lessons learned should be considered: a significant number of IDPs sites were located in churches and schools compounds. The logical conclusion is that we should reinforce capacity of those institutions to respond to future crisis, i.e. construction of durable latrines, prepositioning of kits and training.</p>	EVALUATION PENDING <input type="checkbox"/>
	NO EVALUATION PLANNED <input checked="" type="checkbox"/>

TABLE 8: PROJECT RESULTS

CERF project information			
1. Agency:	UNICEF	5. CERF grant period:	01.01.14 – 30.06.14
2. CERF project code:	13-RR-CEF-153	6. Status of CERF grant:	<input type="checkbox"/> Ongoing <input checked="" type="checkbox"/> Concluded
3. Cluster/Sector:	Health		
4. Project title:	Reduce morbidity and mortality rates due to malaria among vulnerable populations of Bangui and Ouham IDPs sites.		
7. Funding	a. Total project budget:	US\$ 570,490	d. CERF funds forwarded to implementing partners: ▪ <i>NGO partners and Red Cross/Crescent:</i> US\$ 0.00 ▪ <i>Government Partners:</i> US\$ 0.00
	b. Total funding received for the project:	US\$ 446,318	
	c. Amount received from CERF:	US\$ 446,318	
Results			
8. Total number of <u>direct beneficiaries</u> planned and reached through CERF funding (provide a breakdown by sex and age).			
<i>Direct Beneficiaries</i>	<i>Planned</i>	<i>Reached</i>	<i>In case of significant discrepancy between planned and reached beneficiaries, please describe reasons:</i>
a. Female	201,450	141,006	Due to insufficient funding, only 135,583 LLINs, including Freight, Insurance & Inspection fees, were purchased with the funds received. This permitted to cover 271,166 IDPs in Bangui. Among all those who received LLINs, there were: 141,450 females, 130,160 males, and 89,485 children from 0-59 months.
b. Male	193,550	130,160	
c. Total individuals (female + male):	395,000	271,166	
d. Of total, children <u>under</u> age 5	68,335	89,485	The prevailing security situation in the Ouham health prefecture at the time of implementing the project during the first quarter of 2014, thereby creating multiple operational challenges, only the IDP sites in Bangui were covered and distribution in the Ouham IDP sites was postponed to the second semester 2014. In all the households, the distributed LLINs targeted girls, boys, pregnant women and under five children.
9. Original project objective from approved CERF proposal			
Objective(s) Overall objective: Contribute to reduce malaria morbidity and mortality rates among under-five children and pregnant women in the targeted areas. Specific objectives <ul style="list-style-type: none"> At least 80 per cent of the household living in the IDP site receive at least 2 long-lasting insecticide-treated nets At least 80 per cent of pregnant women and under five children in the IDP sites sleep under long lasting insecticide-treated net 			
10. Original expected outcomes from approved CERF proposal			

Expected Outcomes and Indicators (please use SMART6 indicators) <ul style="list-style-type: none"> 80 per cent of the household living in the IDP site received at least 2 long-lasting insecticide-treated nets At least 80 per cent of pregnant women and under five children in the IDP sites sleep under long lasting insecticide-treated net <p>The distribution strategy of 02 LLINs per household could not permit to report on the second outcome</p>	
11. Actual outcomes achieved with CERF funds	
<ul style="list-style-type: none"> 88per cent of household living in the IDP site received at least 2 long-lasting insecticide-treated nets 	
12. In case of significant discrepancy between planned and actual outcomes, please describe reasons:	
<p>Due to the prevailing security situation in the Ouham health prefecture at the time of implementing the project during the first quarter of 2014, thereby creating restriction of movement and multiple operational challenges, the LLINs distribution in the Ouham IDP sites was postponed and will take place from the 2 to 12 December.</p> <p>In Bangui, out of the 48 IDPs sites planned, only 36 were covered by the distribution. Twelve IDPs sites were empty at the time of the distribution</p>	
13. Are the CERF funded activities part of a CAP project that applied an IASC Gender Marker code?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
<p>If 'YES', what is the code (0, 1, 2a or 2b): GM=1</p> <p>If 'NO' (or if GM score is 1 or 0): The procurement and distribution of LLINs in IDP sites in Bangui and Bimbo targeted the whole household including girls, boys and pregnant women. By distributing 2 LLINs per household, all groups, both boys and girls are targeted. Gender parity was also sought in the recruitment of CHW and social mobilizers.</p>	
14. Evaluation: Has this project been evaluated or is an evaluation pending?	EVALUATION CARRIED OUT <input type="checkbox"/>
During the LLINs distribution campaign in the IDP sites in Bangui and Bimbo emphasis was laid on the day to day monitoring of LLINs distributors with government and the Central African Red Cross counterparts. This permitted to rapidly identify issues to be addressed and adjust activities accordingly. Indicators were monitored daily through an elaborated excels sheet table to show advances during the distribution activities.	EVALUATION PENDING <input checked="" type="checkbox"/>
	NO EVALUATION PLANNED <input type="checkbox"/>

⁶ SMART indicators are: specific, to avoid differing interpretations; measurable, to allow monitoring and evaluation; appropriate to the problem statement; realistic and able to achieve; time-bound indicating a specific period of time during which the results will be achieved. Indicators must be designed to enable you to identify the different impacts (intended and unintended) your project has on women, girls, boys, and men.

TABLE 8: PROJECT RESULTS

CERF project information			
1. Agency:	FAO	5. CERF grant period:	[22/01/2014 – 01.10.14
2. CERF project code:	13-RR-FAO-044	6. Status of CERF grant:	<input type="checkbox"/> Ongoing <input checked="" type="checkbox"/> Concluded
3. Cluster/Sector:	Food Security/Agriculture		
4. Project title:	Restore livelihoods in the Central African Republic: seeds for peace		
7. Funding	a. Total project budget:	US\$ 500,000	d. CERF funds forwarded to implementing partners:
	b. Total funding received for the project:	US\$ 500,000	■ <i>NGO partners and Red Cross/Crescent:</i> US\$ 292,239
	c. Amount received from CERF:	US\$ 500,000	■ <i>Government Partners:</i> US\$ 18,000
Results			
8. Total number of <u>direct beneficiaries</u> planned and reached through CERF funding (provide a breakdown by sex and age).			
<i>Direct Beneficiaries</i>	<i>Planned</i>	<i>Reached</i>	<i>In case of significant discrepancy between planned and reached beneficiaries, please describe reasons:</i>
a. Female	13,350	10,680	As members of the identified household, children under 5 where indirect beneficiaries.
b. Male	14,650	12,150	
c. Total individuals (female + male):	28,000	22,830	
d. Of total, children <u>under</u> age 5	17,700	NA	
9. Original project objective from approved CERF proposal			
Objective(s) To strengthen resilience and promote social cohesion among the populations affected by gender inequalities and recurrent crises in the prefectures of Ouham and Ombello-Mpoko in the Central African Republic. The project is in line with the objectives of the so-called <i>Plan de 100 jours</i> and the 2014 Strategic Humanitarian Response Plan for the Central African Republic.			
10. Original expected outcomes from approved CERF proposal			
Expected Outcomes and Indicators (please use SMART⁷ indicators) Result 1 4 600 rural households (23 000 people) affected by the crisis, in particular women, young girls and HIV/AIDS-affected families will receive agricultural kits in order to produce food for three to five months or the equivalent in horticultural products.			

⁷ SMART indicators are: specific, to avoid differing interpretations; measurable, to allow monitoring and evaluation; appropriate to the problem statement; realistic and able to achieve; time-bound indicating a specific period of time during which the results will be achieved. Indicators must be designed to enable you to identify the different impacts (intended and unintended) your project has on women, girls, boys, and men.

Result 2:

65 women associations (1 300 vulnerable households) restore agricultural income-generating activities through women community centres. As the community members will have various religious backgrounds, this will promote social cohesion and reconciliation.

11. Actual outcomes achieved with CERF funds

The activities for this project were carried out within the framework of FAO's Response Programme, specifically, under the agriculture programme that supported a total of 114 000 households. The aim is to improve the access to basic productive inputs through the distribution of planting materials and tools to crisis-affected families in order to restore their capacities for production.

Outcomes under Result 1:

In the project zone Basse-Kotto: 5 000 households received food crop seeds, including a total of 106 000 kg of maize, 4 000 kg of groundnut and 15 000 kg of rice (25 kg of seeds per household) and a total of 10 000 hoes (two per household) to cultivate 2 500 ha of land and produce 2 500 tonnes of food crop.

In the prefecture of Ombella M'Poko, 555 households, of which 493 heads of households (362 men and 131 women) and 62 market gardeners (48 men and 14 women) received 20 kg of amaranth, 20 kg of okra and 20 kg of onion seeds. This allowed for the cultivation of an average of 8.66 ha of land per household. Identified beneficiaries were also involved in work-intensive labour activities to restore irrigation infrastructure to enable market gardening production.

In addition, support was provided under FAO's *caisses de resilience* approach, which aims to build the resilience of farmers' groups and women's associations. This comprehensive approach enables families to generate regular income year round by enhancing their agricultural techniques, financial capacities and governance structures.

Outcomes under Result 2:

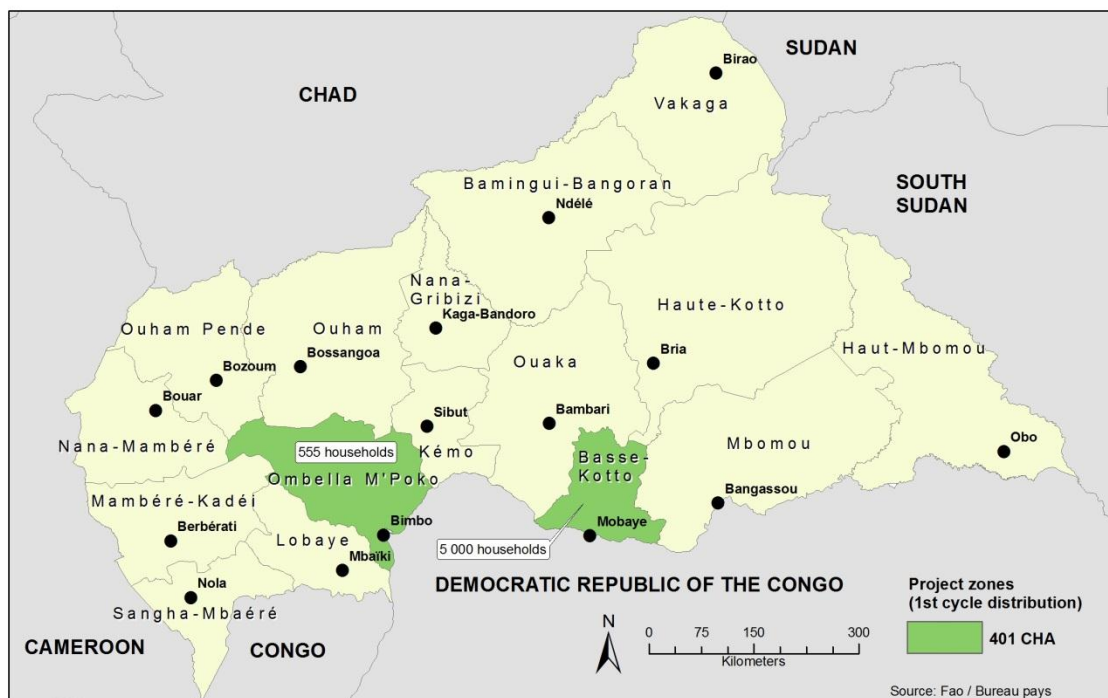
Within the framework of implementing cash for work activities, through the Agency for Technical Cooperation and Development, FAO provided 35 member groups of one cooperative in the Ouham prefecture with 35 cassava- and 105 groundnut-processing machines. This would allow them to resume processing agriculture products as they had lost their productive assets as a result of the crisis.

Difficulties:

During the implementation of the project activities, the constraints encountered were mostly related to the security situation and the limited capacities of NGOs. To address these challenges, close collaboration was undertaken with the Sangaris and MINUSCA forces to implement the project activities, as well as post distribution assessments and trainings. Furthermore, in response to the need of seeking an innovative solution in terms of logistics during conflict, field missions were carried out in the Democratic Republic of the Congo and Cameroon to monitor suppliers, temporary logistical hubs were set up in Garouaboulaye and a transporter system was put in place to ensure their availability for seed delivery. Overall, FAO's main focus is to implement life-saving activities among vulnerable farming families that aim to ensure access to food and prevent negative coping mechanisms (e.g. selling productive assets, joining militia groups, etc.) and movement of the population.

Below is a map indicating the beneficiaries assisted in the project zones for OSRO/CAF/401/CHA.

Distribution of food crop seeds in the Central African Republic (2014)



12. In case of significant discrepancy between planned and actual outcomes, please describe reasons:

13. Are the CERF funded activities part of a CAP project that applied an IASC Gender Marker code?

YES ☐ NO ☒

If 'YES', what is the code (0, 1, 2a or 2b):

If 'NO' (or if GM score is 1 or 0): The project had a particular focus in identifying women among beneficiaries for the implementation of the project activities.

14. Evaluation: Has this project been evaluated or is an evaluation pending?

EVALUATION CARRIED OUT ☒

The post distribution assessment carried out indicates that the beneficiaries planted 95 percent of the seeds were planted by the beneficiaries and 0.5 ha of land were cultivated per household, which allowed a production 0.5 tonne and an estimated production of about USD 400.

EVALUATION PENDING ☐

NO EVALUATION PLANNED ☐

TABLE 8: PROJECT RESULTS				
CERF project information				
1. Agency:		UNFPA	5. CERF grant period: 22.01.14 – 21.07.14	
2. CERF project code:		13-RR-FPA-058	6. Status of CERF grant: <input type="checkbox"/> Ongoing <input checked="" type="checkbox"/> Concluded	
3. Cluster/Sector:		Protection		
4. Project title:		Life-saving response to sexual and gender-based violence in IDPs sites and affected areas in Central African Republic		
7. Funding	a. Total project budget:		US\$ 528,000	d. CERF funds forwarded to implementing partners:
	b. Total funding received for the project:		US\$ 350,018	▪ NGO partners and Red Cross/Crescent: US\$ 60,638
	c. Amount received from CERF:		US\$ 250,018	▪ Government Partners: US\$
Results				
8. Total number of <u>direct beneficiaries</u> planned and reached through CERF funding (provide a breakdown by sex and age).				
Direct Beneficiaries		Planned	Reached	In case of significant discrepancy between planned and reached beneficiaries, please describe reasons:
a. Female		155,000	150,350	The discrepancies are a direct consequence of the security situation in 2014. This affected the capacities of UNFPA and its partners to deliver the response as planned.
b. Male		100,000	95,000	
c. Total individuals (female + male):		255,000	245,350	
d. Of total, children <u>under</u> age 5		0	0	
9. Original project objective from approved CERF proposal				
Objective(s) Objective 1: Ensure multi-sectorial response to survivors of gender-based violence, including sexual violence, from further abuses and provide them with adequate care and support (including psychosocial and medical assistance); Objective 2: Engage in awareness raising and advocacy to monitor sexual violence trends that guide the response				
10. Original expected outcomes from approved CERF proposal				

Expected Outcomes and Indicators (please use SMART⁸ indicators)**Indicators:**

- Number of service providers trained
- Number of post-rape kits distributed
- Number of points for psychosocial assistance which received a support
- Number of people who benefited from the psycho-social support disaggregated by age and gender
- Number of rape survival who benefit from medical support disaggregated by age and gender
- Number and per cent of victims identified accessing medical care within 72 hours for SGBV
- Existing reports on documented cases of sexual and gender-based violence

Expected Outcomes and Indicators (please use SMART⁹ indicators)

- Number of sensitization session carried out
- Number of beneficiaries of sensitization activities (community based / mass media) by area of concern
- Number of radio messages
- Number of community workers including youth trained on social cohesion and GBV
- Existing advocacy notes written by the GBV coordination mechanism

11. Actual outcomes achieved with CERF funds

CERF funds dedicate to the GBV repose have been used by UNFPA in cost share with other World Bank funds, the CERF have directly supported the following activities and reached the associated outcome:

- To train 77 service providers with briefings on clinical care for sexual violence survivors, the multi-sectorial response and GBV core concepts
- 41 RH kits (Kit No. 1A- Male Condoms kit 2; Kit No. 1B- Female Condoms kit 2; Kit No. 3- Rape Treatment kit 20; Kit No. 5- Sexually Transmitted Infections (STI) kit 5; Kit No. 9-Suture of Tears and Vaginal Examination kit 8) distributed to the 16 IDP's health points and 05 health facilities. These commodities helped reaching 406 rape survivors. The remaining 174 kits are the contingency stock in each health canter identified. UNFPA WB funds ensure the whole coverage of pre-positionment of PEP and complete the response of the CERF.
- 350 vulnerable GBV survivors were supported by individual dignity kit (package of minimum of items related to hygiene of displaced women (body lotion, soap, dentifrice, towels and linen for intimate hygiene).
- 04 new listening centres have been created in IDP camps, a minimum of 600 GBV survivors directly benefited from the psycho-social service offered by the ONG COHEB, UNFPA implementing partner. COHEB, in addition the partners undertook sensitization activities. Bangui, Bossangoa, Bambari and Kaga-Bandoro listening centers for psychosocial assistance have been also supported by CERF funds. COHEB conducted 144 sensitization sessions in communities, produced and widespread 17 radio messages and trained 56 community workers on mediation and social cohesion.
- 46per cent of identified rape survivors accessed medical care within 72 hours of the incidents
- Reporting and documentation of GBV incidents have been improved in 2014 towards the roll out of the Gender Based Violence Information Management System (GBVIMS). The GBVIMS started in January 2014 and supported the production of joint reports since April 2014, including informing coordination and advocacy of the GBV Sub-Cluster.

According to the GBVIMS, 6641 GBV cases received specialized assistance and were recorded by the GBVIMS from January to June 2014; 5421 clients were women and 1337 men. Two per cent of cases involved the same survivor e.g the total of survivors of GBV assisted are 6614.

GBV Type	Incidents
Rape	1958

⁸ SMART indicators are: specific, to avoid differing interpretations; measurable, to allow monitoring and evaluation; appropriate to the problem statement; realistic and able to achieve; time-bound indicating a specific period of time during which the results will be achieved. Indicators must be designed to enable you to identify the different impacts (intended and unintended) your project has on women, girls, boys, and men.

⁹ SMART indicators are: specific, to avoid differing interpretations; measurable, to allow monitoring and evaluation; appropriate to the problem statement; realistic and able to achieve; time-bound indicating a specific period of time during which the results will be achieved. Indicators must be designed to enable you to identify the different impacts (intended and unintended) your project has on women, girls, boys, and men.

Sexual Assault	325		
Physical Assault	2313		
Forced Marriage	76		
Denial of Ressources, Opportunities or Service	1077		
Psychologique/Emotional Abuse	210		
GBV vulnérabilités (Non GBV incidents)	799		

12. In case of significant discrepancy between planned and actual outcomes, please describe reasons:

N/A

13. Are the CERF funded activities part of a CAP project that applied an IASC Gender Marker code? YES ☐ NO ☒

If 'YES', what is the code (0, 1, 2a or 2b): Fill in
If 'NO' (or if GM score is 1 or 0): Special attention was paid to adolescents and young girls and boys and women and men in conflict affected zones. In addition to case management, communities are more aware on STI/HIV/GBV issues and condom is freely.

14. Evaluation: Has this project been evaluated or is an evaluation pending?	EVALUATION CARRIED OUT <input type="checkbox"/>
Monthly report on the basis of data collection. We have also tools undertook quarterly joint field mission for the purpose of monitoring/evaluation.	EVALUATION PENDING <input checked="" type="checkbox"/>
	NO EVALUATION PLANNED <input type="checkbox"/>

TABLE 8: PROJECT RESULTS

CERF project information					
1. Agency:		UNHCR		5. CERF grant period:	22.01.2014 – 22.10.2014
2. CERF project code:		13-RR-HCR-069		6. Status of CERF grant:	<input type="checkbox"/> Ongoing <input checked="" type="checkbox"/> Concluded
3. Cluster/Sector:		Protection			
4. Project title:		Protection monitoring and assistance to IDPs in Central African Republic (CAR)			
7. Funding	a. Total project budget:		US\$ 26,856,043	d. CERF funds forwarded to implementing partners:	
	b. Total funding received for the project:		US\$2,183,502	■ NGO partners and Red Cross/Crescent: US\$360,461	
	c. Amount received from CERF:		US\$450,032	■ Government Partners: US\$ 0	
Results					
8. Total number of <u>direct beneficiaries</u> planned and reached through CERF funding (provide a breakdown by sex and age).					
Direct Beneficiaries		Planned	Reached	In case of significant discrepancy between planned and reached beneficiaries, please describe reasons:	
a. Female		371, 306	371, 306	No major discrepancy	
b. Male		303,796	303,796		
c. Total individuals (female + male):		675,102	675,102		
d. Of total, children <u>under</u> age 5		236,285	236,285		
9. Original project objective from approved CERF proposal					
Objective(s) <p>The strategic objectives of the project remain those of the sectorial response plan of the CAR Protection Cluster for 2014 and in relation to protection issues and identified needs:</p> <ul style="list-style-type: none"> Monitoring of protection incidents including violations of human rights, among them the rights of women and children, in order to be able to provide for a holistic assistance, to prevent violations and to address the causes of violence within and between communities. Strengthening the protection response and advocacy in all areas affected by armed conflict and violence Promote and strengthen community protection mechanisms <p>Through an effectively coordinated programme between UNHCR and its implementing partners, the following specific objectives will be achieved:</p> <ul style="list-style-type: none"> Collect, analyse and share data on protection incidents occurring in Bangui, Bossangoa, Bouar and Bohong where most of the displacement and conflict related protection incidents are occurring, this will include, developing narrative and analytical reports on protection incidents on a weekly and monthly basis and establishment of a protection data management system; Strengthen community-based protection mechanisms through the presence of monitors and establishment of protection committees in Bangui, Bossangoa, Bouar and Bohong and ensuring the functioning of effective protection committees in these location; Through protection monitors and partners in the protection committees, develop referral pathways to report on individual cases on gender based violence (GBV) and other serious human rights violations for direct/immediate response to UNHCR, UNICEF, UNFPA, MERCY CORPS and other specialized actors; Increase the advocacy on the protection of civilian population affected by the crisis and armed violence, displacement of population, 					

<p>and, human rights violations.</p> <ul style="list-style-type: none"> • Increase the resilience of communities to prevent sectarian conflicts from becoming violent by promoting community reconciliation and dialogue and other conflict resolution measures;
10. Original expected outcomes from approved CERF proposal
<p>Expected Outcomes and Indicators (please use SMART¹⁰ indicators)</p> <ul style="list-style-type: none"> • Protection by presence is strengthened in all areas covered by the project; • Community-based protection is strengthened through the establishment of community protection committees trained on threat-response; • Civilian population affected by the conflict and armed violence, IDPs and returnees live in a stable protection environment; • Protection needs, including psychosocial and legal needs, and other assistance needs are identified, addressed and/or referred for appropriate response; • Strengthened Protection Cluster capacity at the national level and at the provincial level (namely through the revitalization of a sub-cluster in Bossangoa and in Bouar); • Contribution to the implementation of the Protection Cluster response plan and strategy; • Targeted advocacy initiatives by the Protection Cluster are enabled; • The population has access to credible information and favourable attitudes to non-violence, community reconciliation and social cohesion are promoted • A public dialogue between key actors is launched and joint measures of strengthening of protection and conflict resolution are developed and implemented. <p>Indicators</p> <ul style="list-style-type: none"> • 12 community protection committees established and trained and 2 existing committees in Bangui strengthened. These committees will have significant representation of women. • 30 priority groups (10 groups in Bangui, 10 in Bossangoa and 10 in Bouar/Bohong) covered by the protection monitoring; • 120 protection monitoring missions (40 missions per prefecture) conducted and recorded; • 1,044 protection incidents recorded (174 per month); • 730 cases referred and treated (70 per cent of reported protection incidents) • 96 narrative weekly reports produced and addressed to the Information management Officer • 24 monthly analytical and statistical reports produced • 8 analytical and statistical quarterly reports produced • 1 final report • 7 peace and mediation committees established and trained on conflict resolution, reconciliation and social cohesion • At least 60 per cent of populations in Bangui, Bossangoa, Bouar, and Bohong are targeted by the campaigns and key messages on peace, non-violence and social cohesion. <p>Note: These figures are estimated and may vary from one location to another on the basis of protection incidents occurred during the duration of implementation of the project and accessibility (security) to the zones covered.</p>
11. Actual outcomes achieved with CERF funds
<p>Through the CERF funding, UNHCR achieved the following outcomes:</p> <ul style="list-style-type: none"> • 19 community protection committees established and trained • 170 protection monitoring missions were conducted and recorded; • 897 cases referred and treated (70 per cent of reported protection incidents) • 100 narrative weekly reports produced and addressed to the Information management Officer • 30 monthly analytical and statistical reports produced • 8 analytical and statistical quarterly reports produced • 1 final report • 4 peace and mediation committees established and trained on conflict resolution, reconciliation and social cohesion

¹⁰ SMART indicators are: specific, to avoid differing interpretations; measurable, to allow monitoring and evaluation; appropriate to the problem statement; realistic and able to achieve; time-bound indicating a specific period of time during which the results will be achieved. Indicators must be designed to enable you to identify the different impacts (intended and unintended) your project has on women, girls, boys, and men.

<ul style="list-style-type: none"> A vast campaign on peace, non-violence and social cohesion was conducted in Bangui, Bossangoa, Bouar, and Bohong in collaboration with SFCG (Search for Common Ground) and ASA (Afrique Secours et Assistance) <p>Elaboration of following strategies and plans of actions by the Protection Cluster and under the leadership of UNHCR as cluster lead:</p> <ul style="list-style-type: none"> National protection strategy and cluster's plan of action (endorsed by the HCT) with focus on 6 main areas: communities at risk, support return, child protection, SGBV, community protection; and strengthening state authority. Strategy of protection of communities at risk (endorsed by the HCT) Plans of actions for enclaves in Boda, Carnot, Yaloke, Kabo and Moyen-Sido (endorsed by ICC and HCT) Plan of action for PK5 (endorsed by the ICC and the HCT) Plan of action for M'Poko IDP site for voluntary relocation. <p>Advocacy, through the Protection Cluster was directed towards authorities and other stakeholders, including warring parties, impressing upon them to abide by their internationally recognized responsibilities. Finally, UNHCR was the leader for the protection cluster, where, as of December 31, 2014, it dedicated senior staff and mobilized resources for the coordination of protection interventions with a team of some 74 organizations (national and international NGOs, UN agencies, UN and AU missions and civilian associations). Hence, at the end of the reporting period, some 4113 persons have been trained on protection matters and more than 170 protection missions were organized in displacement and return zones.</p>	
12. In case of significant discrepancy between planned and actual outcomes, please describe reasons:	
There was no discrepancy between planned and actual outcomes and/or activities	
13. Are the CERF funded activities part of a CAP project that applied an IASC Gender Marker code?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
<p>If 'YES', what is the code (0, 1, 2a or 2b):</p> <p>If 'NO' (or if GM score is 1 or 0): UNHCR's Age and Gender Diversity Mainstreaming (AGDM) tool was used.</p>	
14. Evaluation: Has this project been evaluated or is an evaluation pending?	EVALUATION CARRIED OUT <input type="checkbox"/>
UNHCR implemented projects are evaluated yearly through an audit cabinet. The evaluation of this project was supposed to be have been conducted in February 2015. However, the exercise is postponed to March and the result should be shared with CERF as soon as available.	EVALUATION PENDING <input checked="" type="checkbox"/>
	NO EVALUATION PLANNED <input type="checkbox"/>

TABLE 8: PROJECT RESULTS

CERF project information					
1. Agency:		UNHCR		5. CERF grant period:	02.01.14-01.07.14
2. CERF project code:		13-RR-HCR-070		6. Status of CERF grant:	<input type="checkbox"/> Ongoing <input checked="" type="checkbox"/> Concluded
3. Cluster/Sector:		Emergency Shelter/NFI			
4. Project title:		Provision of Emergency Shelter to Vulnerable IDPs in the Ouham and Ouham-Pende Prefectures.			
7. Funding	a. Total project budget:		US\$ 22,595,004	d. CERF funds forwarded to implementing partners:	
	b. Total funding received for the project:		US\$1,877,935	■ NGO partners and Red Cross/Crescent: US\$ 0	
	c. Amount received from CERF:		US\$ 877,935	■ Government Partners: US\$ 0	
Results					
8. Total number of <u>direct beneficiaries</u> planned and reached through CERF funding (provide a breakdown by sex and age).					
Direct Beneficiaries		Planned	Reached	In case of significant discrepancy between planned and reached beneficiaries, please describe reasons:	
a. Female		30,250	28,050		
b. Male		24,750	22,950		
c. Total individuals (female + male):		55,000	51,000		
d. Of total, children <u>under</u> age 5		19,250	17,850		
9. Original project objective from approved CERF proposal					
Objective(s) <p>Through this project, UNHCR seeks to contribute to the attainment of the 2013 Shelter Cluster objectives, in the framework of its 2013 first response pillar - Emergency Response. It seeks to provide emergency shelter as life-saving assistance to vulnerable IDPs, and, at the same time, enhance the capacities of the protection cluster to respond to new displacements in a timely, efficient and accountable manner. As such, this project seeks to respond to the following objectives:</p> <ul style="list-style-type: none"> • Improve living conditions and the protection of IDPs settled in spontaneous sites or stabilized camps through site planning and provision of emergency shelter according to SPHERE standards. • Enhance the Shelter Cluster capacities in view of the rapid scale up of needs due to the new configuration of the current emergency. 					
10. Original expected outcomes from approved CERF proposal					
Outcomes <ul style="list-style-type: none"> • The protection of IDP households is strengthened through the provision of emergency shelter, • The living conditions of the most vulnerable IDPs in Bossangoa, Bouca and Bozoum improves, • The Shelter Cluster is reinvigorated with coordination and leadership capacities to respond to the challenges of the new emergency: • Shelter interventions within the current emergency are coordinated, • Gaps and shelter needs in IDP interventions are identified and acted upon in a timely and efficient way, 					

<ul style="list-style-type: none"> • Site planning is done in Bossangoa, Bouca and Bozoum and space for erecting tents is identified on the IDP settlements, • Family tents are sourced, procured and delivered on the ground in emergency mode, • Vulnerable IDP households in Bosangoa, Bouca and Bozoum are identified based on agreed-upon criteria in close collaboration with IDP communities, authorities and hosting sites officials, • Tents are erected in the quickest and most effective way possible • A Shelter Cluster Coordinator for the emergency is identified, recruited and deployed, • An expert Site Planner is deployed on the ground. <p>Indicators</p> <ul style="list-style-type: none"> • 2,000 family tents, double fold (4x4m) are provided of which 1,450 in Bossangoa, 331 in Bozoum and 219 in Bouca. • 10,000 IDPs live in adequate dwellings, • 1 Shelter Cluster is strengthened, • 2,000 family tents are sourced and procured, • 3 sites are planned (1 in Bossangoa, 1 Bouca and 1 in Bozoum) and space is cleared for tents erecting, • 2,000 IDP households are identified, 1450 in Bossangoa, 331 in Bozoum and 219 in Bouca, • 2,000 family tents are erected, • 1 Shelter Coordinator to support the initial setup of the Cluster is recruited and deployed in Bangui, • 1 Expert Site Planner is operational. 	
11. Actual outcomes achieved with CERF funds	
<ul style="list-style-type: none"> • The protection of IDP households is strengthened through the provision of emergency shelter, • The living conditions of the most vulnerable IDPs in Bossangoa, Bouca and Bozoum improves, • The Shelter Cluster is reinvigorated with coordination and leadership capacities to respond to the challenges of the new emergency: • Shelter interventions within the current emergency are coordinated, • Gaps and shelter needs in IDP interventions are identified and acted upon in a timely and efficient way, • Site planning is done in Bossangoa, Bouca and Bozoum and space for erecting tents is identified on the IDP settlements, • Family tents are sourced, procured and delivered on the ground in emergency mode, • Vulnerable IDP households in Bosangoa, Bouca and Bozoum are identified based on agreed-upon criteria in close collaboration with IDP communities, authorities and hosting sites officials, • Tents are erected in the quickest and most effective way possible • A Shelter Cluster Coordinator for the emergency is identified, recruited and deployed, • An expert Site Planner is deployed on the ground. <p>Although 2,000 family tents were procured, the Cluster changed the strategy on the ground that a tented camp might be a danger to the IDP, taking into account the nature of the conflict. It should be noted that 1,245 tents were already distributed. Instead, shelter materials were provided and distributed as appropriated in Bossangoa, Bouca, and Bozoum. A Shelter coordinator was recruited and redeployed throughout the period under review to and beyond to coordinate the activity of the cluster, together with an expert site planner</p> <ul style="list-style-type: none"> • 2,000 family tents were procured out of which 1245 were distributed as planned. • 4431 households received either a tent or a shelter kit as appropriated in Bossangoa, Bouca, and Bozoum. • A Shelter coordinator was recruited and redeployed throughout the period under review to and beyond to coordinate the activity of the cluster <p>1 Expert Site planner was recruited and deployed during the period covered by the project., together with an expert site planner</p>	
12. In case of significant discrepancy between planned and actual outcomes, please describe reasons:	
There is no major discrepancy. However, due to the insecurity, the implementation has proven hectic for UNHCR. Instead of tents, the Cluster recommended the use of Emergency Shelter kits.	
13. Are the CERF funded activities part of a CAP project that applied an IASC Gender Marker code?	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>

<p>If 'YES', what is the code (0, 1, 2a or 2b):</p> <p>If 'NO' (or if GM score is 1 or 0): UNHCR's Age and Gender Diversity Mainstreaming (AGDM) tool was used.</p>	
14. Evaluation: Has this project been evaluated or is an evaluation pending?	EVALUATION CARRIED OUT <input type="checkbox"/>
UNHCR implemented projects are evaluated yearly through an audit cabinet. The evaluation of this project was supposed to be having been conducted in February 2015. However, the exercise is postponed to March and the result should be shared with CERF as soon as available.	EVALUATION PENDING <input checked="" type="checkbox"/>
	NO EVALUATION PLANNED <input type="checkbox"/>

TABLE 8: PROJECT RESULTS

CERF project information					
1. Agency:		IOM		5. CERF grant period:	13.12.13 – 12.06.14
2. CERF project code:		13-RR-IOM-044		6. Status of CERF grant:	<input type="checkbox"/> Ongoing <input checked="" type="checkbox"/> Concluded
3. Cluster/Sector:		Protection			
4. Project title:		Humanitarian Emergency Assistance to Displaced Populations in CAR			
7. Funding	a. Total project budget:		US\$2,581,937		
	b. Total funding received for the project:		US\$2,581,937		
	c. Amount received from CERF:		US\$ 380,000		
		d. CERF funds forwarded to implementing partners:			
		■ NGO partners and Red Cross/Crescent: US\$ 119,833 ■ Government Partners: US\$			
Results					
8. Total number of <u>direct beneficiaries</u> planned and reached through CERF funding (provide a breakdown by sex and age).					
Direct Beneficiaries		Planned	Reached	In case of significant discrepancy between planned and reached beneficiaries, please describe reasons:	
a. Female		105,000	225,000	The discrepancy between the planned and reached figure can be explained by the following factors: At the height of the crisis IOM was in fact monitoring 125 displacement sites host to 450,000 IDPs in Bangui. This was possible due to funding received from OFDA and ECHO. In addition, the number of people displaced was highest during the first six months of the year when the CERF project was active. It is difficult to calculate a proportion for the CERF funding, as at the beginning CERF was the only funding available for the project and was therefore responsible for reaching all of the beneficiaries. The additional secured funding provided more sustainability over the over the longer term.	
b. Male		105,000	225,000		
c. Total individuals (female + male):		210,000	450,000		
d. Of total, children <u>under</u> age 5		50,000	110,000		
9. Original project objective from approved CERF proposal					
Objective(s) To contribute to the identification of life-saving needs and gaps and to improve the effectiveness and efficiency of humanitarian and protection response of populations in spontaneous IDP sites by: <ul style="list-style-type: none"> Establish and maintain contact with the leaders in the spontaneous IDP sites, helping to create community committees if necessary, and facilitate interaction between beneficiaries and the humanitarian community and other stakeholders; Monitor the dynamics and size of the spontaneous IDP sites, and population movements Particular focus on the persons at risk (minorities, pregnant and lactating women, persons at risk of GBV, children, older persons, persons with disabilities, men specifically targeted by militias etc.) Information on vulnerabilities are gathered through an interactive template (established in the protection cluster, attended by both UNFPA and UNICEF as lead agencies for GBV and UAM), which ensures immediate sharing of relevant information through the cluster lead with responding partners. Increase the accountability of the humanitarian actors to the beneficiaries 					

10. Original expected outcomes from approved CERF proposal

Expected Outcomes and Indicators (please use SMART11 indicators)

- Number of spontaneous sites with team facilitators (static team in highly populated sites and mobile team for the other) – target: 36 spontaneous sites
- Number of reports distributed on population movements and needs/gaps of the sites to humanitarian partners – target: monthly
- Facilitate the dissemination of key information and messages from the humanitarian community to the IDP communities.
- Listen, record and relay the IDP concerns, ensuring all vulnerable populations (minorities, pregnant and lactating women, persons at risk of GBV, children, older persons, persons with disabilities, men specifically targeted by militias etc.) are included and relayed to the different key stakeholders (humanitarian communities, local authorities).

11. Actual outcomes achieved with CERF funds

Expected Outcomes and Indicators (please use SMART12 indicators)

- **Number of spontaneous sites with team facilitators (static team in highly populated sites and mobile team for the other) – target: 36 spontaneous sites. Achieved: 78 Sites**

Since December 2013, IOM site facilitators have actively monitored 78 displacement sites with on-site visits to collect information about movement trends and humanitarian needs on the sites. At the beginning of the displacement crisis a team of 42 facilitators were visiting these 78 displacement sites on a daily basis to monitor displacement trends as well as humanitarian needs. This team of facilitators was organised by the secondment of staff from national and international NGO implementing partners, IDEAL, JUPEDDEC, DRC, Mercy Corps, AIDES, AFPE and REMOD. IOM established a daily presence in the Mosquée Centrale from February 2014 and in the Eglise Luthérienne from April 2014, dedicating a site manager to follow up directly with partners regarding needs on the two sites, while throughout the project period, information on all sites was fed into the displacement tracking matrix (DTM) and shared with cluster leads. Cluster leads could then follow up with their members to react to the information provided and fill gaps.

Since the activation of the Camp Coordination and Camp Management (CCCM) Cluster, in December 2013 the site facilitators also supported the handing over of contacts, information collected and data to the appointed cluster leads, including contributing to 3W records of the cluster and feeding data on displacement movements to the CAR government's Commission for Movement of Populations (CMP). In coordination with the cluster leads, the site facilitators continue with their work on site to enable a triangulation of information. IOM as co-lead of the CCCM cluster, works closely with UNHCR cluster lead to monitor management of the several displacement sites in Bangui.

As an implementing partner, Danish Refugee Council DRC provided site facilitators to the IOM managed team between December and February 2014. In February DRC took over direct site management of two displacement sites in Bangui, namely Don Bosco/Damala and Paroisse St. Charles de Lwanga. Although the DRC team who worked as site facilitators with IOM were no longer included in the reduced site facilitation team, the partnership between the two organisations has continued with DRC still feeding data for the sites managed by them, into the displacement tracking matrix. This slight reduction in the site facilitation team is symptomatic of the ongoing adaptation of IOM to the context throughout the crisis and project period.

In January PU-AMI took over the site management of the Mpoko Airport displacement site and began sharing data for the matrix. In March IOM site facilitators trained PU-AMI staff on the completion of the inter-cluster forms and data sharing tools.

Towards the end of this project period the number of displacement sites in Bangui reduced as some people were able to return home. In June 2014, the IOM team were monitoring 43 sites. An analysis of the displacement trends showed that new displacement was likely. The reduced number of sites to monitor as well as the fact that more humanitarian needs were being met with the regular provision of services than at the start of the crisis (and the project period), IOM in coordination with the CCCM cluster decided to reduce site visits to once a week and therefore the team to a group of 19 site facilitators.

¹¹ SMART indicators are: specific, to avoid differing interpretations; measurable, to allow monitoring and evaluation; appropriate to the problem statement; realistic and able to achieve; time-bound indicating a specific period of time during which the results will be achieved. Indicators must be designed to enable you to identify the different impacts (intended and unintended) your project has on women, girls, boys, and men.

¹² SMART indicators are: specific, to avoid differing interpretations; measurable, to allow monitoring and evaluation; appropriate to the problem statement; realistic and able to achieve; time-bound indicating a specific period of time during which the results will be achieved. Indicators must be designed to enable you to identify the different impacts (intended and unintended) your project has on women, girls, boys, and men.

The funding of this project allowed IOM to act quickly in setting up a dynamic information system to inform humanitarian partners. It was possible to cover almost all sites throughout Bangui through this funding and additional funds received from ECHO and OFDA. Though outside the scope of this project, IOM is also running site facilitation in Kabo, Moyenne Sido and Boda.

- **Number of reports distributed on population movements and needs/gaps of the sites to humanitarian partners – target: monthly. Achieved: weekly and monthly DTM reports**

At the beginning of the crisis when movements were more volatile and humanitarian service provision was less established, IOM sent daily reports to the clusters on humanitarian needs. The DTM manager followed up directly with humanitarian partners to request support for reaction to urgent needs such as water trucking, shelter, etc.

Between January and June IOM also produced monthly Return Intention Survey reports sharing information about the intentions of displaced people as regards how long they planned to stay on the displacement sites, the causes of their displacement and the conditions necessary to enable their return.

Monthly site profiles were also published as snapshots of the situation and trends on all of the active sites. The site profiles included information and graphics on the place of origin of the displaced people, information on services being provided on the site and gaps in assistance by thematic cluster sector.

For the food security cluster, a survey on survival mechanisms in the sites was undertaken. The health cluster requested specific information on distance of health centres in relation to displacement sites and whether medical services were free of charge. IOM and the site facilitator programme have provided detailed survey results on all specific questions addressed to this project.

- **Facilitate the dissemination of key information and messages from the humanitarian community to the IDP communities.**

Clusters providing responses to the needs raised in the DTM regularly feedback to IOM whether a response has been found or the requested need cannot be met due to humanitarian needs of the community. The information received is shared with the site facilitation team so that the DTM is a two-way dialogue between humanitarian actors and the IDP communities. The site facilitators have also supported the CCCM cluster in the delivery of invitation letters to meetings for site representatives and supporting travel to the meetings for representatives of sites in the Muslim enclave.

- **Listen, record and relay the IDP concerns, ensuring all vulnerable populations (minorities, pregnant and lactating women, persons at risk of GBV, children, older persons, persons with disabilities, men specifically targeted by militias etc.) are included and relayed to the different key stakeholders (humanitarian communities, local authorities).**

On a daily basis, IOM receives up to 20 calls or requests of agencies to share specific information of sites in order to be able to respond to reported situations. IOM also participates directly in the GBV and UMSC referral systems on a case by case basis. Humanitarian assistance, gaps and responses are being recorded and regularly shared through so called site profiles, generated by the DTM. Specific sections of the data collection inter-cluster form used by the site facilitators cover the needs of vulnerable populations. Site facilitators interacting with the displaced people on the sites are trained to take into account the different needs vulnerable populations and regularly draw attention to the needs of elderly people alone, as well as concerns of groups of people such as children in need of school or child-friendly spaces, pregnant women in need of maternity healthcare and spent adequate time during site visits to talk to different people and understand their needs, so that these were fed into the DTM or raised through individual referrals.

Reprogramming Request

In May 2014, CERF approved a reprogramming request which reviewed initial estimates for the NGO partnerships and vehicle rental and running costs. As at the time of the project conception no market survey was yet available, estimates were used in an emergency context to enable the site facilitation project to begin as quickly as possible. For the NGO partnerships, these estimated budgets proved to be higher than necessary. With the growing capacity of the facilitators, as well as requested information from cluster partners, a distinct profile emerged so that certain NGOs seconded up to ten staff with particular skill sets, while others only seconded five staff members. This resulted in distinct and individualised budgets and ultimately a lower cost than originally estimated.

<p>ON the other hand, the cost of transport was underestimated in the original budget as this cost is extremely high in CAR. The use of public transport was ruled out as an option for security and access reasons. IOM was running mixed site facilitator teams and frequent check points by Anti-balaka have limited site facilitators' movements, while some sites, such as the Mosquée Centrale were in areas not served by taxis. The savings made on the NGO partnerships were used towards vehicle rentals and running costs.</p>	
<p>12. In case of significant discrepancy between planned and actual outcomes, please describe reasons:</p>	
<p>N/A</p>	
<p>13. Are the CERF funded activities part of a CAP project that applied an IASC Gender Marker code?</p>	<p>YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p>
<p>If 'YES', what is the code (0, 1, 2a or 2b): n/a If 'NO' (or if GM score is 1 or 0): While the project wasn't part of a CAP project that applied the IASC Gender marker code, the project did mainstream gender considerations. Site facilitators were trained in CCCM and protection concerns to look out for issues affecting all vulnerable populations on the sites. As described above, those reporting experiences of SGBV were referred to partners provide support for such cases. Problems of nighttime lighting on sites for women accessing latrines were reported to the clusters. Problems of armed</p>	
<p>14. Evaluation: Has this project been evaluated or is an evaluation pending?</p>	<p>EVALUATION CARRIED OUT <input type="checkbox"/></p>
<p>While no formal evaluation of the project is planned or has been carried out, the project has gone through a cycle of evaluations by the clusters to amend and adapt the intercluster questionnaire which was the basis for the work of the site facilitators. The quality of the site facilitators was also monitored by the CMP, the protection and the CCCM cluster.</p>	<p>EVALUATION PENDING <input type="checkbox"/></p>
	<p>NO EVALUATION PLANNED <input checked="" type="checkbox"/></p>

TABLE 8: PROJECT RESULTS

CERF project information				
1. Agency:		UNDP		5. CERF grant period:
2. CERF project code:		13-RR-UDP-018		6. Status of CERF grant: <input type="checkbox"/> Ongoing <input checked="" type="checkbox"/> Concluded
3. Cluster/Sector:		Security		
4. Project title:		UNDSS SURGE SUPPORT FOR THE CENTRAL AFRICAN REPUBLIC		
7. Funding	a. Total project budget:		US\$1,559,913	
	b. Total funding received for the project:		US\$	
	c. Amount received from CERF:		US\$ 296,750	
		d. CERF funds forwarded to implementing partners:		
		▪ NGO partners and Red Cross/Crescent:		US\$ 0.00
		▪ Government Partners:		US\$ 0.00
Results				
8. Total number of <u>direct beneficiaries</u> planned and reached through CERF funding (provide a breakdown by sex and age).				
Direct Beneficiaries		Planned	Reached	In case of significant discrepancy between planned and reached beneficiaries, please describe reasons:
a. Female		n/a	n/a	N/A, this is a 'support services' project
b. Male		n/a	n/a	
c. Total individuals (female + male):		n/a	n/a	
d. Of total, children <u>under</u> age 5		n/a	n/a	
9. Original project objective from approved CERF proposal				
Objective(s) To assist in maintaining seamless coordination and liaison with security counterparts including those with the Transitional Government and provide security support to UN and I/NGO staff, there is an urgent requirement for UNDSS in the first phase (60 days): <ul style="list-style-type: none"> To deploy two international Field Security Coordination Officer (FSCO) and one Local Security Assistant (LSA) to Bossangoa, Paoua and Kaga-Bandoro, respectively. All staff to be enlisted shall be provided with VHF handset, satellite and cellular phones, as well as in-country transport assets and PPE. They will enhance and maintain close coordination with security partners on the ground. The lone LSA shall be supervised by one of the two FSCOs to be deployed. 				
10. Original expected outcomes from approved CERF proposal				
Expected Outcomes and Indicators (please use SMART indicators) <ul style="list-style-type: none"> Deployment of international FSCOs and a Local Security Assistant to cover Paoua, Kaga-Bandoro and Bossangoa ; Establishment of a close liaison between all security components on the ground and other relevant contacts to receive timely information on the security situation in the area and surrounding locations; Establishment and maintenance of systems for the gathering of reliable information from all agencies and implementing partners; Provision of mechanisms that all Agencies can utilize to continuously update their staff with security-related information necessary for enhanced mission planning and conduct; Identification of threats and development as well as implementation of mitigating measures to reduce risks to a more acceptable level; 				

<ul style="list-style-type: none"> Establishment of an effective area security management system which will provide adequate support to all missions going into the field and deep quarters in capital which will enable projects to be undertaken. 	
11. Actual outcomes achieved with CERF funds	
<ul style="list-style-type: none"> UNDSS was able to provide UN agencies and their participating partners sustained and real-time updates on the security situation in the affected areas. Staff received security related information and analysis necessary for enhanced mission planning and conduct; Identified threats faced by UN/Humanitarian community and develop as well as implement mitigating measures to reduce risks to a more acceptable level; Assisted and advised Area Security Coordinators; Gathered and shared, in a timely manner, relevant security information with UN agencies and implementing partners (email lists established) Issued SOPs and security advisories; Supported humanitarian organisations in programme/mission planning, office security measures, negotiating access; Established and held regular security briefings and maintained reporting arrangements in field locations; Conducted security risk assessments (SRAs) for covered field locations/security areas; Advised UN agencies on MOSS compliance, ECS requirements, and security mitigation measures; Updated security and contingency plans for covered field locations; Established warden systems at field locations; Expanded the liaison capabilities of UNDSS with the Transitional Government security counterparts, the French forces, the Multinational Force of Central Africa (FOMAC), the African-led International Support Mission to the Central African Republic (MISCA), and diplomatic community interlocutors in generating timely information and sharing updates on significant events that may impact on humanitarian operations. Ensured day-to-day operational coordination with all security actors on the ground Prepared implementation of medical evacuation SOPs (Standard Operating Procedures) for UN/INGOs 	
12. In case of significant discrepancy between planned and actual outcomes, please describe reasons:	
N/A	
13. Are the CERF funded activities part of a CAP project that applied an IASC Gender Marker code?	YES <input type="checkbox"/> NO <input type="checkbox"/>
<p>If 'YES', what is the code (0, 1, 2a or 2b): If 'NO' (or if GM score is 1 or 0): This project in the CAP project has a score of 4 – Not applicable – Only used for very small number of projects such as 'support services'.</p>	
14. Evaluation: Has this project been evaluated or is an evaluation pending?	EVALUATION CARRIED OUT <input type="checkbox"/>
No evaluation has been conducted for this project.	EVALUATION PENDING <input type="checkbox"/>
	NO EVALUATION PLANNED <input checked="" type="checkbox"/>

TABLE 8: PROJECT RESULTS

CERF project information					
1. Agency:		WFP		5. CERF grant period:	[20.12.13 – 19.06.14]
2. CERF project code:		13-RR-WFP-081		6. Status of CERF grant:	<input type="checkbox"/> Ongoing <input checked="" type="checkbox"/> Concluded
3. Cluster/Sector:		Food security			
4. Project title:		Assistance to the Conflict-Affected Population in the Central African Republic			
7. Funding	a. Total project budget:		US\$ 116,042,300*	d. CERF funds forwarded to implementing partners:	
	b. Total funding received for the project:		US\$ 89,100,758*	▪ NGO partners and Red Cross/Crescent: US\$ 149,031	
	c. Amount received from CERF:		US\$ 2,493,466	▪ Government Partners: US\$ 0	
Results					
8. Total number of <u>direct beneficiaries</u> planned and reached through CERF funding (provide a breakdown by sex and age).					
Direct Beneficiaries		Planned	Reached	In case of significant discrepancy between planned and reached beneficiaries, please describe reasons:	
a. Female		28,000	66,669	With this CERF grant, WFP had planned to provide 1,340mt of cereal, 68mt of vegetable oil, 200mt of peas and 17mt of salt, of a total of 1,625 mt of food, to reach 55,800 people. However, the proposal for this contribution was developed before the 5 December 2013 crisis and the activation of the L3. When the crisis happened, WFP had to reprioritize based on the pipeline, given the new situation, and focused on the purchase of rice to enable a scaling-up interventions and reach people in need. This way, WFP was able to take the opportunity to procure a higher total tonnage of food, 1,920mt of rice, and thus was able to feed more people than initially planned.	
b. Male		27,800	64,606		
c. Total individuals (female + male):		55,800	131,275		
d. Of total, children <u>under</u> age 5		8,900	19,670		
9. Original project objective from approved CERF proposal					
Objective(s) Save and protect the lives of conflict-affected persons by ensuring adequate access to food.					
10. Original expected outcomes from approved CERF proposal					
Expected Outcomes and Indicators (please use SMART13 indicators) Eighty percent of the targeted population (55,800) has received food assistance.					
11. Actual outcomes achieved with CERF funds					

¹³ SMART indicators are: specific, to avoid differing interpretations; measurable, to allow monitoring and evaluation; appropriate to the problem statement; realistic and able to achieve; time-bound indicating a specific period of time during which the results will be achieved. Indicators must be designed to enable you to identify the different impacts (intended and unintended) your project has on women, girls, boys, and men.

WFP reach over 135 per cent of the planned beneficiaries.	
12. In case of significant discrepancy between planned and actual outcomes, please describe reasons:	
<p>The project duration for this contribution was 6 months and WFP worked with various national and international organisations to carry out food distributions. A small amount of the food was left after the project period had ended, due to the considerable supply chain and logistical difficulties experienced throughout the year, which slowed down incoming food supplies. However, WFP used this amount to work with IEDA Relief in December 2014 to provide assistance in the localities of Abba and Amada Gaza where information about humanitarian needs in the areas had not been available in previous months. The payment to the partner for associated costs of distribution of the food was carried out after the CERF timeframe (in December) and this was not communicated with CERF/the local OCHA delegation at the time. However, the food was purchased within the Terminal Obligation Date, the final date for which all procurement has to be made and the Terminal Disbursement Date, the final date where all funds have to be used.</p>	
13. Are the CERF funded activities part of a CAP project that applied an IASC Gender Marker code?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
<p>If 'YES', what is the code (0, 1, 2a or 2b): 2a If 'NO' (or if GM score is 1 or 0):</p>	
14. Evaluation: Has this project been evaluated or is an evaluation pending?	EVALUATION CARRIED OUT <input type="checkbox"/>
No evaluation was planned as this project is an emergency operation.	EVALUATION PENDING <input type="checkbox"/>
	NO EVALUATION PLANNED <input checked="" type="checkbox"/>

TABLE 8: PROJECT RESULTS

CERF project information				
1. Agency:		WHO		5. CERF grant period:
2. CERF project code:		13-RR-WHO-078		6. Status of CERF grant: <input type="checkbox"/> Ongoing <input checked="" type="checkbox"/> Concluded
3. Cluster/Sector:		Health		
4. Project title:		Providing emergency health interventions to populations affected by the crisis in Central African Republic		
7. Funding	a. Total project budget:		US\$ 1,613,728	
	b. Total funding received for the project:		US\$ 1,126,096	
	c. Amount received from CERF:		US\$ 487,632	
		d. CERF funds forwarded to implementing partners:		
		<ul style="list-style-type: none"> NGO partners (Save The Children) US\$ 248,780 Government Partners: US\$ 0 		
Results				
8. Total number of <u>direct beneficiaries</u> planned and reached through CERF funding (provide a breakdown by sex and age).				
Direct Beneficiaries		Planned	Reached	In case of significant discrepancy between planned and reached beneficiaries, please describe reasons:
a. Female		456,822	443,091	No significant discrepancy
b. Male		475,467	461,180	
c. Total individuals (female + male):		932,289	904,271	
d. Of total, children <u>under</u> age 5		186,458	180,855	
9. Original project objective from approved CERF proposal				
Objective(s) <ul style="list-style-type: none"> Improve access to emergency health care in IDPs sites in Bangui town as well as basic and secondary health care for the most distressed host population in health districts affected by armed fighting in Ouham, Ouham Pendé and Nana Mambéré. Increase health partner's capacity in coordinated outbreak response in crisis affected health districts of west and northwest CAR. 				
10. Original expected outcomes from approved CERF proposal				
Expected Outcomes and Indicators (please use SMART14 indicators) <ul style="list-style-type: none"> 100 per cent of targeted health facilities in IDP sites as well as in Bangui and health district's facilities have received emergency medical kits and ensured emergency care for wounded patients 100 per cent of targeted health facilities are operational with health personnel receiving motivation Access to emergency health care has improved (service utilization coverage increased, 1 consultation per person per year) At least 50 per cent of skilled health workers of targeted health facilities are trained in mass casualty management At least 80 per cent of suspected epidemics are detected within 72 hours and timely responded due to an operational EWARS in all IDP sites and health facilities Measles immunization coverage increased amongst IDPs up to 95 per cent 				

¹⁴ SMART indicators are: specific, to avoid differing interpretations; measurable, to allow monitoring and evaluation; appropriate to the problem statement; realistic and able to achieve; time-bound indicating a specific period of time during which the results will be achieved. Indicators must be designed to enable you to identify the different impacts (intended and unintended) your project has on women, girls, boys, and men.

11. Actual outcomes achieved with CERF funds

100 per cent of targeted health facilities in IDP sites as well as in Bangui and health district's facilities have received emergency medical kits and ensured emergency care to wounded patients

The number of health facilities stocked with emergency kits exceeded the number originally planned, a total of 70 health centers in IDP sites, health districts and 18 hospitals in the most affected areas by the humanitarian crisis received health emergency kits (see annex 1 et 2 for detail). The total quantity provided was as follows:

- 342 basic kits for basic health care for a population of 342,000 people for three months
- 15 supplementary kits for health care at hospitals for the care of hospitalized patients in of a population of 150 000 people for three months
- 17 trauma kits to manage 1,700 serious injuries cases
- HR 88 A and B kits for 26,400 birth delivery management and 1,300 cases of post rape treatment
- 7,000 blood bags of 450 ml and 1,620 double blood bags and reagents for blood transfusion.

• 100 per cent of targeted health facilities are operational with motivated health personnel

The activities accomplished by WHO through the international NGO *Save the Children* with collaboration of the Ministry of Health.

Daily Mobile clinics at IDP sites at BIMBO and MUKASSA

- Free health care provided at the IDP sites of Bimbo and Mukassa through mobile clinics. 18,500 consultations were realized including 8,125 children under 5 years.
- 12 health care workers were employed and paid incentives to ensure health care services every day. 72 supervisions by the NGO *Save the Children*
- 160 birth deliveries
- Nutritional screening has led to the detection of 91 cases of acute malnutrition, including 24 cases of severe acute malnutrition.

Hospital d'Amitié in Bangui

- 1,951 emergency medical cases including 450 hospitalized and 171 surgical emergencies;
- 24 hospital staff were supported through incentives

Hospital de Bouar

- Free health care provided to 749 patients including 120 hospitalized cases
- 52 hospital staff were supported through incentives

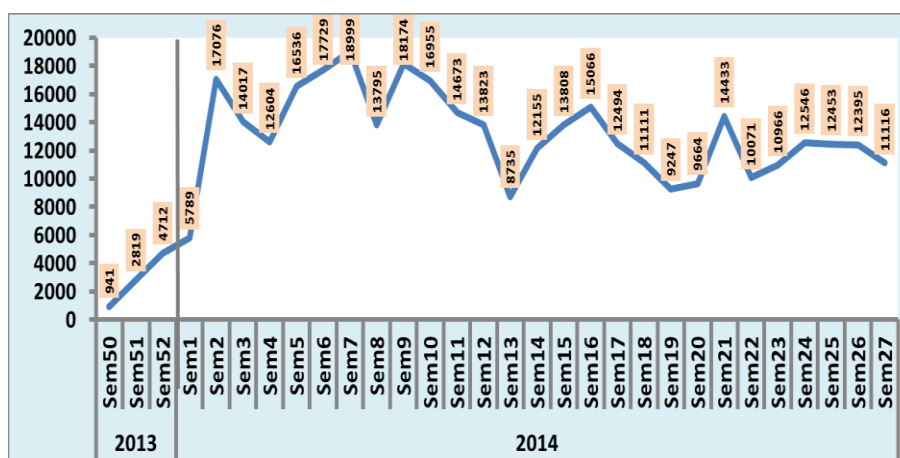
Six temporary IDP sites of Bouar (Cathedrale Saint Joseph, Grand séminaire Saint Laurent, Mosquée du quartier Haoussa, Paroisse Fatime, Couvent Saint Elie and Paroisse Wantiguera)

- Free health care provided through 3,349 consultations including 1,801 children under 5 years and 79 emergency cases referred to the hospital of Bouar
- 49 hospital staff were supported through incentives

• Access to emergency health care has improved (service utilization coverage increased, 1 consultation per person per year)

- Accessibility to health care was improved from the second week of January 2014 in Bangui, Bimbo and Begoua. (512,000 IDPs in January 2014) The average consultations remain stable around 12,000 new cases per week, which corresponds to a rate of 1.2 consultations per person per year

Trends in new cases of consultation in IDP sites Bangui Bimbo and Begoua



- **At least 50 per cent of skilled health workers of targeted health facilities are trained in mass casualty management**

The trainings have been oriented by the priority topics: Mental health and Early Warning and Response System (EWARS)

- **At least 80 per cent of suspected epidemics are detected within 72 hours and timely responded due to an operational EWARS in all IDPs sites and health facilities**

The Early Warning System set up in IDP sites enabled to detect early on all 7 measles outbreaks through the following data:

- 7 confirmed cases of measles in 3 IDP sites in Bangui (Airport, Don Bosco Monastery Boy-Rabe)
- 23 confirmed cases of measles in the sub-prefecture of Bria Prefecture of Haute-Kotto from among host community and IDPs
- 11 confirmed cases of measles in the sub-prefectures Carnot and Berberati from host community and IDPs

- **Measles immunization coverage increased amongst IDPs up to 95 per cent:**

Organizing of measles mass vaccination in IDP sites with outbreaks in collaboration with health partners and the Ministry of Health.

Measles outbreaks	Target	Vaccinated	Coverage rate
IDPs sites in Bangui, Begoua and Bimbo	147 668 (6 months -14 years)	143 755	97,35%
Bria (host community with IDPs)	13 247 (6 months -14 years)	13 941	105,2%
Carnot and Berberati (host community with IDPs)	43 896 6-59 months	31 563	75,2%



12. In case of significant discrepancy between planned and actual outcomes, please describe reasons:

No significant discrepancy between planned and actual outcomes

13. Are the CERF funded activities part of a CAP project that applied an IASC Gender Marker code?

YES ☐ NO ☒

If 'YES', what is the code (0, 1, 2a or 2b):

If 'NO' (or if GM score is 1 or 0):

Score: 1 Taking into account of gender through the consideration of specific aspects of reproductive health as supporting the management of birth deliveries and rape cases

14. Evaluation: Has this project been evaluated or is an evaluation pending?

EVALUATION CARRIED OUT ☐

No evaluation has been planned within the project, however some activities have been supervised (vaccination campaign) or followed through indicators (EWARS) during the implementation.

EVALUATION PENDING ☐

NO EVALUATION PLANNED ☒

TABLE 8: PROJECT RESULTS

CERF project information				
1. Agency:	UNICEF UNFPA WHO	5. CERF grant period:	UNFPA: 1st January to 30 June 2014 WHO: 1st January to 30 June 2014 UNICEF : 1 Dec 2013 - 25 June 2014	
2. CERF project code:	14-RR-CEF-001 14-RR-FPA-001 14-RR-WHO-001	6. Status of CERF grant:	<input type="checkbox"/> Ongoing	
3. Cluster/Sector:	Health		<input checked="" type="checkbox"/> Concluded	
4. Project title:	Reduce excess of maternal and new-born morbidity and mortality through the provision of MISP and basic health services to the most affected areas in Central African Republic			
7. Funding	a. Total project budget:	US\$ 1,896,431	d. CERF funds forwarded to implementing partners:	
	b. Total funding received for the project:	US\$ 1,061, 440	NGO UNICEF partners and Red Cross/Crescent: US\$ 16,663	
	c. Amount received from CERF:	UNICEF : US\$ 213,914 WHO US\$ 246,101 UNFPA US\$ 601,343	■ Government Partners: US\$ Included above	
Results				
8. Total number of <u>direct beneficiaries</u> planned and reached through CERF funding (provide a breakdown by sex and age).				
Direct Beneficiaries	Planned	Reached	In case of significant discrepancy between planned and reached beneficiaries, please describe reasons:	
a. Female	654,880	926,534	The project funds were used to cover the operational cost of the Long Lasting Insecticide Nets (LLIN) distribution campaign in the town of Bangui. They also permitted to purchase and distribute four hundred (400) Interagency Emergency Health Kit (IEHK) 2006, kit, basic units to health facilities in Bangui and other health prefectures. These basic units permitted to treat 400,000 patients nationwide. The availability of these drugs and equipment and the institutionalization of the free care strategy in the said health facilities, increased access to these centres to the under-five age group and pregnant UNFPA activities didn't target children under five	
b. Male	649,662	872,200		
c. Total individuals (female + male):	1,304,542	1,798,734		
d. Of total, children <u>under</u> age 5	0	97,151		
9. Original project objective from approved CERF proposal				

Objective(s)

The main objective of this project is to reduce excess of maternal and new-born morbidity and mortality through access to basic health care services, essentials drug and reproductive health kits to the most affected areas in Central African Republic

Specifics objectives:

- Ensure access to quality reproductive health services in emergency settings
- Ensure availability of emergency obstetrical and new-born care
- Ensure access to basic primary health care services
- Increase and secure blood collection to be provided to women in child birth situation

10. Original expected outcomes from approved CERF proposal

Expected Outcomes and Indicators (please use SMART¹⁵ indicators)**UNFPA**

Outcomes and indicators

- Number of reproductive health kits provided
- Number of visible pregnant women who received clean delivery kits
- Number of skilled birth attendance
- Number of ante natal care consultations carried through the mobile clinics
- Number of women referred for obstetrical emergency
- Number of children assisted
- Number of case of caesarean section managed in the referral health facilities
- Number of staff trained

WHO

Outcomes and indicators

- Permanent availability of safe bloods in national center of transfusion and hospitals in affected areas
- All patients in need of blood transfusion are treated accordingly

UNICEF

Outcomes and indicators

- Increased access/utilization to essential primary health care services with a focus on women and children under 5
- Number of basic health kits distributed to facilities and IDP sites
- Number of consultations conducted

11. Actual outcomes achieved with CERF funds

UNFPA

- 504 lifesaving Reproductive Health (RH) kits and medical equipment international procurement were providing to 16 IDP's health points and 90 health facilities in conflicts areas; also 14 referral health facilities received RH 11 A, 11B and RH kit 12.
- 111 staff (Ministry of Health, Social, NGOs) trained on Minimal Initial Service Package (MISP); and 77 health providers trained on: clinical rape management, family planning, Emergency Obstetric and Newborn Care (EMONC), ant-post natal care).
- 57 mobile clinics organised to reach people out of 5-15 kilometres from health facilities.
- Realised 12 sensitization campaigns of identification visible pregnant women in IDP's site and into community.

WHO:

The funding permitted:

- Operational capacity building of the national blood transfusion centre by providing 5 blood bank refrigerators, 1 Laboratory freezer, laboratory reagents and consumable. To provide 5 blood bank refrigerators and 1 The availability of these drugs, safety blood and

¹⁵ SMART indicators are: specific, to avoid differing interpretations; measurable, to allow monitoring and evaluation; appropriate to the problem statement; realistic and able to achieve; time-bound indicating a specific period of time during which the results will be achieved. Indicators must be designed to enable you to identify the different impacts (intended and unintended) your project has on women, girls, boys, and men.

equipments for free charge by the health care strategy in targeted health facilities increased access to qualified health care for men, women and children

- Monitoring and technical support to activities twice a month

Activity realized	Number	Male	Female	Children male	Children Female
blood collection campaigns	43			N/A	N/A
Blood units collected	4,672			N/A	N/A
Safety blood units delivered	3,818	Not collected	Not collected	588	384
Destroyed bloods pockets	854				

Note: due to the weak reporting system of the national health system, there have been difficulties in collecting the information on the number of patients who received a blood transfusion. UNICEF: The funding permitted to cover the operational cost of the LLIN distribution campaign in the town of Bangui. This concerns, the training and motivation of CHW and social mobilizers in charge of the LLIN distribution and other cost incurred.

- Five hundred (400) IEHK2006, kit, basic units were purchased and distributed to health facilities in Bangui and other health prefectures. These basic units permitted to treat 400,000 patients nationwide.
- The availability of these drugs and equipment and the institutionalization of the free care strategy in the said health facilities, increased access to these centres to the under-five age group and pregnant. Number of consultations conducted: NA. The availability of the basic units allowed for the treatment of 400,000 patients in health facilities nationwide.

12. In case of significant discrepancy between planned and actual outcomes, please describe reasons:

UNFPA: No significant discrepancy

WHO:

- 74% of safety collected bloods units saved lives of wounded by firearms and edged weapons who had severe anaemia.
- Instead of 12 collection blood campaigns planned, 43 blood campaigns have been realized.

UNICEF : No significant discrepancy. These basic units permitted to treat 400,000 patients in health facilities nationwide.

13. Are the CERF funded activities part of a CAP project that applied an IASC Gender Marker code?

YES ☒ NO ☐

If 'YES', what is the code (0, 1, 2a or 2b): GM=1

If 'NO' (or if GM score is 1 or 0): Please describe how gender equality is mainstreamed in project design and implementation

UNFPA: Women is especially targeted

UNICEF & WHO: : The procurement and distribution of basic health kits to health facilities in Bangui and other health prefectures around the country permitted the treatment of girls, boys, pregnant women and all other age groups.

14. Evaluation: Has this project been evaluated or is an evaluation pending?

EVALUATION CARRIED OUT ☒

UNFPA: Monthly report on the basis of data collection. We have also tools undertook quarterly joint field mission for the purpose of monitoring/evaluation.

WHO: Weekly field visits and monitoring of activities blood collection campaigns and safe blood procurements for health facilities: Given some health emergency situations like influx of injured people, several threatening of stock out were observed and avoided

UNICEF: During the implementation of the project, regular field monitoring visits and coordination activities through the health cluster meetings have been organised to take stock on progress, identify issues to be addressed and adequate corrective actions taken to adjust activities implementation. Indicators were monitored monthly through the Humanitarian Performance Mechanism system (HPM) to show advances during the project and impact of the various activities. Particular emphases were laid on joint evaluation follow up missions with government counterparts and the Central African Red Cross at central and decentralised levels.

Prevailing insecurity around the country at the beginning of the year was a serious challenge in the implementation of the project. This led to the closure of many health facilities because staff had fled for their lives to other secured areas. So additional funds from UNICEF were utilized to procure more drugs and supplies to permit the reopening of some of these health facilities.

If evaluation has been carried out, please describe relevant key findings here and attach evaluation reports or provide URL. If evaluation is pending, please inform when evaluation is expected finalized and make sure to submit the report or URL once ready.

EVALUATION PENDING ☐

NO EVALUATION PLANNED ☒

TABLE 8: PROJECT RESULTS

CERF project information					
1. Agency:		UNICEF		5. CERF grant period:	01.03.14 - 31.08.14
2. CERF project code:		14-RR-CEF-016		6. Status of CERF grant:	<input type="checkbox"/> Ongoing <input checked="" type="checkbox"/> Concluded
3. Cluster/Sector:		Protection (Child Protection)			
4. Project title:		Child Protection in CAR			
7. Funding	a. Total project budget:		US\$ 12,014,303		
	b. Total funding received for the project:		US\$ 5,762,000		
	c. Amount received from CERF:		US\$ 450,024		
		d. CERF funds forwarded to implementing partners: <ul style="list-style-type: none"> NGO partners and Red Cross/Crescent: US\$ 361,857 Government Partners: US\$ 00.00 			
Results					
8. Total number of <u>direct beneficiaries</u> planned and reached through CERF funding (provide a breakdown by sex and age).					
Direct Beneficiaries		Planned	Reached	In case of significant discrepancy between planned and reached beneficiaries, please describe reasons:	
a. Female		8,800	7,195	<p>The community-based approach used by War Child in Bangui and Bossangoa led to a sharp increase of children attending recreational activities in Child Friendly Space. This explains why the project reached 19,710 beneficiaries, instead of 15,800 as planned. Among these beneficiaries, 5,000 children under five were provided with bracelets to prevent family separation during population movement.</p> <p>A gender analysis indicated that more boys participated in activities organised in child friendly space than girls in Bossangoa, despite efforts by social workers to appeal to parents to allow all children to attend child friendly activities. War Child observed a tendency by parents to keep girls at home for domestic work; some parents fear that their girls could be subjected to physical and sexual violence if they go outside the house to play.</p>	
b. Male		7,000	12,515		
c. Total individuals (female + male):		15,800	19,710		
d. Of total, children <u>under</u> age 5		N/A	5,000		
9. Original project objective from approved CERF proposal					
Objective(s) In order to save the lives of children affected by conflict: <ul style="list-style-type: none"> Ensure identification, registration, family tracing and reunification, interim care arrangements and follow-up of boys and girls that are at heightened risk with a focus on unaccompanied and separated, and children without appropriate care. Provide psychosocial support to children affected by the emergency, e.g. through provision of child friendly spaces or other community-based interventions. Ensure registration, family tracing and reunification or interim care arrangements for children leaving armed groups/forces. follow-up of armed forces/groups 					
10. Original expected outcomes from approved CERF proposal					

<p>Expected Outputs and Indicators (please use SMART16 indicators)</p> <ul style="list-style-type: none"> • Number of unaccompanied minors identified and cared for; • Number of unaccompanied minors reunified with their families • Number of child Friendly Spaces where structured age appropriate CFS activities are implemented based on needs identified by girls, boys and families. • Number of IDP sites that have functioning CFS activities. • Number of children released from armed groups 	
11. Actual outcomes achieved with CERF funds	
<ul style="list-style-type: none"> • 156 separated and unaccompanied minors, including 66 girls and 90 boys were identified and cared for by WAR Child. • 144 separated and unaccompanied minors were reunified with their families; efforts to reunite the remaining children 12 continue. • 11 Child Friendly Space (CFS) where structured age appropriate activities were implemented based on needs identified by girls, boys and families. They include six CFS in Bossangoa (Pont Ouham, Valee, Liberte, Centre 2, Boro, Zere), as well as five in schools located on the Bossangoa axis (Carriere, Gbogboto, Gazouene, Bokine, Gonzengue). In total, 19,710 children including 7,195 girls and 12,515 boys benefited from recreational and psycho-social activities in child friendly space. • Two IDP sites (Liberte and Eveche) in Bossangoa had three functioning Child Friendly Space. • 150 children associated with anti-Balaka, including 30 girls and 120 boys, were identified in Bossangoa. Practical arrangements are underway for their release and interim care in November 2014. 	
12. In case of significant discrepancy between planned and actual outcomes, please describe reasons:	
<p>The community-based approach used by War Child in Bangui and Bossangoa led to a sharp increase of children attending recreational activities in Child Friendly Space. This explains why the project reached 19,710 beneficiaries, instead of 15,800 as planned. Among these beneficiaries, 5000 children under five were provided with bracelets in to prevent family separation during population movement.</p> <p>A gender analysis indicated that more boys participated in activities organised in child friendly space than girls in Bossangoa, despite efforts by social workers to appeal to parents to allow all children to attend child friendly activities. War Child in observed a tendency by parents to keep girls at home for domestic work; some parents fear that their girls could be subjected to physical and sexual violence if they go outside the house to play.</p>	
13. Are the CERF funded activities part of a CAP project that applied an IASC Gender Marker code?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
<p>If 'YES', what is the code (0, 1, 2a or 2b): 2a</p> <p>If 'NO' (or if GM score is 1 or 0):</p>	
14. Evaluation: Has this project been evaluated or is an evaluation pending?	EVALUATION CARRIED OUT <input type="checkbox"/>
The evaluation will be done during an overall evaluation of UNICEF emergency response in November 2014.	EVALUATION PENDING <input checked="" type="checkbox"/>
	NO EVALUATION PLANNED <input type="checkbox"/>

TABLE 8: PROJECT RESULTS

CERF project information			
1. Agency:	UNICEF	5. CERF grant period:	07.03.14 – 06.09.14
2. CERF project code:	14-RR-CEF-017	6. Status of CERF grant:	<input type="checkbox"/> Ongoing
3. Cluster/Sector:	Nutrition		<input checked="" type="checkbox"/> Concluded
4. Project title:	Contribute to the reduction of morbidity and mortality associated with acute malnutrition in boys and girls under 5 in high burden and conflict-affected areas in CAR		
7. Funding	a. Total project budget:	US\$ 7,698,500	d. CERF funds forwarded to implementing partners:
	b. Total funding received for the project:	US\$ 250,065	▪ NGO partners and Red Cross/Crescent: US\$ 00.00
	c. Amount received from CERF:	US\$ 250,065	▪ Government Partners: US\$ 14,620.00
Results			
8. Total number of <u>direct beneficiaries</u> planned and reached through CERF funding (provide a breakdown by sex and age).			
Direct Beneficiaries	Planned	Reached	In case of significant discrepancy between planned and reached beneficiaries, please describe reasons:
a. Female	2,231	2,559	<p>5,028 cases of severe acute malnutrition children (girls and boys included) benefited from appropriate therapeutic care through out-patient and in-patient treatment programmes with adequate supplies of Ready-to-Use Therapeutic Foods.</p> <p>Data collection mechanism for new admissions and performance indicators are disaggregated by sex and age is being utilized in all treatment nutrition units.</p> <p>As reflected by the figure of beneficiaries reached, the girls represent 50.9 per cent (2,559), whereas the boys covered are estimated to be of 49.1 per cent (2,469). The security situation deteriorated significantly in a short timeframe, more children were screened and admitted for treatment. The implementation of the new nutrition information management system allowed partners to include gender in their reporting. Thus, 1,738 girls and 1,687 boys were captured through the system and reported reaching.</p>
b. Male	2,144	2,469	
c. Total individuals (female + male):	4,375	5,028	
d. Of total, children <u>under</u> age 5	4,375	5,028	
9. Original project objective from approved CERF proposal			
<p>Objective(s)</p> <p>Contribute to the reduction in malnutrition-related child mortality and morbidity with provision of life-saving nutrition interventions for affected populations (girls and boys).</p> <p>The specific objectives of this particular CERF-funded project are:</p> <p>To provide life-saving nutrition supplies for the care and treatment of severe acute malnutrition cases in Bangui</p> <ul style="list-style-type: none"> To provide timely and appropriate treatment to 4,375 severely malnourished children (estimated 2,231 girls and 2,144 boys based on demographic breakdown by sex) over a period of 5 months in Bangui. 			

10. Original expected outcomes from approved CERF proposal									
<p>Expected Outcomes and Indicators (please use SMART indicators)</p> <p>Output indicators:</p> <ul style="list-style-type: none"> At least 4,375 children (estimated 2,231 girls and 2,144 boys based on demographic breakdown by sex) suffering from severe acute malnutrition benefit from appropriate therapeutic care through out-patient and in-patient treatment programmes with adequate supplies of Ready-to-Use Therapeutic Foods. Number of nutrition supply stock out: 0 <p>Outcome indicators:</p> <ul style="list-style-type: none"> Health facilities implementing CMAM services meet minimum quality SPHERE standards: <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="width: 35%;">Proportion of exits:</td> <td>ITP & OTP</td> </tr> <tr> <td>Died</td> <td>< 5 per cent</td> </tr> <tr> <td>Defaulted</td> <td>< 15 per cent</td> </tr> <tr> <td>Recovered</td> <td>≥75 per cent</td> </tr> </table> <p style="margin-top: 10px;">The Nutrition Cluster is currently reflecting on the feasibility of implementing data collection mechanisms for these performance indicators that are disaggregated by sex.</p> <ul style="list-style-type: none"> Coverage rate for OTP services: 60 per cent 		Proportion of exits:	ITP & OTP	Died	< 5 per cent	Defaulted	< 15 per cent	Recovered	≥75 per cent
Proportion of exits:	ITP & OTP								
Died	< 5 per cent								
Defaulted	< 15 per cent								
Recovered	≥75 per cent								
11. Actual outcomes achieved with CERF funds									
<p>The procurement of 3,678 cartons of therapeutic foods acquired prevented stock-outs at out-patient and in-patient treatment centres thereby permitted the treatment of 5,028 cases of severe acute malnutrition (girls and boys included) in under five children benefit from appropriate therapeutic care through out-patient and in-patient treatment programmes with adequate supplies of Ready-to-Use Therapeutic Foods. Overall performance indicators of case management remained within global standards with an average recovery rate of 79 per cent (≥75 per cent) and death rate of 2 per cent (<10 per cent). However, the default rate remained high 17.2 per cent (standard < 15 per cent), due to insecurity and population displacements.</p> <p>UNICEF Nutrition Specialists also provided technical assistance in the capacity building of service providers in the beneficiary health facilities identified, in the treatment of severe acute malnutrition.</p>									
12. In case of significant discrepancy between planned and actual outcomes, please describe reasons:									
<p>The security situation deteriorated significantly and in a short period of time, more children than planned were screened and admitted for treatment. The setup of a coordination mechanism through the nutrition cluster contributed to providing timely and appropriate treatment to more beneficiaries.</p>									
13. Are the CERF funded activities part of a CAP project that applied an IASC Gender Marker code?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>								
<p>If 'YES', what is the code (0, 1, 2a or 2b): GM=1</p> <p>If 'NO' (or if GM score is 1 or 0):</p> <p>The procurement and distribution of Ready-to-Use Therapeutic Foods to health facilities in Bangui and other health prefectures around the country permitted the treatment of all malnourished cases both girls and boys.</p>									
14. Evaluation: Has this project been evaluated or is an evaluation pending?	EVALUATION CARRIED OUT <input type="checkbox"/>								
During the implementation of the project, regular field monitoring visits and coordination activities through the nutrition cluster meetings have been organised to take stock on progress, identify issues to be addressed and adequate corrective actions were taken to adjust activities implementation. Indicators were monitored on monthly basis through the Humanitarian Performance Mechanism system (HPM) to show advances during the project implementation and	EVALUATION PENDING <input type="checkbox"/>								
	NO EVALUATION PLANNED <input checked="" type="checkbox"/>								

<p>impact of the various activities. These indicators include cured rate death rate and defaulters' rate. As mentioned the actual cured rate for CAR is of 79 per cent (≥ 75 per cent), death rate of 2 per cent (< 10 per cent). The default rate remained high 17.2 per cent (standard < 15 per cent), due to insecurity and population displacements. A particular emphasis was laid on joint evaluation follow up missions with government counterparts at central and decentralised levels. A monitoring mission was carried out by the OCHA M&E officer in December 2014 in the Therapeutic In-Patient Unit of the CPB (Complex Paediatric of Bangui).</p>	
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TABLE 8: PROJECT RESULTS				
CERF project information				
1. Agency:		UNICEF	5. CERF grant period: 01.02.2014 – 31.07.14	
2. CERF project code:		14-RR-CEF-018	6. Status of CERF grant: <input checked="" type="checkbox"/> Ongoing <input type="checkbox"/> Concluded	
3. Cluster/Sector:		WASH		
4. Project title:		Response to emergency WASH needs of internally displaced persons, and vulnerable population in CAR		
7. Funding	a. Total project budget:		US\$ 13,939,992	
	b. Total funding received for the project:		US\$ 3,389,004	
	c. Amount received from CERF:		US\$ 1,000,000	
		d. CERF funds forwarded to implementing partners:		
		<ul style="list-style-type: none"> NGO partners and Red Cross/Crescent: US\$ 383,076 Government Partners: US\$ 150,608 		
Results				
8. Total number of <u>direct beneficiaries</u> planned and reached through CERF funding (provide a breakdown by sex and age),				
Direct Beneficiaries		Planned	Reached	In case of significant discrepancy between planned and reached beneficiaries, please describe reasons:
a. Female		25,500	35,190	As the crisis developed, there was a larger number of internally displaced persons than initially targeted, which explains the higher number reached. Taking in consideration this fact, UNICEF reached a greater number of beneficiaries through: <ul style="list-style-type: none"> Carrying out activities via a greater number of partners, as compared to the initially proposed project. Considering the timeframe, water supply by water trucking was privileged over well drilling in order to reach a greater number of beneficiaries.
b. Male		24,500	33,810	
c. Total individuals (female + male):		50,000	69,000	
d. Of total, children <u>under</u> age 5		8,650	11,940	
9. Original project objective from approved CERF proposal				
Objectives: Integrated emergency WASH response to the needs of internally displaced persons, and vulnerable population in Central African Republic (including returnees and host families) Geographic area: in North West region (Paoua, Bocaranga, Bouar, Bozoum) areas as well as in the most affected zones (including Bangui), UNICEF will respond to the immediate needs of potable water in the city, distribution of WASH kit to the most vulnerable IDPs, access to sanitation and emergency management of solid waste generated during the conflict through partnership with International and local NGO's.				
10. Original expected outcomes from approved CERF proposal				
Expected Outcomes and Indicators (please use SMART17 indicators)				
Indicator	Disaggregation	Source	UNICEF Target	Cluster Target18

¹⁷ SMART indicators are: specific, to avoid differing interpretations; measurable, to allow monitoring and evaluation; appropriate to the problem statement; realistic and able to achieve; time-bound indicating a specific period of time during which the results will be achieved. Indicators must be designed to enable you to identify the different impacts (intended and unintended) your project has on women, girls, boys, and men.

¹⁸Note: the waste management targets are new for the cluster as this is a new urgent need for the cluster to address.

Number of IDP's/returnees/host families covers with emergency water system or rehabilitation of water point	25,500 women, 24,500 men, including 8650 girls and boys under five	Report from implementing partner,	50,000		
Number of IDP's/returnees/host families having access to emergency sanitation	25,500 women, 24,500 men, including 8650 girls and boys under five	Report from implementing partner, filed monitoring visit	50,000		
Number of people reach by mass media campaign focusing on hand washing with soap and latrines use and maintenance	51,000 women, 49,000 men, including 17300 girls and boys under five	Mass media report	100,000		
Number of IDP's/returnees/host families a site with solid waste management organization	25,500 women, 24,500 men, including 8650 girls and boys under five	Report from implementing partner, filed monitoring visit	50,000		

11. Actual outcomes achieved with CERF funds

Number of IDP's/returnees/host families covers with emergency water system or rehabilitation of water point: 69,069

Number of IDP's/returnees/host families having access to emergency sanitation: 49,500

Number of people reach by mass media campaign focusing on hand washing with soap and latrines use and maintenance: 63,563

Number of IDP's/returnees/host families a site with solid waste management organization: 49,500

12. In case of significant discrepancy between planned and actual outcomes, please describe reasons:

The number of people reached by mass media campaign focusing on hand washing with soap and latrines use and maintenance has decreased to avoid overlapping since some actors were already conducting similar activities.

13. Are the CERF funded activities part of a CAP project that applied an IASC Gender Marker code?

YES ☒ NO ☐

If 'YES', what is the code (0, 1, 2a or 2b): 1

If 'NO' (or if GM score is 1 or 0): Wash interventions are conducted in conformity with the "5 engagements minimums WASH et genre CAR" " defined and agreed by all the partner. The engagements ensure that the views of girls, boys, women and men are taken into account during all the steps of the project, from the design to the implementation and monitoring. They also ensured the data are gender desegregated and that cultural concerns are well integrated.

14. Evaluation: Has this project been evaluated or is an evaluation pending?

EVALUATION CARRIED OUT ☐

Due to the timeframe of the project within the volatile context, an evaluation cannot be objectively conducted. Some of the sites have closed and IDPs have returned home. Most of the activities were punctual activities that are difficultly traceable. Nevertheless during project implementation, UNICEF has ensured proper monitoring through field visits. Despite the fact that a former evaluation was not conducted, some findings and lessons learned should be considered: a significant number of IDPs sites were located in churches and schools compounds. The logical conclusion is that we should reinforce capacity of those institutions to respond to future crisis, i.e. construction of durable latrines, prepositioning of kits and training.

EVALUATION PENDING ☒

NO EVALUATION PLANNED ☐

TABLE 8: PROJECT RESULTS

CERF project information				
1. Agency:	UNICEF UNFPA WHO	5. CERF grant period:	UNFPA: 07.03.14 – 06.09.14 WHO: 07.03.14 – 06.09.14 UNICEF : 07.03.14 – 06.09.14	
2. CERF project code:	14-RR-CEF-019 14-RR-FPA-004 14-RR-WHO-009	6. Status of CERF grant:	<input type="checkbox"/> Ongoing	
3. Cluster/Sector:	Health		<input checked="" type="checkbox"/> Concluded	
4. Project title:	Providing emergency health interventions to populations affected by the crisis in Central African Republic			
7.Funding	a. Total project budget:	US\$ 10,802,607	d. CERF funds forwarded to implementing partners:	
	b. Total funding received for the project:	US\$ 2,495,308	<ul style="list-style-type: none"> NGO UNICEF partners and Red Cross/Crescent: US\$ 15,701.00 NGO WHO Save The Children: US\$ 200,000.00 NGO WHO: Emergency: US\$ 122,633.00 	
	c. Amount received from CERF:	US\$1,216,006 (UNFPA: US\$ 300,106 WHO: US\$ 562,101 UNICEF US\$ 353,799)	<ul style="list-style-type: none"> Government Partners: 	US\$ Included above
Results				
8. Total number of <u>direct beneficiaries</u> planned and reached through CERF funding (provide a breakdown by sex and age).				
Direct Beneficiaries	Planned	Reached	In case of significant discrepancy between planned and reached beneficiaries, please describe reasons:	
a. Female	900,000	796,534	UNFPA: Children were not directly targeted by activities of UNFPA UNICEF : A total number of 85,500 additional LLINs were procured for the distribution campaign in the IDP sites in Bangui. These nets permitted to cover 171,000 IDPs (One LLIN for 2 persons). The recipients included: 88,920 females, 82,080 males and 34,200 under five children. The funds also permitted to cover part of the operational cost of distribution campaign of LLINs in IDP sites in Bangui, such as training and motivation of Community Health Worker and their motivation and social mobilizers and the rehabilitation cost of the warehouse where LLINs were kept for better conservation and security WHO: No significant discrepancy	
b. Male	700,000	713,810		
c. Total individuals (female + male):	1,600,000	1,510,344		
d. Of total, children <u>under</u> age 5	320,000	251,069		
9. Original project objective from approved CERF proposal				
Objective(s)				

- Ensure access to quality reproductive health services in emergency settings
- Ensure availability of emergency obstetrical and new-born care
- Ensure access to basic primary health care services
- Ensure secure blood transfusion to patients in needs (injured, women in child birth situation and children with anaemia)
- Ensure at least coverage of 80 per cent of households by long-lasting insecticide-treated nets in the IDP sites at Bangui and Ouham

10. Original expected outcomes from approved CERF proposal

Expected Outcomes and Indicators (please use SMART19 indicators)

UNFPA

Outcomes and indicators

- Number of reproductive health kits provided
- Number of visible pregnant women who received clean delivery kits
- Number of skilled birth attendance
- Number of ante natal care consultations carried through the mobile clinics
- Number of women referred for obstetrical emergency
- Number of children assisted
- Number of case of caesarean section managed in the referral health facilities
- Number of staff trained

WHO

Outcomes and indicators

- Permanent availability of safe bloods in national centre of transfusion
- Proportion of hospitals without stock-out of blood bags, reagents and consumables. in affected areas
- Number of transfused patients with safe blood
- Number of patients referred by 5 ambulances in Bangui and Bouar for emergencies.
- Proportion of health facilities without stock-out of essential drugs in affected areas

UNICEF

Outcomes and indicators

- 80 per cent of households in IDP sites at Bangui

11. Actual outcomes achieved with CERF funds

UNFPA:

- GBVIMS

5983 cases of GBV were recorded from January to June 2014; desegregated in female 5403 and 580 males.

GBV Type	Number
Rape	819
Sexual Assault	38
Physical Assault	2050
Forced Marriage	11
Denial of Ressources, Opportunities or Service	2526
Psychologique/Emotional Abuse	538

- 41 RH kits (Kit No. 1A- Male Condoms kit 2; Kit No. 1B- Female Condoms kit 2; Kit No. 3- Rape Treatment kit 20; Kit No. 5-

¹⁹ SMART indicators are: specific, to avoid differing interpretations; measurable, to allow monitoring and evaluation; appropriate to the problem statement; realistic and able to achieve; time-bound indicating a specific period of time during which the results will be achieved. Indicators must be designed to enable you to identify the different impacts (intended and unintended) your project has on women, girls, boys, and men.

Sexually Transmitted Infections (STI) kit 5; Kit No. 9-Suture of Tears and Vaginal Examination kit 8) distributed to the 16 IDP's health points and 05 health facilities.

- 350 vulnerable GBV survivors were supported by individual dignity kit(package of minimum of items related to hygiene of displaced women (body lotion, soap, dentifrice, towels and linen for intimate hygiene).
- Deployment of 04 four confidentiality spaces in IDP sites (Tents).

WHO: WHO: Overall key results:

- Permanent availability of safe bloods in national center of transfusion during the project maintained.
- No stock out blood bags, reagents and consumables in National centre of Blood transfusion from which the health facilities of Bangui, Bimbo and Begoua are supplied and represent around 53% of population in affected areas
- Around 5000 patients were transfused during the project (see below the detail of safe blood transfusion provided to the health facilities)
- 2,648 patients referred by 4 ambulances in Bangui and but this activity were covered in
- All the health facilities in needs in affected areas were supplied by essential drugs, however, the lack of a functioning NHIS (National Health Information System) hindered the efforts to collect specific data on the number or the proportion of health facilities without stock-out of essential drugs in affected areas:

Detailed Achievements:

Outcomes at Mukassa and Bimbo IDP's camps Mobile clinics, by Save the children NGO

Activities	Outcomes
Health care services	148 Deliveries 15,378 Curative consultations including 5,142 children under 5 years <ul style="list-style-type: none"> • Malaria: 1,798 cases • Acute Respiratory Infection: 1,562 cases • Aqueous diarrhea: 615 cases
Monitoring and supervision	72 supervisions due to 3 per week
Registered Referrals	51 cases for Surgical 60 cases for gynecology and obstetrics 63 cases for specific care (HIV and Tuberculosis treatments)

Number of patients referred by 5 ambulances in Bangui, by WHOn collaboration with MoH

Free referrals from 13rd January to 22nd June in Bangui	Number of patients
Referrals by ambulances from IDPs camps and host community to hospitals by 4 ambulances <ul style="list-style-type: none"> • Number of patients referred by 4 ambulances in Bangui 	2,648

Outcomes at Obo referral Hospital trough Save the children

Activities	Outcomes
Health care services	100 Deliveries 14 cases of sexual violence have been managed through medical and psychological

	care including 2 cases within 72 hours with PEP kit 4789 patients have been reached by consultation and mobile clinic out of 3675 planned 80% of essential drugs have been available at Obo hospital
Monitoring and supervision	6 supervisions carried out, focused on ANC and follow up deliveries
Registered Referrals t	22 cases for Surgical including 7 caesarian surgery

Outcomes at the national blood transfusion centre through "Emergency" International NGO

Activities	Outcomes
Procurement of laboratory equipments	<ul style="list-style-type: none"> 1 Laboratory Freezer (capacity of 700 Liters) for the national blood transfusion centre 5 Blood bank refrigerators (capacity of 400 blood bags of 450 mL) for Bimbo, Communautaire hospital, Amitié Hospitals and the Pediatric complex of Bangui.
Procurement of Laboratory consumables and laboratory reagents for 6 months	<ul style="list-style-type: none"> Round the clock services offered at the national blood transfusion centre
Monitoring and supervision	Twice a month for supervision and data collection
Blood bags availability	<ul style="list-style-type: none"> Collected: 7,350 blood bags Secured: 5,899 blood bags,

UNICEF: Funds provided permitted to procure 85,500 additional LLINs for the distribution campaign in the IDP sites and for the universal distribution of LLINs in the town of Bangui.

They also permitted to cover part of the operational cost of distribution campaign of LLINs in IDP sites in Bangui, such as training and motivation of Community Health Worker and their motivation and social mobilizers.

These funds also permitted the rehabilitation cost of the warehouse where LLINs were kept for better conservation and security.

12. In case of significant discrepancy between planned and actual outcomes, please describe reasons:

No significant discrepancy

13. Are the CERF funded activities part of a CAP project that applied an IASC Gender Marker code?

YES ☐ NO ☐

If 'YES', what is the code (0, 1, 2a or 2b): GM=1

If 'NO' (or if GM score is 1 or 0):

UNFPA: Women especially targeted

WHO The procurement et supply to safe blood and essential drugs allowed to provide equal services to men, women and children (boys and girls)

UNICEF: The procurement and distribution of LLINs in IDP sites in Bangui and Bimbo targeted the whole household including girls, boys and pregnant women. Gender parity was also sought in the recruitment of CHW and social mobilizers.

14. Evaluation: Has this project been evaluated or is an evaluation pending?	EVALUATION CARRIED OUT <input type="checkbox"/>
<p>UNFPA: Monthly report on the basis of data collection. We have also tools undertook quarterly joint field mission for the purpose of monitoring/evaluation.</p> <p>WHO: The regular monitoring carried out in field pointed out the following observations:</p> <ul style="list-style-type: none"> - The waste management still a big challenge of health facilities. - The lack of medical drugs indicated for the opportunistic infections of HIV/AIDS still a big challenge because only the International Federation of Red Cross organizes supply provision of those drugs. - The safe blood procurement remains a challenge in countryside health facilities <p>UNICEF: During the implementation of the project, regular field monitoring visits and coordination activities through the health cluster meetings were organised to take stock on progress, identify issues to be addressed and adequate corrective actions taken to adjust activities implementation. Indicators were monitored on monthly basis through the Humanitarian Performance Mechanism system (HPM) to show advances during the project implementation and impact of the various activities. A particular emphasis was laid on joint evaluation follow up missions with government counterparts at central and decentralised levels.</p>	
	EVALUATION PENDING <input type="checkbox"/>
	NO EVALUATION PLANNED <input checked="" type="checkbox"/>

TABLE 8: PROJECT RESULTS

CERF project information					
1. Agency:		FAO		5. CERF grant period:	[10/03/14 – 09/09/14]
2. CERF project code:		14-RR-FAO-002		6. Status of CERF grant:	<input type="checkbox"/> Ongoing <input checked="" type="checkbox"/> Concluded
3. Cluster/Sector:		Food Security/Agriculture			
4. Project title:		Emergency agriculture assistance to restore the food security of the crisis-affected populations through food crop and vegetable kits in the Central African Republic.			
7. Funding	a. Total project budget:		US\$ 2,161,400	d. CERF funds forwarded to implementing partners:	
	b. Total funding received for the project:		US\$ 1,313,091	■ NGO partners and Red Cross/Crescent: US\$ 118,700	
	c. Amount received from CERF:		US\$ 1,313,091	■ Government Partners: US\$ 12,000	
Results					
8. Total number of <u>direct beneficiaries</u> planned and reached through CERF funding (provide a breakdown by sex and age).					
Direct Beneficiaries		Planned	Reached	In case of significant discrepancy between planned and reached beneficiaries, please describe reasons:	
a. Female		32,000	21,165	The extreme volatility and sudden deterioration of security situation severely limited and hampered access to many rural areas, causing the observed reduction in the number of beneficiaries reached.	
b. Male		33,000	22,928		
c. Total individuals (female + male):		65,000	44,093		
d. Of total, children <u>under</u> age 5		N/A	N/A		
9. Original project objective from approved CERF proposal					
Objective(s): To improve the food security and nutritional situation of displaced, returnee and host families affected by the crisis, reinforce their livelihoods and increase their production and food capacity. More specifically, the project will help vulnerable populations to access agricultural inputs through distributions to restore their livelihoods.					
10. Original expected outcomes from approved CERF proposal					
Expected Outcomes and Indicators (please use SMART²⁰ indicators)					
<ul style="list-style-type: none"> Number of beneficiaries by category and gender: 13 000 vulnerable households (about 65 000 people) – returnees and displaced families. 					

²⁰ SMART indicators are: specific, to avoid differing interpretations; measurable, to allow monitoring and evaluation; appropriate to the problem statement; realistic and able to achieve; time-bound indicating a specific period of time during which the results will be achieved. Indicators must be designed to enable you to identify the different impacts (intended and unintended) your project has on women, girls, boys, and men.

Kits	Households	Men	Women	Children under five	Total (people)
Food crop	11 000	10 800	11 000	33 200	55 000
Vegetable	2 000	1 900	2 000	6 100	10 000
Total	13 000	12 700	13 000	39 300	65 000

- Quantities of inputs distributed: 275.08 tonnes of seeds (275 tonnes of rice and maize seeds and 80 kg of vegetable seeds) and 30 000 tools (hoes, rakes, shovels and watering cans)

Type of input	Quantity	Unit
Maize and rice	275	tonne
Vegetable (amaranth, cabbage, lettuce, tomato, onion, okra)	80	kg
Hoe	24 000	unit
Rake	2 000	unit
Shovel	2 000	unit
Watering can	2 000	unit

- Total land cultivated with food crops: 5 500 ha (0.5 ha per beneficiary) and vegetables: 400 ha (0.2 ha per beneficiary)
- Estimated production: 5 500 tonnes of food crop (1 tonne/ha) and vegetables: 1 200 tonnes (3 tonnes/ha).
- Estimated value of production: food crop: USD 2.75 million (USD 250 per household) and vegetable: USD 960 000 (USD 480 per household)
- Food production obtained during the agricultural campaign by the 11 000 beneficiaries of the food crop kits, which will allow an estimated consumption of 2 kg of cereals (maize and rice) per day per household for seven to eight months.

11. Actual outcomes achieved with CERF funds

The activities for this project were carried out within the framework of FAO's Response Programme, specifically, under the agriculture programme that supported a total of 114 000 households. The aim was to improve the access to basic productive inputs through the distribution of planting materials and tools to crisis-affected families in order to restore their capacities for agriculture production.

Outcomes:

- In Bamingui-Bangoran, 1 559 households (about 9 213 people, as 850 households had an average of five people and 709 had an average of seven people) were identified and received 7 795 kg of maize (5 kg per households to cultivate 0.25 ha); ten farmers' groups (about 200 people) received 220 kg of maize seeds (22 kg per group to cultivate 1 ha); and 11 farmers' groups (about 220 people) received 20 485 kg of maize seed.
- In Mambéré-Kadéï, 3 820 vulnerable households (19 100 people) received 22 kg of rice and 3 kg of groundnut seeds, and a total of 7 770 hoes (two hoes per household); in addition 45 farmers' groups (900 households or 6 300 people) received 100 kg of rice and 45 kg of groundnut seeds per group.
- In Nana-Membéré: 1 812 households received 7 270 kg of maize seeds, 5 000 kg of rice seeds, 9 000 kg of niébé and 2 190 kg of groundnut seeds (15 kg per households), which allowed to cultivate 400 ha of land and produce 400 tonnes of food crops.
- Of the total beneficiaries in both prefectures, 48 percent were women and 52 percent were men.

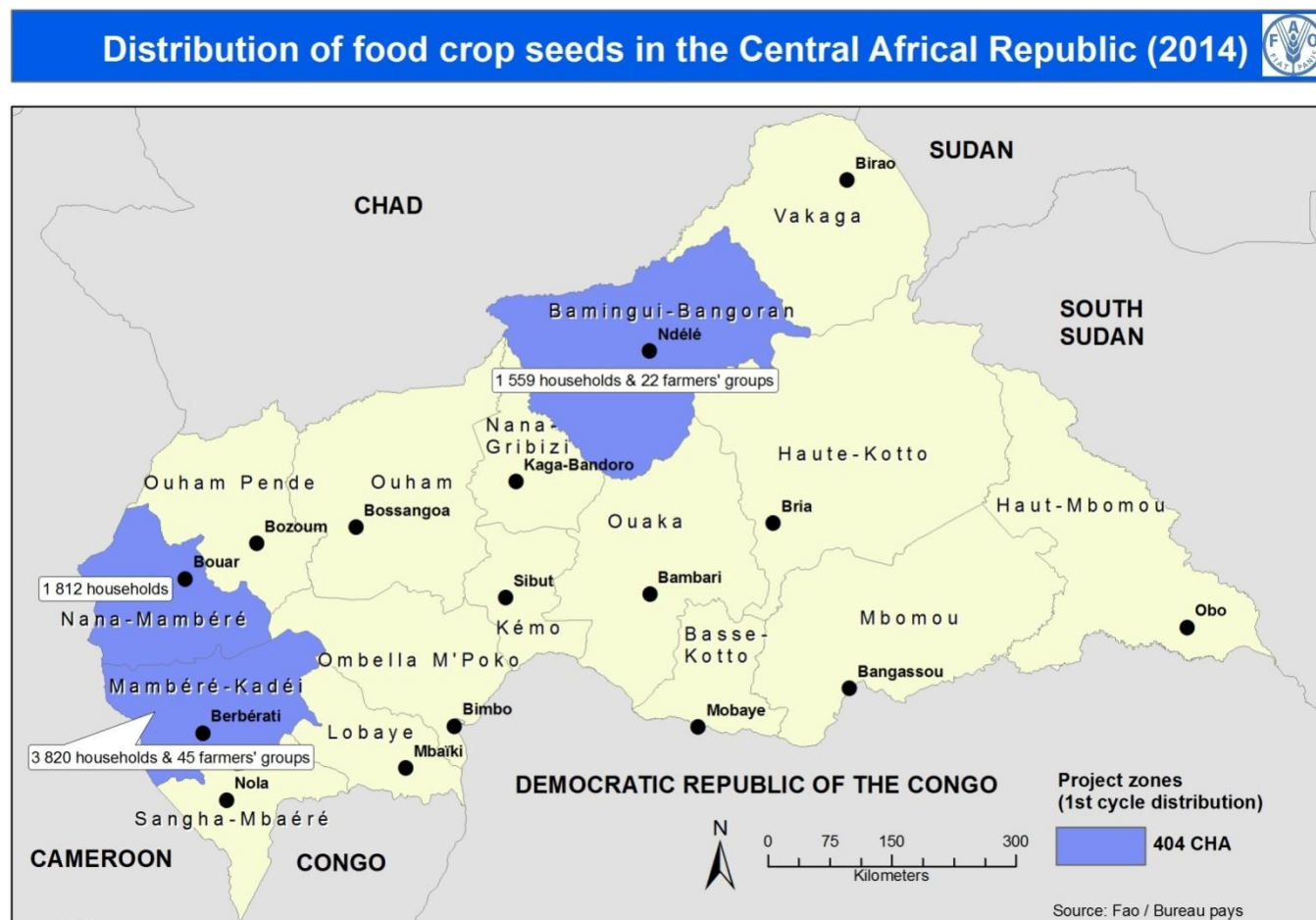
In addition, support was provided under FAO's *caisses de résilience* approach, which aims to build the resilience of farmers' groups and women's associations. This comprehensive approach enables families to generate regular income year round by enhancing their agricultural techniques, financial capacities and governance structures.

Outcomes:

Training sessions for staff members of the Ministry of Rural Development, as well as national and international NGOs, on the Integrated Phase Classification of Food Security evaluation tools and resilience were also organized by FAO.

During the implementation of the project activities, the constraints encountered were mostly related to the security situation and the limited capacities of NGOs. To address these challenges, close collaboration was undertaken with the Sangaris and MINUSCA forces to implement the project activities, and post distribution assessments and trainings were implemented. Furthermore, in response to the need of seeking an innovative solution in terms of logistics during conflict, field missions were carried out in the Democratic Republic of the Congo and Cameroon to monitor suppliers, temporary logistical hubs were set up in Garouaboulaye and a transporter system was put in place to ensure their availability to deliver the seeds procured. Overall, FAO's main focus is to implement life-saving activities among vulnerable farming families to ensure access to food and prevent negative coping mechanisms (e.g. selling productive assets, joining militia groups, etc.) and movement of the population.

Below is a map indicating the number of households provided with inputs in each project zone for OSRO/CAF/404/CHA.



12. In case of significant discrepancy between planned and actual outcomes, please describe reasons:

No significant discrepancy

13. Are the CERF funded activities part of a CAP project that applied an IASC Gender Marker code?

YES ☐ NO ☒

If 'YES', what is the code (0, 1, 2a or 2b):

If 'NO' (or if GM score is 1 or 0): The project had a particular focus in identifying women among beneficiaries for the implementation of the project activities.

14. Evaluation: Has this project been evaluated or is an evaluation pending?	EVALUATION CARRIED OUT <input checked="" type="checkbox"/>	
The post distribution assessment carried out indicates that the beneficiaries planted 95 percent of the seeds were planted by the beneficiaries and 0.5 ha of land was cultivated per household, which allowed a production 0.5 tonne and an estimated production of about USD 400.	EVALUATION PENDING <input type="checkbox"/>	
	NO EVALUATION PLANNED <input type="checkbox"/>	

TABLE 8: PROJECT RESULTS

CERF project information					
1. Agency:		UNHCR		5. CERF grant period:	01.02.14-31.07.14
2. CERF project code:		14-RR-HCR-006		6. Status of CERF grant:	<input type="checkbox"/> Ongoing <input checked="" type="checkbox"/> Concluded
3. Cluster/Sector:		Protection			
4. Project title:		Protection and Solutions for IDPs Through Enhanced Communication and Monitoring			
7. Funding	a. Total project budget:		US\$ 9,491,275	d. CERF funds forwarded to implementing partners:	
	b. Total funding received for the project:		US\$500,000	▪ NGO partners and Red Cross/Crescent: US\$ 456,022	
	c. Amount received from CERF:		US\$500,000	▪ Government Partners: US\$ 0	
Results					
8. Total number of <u>direct beneficiaries</u> planned and reached through CERF funding (provide a breakdown by sex and age).					
Direct Beneficiaries		Planned	Reached	In case of significant discrepancy between planned and reached beneficiaries, please describe reasons:	
a. Female		123,716	123,716	N/A	
b. Male		123,600	123,600		
c. Total individuals (female + male):		247,316	247,316		
d. Of total, children <u>under</u> age 5		17,312	17,312		
9. Original project objective from approved CERF proposal					
Objective(s) <ul style="list-style-type: none"> Voluntary returns are facilitated through effective dissemination of information, in close collaboration with humanitarian actors, to ensure that messaging on peace and reconciliation, livelihoods, access to housing and other necessary social infrastructure is in place. Representative and functional communication with affected populations and leadership structures are in place and effective in sites and host communities, and all affected, including women, girls, boys, men and vulnerable populations are involved. Humanitarian assistance to affected populations seeking refuge in displacement sites is managed efficiently, effectively and coordinated in manner to meet the needs and enhance IDP protection, particularly of most vulnerable populations. 					
10. Original expected outcomes from approved CERF proposal					
Expected Outcomes and Indicators (please use SMART21 indicators) <ul style="list-style-type: none"> A communication with affected communities and information sharing strategy is elaborated and implemented for each site The voluntary return of IDPs to their areas of origin supported by effective information sharing and coordination Assessments are conducted in the areas of return before the establishment of support mechanisms to voluntary returns Committees of return are in place and supported Establishment of a multi-sectoral task force, to identify needs and prioritize interventions in anticipation of the rainy season, through direct intervention or advocacy with stakeholders (identification and execution of relocation and site remediation activities) 60 per cent of service providers and stakeholders are involved in the coordination site and the management mechanisms in 					

²¹SMART indicators are: specific, to avoid differing interpretations; measurable, to allow monitoring and evaluation; appropriate to the problem statement; realistic and able to achieve; time-bound indicating a specific period of time during which the results will be achieved. Indicators must be designed to enable you to identify the different impacts (intended and unintended) your project has on women, girls, boys, and men.

displacement sites in Bangui and Bossangoa <ul style="list-style-type: none"> • The representation of women and vulnerable groups in the committees of the site is ensured • Monitoring system for humanitarian assistance in each site (including stakeholders lists, site profiles and 3W lists updated on a weekly basis) • A direct intervention is implemented or advocacy is conducted among relevant actors when gaps and needs are identified • 50 per cent of effective responses to the needs and gaps identified • Registration of the population and monthly update lists 	
11. Actual outcomes achieved with CERF funds	
<ul style="list-style-type: none"> • A communication with affected communities and information sharing strategy was elaborated and implemented for each site • The voluntary return of IDPs to their areas of origin supported by effective information sharing and coordination • Assessments were conducted in the areas of return before the establishment of support mechanisms to voluntary returns • Committees of return were in place and supported • Establishment of a multi-sectoral task force, to identify needs and prioritize interventions in anticipation of the rainy season, through direct intervention or advocacy with stakeholders (identification and execution of relocation and site remediation activities) • 60 per cent of service providers and stakeholders are involved in the coordination site and the management mechanisms in displacement sites in Bangui and Bossangoa • The representation of women and vulnerable groups in the committees of the site is ensured • Monitoring system for humanitarian assistance in each site (including stakeholders lists, site profiles and 3W lists updated on a weekly basis) • A direct intervention is implemented or advocacy is conducted among relevant actors when gaps and needs are identified • 50 per cent of effective responses to the needs and gaps identified • Registration of the population and monthly update lists 	
12. In case of significant discrepancy between planned and actual outcomes, please describe reasons:	
N/A	
13. Are the CERF funded activities part of a CAP project that applied an IASC Gender Marker code?	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
If 'YES', what is the code (0, 1, 2a or 2b): If 'NO' (or if GM score is 1 or 0): UNHCR's Age and Gender Diversity Mainstreaming (AGDM) tool was used	
14. Evaluation: Has this project been evaluated or is an evaluation pending?	EVALUATION CARRIED OUT <input type="checkbox"/>
UNHCR will conduct the evaluation of this programme through a formal financial and programmatic audit initially scheduled for February 2015; the exercise was cancelled as result of recent insecurity and is now confirmed for May.	EVALUATION PENDING <input checked="" type="checkbox"/>
	NO EVALUATION PLANNED <input type="checkbox"/>

TABLE 8: PROJECT RESULTS

CERF project information					
1. Agency:		UNHCR		5. CERF grant period:	10.03.14 – 09.09.14
2. CERF project code:		14-RR-HCR-007		6. Status of CERF grant:	<input type="checkbox"/> Ongoing <input checked="" type="checkbox"/> Concluded
3. Cluster/Sector:		Emergency Shelter/NFI			
4. Project title:		Provision of Shelter and Core Relief Items Assistance to Returning IDPs in the Central African Republic			
7. Funding	a. Total project budget:		US\$ 22,595,004	d. CERF funds forwarded to implementing partners:	
	b. Total funding received for the project:		US\$ 1,877,935	▪ NGO partners and Red Cross/Crescent: US\$593,740	
	c. Amount received from CERF:		US\$ 1,877,935	▪ Government Partners: US\$ 0	
Results					
8. Total number of <u>direct beneficiaries</u> planned and reached through CERF funding (provide a breakdown by sex and age).					
Direct Beneficiaries		Planned	Reached	In case of significant discrepancy between planned and reached beneficiaries, please describe reasons:	
a. Female		8,745	8,745		
b. Male		7,155	7,155		
c. Total individuals (female + male):		15,900	15,900		
d. Of total, children <u>under</u> age 5		5,565	5,565		
9. Original project objective from approved CERF proposal					
Objective(s) <p>Through this project, UNHCR seeks to contribute to the attainment of the 2014 Shelter/NFIs Cluster strategic objective of providing adequate dwellings to IDPs and returning IDPs and an increased access to non-food domestic items, in view of guaranteeing an improved life of security and dignity in IDPs areas of displacement and return. In this regard, this project seeks to respond to the following specific objectives:</p> <ul style="list-style-type: none"> • Encourage the return of IDPs through the provision of NFIs and shelter reconstruction kits, • Create conditions of peaceful cohabitation between returning communities by encouraging them to return in the same communities and providing them with training and assistance, so that they re-build their houses together helping each other, • Contribute to the humanitarian response to Core Relief Items (CRIs) needs for IDPs in CAR by sourcing and transporting CRIs by the most secure and direct way possible and providing them to IDPs in need. 					
10. Original expected outcomes from approved CERF proposal					
Expected Outcomes and Indicators (please use SMART22 indicators)					

²² SMART indicators are: specific, to avoid differing interpretations; measurable, to allow monitoring and evaluation; appropriate to the problem statement; realistic and able to achieve; time-bound indicating a specific period of time during which the results will be achieved. Indicators must be designed to enable you to identify the different impacts (intended and unintended) your project has on women, girls, boys, and men.

Outcomes

- Shelter kits are procured and transported to distribution places,
- Beneficiary IDP households are identified,
- Shelter reconstruction kits are distributed,
- Shelter support is provided to the most vulnerable IDPs households among the beneficiary,
- House reconstruction training is provided to the beneficiary IDPs households,
- CRIs kits are sourced, transported and warehoused
- IDPs benefited from CRIs distribution.

Indicators

- 1000 Shelter reconstruction kits are procured,
- 1000 Beneficiary IDP households are identified,
- 1000 Shelter reconstruction kits are distributed,
- 200 most vulnerable IDPs households are assisted with household reconstruction,
- 3 sessions of house reconstruction training are conducted in favour of IDP household beneficiaries,
- 3180 CRIs kits are sourced, transported and warehoused
- 3180 IDPs households receive CRIs distribution.

11. Actual outcomes achieved with CERF funds

Expected Outcomes and Indicators (please use SMART indicators)

Outcomes

- 1000 Shelter reconstruction kits are procured,
- 1000 Beneficiary IDP households are identified,
- 1000 Shelter reconstruction kits are distributed,
- 200 most vulnerable IDPs households are assisted with household reconstruction,
- 3 sessions of house reconstruction training are conducted in favour of IDP household beneficiaries,
- 3180 CRIs kits are sourced, transported and warehoused
- 3180 IDPs households receive CRIs distribution

Indicators

- In total 4,500 household benefited from UNHCR shelter programme, either through receipt of shelter kit or direct construction undertaken
- 53,946 IDPs households received CRIs kits directly from UNHCR.

12. In case of significant discrepancy between planned and actual outcomes, please describe reasons:

The objectives of this project achieved as planned, there was no discrepancy in the realisation of the planned outcomes

13. Are the CERF funded activities part of a CAP project that applied an IASC Gender Marker code?

YES ☐ NO ☒

If 'YES', what is the code (0, 1, 2a or 2b):

If 'NO' (or if GM score is 1 or 0): UNHCR AGDM tool was used to ensure that Gender is mainstreamed during the implementation of these CERF funded activities.

14. Evaluation: Has this project been evaluated or is an evaluation pending?

EVALUATION CARRIED OUT ☐

UNHCR will conduct the evaluation of this programme through a formal audit in 2015. Initial audit scheduled for February was cancelled as result of recent insecurity.

EVALUATION PENDING ☒

NO EVALUATION PLANNED ☐

TABLE 8: PROJECT RESULTS

CERF project information			
1. Agency:	IOM	5. CERF grant period:	[01.03.14 – 30.09.14]
2. CERF project code:	14-RR-IOM-008	6. Status of CERF grant:	<input type="checkbox"/> Ongoing <input checked="" type="checkbox"/> Concluded
3. Cluster/Sector:	HEALTH (Protection)		
4. Project title:	Increasing access to Mental Health and Psychosocial support for crisis-affected population in Bangui.		
7. Funding	a. Total project budget:	US\$ 1,200,000	d. CERF funds forwarded to implementing partners:
	b. Total funding received for the project:	US\$ 557,952	▪ NGO partners and Red Cross/Crescent: US\$ 375,755
	c. Amount received from CERF:	US\$ 557,952	▪ Government Partners: US\$ 0
Results			
8. Total number of <u>direct beneficiaries</u> planned and reached through CERF funding (provide a breakdown by sex and age).			
Direct Beneficiaries	Planned	Reached	In case of significant discrepancy between planned and reached beneficiaries, please describe reasons:
a. Female	7,500	23,061	Final target population is much higher than expected initially due to recreational events and community mobilisation and sensitisation (22,855 beneficiaries). Nevertheless, if we are focusing on support to individuals and group discussions, the total number of beneficiaries attending the project is still higher than expected:
b. Male	2,500	15,712	
c. Total individuals (female + male):	10,000	38,773	
d. Of total, children <u>under</u> age 5	0	0	11,001 female and 4,917 male, representing a total number of 15,918 beneficiaries attending focus group discussion; individuals counselling and follow-up.
9. Original project objective from approved CERF proposal			
Objective(s) <ul style="list-style-type: none"> • Objective 1: The psycho-social conditions of conflict-affected and vulnerable individuals is enhanced through strengthened community and family support mechanisms • Objective 2: The psycho-social conditions of conflict-affected and vulnerable individuals is enhanced through the provision of focused psychosocial support 			
10. Original expected outcomes from approved CERF proposal			
Expected Outcomes and Indicators (please use SMART²³ indicators)			
Expected Outcome 1: Increased capacity of target populations to identify and support individuals to cope with crisis-related mental health and psychosocial difficulties			
Indicators: <ul style="list-style-type: none"> • Number of social workers trained on the provision of emotional and practical support • Number of individuals and families provided with basic emotional and practical support 			

²³ SMART indicators are: specific, to avoid differing interpretations; measurable, to allow monitoring and evaluation; appropriate to the problem statement; realistic and able to achieve; time-bound indicating a specific period of time during which the results will be achieved. Indicators must be designed to enable you to identify the different impacts (intended and unintended) your project has on women, girls, boys, and men.

- Number of induction sessions and discussion groups for the population
- Number of culturally appropriate art-based activities conducted by the theatre group for the target communities

Expected Outcome 2: Increased access to culturally-sensitive MHPSS services in target populations

Indicators:

- Number of individuals provided with focused psychological or social support
- Number of outreach activities conducted by mobile teams

Expected Outcome 3: Appropriate referral to specialized MH services

Indicators:

- Number of individuals referred in an outpatient fashion to specialized MH services, number of trips, and qualitative analysis of their needs.
- Number of individuals followed-up in the community between follow ups, including number of focused psychosocial support sessions offered to them, number of education sessions offered to the families.

11. Actual outcomes achieved with CERF funds

Outcome 1: Increased capacity of target populations to identify and support individuals to cope with crisis-related mental health and psychosocial difficulties:

- During the project a total of **38** social workers directly involved in the activities and **270** focal points from the community in the 3rd, 4th and 7th arrondissement of Bangui have been trained on monthly basis on basic emotional and practical support to individuals and families.

In addition, the teams involved in the project received also training on:

- PFA and supportive communication,
- Psychosocial support and follow up through lay counselling,
- Stress management, traumatism and GBV,
- Psychosocial support and mental health (held in coordination with the psychiatric hospital).
- **24,723** beneficiaries were reached throughout the project through public sensitisation, community mobilization and recreational activities. Within the 6 IDP sites, 2 in each arrondissement targeted by the actions, an average of 72 induction sessions and group discussions were held per week (3 per site per day; targeting men, women and teenagers) for a total of about **280** sessions per month. Among this global figure, public sensitisations on mental health and psychosocial support, family and social cohesion and substance abuse have been conducted regularly, reaching about **12,000** persons. Two radio shows on mental health wellbeing, psychosocial support and social cohesion have been broadcast on local radio. Finally, culturally appropriate art based activities have involved 3,313 beneficiaries within the three arrondissements targeted by the actions.

Outcome 2: Increased access to culturally-sensitive MHPSS services in target populations:

- **8,808** beneficiaries have received focused psychological or social support during the project. This focused support was liaised with lay counselling, focused group discussion, provision of special kits, and was targeting beneficiaries of the project and victims of GBV.
- According to outreach activities and home visits, the MHPSS mobile teams have been able to reach **1,211** women and **737** men, for a total of **1,948** beneficiaries reached outside our listening centres.

Outcome 3: Appropriate referral to specialized MH services:

- Concerning specialized services and referrals, at first level between the two partners DRC referred **392** cases to Coopi's psychologists for second interviews and psychological follow up while Coopi referred **240** other cases to partners, public hospital and psychiatric unit. On top of those 240 cases referred, **15** were referred to the psychiatric unit for severe psychiatric disorder and have received medical treatment.
- At community level, **871** beneficiaries have been followed-up with focused psychosocial support. Among them, **501** due to gender based violence.

12. In case of significant discrepancy between planned and actual outcomes, please describe reasons:

N/A

13. Are the CERF funded activities part of a CAP project that applied an IASC Gender Marker code?		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
<p>If 'YES', what is the code (0, 1, 2a or 2b): N/A</p> <p>If 'NO' (or if GM score is 1 or 0): Young women and victims of sexual and gender based violence (SGBV) were a specific target group of this action. The support response was adapted to the needs of communities and individuals according to their needs. For example women and men not able/willing to talk about their experiences in groups had access to psychosocial support through individual counselling sessions. COOPI ran supportive parenting programmes, which took into account different gender roles played by men and women within the family. In addition, project teams were trained on several psychosocial related subjects, including traumatism and GBV.</p>		
14. Evaluation: Has this project been evaluated or is an evaluation pending?		EVALUATION CARRIED OUT <input type="checkbox"/>
No evaluation is planned for this project; however, social workers and focal points were trained on a monthly basis throughout the project period allowing ongoing evaluation of their progress and engagement with the trainings. Likewise case management of individuals with referrals and follow up allowed evaluation of the impact of the psychosocial support throughout the project period.		EVALUATION PENDING <input type="checkbox"/>
		NO EVALUATION PLANNED <input checked="" type="checkbox"/>

TABLE 8: PROJECT RESULTS

CERF project information			
1. Agency:	WFP	5. CERF grant period:	[25.02.14 – 24.08.14]
2. CERF project code:	14-RR-WFP-008	6. Status of CERF grant:	<input type="checkbox"/> Ongoing <input checked="" type="checkbox"/> Concluded
3. Cluster/Sector:	Food security		
4. Project title:	Assistance to vulnerable populations affected by armed conflicts in the Central African Republic		
7. Funding	a. Total project budget:	US\$ 116,042,300*	d. CERF funds forwarded to implementing partners:
	b. Total funding received for the project:	US\$ 89,100,758*	■ NGO partners and Red Cross/Crescent: US\$ 110,970 ■ Government Partners: US\$ 0
	c. Amount received from CERF:	US\$ 2,287,588	
Results			
8. Total number of <u>direct beneficiaries</u> planned and reached through CERF funding (provide a breakdown by sex and age).			
Direct Beneficiaries	Planned	Reached	In case of significant discrepancy between planned and reached beneficiaries, please describe reasons:
a. Female	31,752	62,365	WFP reached twice the planned beneficiaries with the funds received from CERF, for which 1,515mt of rice was distributed, thus maximizing coverage under the general food distribution programme. This was enabled through WFP's efforts to expand the activity and reach new beneficiaries, specifically under the seed protection activity. Of the beneficiaries reached, 10,518 were girls under the age of five and 10,105 boys.
b. Male	31,752	61,868	
c. Total individuals (female + male):	63,504	124,233	
d. Of total, children <u>under</u> age 5	9,525	20,623	
9. Original project objective from approved CERF proposal			
Objective(s) The overall objective of WFP's response is to save lives and protect livelihoods in emergencies. Specifically, CERF funding will support WFP in its project objective: to improve the food consumption over assistance period for beneficiaries in conflict-affected areas.			
10. Original expected outcomes from approved CERF proposal			
Expected Outcomes and Indicators (please use SMART24 indicators) Output indicators: <ul style="list-style-type: none"> • Number of women, men, boys and girls receiving food assistance • Quantity of food assistance distributed, by commodity type Outcome indicators: <ul style="list-style-type: none"> • Food consumption score 			

²⁴SMART indicators are: specific, to avoid differing interpretations; measurable, to allow monitoring and evaluation; appropriate to the problem statement; realistic and able to achieve; time-bound indicating a specific period of time during which the results will be achieved. Indicators must be designed to enable you to identify the different impacts (intended and unintended) your project has on women, girls, boys, and men.

<ul style="list-style-type: none"> • Coping strategy index <p>WFP staff has deep field presence at distributions and monitor implementation of activities and output indicators, address concerns and questions of beneficiaries, and ensure that activities indeed support the most vulnerable. Currently the context does not allow for comprehensive outcome/impact monitoring, but over the course of the Project it is hoped that the security situation and population movements may stabilize sufficiently to allow; WFP is also exploring alternative means of data collection, such as remote post-distribution monitoring using mobile phones. In the meantime, food security, multi-sector and rapid assessments will allow to collect qualitative (and some quantitative) data on the evolving situation. As the situation develops and allows implementing more comprehensive monitoring systems, WFP will work with partners to collect data disaggregated by sex of head of household.</p> <p>WFP has already reinforced its in-house monitoring toolkit and sub-office footprint, and a field office is now established in Bossangoa. In 2014, WFP with UN partners aim to re-build sub-offices in Bambari and Kaga-Bandoro, strengthening presence in the field.</p>	
11. Actual outcomes achieved with CERF funds	
<p>The large-scale food security assessments provided a global view of the status of the food security situation among the population. The significant scale-up of assistance to food insecure displaced people, as well as efforts to protect planting and cultivation during the critical agricultural season in April-September, considered the geographical mapping of food security of the April 2014 Integrated Phase Classification (IPC) and helped providing access to food.</p> <p>According to the September 2014 Emergency Food Security Assessment (EFSA), food reserves in rural areas in 2014 were estimated at 40-50 percent lower than average and a decrease in the quantity and quality of meals was observed, with critically low levels of food consumption and high malnutrition risks. Almost two-thirds of surveyed households had adopted coping strategies to access food. More than 50 percent had used crisis and emergency strategies such as the withdrawal of children from school or the practice of risky activity. The use of these strategies increased from 4 to 11 percent compared to 2013. The trend underscores the impact of the protracted crisis which has exhausted household ability to cope using less irreversible strategies such as borrowing.</p> <p>Economic recovery of the country will take time. The ongoing crisis has had an impact on food security and access to income-generating opportunities. The early confirmation of the CERF funds was crucial to ensure timely response to affected populations and contributed to the stabilization of access to food for beneficiaries and helped facilitate the retake of livelihoods especially for the previously displaced which have returned to their areas of origin.</p> <p>The November 2014 IPC revealed that the global food security situation in the country, which had deteriorated during the year with 4 percent compared to the 2013 IPC before the escalation of the crisis, had improved from April to November with 11 per cent.</p>	
12. In case of significant discrepancy between planned and actual outcomes, please describe reasons:	
<p>The activities were carried out between the end of February and May 2014. WFP had planned for a quick distribution of the commodities however due to significant supply chain challenges experienced in February and March, the food arrived later than planned. This was caused by the disruption of transportation from the border of Cameroon for three weeks in February. International forces began providing military escorts of transports from the border, which provided incoming supplies once a week and WFP organized an airlift of food in February until early March to mitigate any possible breaks in assistance. Therefore, distributions of commodities procured with the CERF funds were finalised in May.</p> <p>The food was used within the greater WFP general food distribution programme and distributed to food insecure farmer households during the critical planting season and coordinated with FAO's agricultural input programme. WFP provided food as seed protection to provide access to food and prevent the consumption of seeds received for planting.</p> <p>WFP worked to engage additional partners to enable a scale-up of activities to expand geographically as well as programme coverage, and was thus able to identify more willing partners than mentioned initially in the proposal.</p>	
13. Are the CERF funded activities part of a CAP project that applied an IASC Gender Marker code?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
<p>If 'YES', what is the code (0, 1, 2a or 2b): 2a</p> <p>If 'NO' (or if GM score is 1 or 0):</p>	

14. Evaluation: Has this project been evaluated or is an evaluation pending?	EVALUATION CARRIED OUT <input type="checkbox"/>
No evaluation was planned as this project is an emergency operation.	EVALUATION PENDING <input type="checkbox"/>
	NO EVALUATION PLANNED <input checked="" type="checkbox"/>

TABLE 8: PROJECT RESULTS

CERF project information					
1. Agency:		WFP		5. CERF grant period:	27.03.14 – 26.09.14
2. CERF project code:		14-RR-WFP-009		6. Status of CERF grant:	<input type="checkbox"/> Ongoing <input checked="" type="checkbox"/> Concluded
3. Cluster/Sector:		Coordination and Support Services			
4. Project title:		Provision of Humanitarian Air Services CAR			
7. Funding	a. Total project budget:		US\$ 14,281,174	d. CERF funds forwarded to implementing partners: N/A	
	b. Total funding received for the project:		US\$ 12,029,244	■ NGO partners and Red Cross/Crescent: US\$	
	c. Amount received from CERF:		US\$ 987,963	■ Government Partners: US\$	
Results					
8. Total number of <u>direct beneficiaries</u> planned and reached through CERF funding (provide a breakdown by sex and age).					
Direct Beneficiaries		Planned	Reached	In case of significant discrepancy between planned and reached beneficiaries, please describe reasons:	
a. Female		N/A	N/A		
b. Male		N/A	N/A		
c. Total individuals (female + male):		N/A	N/A		
d. Of total, children <u>under</u> age 5		N/A	N/A		
9. Original project objective from approved CERF proposal					
Objective(s) <ul style="list-style-type: none"> Provide safe, efficient and cost-effective air transport services to humanitarian agencies and donor representatives in CAR. Carry out medical and security evacuations for staff as necessary. Transport life-saving and other light cargo in support of humanitarian operations. 					
10. Original expected outcomes from approved CERF proposal					
Expected Outcomes and Indicators (please use SMART25 indicators) Expected outcomes: <ul style="list-style-type: none"> 100 per cent of planned aircraft flying hours per month for each of two LET 410 aircraft into various destinations within CAR reached. As many as 1,000 humanitarian passengers transported every month (based on current increased frequency). As much as 20 metric tonnes of medical supplies and other light cargo transported every month (based on current increased frequency). 100 per cent of requests for medical and security evacuations carried out (target: 100) Indicators: <ul style="list-style-type: none"> Number of Aircraft Hours flown : 2,956 hours of flight in 2014 with 3 Aircrafts (2 X LET 410 of 17 seats each, plus 1 x Dash8/100 of 35 seats). Aircraft seat occupancy rates : 57per cent in 2014 (Passengers and cargo together) 					

²⁵SMART indicators are: specific, to avoid differing interpretations; measurable, to allow monitoring and evaluation; appropriate to the problem statement; realistic and able to achieve; time-bound indicating a specific period of time during which the results will be achieved. Indicators must be designed to enable you to identify the different impacts (intended and unintended) your project has on women, girls, boys, and men.

<ul style="list-style-type: none"> • Tonnage of light humanitarian cargo transported : 323 MT in 2014 (20, 351 passengers in 2014) • Number of evacuations carried out : 17 Medical evacuations and 14 Security relocations in 2014 	
11. Actual outcomes achieved with CERF funds	
<p>Due to the increase of fleet, especially with the addition of a 35 seats aircraft (Dash8) in 2014, there was a Budget Revision undertaken in June 2014, increasing accordingly the budget of UNHAS in 2014, from US\$ 8,790,716 to US\$ 14,281,174.</p> <p>CERF funds have been participating to the significant increase of UNHAS activities in 2014, as explained below.</p>	
12. In case of significant discrepancy between planned and actual outcomes, please describe reasons:	
<p>UNHAS has been present in the country since 2006 and has assumed a critical role to the Level 3 humanitarian response as it remains the only service that provides equal access to staff of non-governmental organizations, United Nations agencies, donor organizations and diplomatic missions.</p> <p>With another year of heightened rebel activity and inter-communal violence in the country, UNHAS faced many challenges in 2014. Particularly in terms of insecurity in Bangui and the provinces. There were also significant disruption in the supply of jet fuel on several occasions which resulted in UNHAS importing 1,500 drums of JET A1 fuel from neighboring countries. The infrastructure of landing strips is sometimes low quality and in need of maintenance. Despite these challenges, UNHAS successfully provided indispensable services and responded to the increased demand from the humanitarian community.</p> <p>In 2014, UNHAS provided services for 20,351 passengers and 323mt of cargo. This represents an increase of 167 percent compared to 2013 when UNHAS assisted 9,394 passengers and 279mt. In 2014, the UNHAS fleet was composed of 2 aircrafts of 17 seats each (2xLET 410) and an additional aircraft of 35 seats (Dash8/100) was added to the fleet which proved essential during the height of the emergency and during security events.</p> <p>During the year, the number of humanitarian organizations registered with UNHAS increased from 57 to 105, which rely on UNHAS to implement and monitor activities. The number of joint missions and high-level visits of key personalities into the country also increased considerably. User group committees and steering group committees were set up which met on a regular basis to identify user demands and needs.</p> <p>UNHAS is flying to regular locations and also flew to ad hoc destinations (27 locations total), such as Douala, Cameroon which for long served as an important air bridge for humanitarian movements in and out of the country when commercial flights were limited or sometimes cancelled.</p> <p>Due to the highly volatile environment and the scale-up of humanitarian operations throughout the year, UNHAS provided vital support to assist humanitarian staff and provide quick and safe passage to and from operational areas. In total, UNHAS carried out 17 Medevac and 14 security relocations in 2014.</p>	
13. Are the CERF funded activities part of a CAP project that applied an IASC Gender Marker code?	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
<p>If 'YES', what is the code (0, 1, 2a or 2b): N/A</p> <p>If 'NO' (or if GM score is 1 or 0): This is a logistic project for which the gender marker does not apply.</p>	
14. Evaluation: Has this project been evaluated or is an evaluation pending?	EVALUATION CARRIED OUT <input checked="" type="checkbox"/>
Quality Assurance, PMP (Performance Management Plan) and Aviation Safety audits planned in 2015.	EVALUATION PENDING <input type="checkbox"/>
	NO EVALUATION PLANNED <input type="checkbox"/>

TABLE 8: PROJECT RESULTS

CERF project information				
1. Agency:	WFP	5. CERF grant period:	[25.02.14 – 24.08.14]	
2. CERF project code:	14-RR-WFP-010	6. Status of CERF grant:	<input type="checkbox"/> Ongoing	
3. Cluster/Sector:	Nutrition		<input checked="" type="checkbox"/> Concluded	
4. Project title:	Assistance to vulnerable populations affected by armed conflicts in the Central African Republic			
7. Funding	a. Total project budget:	US\$ 4,956,900*	d. CERF funds forwarded to implementing partners:	
	b. Total funding received for the project:	US\$ 3,806,056*	▪ NGO partners and Red Cross/Crescent: US\$ 0	
	c. Amount received from CERF:	US\$ 250,008	▪ Government Partners: US\$ 0	
Results				
8. Total number of <u>direct beneficiaries</u> planned and reached through CERF funding (provide a breakdown by sex and age).				
Direct Beneficiaries		Planned	Reached	In case of significant discrepancy between planned and reached beneficiaries, please describe reasons:
a. Female		6,725	6,657	
b. Male		6,725	6,604	
c. Total individuals (female + male):		13,450	13,261	
d. Of total, children <u>under</u> age 5		13,450	13,261	
9. Original project objective from approved CERF proposal				
Objective(s) The overall objective of WFP's response is to save lives and protect livelihoods in emergencies. Specifically, CERF funding will support WFP in its project objective: reduced under nutrition among children aged 6-59 months and pregnant/lactating women.				
10. Original expected outcomes from approved CERF proposal				
Expected Outcomes and Indicators (please use SMART indicators) Output indicators: <ul style="list-style-type: none"> Number of girls and boy receiving nutrition assistance Quantity of special nutrition products distributed Quantity of non-food items distributed, by type (as applicable) Outcome indicators: <ul style="list-style-type: none"> Proportion of target population who participate in an adequate number of distributions Proportion of eligible population who participate in programme (coverage) 				
11. Actual outcomes achieved with CERF funds				

<p>A total of 54,9mt of Plumpy'Sup was distributed to children under the age of five to prevent spikes in malnutrition.</p> <p>Due to the complex security context, WFP experienced challenges and limitations to carry out monitoring activities to collect adequate quantitative data during the year. However, the large-scale nutrition survey provided a global view of the status of malnutrition and food security situation among the population and some monitoring activities were carried out at the end of the year.</p> <p>Despite the lack of complete data for all regions by the end of the year, preliminary results of the 2014 SMART survey showed no significant increase in global acute malnutrition or in moderate acute malnutrition and severe acute malnutrition. However, findings showed high chronic malnutrition rates of 40 percent in seven of 14 prefectures assessed and high under five mortality rates with three prefectures having rates equal to or above the threshold of two deaths per 10,000 children.</p> <p>The timeliness and flexibility of the CERF funding was crucial for the start-up of the WFP blanket supplementary feeding programme. Early on, WFP activated its internal advance financing mechanism, which enabled swift programming of the funds. WFP reached success under the blanket feeding programme to one child under five per household by reaching a monthly average of 22,800 children. In total, WFP reached 162,846 beneficiaries under this programme throughout the year. In addition, messages on good nutrition practices through post and prenatal medical consultations were provided, as a measure to prevent malnutrition. The CERF contribution took part in the countrywide efforts which helped stabilize mortality and malnutrition in the country.</p>	
12. In case of significant discrepancy between planned and actual outcomes, please describe reasons:	
<p>To get the food product into the country as soon as possible, WFP proceeded with its internal advance financing mechanism. The contribution was therefore entered into a common pot together with other contributions for the purchase of Plumpy'Sup. The food was distributed under the blanket feeding programme which was integrated with the general food distribution programme, distributed by partners or through WFP direct distributions. Since the funds were put in a common pot, it is difficult to track details of subgrants and partners specifically for the CERF contribution. However, 90 percent of the 2014 general food distribution was achieved through partnerships, thus an estimated total of 49.41mt of the food purchased with the CERF funding was distributed by partners, for the total value of US\$6,374.</p>	
13. Are the CERF funded activities part of a CAP project that applied an IASC Gender Marker code?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
<p>If 'YES', what is the code (0, 1, 2a or 2b): 2a</p> <p>If 'NO' (or if GM score is 1 or 0):</p>	
14. Evaluation: Has this project been evaluated or is an evaluation pending?	EVALUATION CARRIED OUT <input type="checkbox"/>
No evaluation was planned as this project is an emergency operation.	EVALUATION PENDING <input type="checkbox"/>
	NO EVALUATION PLANNED <input checked="" type="checkbox"/>

ANNEX 1: CERF FUNDS DISBURSED TO IMPLEMENTING PARTNERS

CERF Project Code	Cluster/Sector	Agency	Implementing Partner Name	Sub-grant made under pre-existing partnership agreement	Partner Type	Total CERF Funds Transferred to Partner US\$	Date First Installment Transferred	Start Date of CERF Funded Activities By Partner*	Comments/Remarks
13-RR-CEF-152	Water, Sanitation and Hygiene	UNICEF	IRC	No	INGO	\$172,048	21-Jan-14	1-Jan-14	agency pre-financing
13-RR-CEF-152	Water, Sanitation and Hygiene	UNICEF	TEARFUND	No	INGO	\$178,745	9-Apr-14	17-Mar-14	agency pre-financing
13-RR-CEF-152	Water, Sanitation and Hygiene	UNICEF	LWF	No	INGO	\$86,403	11-Apr-14	1-Mar-14	agency pre-financing
13-RR-CEF-152	Water, Sanitation and Hygiene	UNICEF	LIFA	No	NNGO	\$5,539	16-Apr-14	9-Jan-14	agency pre-financing
13-RR-CEF-152	Water, Sanitation and Hygiene	UNICEF	MERCY CORPS	No	INGO	\$218,229	14-May-14	1-Mar-14	agency pre-financing
13-RR-CEF-152	Water, Sanitation and Hygiene	UNICEF	ACF	No	INGO	\$214,045	13-Jun-14	5-Jan-14	agency pre-financing
13-RR-CEF-152	Water, Sanitation and Hygiene	UNICEF	ICDI	No	INGO	\$5,185	31-Mar-14	8-Jan-14	agency pre-financing
13-RR-CEF-152	Water, Sanitation and Hygiene	UNICEF	DGH	No	GOV	\$4,677	9-Apr-14	17-Jun-14	
13-RR-CEF-152	Water, Sanitation and Hygiene	UNICEF	ANEA	No	GOV	\$999	23-Jan-14	16-Jan-14	agency pre-financing
13-RR-CEF-152	Water, Sanitation and Hygiene	UNICEF	EAA	No	INGO	\$13,713	6-Mar-14	16-Jan-14	
14-RR-CEF-018	Water, Sanitation and Hygiene	UNICEF	IRC	No	INGO	\$112,928	14-Jul-14	21-Feb-14	2eme tranche de paiement sur CERF 2
14-RR-CEF-018	Water, Sanitation and Hygiene	UNICEF	TEARFUND	No	INGO	\$89,080	29-Jul-14	17-Mar-14	2eme tranche de paiement sur CERF 2
14-RR-CEF-018	Water, Sanitation and Hygiene	UNICEF	IRAD	No	NNGO	\$17,995	16-Apr-14	5-May-14	
14-RR-CEF-018	Water, Sanitation and Hygiene	UNICEF	CRCA	No	RedC	\$14,513	29-Apr-14	19-May-14	
14-RR-CEF-018	Water, Sanitation and Hygiene	UNICEF	MERCY CORPS	No	INGO	\$143,023	23-Jul-14	15-May-14	2eme tranche de paiement sur CERF 2
14-RR-CEF-018	Water, Sanitation and Hygiene	UNICEF	ACF	No	INGO	\$857	13-Jul-14	16-Jun-14	2eme tranche de paiement sur CERF 2
14-RR-CEF-018	Water, Sanitation and Hygiene	UNICEF	DGH	No	GOV	\$32,434	24-Mar-14	15-Feb-14	agency pre-financing

14-RR-CEF-018	Water, Sanitation and Hygiene	UNICEF	CARITAS	No	NNGO	\$4,680	25-Jun-14	1-Jul-14	
14-RR-CEF-018	Water, Sanitation and Hygiene	UNICEF	ANEA	No	GOV	\$118,174	14-Jul-14	1-Aug-14	
13-RR-CEF-153	Health	UNICEF	Not applicable	No		\$0	22-Feb-14	24-Feb-14	This grant was used to purchase LLINs and for freight fees
14-RR-CEF-001	Health	UNICEF	CAR Red Cross	No	RedC	\$16,663	22-Feb-14	24-Feb-14	
14-RR-CEF-017	Nutrition	UNICEF	MOH	No	GOV	\$14,620	22-Feb-14	24-Feb-14	
14-RR-CEF-019	Health	UNICEF	CAR Red Cross/ MoH	No	RedC	\$15,701	22-Feb-14	25-Feb-14	
13-RR-CEF-151	Child Protection	UNICEF	Don Bosco	Yes	NNGO	\$36,822	4-Feb-14	4-Feb-14	
13-RR-CEF-151	Child Protection	UNICEF	COOPI	Yes	INGO	\$271,758	19-Mar-14	19-Mar-14	
13-RR-CEF-151	Child Protection	UNICEF	ESF	Yes	NNGO	\$16,095	21-Jan-14	21-Jan-14	
14-RR-CEF-016	Child Protection	UNICEF	WAR CHILD	Yes	INGO	\$301,891	13-Mar-14	13-Mar-14	
14-RR-CEF-016	Child Protection	UNICEF	COOPI	Yes	INGO	\$59,966	14-May-14	14-May-14	
13-RR-HCR-069	Protection	UNHCR	Danish Refugee Council	No	INGO	\$360,461	23-Jan-14	1-Jan-14	1) The non existence of pre-existing agreement refers to 2013. As such, this was a misunderstanding that should be corrected as UNHCR signed an agreement with DRC as of 1 July 2014. 2) CERF financing is complement UNHCR's own funding which enables the partner to start the project pending availability of CERF disbursement.
14-RR-HCR-006	Protection	UNHCR	Danish Refugee Council	Yes	INGO	\$456,022	1-May-14	4-Jun-14	
14-RR-HCR-007	Shelter & NFI	UNHCR	Danish Refugee Council	No	INGO	\$593,740	1-May-14	4-Jun-14	
14-RR-WFP-008	Food Assistance	WFP	ACTED	Yes	INGO	\$235	29-Oct-14	1-Apr-14	
14-RR-WFP-008	Food Assistance	WFP	COOPI	Yes	INGO	\$55,343	15-Aug-14	1-Apr-14	
14-RR-WFP-008	Food Assistance	WFP	Triangle G	Yes	INGO	\$4,606	21-May-14	1-May-14	
14-RR-WFP-008	Food Assistance	WFP	COHEB	Yes	INGO	\$3,916	22-Apr-14	1-May-14	
14-RR-WFP-008	Food Assistance	WFP	Caritas Bouar	Yes	NNGO	\$676	19-May-14	1-Mar-14	
14-RR-WFP-008	Food Assistance	WFP	Caritas Kaga Bandoro	Yes	NNGO	\$3,662	9-Sep-14	1-Apr-14	
14-RR-WFP-008	Food Assistance	WFP	Cordaid	Yes	INGO	\$10,756	3-Jun-14	1-Apr-14	

14-RR-WFP-008	Food Assistance	WFP	DRC	Yes	INGO	\$13,743	2-May-14	1-Apr-14	
14-RR-WFP-008	Food Assistance	WFP	Caritas Bossangoa	Yes	NNGO	\$15,242	15-Apr-14	1-Apr-14	
14-RR-WFP-008	Food Assistance	WFP	OSEEL	Yes	NNGO	\$2,792	18-Jun-14	1-Apr-14	
13-RR-WFP-081	Food Assistance	WFP	ACTED	Yes	INGO	\$122	29-Oct-14	1-Apr-14	
13-RR-WFP-081	Food Assistance	WFP	COOPI	Yes	INGO	\$30,811	6-May-14	1-Jan-14	
13-RR-WFP-081	Food Assistance	WFP	Triangle G	Yes	INGO	\$3,651	21-May-14	1-May-14	
13-RR-WFP-081	Food Assistance	WFP	COHEB	Yes	INGO	\$1,588	22-Apr-14	1-May-14	
13-RR-WFP-081	Food Assistance	WFP	Caritas Bouar	Yes	NNGO	\$44	19-May-14	1-Mar-14	
13-RR-WFP-081	Food Assistance	WFP	Caritas Kaga Bandoro	Yes	NNGO	\$6,554	9-Sep-14	1-Mar-14	
13-RR-WFP-081	Food Assistance	WFP	Cordaid	Yes	INGO	\$11,918	3-Jun-14	1-Apr-14	
13-RR-WFP-081	Food Assistance	WFP	DRC	Yes	INGO	\$12,762	2-May-14	1-Feb-14	
13-RR-WFP-081	Food Assistance	WFP	Caritas Bossangoa	Yes	NNGO	\$45,334	15-Apr-14	1-Feb-14	
13-RR-WFP-081	Food Assistance	WFP	World Vision	Yes	INGO	\$14,487	1-Jul-14	1-Jun-14	
13-RR-WFP-081	Food Assistance	WFP	IDEA Relief	Yes	INGO	\$21,761	29-Dec-14	1-Dec-14	
13-RR-WHO-078	Health	WHO	Save the Children	No	INGO	\$248,780	30-Jun-14	1-Feb-14	After validation of CERF project, Save the Children agreed to prefinance , the NGO was already identified in the project for implementation
14-RR-WHO-009	Health	WHO	Save the Children	No	INGO	\$200,000	31-Jul-14	1-May-14	After validation of CERF project, Save the Children agreed to prefinance , the NGO was already identified in the project for implementation
14-RR-WHO-009	Health	WHO	Emergency	No	INGO	\$122,633	30-Jun-14	1-Jun-14	After validation of CERF project, Save the Children agreed to prefinance , the NGO was already identified in the project for implementation
13-RR-FPA-058	Gender-Based Violence	UNFPA	COHEB	Yes	INGO	\$60,638	21-May-14	17-Mar-14	
13-RR-IOM-044	Protection	IOM	REM0D	No	NNGO	\$12,266	20-Feb-14	13-Dec-13	
13-RR-IOM-044	Protection	IOM	IDEAL	No	NNGO	\$16,075	20-Feb-14	13-Dec-13	
13-RR-IOM-044	Protection	IOM	AIDES	No	NNGO	\$16,613	20-Feb-14	13-Dec-13	
13-RR-IOM-044	Protection	IOM	Danish Refugee Council	No	INGO	\$17,225	20-Feb-14	13-Dec-13	
13-RR-IOM-044	Protection	IOM	MERCY CORPS	No	INGO	\$4,987	20-Feb-14	13-Dec-13	

13-RR-IOM-044	Protection	IOM	AFPE	No	NNGO	\$17,850	20-Feb-14	13-Dec-13	
13-RR-IOM-044	Protection	IOM	JUPEDEC	No	NNGO	\$34,817	20-Feb-14	13-Dec-13	
14-RR-IOM-008	Protection	IOM	Danish Refugee Council	No	INGO	\$195,434	30-Apr-14	1-Apr-14	
14-RR-IOM-008	Protection	IOM	COOPI	No	INGO	\$180,321	30-Apr-14	1-Apr-13	
13-RR-FAO-044	Livelihoods	FAO	COHEB	Yes	INGO	\$97,413	22-Jan-14	1-Oct-14	
13-RR-FAO-044	Livelihoods	FAO	FMABE	Yes	NNGO	\$97,413	22-Jan-14	1-Oct-14	
13-RR-FAO-044	Livelihoods	FAO	ACTED	Yes	INGO	\$97,413	22-Jan-14	1-Oct-14	
13-RR-FAO-044	Livelihoods	FAO	MOA	Yes	GOV	\$18,000	10-Mar-14	9-Sep-14	
14-RR-FAO-002	Livelihoods	FAO	PU-AMI	Yes	INGO	\$118,700	10-Mar-14	9-Sep-14	
14-RR-FAO-002	Livelihoods	FAO	MOA	Yes	GOV	\$12,000	10-Mar-14	9-Sep-14	

ANNEX 2: ACRONYMS AND ABBREVIATIONS (Alphabetical)

ANEA	Agence Nationale de l'Eau et de l'Assainissement
CFS	Child Friendly Spaces
CHF	Common Humanitarian Fund
CHW	Community Health Workers
CRI	Core Relief Items
DSRSG/RC/HC	The Deputy Special Representative of the Secretary-General/Resident Coordinator/Humanitarian Coordinator
DTM	Displacement Tracking Matrix
EMONC	Emergency Obstetric and Newborn Care
EWARS	Early Warning and Response System
FSCO	Field Security Coordination Officer
FOMAC	Multinational Force of Central Africa
FTS	Financial Tracking System
GBV	Gender-based Violence
GBVIMS	Gender Based Violence Information Management System
HCT	Humanitarian Country Team
HNO	Humanitarian Needs Overview
IASC	Inter Agency Standing Committee
IDP	Internally Displaced Person
IEHK	Interagency Emergency Health Kit
L3	Level 3 system-wide emergency
LLIN	Long Lasting Insecticide Nets
LSA	Local Security Assistant
MISCA	African-led International Support Mission to the Central African Republic
MIRA	Multi Cluster/Sector Initial Rapid Assessment
MISP	Minimal Initial Service Package
NFI	Non Food Items
PPE	Personal Protection Equipment
RH	Reproductive Health
SMART survey	Standardized Monitoring and Assessment of Relief and Transitions survey
SOP	Standard Operating Procedure
SRP	Strategic Response Plan
UMSC	Unaccompanied Minors and Separated Children