



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

Country	Dominican Republic
Resident Coordinator	Tadeusz Palac, R.C. a.i and UNICEF Representative
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I. Executive Summary

Tropical Storm Noel hit the Dominican Republic during the week of 28 October to 3 November 2007, near the end of the hurricane season. A tropical depression led to several days of very heavy rain, causing flash floods, swollen rivers, landslides, and flooding of low lying areas. By the time the storm had subsided, there had been 129 deaths, and thousands of homes were destroyed or damaged. There were severe losses in agriculture, infrastructure and services, especially water supply and irrigation. Around 65,000 people were estimated to have been severely affected, with most of these needing to be temporarily accommodated in shelters. Many lost their homes and all their belongings, and in many cases their means of livelihood as well. A large majority of those most affected by the disaster were poor, living in highly vulnerable areas, both rural and urban. The most severely affected areas were Barahona, Ocoa, San Cristobal, the Bajo Yuna and flood prone in and around Santo Domingo.

Based on initial assessments and consultations with Government and other partners even while the effects of storm were still being felt, an emergency Flash Appeal was prepared and submitted on 5 November, amounting to US\$13.8 million. To cover the most urgent needs, CERF funding was requested from the Office of the Coordinator of Humanitarian Affairs (OCHA) on 8 November. The Fund provided US\$3.1 million to cover needs in food, health, water, sanitation and hygiene, protection and early recovery.

Although there was a rapid response by Government during the first days of the emergency, it was difficult to get a clear indication of the scale of the disaster. Responses were not as well coordinated as they could have been and there were many spontaneous donations from various sources. National and local authorities established temporary shelters to accommodate those who had lost their homes or were forced to leave them. The population in these shelters, some of which continued to shelter families well into December, became the main target group for humanitarian assistance. Thousands of others affected by the floods were being forced to survive with friends and family or in what was left of their homes and communities. From very early on in the emergency it was clear that the overall impact would be major. In the end, Tropical Storm Noel turned out to be the country's most serious natural disaster since Hurricane Georges in 1998.

Based on information shared by colleagues from OCHA and participating agencies, the UN Country Team (UNCT) was not very optimistic about the possibilities of a significant and rapid response to the Flash Appeal for a country like the Dominican Republic. Hence it felt that obtaining at least a "guaranteed minimum" from the Central Emergency Response Fund (CERF) was essential for the UN to have a credible, flexible and rapid response to the emergency. Given that donors' attention was also focused on the flood emergency in Mexico and more significantly the impact of Cyclone Sidr in Bangladesh, this was probably a wise approach. Although agencies did obtain some funding from other sources, the \$3.1

million in CERF funding was absolutely crucial in allowing a timely, coherent and coordinated UN response, in collaboration with key partners, in a situation where needs were difficult to assess and the national response capacity was strained by the scale of the disaster.

The country was still recovering from the impact of TS Noel when it was hit by a second major storm – Tropical Storm Olga – in mid-December, causing damage and loss of life on a similar scale, mostly in areas that had not been badly affected by TS Noel. The UN system revised the Flash Appeal to include additional needs and the response to Olga became integrated into the support for relief and recovery from Noel which was still ongoing and in some cases continued into January 2008. Additional CERF funding was requested for the areas of food, water supply, hygiene and sanitation, and early recovery. This report focuses on the CERF funding received for victims of Noel as CERF funds for victims of Olga were received in early 2008 and activities are still continuing.

Total amount of humanitarian funding required and received (per reporting year)	Required: \$13,985,000 (FLASH APPEAL TS NOEL ONLY) Received: \$7,615,691 (Up to 8 April 2008)			
Total amount of CERF funding received by funding window	Rapid Response: \$3,105,354 Under funded: \$0 Grand Total: \$3,105,354			
Total amount of CERF funding for direct UN agency/IOM implementation and total amount forwarded to implementing partners	Total UN agencies/IOM: \$3,105,354 Total implementing partners: \$6,500 (UNICEF to UN-INSTRAW)			
Approximate total number of beneficiaries reached with CERF funding (disaggregated by sex/age if possible)	Total	under 5 years of age	Female (If available)	Male (If available)
	c. 65,000 direct beneficiaries	10,000 approx.	n/a	n/a
Geographic areas of implementation	Areas that were most seriously affected by the flooding and other problems caused by Tropical Storm Noel: Barahona, Azua, Ocoa, San Cristobal, Bajo Yuna and low lying areas in and around Santo Domingo.			

II. Coordination and Partnership- building

a) Decision-making process:

From the onset of the storm on 29 October, the UNCT/UNDMT (United Nations Disaster Management Team), with the help of the UNETE (UN Emergency Technical Team), was in constant touch with national and key local authorities/contacts and thus able to apprise itself of developments. Information was by no means complete or comprehensive in those first days but a definite picture of the impact of the storm began to emerge. As many communities remained cut off for several days, a fuller picture did not emerge until well into the second week of the emergency.

The decision to request the **United Nations Disaster Assessment and Coordination (UNDAC) deployment and OCHA staff support** was taken after consultation with the head of the National Emergency Operations Centre (COE) on the second day of the emergency while the effects of the storm were still being felt in many parts of the country. That decision was followed shortly thereafter by the decision to prepare a Flash Appeal and include a component for CERF funding.

On 31 October the Government (COE and the Secretariat for International Cooperation) held an emergency meeting with donors, NGOs and key Government sectors to apprise all partners of the situation and formally request support. Unlike other recent occasions when storms or hurricanes hit the country, the Government did declare a formal emergency, primarily to enable it to take certain types of administrative decisions regarding the response.

As the UNCT and agency staff began to develop the Flash Appeal and CERF proposals, the roles that each agency felt it could play in line with the inter-agency Emergency Preparedness and Response Plan obviously played a significant role in decision-making, as did the continuing communication that agencies maintained with key national partners who were involved in the response (e.g. COE, the Ministry of Health, Ministry of Agriculture, etc.) through the coordination structures or directly with sectors or NGO partners. During this period several agencies including the World Food Programme (WFP), The Pan American Health Organization (PAHO), and the United Nations Children's Fund (UNICEF), among others brought in emergency support staff to help plan and support the UN's response, and in developing the Appeal and the CERF request.

As soon as conditions allowed, a **rapid multi-sector assessment** was carried out on 2 November by six evaluation teams composed of staff of the various UN agencies, governmental institutions and key NGO partners. Arrangements were coordinated by UNETE and UNDAC. The assessment focused on what were known to be the most affected areas, with the aim of identifying damage and needs through direct observation and immediate contact with local governmental and non-governmental institutions. The results for the sectors covered were presented to the UNDMT. Although the assessments were obviously not comprehensive, they did serve to substantiate the picture that had emerged through other sources of the damage and needs and provided a solid basis on which to complete the Appeal and the CERF. Technical working groups then worked intensively to prepare draft proposals.

The **draft Appeal and the draft CERF proposals** were circulated rapidly to all members of the UNDMT as well as UNETE, before being finalised and dispatched. Consultations also took place with **key implementation partners** such as the Dominican Red Cross and other NGOs and donors. A key factor in the decision making process was agencies' comparative advantage and existing capacity to support interventions and a realistic assessment of the external support that could be mobilised quickly.

The **Flash Appeal was formally submitted on Monday 5 November**. At that point the "baseline" for the emergency's impact was estimated to be: 84 people killed, 48 missing and 65,000 displaced.

The close contact between the RC/UNCT and the National Emergency Coordinator (COE), the support provided by a staff member from the regional bureau of OCHA, the situation reports prepared almost daily, and the information being shared and discussed in the coordination tables built a valuable framework for the decision-making process of the UNDMT, helping to cross and validate existing information about damage and needs in order to determine the gap between demand and supply of humanitarian assistance in the most affected areas.

(b) Coordination amongst the humanitarian country team and partnerships:

Within the UN system the main coordination mechanism were the meetings convened and chaired by the Resident Coordinator i.e. once the emergency response phase of the Interagency Plan of Disaster Response had been activated at the onset of the emergency. Initially these took place almost on a daily basis. In most of the meetings the heads of all resident UN-agencies (UNDP, UNICEF, PAHO, WFP, UNFPA, FAO, UNAIDS and UN-INSTRAW) were joined by members of UNETE and the UNDAC team, OCHA, UNDSS, IOM, IFRC, Dominican Red Cross, ECHO, IDB, the World Bank, as well as the regional experts providing technical support to UN agencies.

There were informal contacts with other donors for sharing of information and although it was expected that Government would convene meetings of all donors and partners, only two such meetings took place – once just after the onset of the emergency and again two weeks later in order to share information on the impact of the storm and the response to date.

From early on in the emergency response, the UN system organized itself into a cluster-like arrangement that more or less matched existing Government sectoral coordination arrangements for emergencies. At the operational level, under the leadership of the Government and with the support and involvement of UN agencies and other partners, structures (Coordination Tables or Working Groups) were set up that worked on identifying the needs and coordinating the responses in the following areas:

- **Health**, under the leadership of the Ministry of Health and with PAHO/WHO acting as the UN's focal point/lead and involving all other UN (UNICEF, UNFPA, UNAIDS) and external partners;
- **Water and Sanitation**, including distribution of drinking water and initial effort to repair damaged water systems – here, based on the existing emergency coordination mechanisms, the Ministry of Health (but working closely with the National Institute for Water resources) took the lead supported by PAHO/WHO and with the participation of relevant UN and other partners;
- **Provision of food and nutrition** interventions where WFP took the lead in collaboration with UNICEF and others. The Dominican Red Cross was a key partner in planning as well as implementation.
- **Management of temporary shelters** (and coordination of inputs from other “sectors”) where the Civil Defence coordinated in collaboration with the Ministry of Health and the Dominican Red Cross and where several UN and other partners, including IOM, were involved.
- **Early agricultural and agricultural livelihood recovery**, led by the Ministry of Agriculture where from the UN side FAO acted as the focal point;
- **Psycho-social support** to affected populations especially children where the Ministries of Health and Basic Education played the leading role with UNICEF as the lead agency from the UN side.
- Subsequently an **Early Recovery** working group was established, with UNDP taking the lead.

Some of the Government-led structures did not function as effectively as would have been hoped for: sometimes sectors would not send representatives with decision making authority or participation would be inconsistent. Support for the population in shelters that had been set up by Civil Defence authorities was somewhat problematic as it involved multiple sectors without any real overall control from the centre, beyond making available basic data on people accommodated in them. For the UNCT uncertainty over the mandate of IOM in such situations created some difficulties, with a CERF proposal for its involvement in coordination of shelters being rejected. Similarly, issues of mandate created uncertainties as regards the roles of the Dominican Red Cross compared to the IFRC in the response.

c) Prioritization process:

The initial selection of sectors/projects for the Flash Appeal and the CERF allocations was based on a number of factors but was made difficult by incomplete information on the actual needs and limited information about what other players, including Government, were doing. By focusing on areas of comparative advantage, taking into account the type of support provided in previous emergencies and exploiting existing working relationships with key sectors as well as with NGOs and community organisations, the UN team was able determine a list of priority interventions that were not only essential but carried a certain level of guarantee as regards their feasibility. Obviously in some areas such as health, for example, it was recognised that a certain amount of flexibility would have to be applied to ensure that whatever support was provided was in line with rapidly changing needs. A second series of **inter-agency assessments** by members of UNETE and others was carried out on 21 November and the results fed into the planning of activities. Subsequently, during the implementation phase, **priority geographical areas** for support were determined on the basis of much more precise information that had become available in terms of the populations affected and their needs and action was coordinated through the clusters/coordination tables that had been established.

III. Implementation and Results

Rapid Response projects

Food, Nutrition and Food Security

Projects in this cluster accounted for just over 51% of the CERF funding provided for the rapid response to TS Noel and involved activities of three UN agencies - namely WFP, UNICEF and FAO - each adopting a different, yet mutually complementary strategy of intervention aiming both for immediate relief and longer term food security of affected populations. Needs in this area had been identified through the rapid assessments and were then verified through a more in-depth **food security assessment** carried out in the third week of the emergency. This also highlighted the serious long term impact on food security in the most affected areas, due to direct loss of auto-consumption crops and the loss of income/livelihoods. In order to satisfy **basic nutritional needs**, WFP and UNICEF focused on the direct distribution of food rations, reaching a total of 49,700 people, mostly those who were housed in temporary shelters, having lost their homes or for other reasons had a reduced capacity for guaranteeing food security. While WFP reached out to persons of all ages through the local distribution of **family food rations** including **rice, maize meal, pulses and vegetable oil**, UNICEF focussed on the particular needs of children through the distribution of **“nutrition kits” specially adapted for babies and children under 10 years of age**. Given that emergency food provided by government and other institutions did not take into consideration this age group and its particular nutritional needs, an essential role of UNICEF included a strong advocacy for appropriate food for babies and children. Both UNICEF and WFP closely coordinated planning and distribution with national and international NGOs, particularly the Dominican Red Cross, as well as governmental authorities.

Given that the national emergency response coordination improved and that the cluster on “food and nutrition security” was activated under WFP leadership, new partner organizations – local authorities and organizations, particularly church groups – that initially had not been included in the activities joined the efforts of food distribution. Also, the number of beneficiaries increased significantly with respect to the original plan (from 35,000 to 49,700) due to adjustment in family rations, their duration, and cost savings, all of these supported by the food security assessment carried out in close cooperation with FAO and the Ministry for Agriculture.

FAO’s activities focused on “food security” through the **restoration of livelihoods of small farmers**, organized in partnership with several local and international NGOs, partly combined with direct distribution of food rations through an interagency coordination with WFP. Some 22,200 small farmers and family members benefited from the restoration of irrigation channels and arable land, carried out by specially-created working brigades with more than 2,000 sets of tools also financed by CERF funds. These activities not only allowed 2,700 small farmers to recover large parts of their production capacity but also provided temporary employment and income for 1,000 persons affected by the storm, both benefits that also trickled down to their respective families.

Apart from the direct benefits of these interventions, all these activities enhanced the level of local organization and had a positive psychological impact by increasing hope and self-confidence of affected families/beneficiaries.

Health

The health cluster response was led by the Ministry of Health through a well established emergency coordination and response mechanism, supported by PAHO/WHO as lead agency as well as UNFPA and UNICEF. The cluster also looked at key water and sanitation needs.

PAHO focussed its support on **protecting the affected population from possible outbreaks of communicable diseases** due to the increase in the vector population and the lack of access to clean water and health care. Approximately 112,000 individuals were direct beneficiaries, about 34,000 persons located in shelters and around 78,000 individuals that were evacuated from their communities. All of the

actions in the Health Cluster were inextricably linked to the Cluster on Water and Sanitation. A clear separation of PAHO's activities is therefore difficult. Yet, all of them followed three lines of action:

- (i) Reaching out to the population living in temporary shelters and persons that had been evacuated from their communities. CERF funds allowed WHO/PAHO to distribute water purification kits, water tanks, portable latrines, solid waste bags, material for personal hygiene, disease diagnostic kits, as well as items for health worker protection. This distribution, as well as damage and need assessments, were carried out by central, provincial and volunteer brigades that were also paid by CERF funds.
- (ii) Furthermore, the funds were used for technical assistance for the coordination process of disease diagnosis and treatment carried out by supporting health institutions. PAHO provided case management on-site training and the strengthening laboratory capacity for diagnosis and early detection. A damage assessment of aqueducts and sewage systems was conducted to facilitate their rehabilitation and consequently avoid other water born diseases. Also, PAHO provided technical support to INAPA for the reparation of a part of 152 water systems damaged by TS Noel.
- (iii) As leader of the health cluster, PAHO/WHO supported national and local institutions in convening national coordination foray on health matters.

All of PAHO's CERF-funded activities were carried out in close coordination with the Ministry for Health, other health authorities, local community organizations and local water supply companies.

UNFPA focused its CERF-funded support on the **restoration and equipment of health care facilities, guaranteeing their full operational activity**. UNFPA either directly distributed medical equipment and supplies to health services in affected areas - benefiting from existing structures such as the health care system and the Provincial Health Department – or assisted health care authorities and governmental institutions in the organization and distributions of supplies. Special priority was given to the needs of women and young girls. Also, the funds covered expenses for elaborating, printing and distributing educational materials on health issues. UNFPA coordinated all its activities with governmental authorities in charge of disaster management, and the Ministry of Health, both at national as well as local level, as well as other UN agencies, in particular UNETE in its rapid assessments.

Water and sanitation

UNICEF was the only UN agency that requested and received CERF funds for water and sanitation as such. However, it is important to point out that **PAHO/WHO** not only assumed the overall **cluster lead**, but also dealt with **the issue of "Water and Sanitation" through its technical and financial intervention within the Health Cluster in which UNICEF was also an active partner**. As mentioned above, these actions included the distribution of water purification kits, water tanks, portable latrines, solid waste bags and disease diagnostic kits as well as the on-site training and the strengthening laboratory capacity for diagnosis and early detection. PAHO also provided important technical support to the National Institute for Drinking Water and Sewerage (INAPA) for the assessment and repair of a part of 152 local water systems damaged by the storm.

UNICEF on the other hand focused on the **provision of almost 10,000 hygiene and cleaning kits** to 2,500 families including 5,000 children - most of them under 5 years of age - and of 16 water tanks, distributed in shelters in prioritized communities. The hygiene kits, which were prepared according to the different ages and needs of children, were made up of components aimed at improving sanitary conditions in shelters and communities in order to prevent outbreaks of water borne and other diseases.

Furthermore, UNICEF supported the Ministry of Health (Directorate of Health Promotion) for the production and reproduction of six radio spots about water treatment and conservation, garbage disposal and food hygiene in the communities. To help in the efforts to stop the spread of leptospirosis, UNICEF also provided funds for 50,000 brochures and 2,500 posters on how to prevent the spread of the disease. As a result of the joint efforts of UN agencies and the health sector the outbreak of leptospirosis was contained having at one point threatened to become a major epidemic.

Further hygiene promotion activities carried out by the Ministry of Education and INAPA with technical and financial assistance from UNICEF and PAHO/WHO are reaching 155 schools in the affected areas.

Protection/Human Rights/Rule of Law

The cluster of “protection, human rights and rule of law” covered activities supported by UNICEF, UNFPA and UN-INSTRAW.

UNICEF launched a programme of **psycho-emotional care for around 5,000 children aged between 5 and 12 years** of age living in the most affected areas. Many of these children had lost homes and belongings and in some cases family members but also the sheer scale of the disaster left children traumatised. The approach is based on the games/play-oriented methodology “**Return of Happiness**” and helps the children to cope with different kinds of trauma as well as helping identify the most serious cases that may require psychological support. The objective is to reach a total of 10,000 children within the next months. In order to achieve this objective, 64 adults, including psychologists and teachers, received training in the applied methodology. Also, 281 adolescents were trained in seven workshops as game/play therapists and provided with the respective learning and play materials in order to work directly with children between the ages of 5 and 12. UNICEF also provided the services of an experienced technical expert to help initiate and manage the programme.

On an upstream level, UNICEF strongly advocated and strengthened inter-institutional coordination to support psycho-emotional recovery of children affected by emergencies. A meeting with key partners was held to present the “Return of Happiness” methodology and the preliminary results of its application in the country. Besides the concrete results achieved so far, UNICEF will continue to develop capacity building strategies in order to ensure that children’s psycho-emotional recovery in emergencies is a sustainable process in the country. This will include working with NGO implementation partners (World Vision and Plan International) as well as with academic institutions having psychology programmes and the Education Sector.

UNFPA used CERF funds in this cluster to **cover basic needs** of persons affected by the storm. Actions carried out included the **distribution of vital goods** (water, food and clothing), **educational and informational activities** to prevent gender-based and other types of violence, psychological assistance to victims of gender-based violence, as well as basic health care assistance, including Sexual Reproductive Health. CERF funds also helped to print and distribute educational material emphasizing on women’s health and the prevention of transmissible infections.

CERF funds channelled to UNICEF were passed on to **UN-INSTRAW** to enable it to carry out an **assessment of gender based violence and other protection issues in the areas affected by floods including in shelters**. Although planning for this activity began in late 2007, actual implementation of the assessment will be completed in 2008 and will be reported on in the next report. This activity is regarded as an essential input for developing strategies for protecting vulnerable women and girls in disaster situations.

Shelter and non-food items

Much of the support provided by the UN system and other partners was to the population temporarily housed in shelters set up by Government and local authorities. At their peak shelters were reported to be accommodating some **80,000 people** although figures fluctuated almost on a daily basis. Most of those eventually returned to their homes but several hundred families who had lost their homes completely and/or were not allowed to return to what were considered extremely vulnerable locations were to be provided with alternative accommodation or housing. Although some of these families benefited from various inputs such as food and hygiene items, the UNS did not get directly involved in the resettlement problem.

CERF funds for **UNDP** were envisaged to finance **clean-up and rehabilitation activities** - ultimately allowing better access to for humanitarian aid and other support - in order to reduce risk and vulnerability

in their efforts to return to their affected communities. Beneficiaries are at least 1,000 individuals in five selected communities in the provinces of San Cristóbal, Duarte y Azua.

Given that UNDP received CERF funds only on 31 December 2007, clean up activities could not be carried out until the beginning of 2008 and will therefore be reported on in the next report. However, during the weeks after the approval of CERF funds (19 December 2007) and the end of the reporting year, UNDP planned its activities in close collaboration with the Office of the Social Cabinet – a key partner in the later project implementation. While this institution identified three implementing NGOs (Sur Futuro, Caritas and the parish church of Villa Altagracia), UNDP prepared coordination and planning mechanisms that allowed for an appropriate support to the affected communities selected, namely Coordination and Consensus Roundtables constituted by local authorities and community leaders, whose responsibility is to identify, prioritize and oversee the rehabilitation activities carried out in 2008.

Education

Initially authorities declared that the impact of the storm on the education system had been minimal and that most schools were able to resume classes not long after the storm subsided and clean up activities were completed. However the fact that in many areas schools were used as temporary shelters – in some cases for several weeks -- created its own set of difficulties. Given this situation, UNICEF worked with the Ministry of Education to carry out an **assessment of the impact of the storm on the Dominican education system**. It was carried out in a sample of 41 strategically selected schools and the report was completed in early 2008. Its quantitative data and qualitative analysis revealed a much more serious situation than had been anticipated and the findings have been a valuable tool for the Ministry of Education and other institutions to take measures in order to ensuring that children are back to school within a short period of time and on how to strengthen school-community relations so that schools can fulfil their role as shelters without becoming additional victims.

UNICEF also provided **57 recreational and educational kits** to different educational centres catering to some 8,000 school children aged 2 to 14 years as well as 300 flood-affected teachers in some the most heavily hit communities in Barahona, Peravia, San José de Ocoa, San Cristóbal (Villa Altagracia), Duarte (Bajo Yuna) and Santo Domingo. The kits replaced educational material lost or destroyed due to the storm and therefore allowed learning to restart or continue in these areas. A second type of support for schools in those areas consisted of **training for 42 teachers** from 19 schools on risk prevention and psycho-social recovery of children affected by the storm. This training, carried out in cooperation with the Ministry for Education, helped to protect affected children from possible exploitation and abuse in the aftermath of the storm and to cope with the traumatic experiences they had gone through, often including the loss of possessions or even family members.

(a) Monitoring and evaluation

The Office of the Resident Coordinator through regular meetings of the UNCT/UNDMT and with the support of the UNETE maintained overall monitoring of the development and implementation of all CERF projects within the overall UN response to the emergency. A summary of progress and results – including activities supported by UN agencies but funded by non-CERF funding sources -- was prepared in January 2008 and shared with Government. Regular meetings of staff of agencies participating in each cluster were also held to plan and follow-up on activities and agencies have also carried out their own direct monitoring of activities, coordinating with other partners wherever necessary.

Depending on the type of intervention, monitoring actions were an integral part of agencies' projects of support and all agencies have accompanied implementation processes closely, be it for distribution of food and relief items or more staff-intense activities such as psycho-social support interventions, accompanied by national and local level partners. In general there was no large scale deployment of additional staff by agencies except for short term technical support and local NGOs who tend to have a significant on the ground presence have been used widely to implement and monitor activities.

Examples of some agency specific monitoring actions are given below.

- UNDP: In addition to the monitoring procedures established in the UNDP National Execution Projects Manual, the project has established the conformation of Local Monitoring Committees consisting of one person from the local organizations involved, one community leader and the mayor of each municipality. They have the responsibility to locally monitor the activities of the community brigades as well as the overall progress of the project.
- UNICEF: There have been several Inter-agency trips to the most affected areas to evaluate the damages caused by tropical storm Noel. After that, part of the UNICEF staff was assigned as focal points to plan, implement and follow-up activities of each of the sectors granted by the CERF. Health, Education and Protection projects are still in process of implementation, so monitoring and evaluation continues to the present date.
- FAO: From the very beginning, the process was led by FAO's Regional Coordinator for Disasters of Latin America and the Caribbean. During the entire process two expert consultants were following closely the implementation of the project. For the monitoring and evaluation one consultant was present in the FAO office in Santo Domingo and another agronomist consultant was constantly present in the area of intervention, working directly with beneficiaries and partners. This allowed an immediate monitoring and evaluation mechanisms of operational processes.
- WFP: Monitoring was the key for ensuring adequate targeting and distribution. WFP monitoring personnel accompanied partners in the field in the identification process of beneficiaries, the set-up of distribution schemes and the distribution of food aid.
- PAHO/WHO: Being part of the UNETE team, PAHO contributed to the monitoring of CERF projects in coordination with other UN Agencies. Furthermore, PAHO/WHO heads the Health Cluster as well as the Water, Sanitation and Hygiene Cluster that not only coordinate but also monitor projects with the aim to avoid duplication in the field. In March 2008, PAHO /WHO will carry out an assessment of the health situation in the most affected provinces.
- UNFPA: For monitoring and evaluation purposes, six visits were made to the affected areas in coordination with local public authorities and counterpart representatives.

(b) Initiatives complemented the CERF-funded projects

CERF-funded activities were obviously only a part of the overall national and donor relief and rehabilitation response which has continued into 2008 and became integrated with the response for victims of Tropical Storm Olga.

In each area of need there were various Government led relief initiatives as well as others handled directly by NGOs, private individuals and even political parties (the country is in the midst of campaigning for presidential elections due in May 2008). CERF-funded activities thus complemented these rather than the other way around.

However, most UN agencies also obtained additional funding from other sources to enable them to expand their areas of action or in some cases start action immediately. For example UNICEF obtained rapid funding from its EPF which enabled it to start providing support (food and hygiene items) even before CERF funds were received. Subsequently UNICEF received supplementary funds which would enable it to continue support for psycho-social recovery activities that had been initiated with CERF funds.

In terms of provision of food, basic rations were provided by government and local authorities but were insufficient to meet requirements in terms of quality and quantity. WFP- and UNICEF- supplied food items thus filled crucial gaps in the availability/supply of food for vulnerable groups.

In the area of health, support provided through PAHO, UNFPA and UNICEF was an integral part of the Ministry of Health's overall response to ensure that local health services could cope with the demands created by the storms, disease surveillance could be carried out and so that education and prevention campaigns could be implemented.

To ensure short and long term food security, the Agriculture Sector authorities initiated various programmes of support for affected farmers, including loan packages most of which were directed at medium size producers. FAO support focussed more on recovery of small-scale and family level production especially of basic staples so as to ensure the food security of affected families.

Linkages with agency-supported activities

Within their emergency response activities, UNDP and the Presidential Social Cabinet have planned Coordination and Consensus Roundtables, which are formed by the mayor of each municipality, directors of local NGOs, representatives of local organizations, and community as well as religious leaders. Their primary function is to recommend and monitor activities, approve beneficiaries and select people for daily oversight. A fundamental character of these activities is that they are based on existing local networks as operational structures, thus allowing a better organization of humanitarian aid by ensuring a real impact of the actions and avoiding duplication.

Before the CERF funds were granted, UNICEF used existing emergency funds to provide 900 hygiene kits (for children under two years of age), 900 hygiene kits (three to five year olds), and 1,800 nutrition kits (children under five years). UNICEF is also negotiating additional funding with its National Committees to develop further capacity building processes oriented to consolidate the "Return of Happiness" initiative in the country, including the design and implementation of a diploma course to create a cadre of local staff for future emergency situations.

On the basis of the common Food Security Program between the Ministry of Agriculture and FAO, working brigades were quickly organized to start the rehabilitation of livelihoods of small farmers in Bahoruco, an area that could not be covered by CERF funds. Through advocacy and lobbying with international donors, FAO was able to receive additional funds included in the Flash Appeal. These funds will allow FAO to start implementing a complementary project in the same region in the next months, thereby extending the area of intervention area and the coverage of beneficiaries towards other affected small farmers that FAO could not support with the original CERF funds.

A quick Emergency Food Security Assessment (EFSA) was conducted by WFP at the onset of the emergency in order to determine the number of people living in food insecurity as a result of the floods, the extent of the situation and the location of that population. This assessment served as the basis for programming the live-saving food assistance. A new full-fledged EFSA will be conducted in April 2008 in order to determine changes in the situation of food security and of the effectiveness of food assistance. In addition,

Initiatives that complement the CERF-funded projects were related to PAHO/WHO projects in disaster preparedness, mitigation and rehabilitation, the rehabilitation of water, sanitation and hygiene, and the empowerment of civil society leaders (women, teenagers, leaders of ECOCLUBS, teachers, health promoters). These initiatives focused on strengthening the existing sub-national capacities especially Primary Health Care. They were funded by PAHO/WHO itself and by international donors, such as ECHO, OFDA, CIDA, the Republic of Ireland, and SIDA.

IV. Lessons Learned

(a) As regards CERF modalities and procedures

- i. **Timeliness and speed:** The CERF proved to be a valuable mechanism allowing agencies to receive funds relatively quickly and provide an appropriate response in aftermath of the disaster. Nevertheless, the time lag between submission of proposals and actual receipt of funds by agencies at the country level was too long, undermining the very purpose of the CERF. Various factors contributed to this, ranging from lack of clarity in some of the original proposals requiring queries and further explanations, to intra-agency confusion about actual procedures (e.g. signing of LOUs). (N.B. These issues will be looked at in more depth in the CERF External Evaluation visit to the DR).

- ii. **Joint Action:** The fact that a joint overall proposal was prepared by the UNCT/RC and several agencies eventually obtained funding for key activities encouraged coordination at the planning and implementation stage. There has been a definite sense of “joint responsibility” for the overall emergency response. This was also helped by the establishment of clusters and working teams around specific areas of the response.
- iii. **CERF criteria:** The “life-saving” criterion for the immediate response window is too narrow and should be expanded. Generally lives are saved in the first few days of the disaster. Most of what the UN can do subsequently is related to improving lives that have been saved by national (and international) rescue efforts. Since the funds are provided for a three to six months period, a more appropriate criterion would be to improve or mitigate the difficult situations faced by the affected populations. The “life-saving” criterion is in any case not consistently applied. Reduction of vulnerability and improvement of seriously deteriorated living conditions, especially for isolated communities, should be acceptable criteria for CERF projects. The fact that UNDP’s proposal in this regard was finally accepted is hopefully an indication of the legitimacy of such rapid response actions in an emergency.
- iv. **Early recovery:** The division between humanitarian action and early recovery is in many cases artificial and cannot be applied strictly in such emergencies. For many victims, early recovery began within a few days, as soon as they were able to return to their homes or communities, or realised that they would have to look for alternative homes and livelihoods.
- v. **Need for more information and training:** More information on the CERF modalities and criteria during the preparation period would be useful. The UNCT was fortunate to receive the support of a Regional OCHA Officer as well as advice from agency sources. However a deeper understanding of CERF modalities and procedures is essential. Ideally, the course on CERF modalities carried out by OCHA in Panama at the end of 2007 should be organized in the Dominican Republic, so as to enable representatives and staff of all UN agencies and humanitarian actors in the country to participate.
- vi. **Clarity on criteria and procedures:** Alternatively, more systematic information should be made available to all those involved. This would help to clarify issues that created several problems for us as a team: Who should apply with chances of success to CERF funds? Can CERF funds be used to strengthen an agency’s capacity to support actions for which it feels it has a mandate but limited capacity? An added and previous knowledge of how the UN system operates in this process would prevent agencies from going to some length to prepare proposals and then going through the embarrassment of having proposals rejected; it would also avoid the RC being put on the spot if declining to forward requests which s/he may consider inappropriate. A judgment call, which in most cases is refuted by the agency in question, would not be needed if the system’s operational modalities are clearly determined and widely understood and applied.
- vii. **Role of HQs:** The same need for more knowledge applies to approval procedures at HQs level. The agonizing delay faced by UNDP in signing the approved LOUs and getting funds transferred indicates that the problem of lack of information on how the system operates does not only reside at country level.
- viii. **Size of requests:** CERF requests for very small amounts (to one agency) should not be accepted even when they are part of another agency’s request/proposal as they create excessive bureaucracy and paper work.
- ix. **Flexibility needed in unfolding situations:** In a situation where the impact of the emergency is still unfolding and adequate assessments have not been made but it is important to act quickly, there should be more flexibility in the actual use and application of funds received. Strict adherence to proposals is not possible when situations have changed and other needs have emerged. There should be possibilities for changing allocations between projects.
- x. **Importance and value of clusters:** The combination of a cluster-like approach and the CERF funding of different UN agencies strongly contributed to a coordinated response of the UN system, not only at national but especially at local level. However, better coordination is still needed so as to avoid overlapping of efforts or multiple agencies being involved in the same area. The cluster approach is a positive move but it needs to be introduced properly to all

concerned and incorporated into the UN's Emergency Preparedness and Response Plan and through effective training and orientation at country level. The onset of a full scale emergency is not a good time to introduce new modalities for coordination and response.

- xi. **Cluster approach.... but with flexibility:** In a country like the Dominican Republic the cluster approach must be flexible and be implemented in accordance with the country situation, the type of emergency, the reality of the UN presence in the country and, above all, taking into account the national authorities' pre-eminent responsibility for coordination.

(b) As regards the actual response

- i. **Synergy for food security:** Coordination between FAO and WFP for ensuring longer term food security whilst continuing to provide much needed humanitarian assistance reconfirms the necessity and value of cooperation and synergy of efforts, leading to greater results and positive impact in the recovery of livelihoods.
- ii. **Comparative advantages and importance of ongoing partnerships:** Focussing on comparative advantages and existing areas of involvement (in ongoing Country Programme work) helped ensure activities and projects were viable and feasible. Without the existing partnerships with Government and NGOs partners it would have been more difficult to identify needs and respond to them effectively. Experience from previous emergencies in the country – reflected in the Emergency Preparedness and Response Plan – was also an important factor.
- iii. **Geographic concentration:** In a situation where many parts of the country are affected, the concentration of projects in *one* geographic area leads to greater impact on beneficiaries, faster recovery of livelihoods and greater efficiency in use of funds.
- iv. **Importance of NGOs as implementing partners:** The cooperation with NGOs as partners was positive and highly useful, given their social and human relations, notably with farmers' associations and other community groups. The collaboration between NGOs and these associations shows the capacity of some of these associations to lead and manage project implementation and helps strengthen their direct participation. For activities involving identification of beneficiaries for direct distribution of aid, NGOs were critical, although in some cases their limited operational capacity created difficulties (e.g. in ensuring rapid distribution).
- v. **Advocacy needed for vulnerable groups:** In their response to the emergency national and local authorities need to be persuaded to pay more attention to the needs of vulnerable groups, such as women and children, especially very young children/babies in emergency situations. The special needs of such groups were almost invisible in the response hence the extensive UN agency support.

V. RESULTS

Sector/ Cluster	CERF projects per cluster	Amount disbursed (US\$)	Number of Beneficiaries (by sex/age)	Implementing Partners	Expected Results/Outcomes	Actual results and improvements for the target beneficiaries
Food & Nutrition	<p>07-WFP-036</p> <p>Emergency food assistance to storm affected population</p>	<p>700,000</p>	<p>44,700 persons of both sexes and of all ages, mostly in shelters</p>	<p>Dominican Red Cross, World Vision International, Mujeres en Desarrollo Dominicana (MUDE) and Asociación para el Desarrollo de San José de Ocoa (ADESJO)</p>	<p>Critical and immediate food and nutrition needs of beneficiary population affected by the floods are met and nutritional status of vulnerable population such as children under five and pregnant and lactating women do not deteriorate.</p>	<ul style="list-style-type: none"> ▪ 590 MT of rice, pulses maize meal and vegetable oil were distributed in the ten most affected provinces, targeting displaced food insecure population. Beneficiaries received a family ration (five members) worth for 27 days. ▪ Number of beneficiaries increased significantly with respect to planned (from 35,000 to 44,700) due adjustment in family rations, duration of the ration and savings, all of these supported by the food security assessment results. ▪ Prioritized beneficiaries were those living in shelters, having lost their homes and with reduced capacities to cope and food insecure. ▪ Food distribution received the support of new partners (local authorities and local organizations, mostly church) not included in the initial planning as national emergency response coordination improved and the food and nutrition security cluster was activated under WFP leadership. ▪ Community participation was enhanced as many local community and government organizations provided support to local distribution of family rations.

<p>Food & Nutrition</p>	<p>07-CEF-085-C Complementary feeding for children under five affected by flood</p>	<p>287,158</p>	<p>5,000 children (under five years) for three weeks. 2,500 of them for six weeks.</p>	<p>Ministry of Health, PAHO/WHO, Dominican Red Cross, Municipal authorities, World Vision, Caritas, Catholic Relief Service, Padre Rogelio Foundation, Civil Defense, FUNDEBMUNI, Santiago Solidario and other NGOs</p>	<ul style="list-style-type: none"> ▪ 2,500 children (0-2 and 3-5 years old) have received nutrition kits for three weeks ▪ 2,500 children have received nutrition kits for six weeks ▪ Prevention of malnutrition among children in shelters and communities has been achieved ▪ Survival and nutrition of young children among vulnerable groups affected by flooding has been ensured. 	<ul style="list-style-type: none"> ▪ 1,995 nutrition kits were provided for three weeks to 1,995 children from 0-Two years of age. ▪ 3,710 nutrition kits were provided for three weeks to 3,710 children from three to ten years old. ▪ These nutrition kits were distributed in shelters and communities in the most affected areas of the country. ▪ One of the main problems existing after the storm was that food being provided by government and other institutions didn't consider the nutritional needs of babies and young children. Besides its own contribution, UNICEF made strong advocacy to stimulate that appropriate food for children were distributed in shelters and communities, this way preventing malnutrition among them
<p>Food & Nutrition</p>	<p>07-FAO-054 Emergency support to recover the livelihoods of the small farmers affected by tropical storm Noel in the southern region of Dominican Republic</p>	<p>600,000</p>	<p>Total direct beneficiaries: 22,200</p> <ul style="list-style-type: none"> - 2,700 families of small farmers - 1,000 families of workers. <p>Indirect beneficiaries:</p> <ul style="list-style-type: none"> - Small farmers benefiting from canal reparations 	<p>The Ministry of Agriculture (SEA). Local and International NGOs: World Vision, FAMA/ADEFU, IDDI, CEAJURI, FUNDASUR, MUDE</p>	<ul style="list-style-type: none"> ▪ Restore livelihoods in order to diminish food insecurity, with activities undertaken in <ol style="list-style-type: none"> 1. Restoration of production capacity through provision of essential inputs (seeds, fertilizers, and tools), of irrigation channels, and of banana plantations, as well as the preparation of agricultural land. 2. Reactivation of the local working capacity by offering employment in 	<ul style="list-style-type: none"> ▪ 200 km of irrigation channels restored ▪ 1,500 ha of fields restored ▪ 2,182 tools given to the work brigades and farmers ▪ 3,700 families achieved their basic needs ▪ 2,700 small farmers recovered parts of their production capacity ▪ 1,000 workers retake an employment ▪ Interagency coordination FAO-WFP allows to improve the income of workers through an additional food ration ▪ A positive psychological impact of hope and self-confidence of all beneficiaries

					working brigades	<ul style="list-style-type: none"> Strengthening of local organization capacity <p><i>Project is ongoing and will be completed in 2008</i></p>
Health	<p>07-WHO-028</p> <p>Health Protection for affected population</p>	540,000	112,000 individuals: 34,000 living in temporary shelters and 78,000 that were evacuated from their communities	SESPAS, provincial health authorities and local community organizations, PROMECE, local water supply companies	<ul style="list-style-type: none"> Surveillance system providing regular and reliable data in eight most affected provinces. Provision of complementary medicine and laboratory kits in 8 most affected provinces. Provision of emergency sanitation kits to 122 official temporary shelters. Forum for coordination of health and water and sanitation activities functioning at national level 	<ul style="list-style-type: none"> 40 dengue diagnostic kits were purchased and distributed to the most affected provinces. Activities are ongoing. 350 free chlorine test kits were provided to shelters in order to ensure the quality of the water provided. Other actions to ensure water quality and quantity were the provision of water tanks and small chlorination production plants. Active surveillance of leptospirosis, dengue and other communicable diseases is being conducted with community participation in the eight targeted provinces. Training was conducted in hospitals, and health centres to enhance the diagnosis and risk assessment. At community level training was provided to identify warning signs of most prevalent diseases. The first coordination meetings of the clusters took place early November for Water and Sanitation and early December for Health and they are still ongoing. PAHO is lead agency for both clusters together with national authorities. Partners attending this coordination forum are: national NGOs, international NGOs, other UN agencies, Red Cross Movement, World Bank; donor partners among others.

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<p>Health</p>	<p>07-FPA-030</p> <p>Restore and strengthen the capacity of the local primary health system to provide reproductive health services.</p>	<p>70,000</p>	<p>An estimated 100,000 beneficiaries with special emphasis on 20,000 women and young people aged between 10 and 19.</p>	<p>MOH's Primary Health Care Department and Provincial Health Departments.</p>	<ul style="list-style-type: none"> ▪ To conduct a rapid assessment of the reproductive health services situation in affected areas. ▪ To re-establish reproductive health services in the affected areas, emphasizing the regions where UNFPA works ▪ To promote reproductive health services in shelters, health care centres, and communities, with emphasis on regions where UNFPA works. ▪ To provide RH commodities, equipment and emergency RH services within the primary health care system of affected areas. 	<ul style="list-style-type: none"> ▪ Distribution of medical equipment and supplies to health services in affected areas. ▪ Pharmaceuticals distributed among impacted population using the health care system and the Provincial Health Department. ▪ Health Care Facilities in affected areas restored and equipped to operate at full capacity. ▪ Assistance to health care authorities and government representatives in organizing and distributing supplies and medicines. Priority given to the needs of women and young girls. ▪ Elaboration, printing and distribution of educational materials.
<p>Water and sanitation</p>	<p>07-CEF-085-A</p> <p>Hygiene and hygiene-education</p>	<p>328,383</p>	<p>2,500 families including 5,000 children under five</p>	<p>Ministry of Health, PAHO/WHO, Dominican Red Cross, Municipal authorities, World Vision, Caritas, Catholic Relief Service, Padre Rogelio Foundation, Civil Defense, FUNDEBMUNI, Santiago Solidario and other NGOs</p>	<ul style="list-style-type: none"> ▪ 2,500 families including 5,000 children under 5 receive hygiene kits, family cleaning kits and 2 jerry cans per family (5,000 in total) ▪ There are improved hygiene and sanitary conditions for population in shelters and communities, especially those in temporary accommodation, prevention of outbreaks of water borne and other 	<ul style="list-style-type: none"> ▪ 2,422 hygiene kits were provided for 0-2 year old children. ▪ 4,070 hygiene kits were provided for 3-10 years old children. ▪ 3,250 family cleaning kits were purchased and distributed. ▪ 16 water tanks (500 gallons) were distributed in shelters and priority communities in the areas most affected by the flood. ▪ The hygiene kits, which were prepared according to the different ages and needs of children, were made up of items aimed at improving sanitary conditions in shelters and

					<p>diseases.</p> <ul style="list-style-type: none"> Survival and health of young children among vulnerable groups affected by flooding has been ensured. 	<p>communities in order to prevent outbreaks of water borne and other diseases.</p> <ul style="list-style-type: none"> Additionally, support was given to the Ministry of Health (Directorate of Health Promotion) for the production and reproduction of 6 radio spots about water treatment and conservation, garbage disposal and food hygiene in the communities. 50,000 brochures and 2,500 posters for Leptospirosis prevention were printed. 155 schools have benefited from hygiene promotion activities carried out by the Ministry of Education and the National Institute for Drinking Water and Sewerage (INAPA) with UNICEF and PAHO/WHO technical and financial assistance.
<p>Protection Human Rights Rule of Law</p>	<p>07-CEF-085-D</p> <p>Psychosocial recovery for children / Prevention of violence and sexual abuse against children in shelters and protection of vulnerable children</p>	<p>173,285</p>	<p>7,500 children 5 to 15 years of age, and 250 adolescent volunteers / 10,000 children under 18 years of age</p>	<p>Ministry of Health – Sub-Secretariat of Mental Health, Ministry of Education, Municipal authorities, Children and Youth Councils, World Vision International, Plan International, UCODEP, Autonomic University of Santo Domingo (UASD)</p>	<ul style="list-style-type: none"> 10,000 children have participated on game sessions for a period of three months. Psychologist, teachers and other supporting adults have been trained to assist adolescents on the implementation of the programme. 250 adolescent volunteers have been trained to work with children between 5 and 12 years old. 	<ul style="list-style-type: none"> 64 adults, including psychologists and teachers trained as trainers to support the application of the methodology 'Return of Happiness' Additionally, 281 adolescents trained as play therapists to directly work with children between 5 and 12 years old. For this, 7 workshops carried out in: Barahona (twice), Santo Domingo, San Jose de Ocoa, Villa Altagracia, Yaguata and Sabana Perdida (North Santo Domingo) 20 therapeutic backpacks plus learning materials purchased and CDs, cassettes, booklets and guides were reproduced to support workshops and play therapy sessions,

						<ul style="list-style-type: none"> ▪ Around 5,000 children from five to twelve years old from the most affected areas are currently receiving psycho-emotional care based on the “Return of Happiness” methodology, through play sessions oriented to help them to cope with different kinds of trauma. The objective is to reach 10,000 children within the next few months. ▪ To advocate and strengthen inter-institutional coordination to support psycho emotional recovery of children affected by emergencies, a meeting with key partners was held to present the “Return of Happiness” methodology and the preliminary results of its application in the country. <p>UNICEF will continue to develop capacity building strategies in order to ensure that children’s psycho-emotional recovery in emergencies is a sustainable process in the country.</p>
Protection Human Rights Rule of Law	07-FPA-013 Strengthen local capacity to meet the health, psychological, and legal needs of the most vulnerable population, with an emphasis on women and girls of reproductive age, people	50,000	25,000 people, men and women of reproductive age and young girls. An estimated 100,000 indirect beneficiaries	Ministry for Women	<ul style="list-style-type: none"> ▪ To conduct a rapid assessment to identify the most vulnerable groups, in the regions where UNFPA is operational in coordination with UN-INSTRAW gender experts. ▪ To provide information and services to women and girls on sexual and gender-based violence, and STIs/HIV/AIDS ▪ To protect vulnerable groups (women, girls, the 	<ul style="list-style-type: none"> ▪ Covering the basic needs, including distribution of vital goods, (water, food and clothing) for 76 households, including 46 female-headed households ▪ Educational and informational activities to prevent GBV and other types of violence. ▪ Psychological assistance to victims of GBV, with emphasis on women and girls. ▪ Basic health care assistance to affected population including Sexual Reproductive Health.

	living with HIV/AIDS, pregnant women and the elderly.				<p>elderly and disabled, etc.) from sexual and gender-based violence, providing them with legal, medical and psychosocial information and services.</p> <ul style="list-style-type: none"> ▪ To link community centres to a mobile team of health care providers that can give support and counselling to the victims of sexual and gender-based violence, and to assist them with referrals to medical facilities. ▪ Strengthen community organization in providing management. ▪ Support community actions that will guarantee basic physical and mental health services in shelters and affected communities, with an especial emphasis on the most vulnerable groups. 	<ul style="list-style-type: none"> ▪ Printing and distribution of educational material with emphasis on women's health and to avoid transmissible infections and other health problems.
	<p>07-CEF-085-E</p> <p>Assessment and Evaluation of Gender Based Violence <i>(Implemented by UN-INSTRAW)</i></p>	6,500	65,000 Women and children affected	UNFPA	<ul style="list-style-type: none"> ▪ Desk and literature review report ▪ Stakeholder mapping ▪ Interviews with key actors and public institutions in question ▪ Focus group interviews with vulnerable populations ▪ Quantitative survey about users of reproductive health services 	<ul style="list-style-type: none"> ▪ Preparatory visits to affected areas carried out ▪ Consultant hired ▪ Desk and literature review ▪ Research instruments and detailed work plan developed <p><i>To be completed in 2008</i></p>

<p>Education</p>	<p>07-CEF-085-B</p> <p>Temporary learning spaces, re-initiation of educational and recreational activities for school children affected by floods.</p>	<p>50,000</p>	<p>3,000 school children (4-14 years) & 5,000 children (2-14 years) and 300 flood-affected teachers</p>	<p>Ministry of Education, Municipal authorities, Fe y Algeria, World Vision, Catholic Relief Service and Plan International</p>	<ul style="list-style-type: none"> ▪ Recreational and educational kits have been distributed to those educational centres most affected by the tropical storm. ▪ Teachers and psychologists from affected schools have been trained on risk management and prevention and children psycho-social recovery. ▪ Educational activities have been re-initiated in schools and temporary learning spaces after the storm. 	<ul style="list-style-type: none"> ▪ 57 Recreational and educational kits have been delivered to different educational centres in priority communities of: Barahona, Peravia, San José de Ocoa, San Cristóbal (Villa Altagracia), Duarte (Bajo Yuna) and Santo Domingo. ▪ 42 teachers from 19 schools were trained on risk prevention and psycho-social recovery of children affected by the storm. ▪ An assessment of the impact of TS Noel on Dominican Education System was carried out in a sample of 41 strategically selected schools. Its quantitative data and qualitative analysis has been a valuable tool for the Ministry of Education and other institutions to take measures in order to ensure that children are back to school within a short period of time.
<p>Shelter and non-food items</p>	<p>07-UDP-036</p> <p>Support to spontaneous return of target population to isolated and affected areas</p>	<p>300,028</p>	<p>At least 1,000 individuals</p>	<p>Social Cabinet</p>	<ul style="list-style-type: none"> ▪ Three social organizations - one in each municipality where the project is being developed - as co-managers involved in the project. • Eight structures of community participation set up, composed by representatives of local community organizations (two in each of the four project municipalities) • 20 meetings of consensus, monitoring and evaluation 	<p>Selected three organizations that will act as co-managers of the project.</p> <ul style="list-style-type: none"> ▪ Constituted four Coordination and Consensus Tables, one per Municipality, and four Local Monitoring Committees for monitoring of activities at the local level. ▪ Submitted working proposals, with prioritized working recommendations and suggestions from Coordination and Consensus Tables, and in agreement with criteria established in the project.

					<p>carried out.</p> <ul style="list-style-type: none"> • Improved transit of people through the rehabilitation of 150 km of roads in the four target municipalities through community work. • Improved incomes of 1,000 persons living in the four municipalities. 	<p><i>Activities are under way and will be completed in 2008</i></p>
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VI. CERF IN ACTION: Success stories

Contents

1. Preventing and controlling outbreaks of disease
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5. A success story in the “Bateyes”
6. Happiness is returning to boys and girls in the community of La Barquita
7. Helping families and communities clean up and get back on their feet

Preventing and controlling outbreaks of disease

CERF funding allowed the implementation of many activities in the health field, but probably the most significant one was the effort to control the **leptospirosis epidemic** after TS Noel. Some shelters remained open for several weeks and more people went to them after TS Olga in mid December, affecting some of the same but also additional communities.

Despite efforts by national authorities and international agencies, life in shelters remained precarious for many people, especially women and children. Initially, water quantity and quality were poor and sewage systems and waste disposal were nonexistent. In the Dominican Republic leptospirosis is endemic not only among rodents but also among pigs (which are very widely bred in the country) which increased the risk of dissemination of the disease.

One of the activities PAHO accomplished with CERF funds was the establishment of a disease surveillance system in shelters. At the beginning, reporting was slow so epidemiologists from other countries with specific experience in disaster management were brought to provide technical assistance. Because of their field experience, they were able to rapidly investigate an epidemic of leptospirosis, put in place control measures as well as provide rapid treatment to patients. A clinical expert from Nicaragua was mobilized to strengthen the local team. Nicaragua had recently suffered from a leptospirosis epidemic after Hurricane Felix. Consequently, this expert was well acquainted with this disease. Courses on clinical management of the disease were organized in the main hospitals for local professionals.



Population in shelters – the Auditorium of the “Liceo Musical” in San Cristobal was used as a shelter for many families.

Restoring Reproductive Health Services after the storm

Acquisition of medicines and equipment was prioritized in order to rapidly restore the capacities of health centres located in regions and areas of UNFPA's intervention.

Approximately 4,000 people received direct support and services, with emphasis on the population of La Barquita and Los Alcarrizos, two of the poorest neighborhoods of Santo Domingo city, and the two southern provinces, of Azua and Barahona. All the activities implemented were coordinated with municipal and state authorities of the Ministry of Public Health. Women and men of reproductive age, adolescents, and people living with AIDS were prioritized. The assistance included the distribution of medicines for the treatment of vaginal infections and epidemiological threats after the floods.

During the post-storm months there was an increase in the demand for health services in the affected areas, especially reproductive health services. Vaginal infections and obstetric care cases also increased. The provincial capitals saw a higher concentration of people due to the designation of the largest facilities as shelters in those communities. Several health centers at the community level were also severely damaged by the storm, thus causing an increased demand for services in the public hospitals, at both regional and provincial levels. In the case of the Jaime Mota Regional Hospital in the Province of Barahona, 367 deliveries and 59 miscarriages were attended in December 2008 and 334 deliveries and 75 miscarriages in January 2008 with supplies, commodities and medications procured with CERF funds. An increased demand for medical care and prescriptions from the population residing in the areas flooded by the tropical storm was met with CERF funds.

Providing nutrition and hygiene kits to shelters and isolated communities

El Limón, a fighting community that rises up after tropical storm Noel

El Limón is located five kilometers off the main road to San Jose de Ocoa. Eighty per cent of the homes in this small agricultural community were affected by the storm, and 10 houses were completely destroyed. Ninety per cent of the tomatoes, oranges, avocados and other vegetable crops were lost.

El Limón, San José de Ocoa. - 'We were sleeping, and I was really scared when I woke up at midnight and I saw my house completely flooded. My dad was making holes in every corner to keep the water away'. These are the words of Eddy M. Valdéz Presinal, age 13, who remembers some moments of the damage caused by tropical storm Noel with a faint smile and a downcast look.

Eddy is the oldest of three brothers who live with their parents in El Limon, in the province of San Jose de Ocoa. He is going to 7th grade and likes using the computer and the Internet.

El Limon is located five km off the main road to Ocoa, the Padre Billini Road. However, looking at the state of the access road after the storm, it is hard to imagine that many kilometers up in the hills there is an entire village whose sustainability depends on agriculture and whose main worry today is how they are going to make a living, now that the crops have been devastated by the "cyclone".



*Eddy Valdéz in El Limón
Photographer: Luis E.
González*



*Villagers from El Limón carrying UNICEF nutrition
and hygiene kits on foot over the hill
Photographer: Luis E. González*

Cyclone and hurricane is how men and women refer to tropical storm Noel, which has caused them to become practically isolated from the rest of the country.

Although one of the distribution trucks was not able to reach the community due to poor access, this was not a barrier for the staff of UNDP's Small Subsidies Programme and UNICEF. As they arrived at the site, they were received with grateful smiles by the local villagers while 60 hygiene and nutrition kits for children under 5 years of age were distributed.

In El Limón there are 76 families and a total of 90 children and teenagers. Each one has to choose between risking their lives going through the damaged road that takes them to Ocoa, or suffering without the possibility of receiving appropriate health care, as well as other problems that are common in this remote community.

Considering the difficulties that affect this community, the villagers do realize that they must go on. Men and women are looking for a solution to their current problems. This is why they have decided to set up their own 'Emergency Operations Committee' to find a way out of the situation that is affecting them after the storm. They have also managed to set up and master an information technology unit through their own efforts.

“We have had to do several things in the last few days, and help has not been getting through. But we have a community with many needs, so we have decided to work together towards a common goal and not just wait for the authorities to help us”, says Alberto Presinal Mateo, the Mayor.

People from El Limón have tried to repair the access to a bridge nearby, women are starting to cook orange jam in order to earn an income until they recover their crops, and men are collecting the last tomatoes that have survived the storm.

El Limón does not have its arms crossed; its residents are still standing, repairing the damage.

Using CERF funds UNICEF provided the following support:

- **1,995 nutrition kits to meet the nutritional needs of 1,995 children under the age of two for three weeks.**
- **3,710 nutrition kits to meet the needs of 3,710 children from three to ten years old for three weeks.**
- **2,422 hygiene kits for children under two years of age and 4,070 hygiene kits for children aged three to ten.**
- **3,250 family hygiene and cleaning kits to meet basic hygiene needs and help families in their clean-up efforts.**

With the help of local authorities, NGOs and other partners, these nutrition and hygiene kits were distributed in shelters and communities in the most affected areas of the country, communities such as El Limón.

Providing food for displaced populations and vulnerable groups

As a result of Tropical Storm Noel, some 67,000 people were displaced from their homes and 55,000 were found to be moderately or severely food insecure.

In response, WFP designed an emergency operation aimed at assisting food insecure populations in the hardest hit provinces through general food distribution targeting displaced populations, families whose livelihoods were lost or significantly affected, and vulnerable groups such as children under 5, pregnant and lactating women and the elderly.

CERF made a critical difference for WFP to respond quickly and decisively to the emergency situation since funds were made available swiftly (less than 20 days after the onset of the emergency) and provided a significant proportion of the resources needed in the early stage of the emergency.



CERF funds allowed WFP to assist 44,700 beneficiaries out of the 55,000 targeted to receive live-saving rations to last for 27 days. The vast majority of these beneficiaries ceased to receive food supplies days after their income and food sources were devastated.

Food distribution was carried out made in collaboration with local organizations at the province level, such as local committees of the Dominican Red Cross and NGOs with local capacities and infrastructure. Partners were responsible for identifying and enrolling beneficiaries and, in cooperation with WFP staff, designing and implementing food

distribution operations.

WFP's response with the support of CERF funds was particularly critical in provinces in the South and South East such as Barahona, Bahoruco and Independencia, where alternative sources of food were very limited.

Beneficiaries, as well local partners with regular activities within affected communities, were very grateful for the timely provision and size and composition of the food basket. The success of the food aid was evident in the integration and common support among beneficiaries, community

members and institutions. When local partners could not come to the beneficiaries, they organized themselves, rallied support, and collaborated with the distribution. This assistance has set a precedent for community organization and collaboration in future emergencies.



According to beneficiaries, the prompt arrival and ration composition refilled

them with hope in a moment of despair and provided them with a motive to draw strength and push forward. As expressed by a beneficiary: "Receiving a food ration made us feel protected and secure for the time being and supported us in our efforts to get back on our feet."

The evidence gathered by WFP monitors in the field suggests that beneficiaries overwhelmingly used food aid for self consumption. However, in a small number of cases where ration served as their only aid, it helped them in achieving other means of subsistence. Unemployed subsistence farmers became vendors of fried foods to cover other urgent family needs such as health care. In addition, the provision of food made it possible for children to go back to school, instead of solely supporting their parents in their efforts for subsistence.

Furthermore, according to WFP partners in the field, the timely provision of food aid at the beginning of the emergency helped in preventing the deterioration of health conditions of children and assisted in reducing vulnerability to sickness and infections.

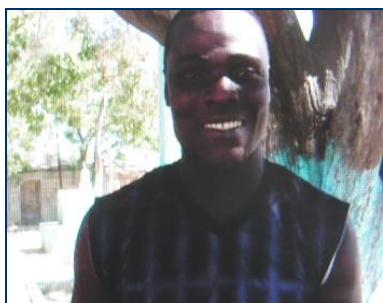
A success story in the “Bateyes”

The CERF Funds arrived in time to provide humanitarian aid to small farmers and agricultural workers living in poverty and who lost their jobs, livelihoods and crops due to TS Noel.

This is the story at *Batey six* in the southern region of Bahoruco. The *bateyes* are remote and poor communities. Many of them were originally established to house sugar plantation workers. Finding work here is not easy. Around 90 percent of the population work in agriculture, owning a small piece of land themselves or as agricultural labourers. These people lost almost everything due to Noel and their small fields were devastated, leaving them with nothing else to live.

Because of the unemployment and the destruction of the food crops that make up the basic family basket, access to elementary food supplies was even more difficult. So the risk of food insecurity increased in the community. A fast response was very urgently needed. FAO in cooperation with local NGOs organized “work brigades” and distributed inputs – such as seeds, fertilizers and tools - for small farmers in the *bateyes*.

The additional cooperation between FAO and WFP strengthened the emergency response through the implementation of a “food for work” programme, ultimately decreasing the food insecurity of the workers’ families. WFP provided a food ration to supplement the worker’s wages. One ration of food with a high nutritional value was calculated to feed a family of five members during one month.



The testimony of the agricultural workers and small farmers give us their vision of the human impact of the FAO’s CERF-funded project on their lives and their efforts to recover their livelihoods, self-confidence and hope.

Jonathan Felix, brigade worker in *Batey six* tells us: “We were desperate, without a job and without food for our children. With this job, we are happy and our hope and energy have returned. If there wasn’t this opportunity we would not be able to find another job in the area and to feed our family. Also, we are helping the farmers to recover their fields and livelihood; and this gives us a huge satisfaction.”



Carmiño Lopez, leader of Brigade one at the *Batey six*, tells us: “The workers are very happy, are working very hard and are organized. Thanks to this project, small farmers are very happy with and grateful for a job. The rehabilitation work was accelerated through the brigades’ actions. Also, the community has been strengthened and has benefited from the project. Indeed people, working all together to recover their livelihoods, allowed the reactivation of the local economy, opportunities of employment as well as increased solidarity within the

community.”



Reyita is a community leader and also had a small piece of land, working as a banana producer. She is a beneficiary of working brigades and of the distribution of seeds and

fertilizers. She tells us: “Without the brigades’ help it would take about a year in order to rehabilitate my land. I would be forced to work for someone else and pay with this income other men to do the rehabilitation work. Not even the project funds were enough to recuperate everything. Nonetheless, the impact of the project has been huge because it has given us hope and motivation to start again. I feel my needs were taken into account, because I received the type of seeds and fertilizers I use normally. And the material arrived on time. Also, with the rehabilitation of the irrigation channel, I was able to produce bananas again”.

Apart from the direct beneficiaries, farmers whose land is located around irrigation channels could also benefit from the rehabilitation work and recover faster their livelihood.



Handing over tools to a work brigade



Rehabilitation a banana plantation

Happiness is returning to boys and girls of La Barquita

A visit to La Barquita, North Santo Domingo

Some time has passed since tropical storm Noel flooded a significant part of this poor and very vulnerable *barrio*, affecting about 200 families that within a few hours, were left without a home and with a lot of their belongings damaged or taken away by floodwaters.

Today we go back to this neighborhood, following a group of adolescents who, as if they were some sort of “Pied Piper of Hamelin” call out through their megaphones so that the children follow them to an empty field. Here they make the most of the shade offered by some trees, and meet to continue applying play therapy of the “Return of Happiness” project.

In an open space next to the Isabela river that has been cleaned and prepared with the support of the local Mayor, we find five groups of children between five and twelve years of age doing different kinds of activities: some are making masks, others are painting a flag, others are making puppets, and the older ones are competing in a race.



Children and adolescents arriving at the field where they participate in the play therapies
Photographer: Luis E. González

There is a lot of noise and, if somebody just passes by without knowing what is happening there, they might think that children are just playing. But if you look closer, you can see that each group has about 20 boys and girls, two play therapists that are cheering them up, and one more that observes and takes notes of everything that is happening in order to identify and register possible symptoms of psycho-emotional trauma.

George Arias, 18, lives in the neighborhood and was affected by the storm himself, but he and other teenagers have joined in the voluntary work of "Return of Happiness". "Actually, one feels good, in comparison to the children that need help", he says. He is one of the play therapists who are animating the group of eight to eleven year old children. "It is important to be there when someone needs some orientation and guidance so that they do not waste their lives", he adds with enthusiasm.



Alvaro, Jan Carlos and Alexis in La Barquita
Photographer: Luis E. González

Around him, his companions are trying to have some order and one of the therapists shouts "Yes, yes, yes", trying to get some attention from everyone to form a line, but the restless boys and girls answer "No, no, no"...and we can see that it is not that easy to control the children's energy, in a slum area with no space to play, and of course with no playground.

There is a lot of enthusiasm. Alvaro and Jan Carlos, both aged nine, come to us running and Alexis, who is ten, catches up with them. They tell me that they go to school in the afternoon, to third grade, and they come here "to play, to play a lot". Alvaro tells me that here "You learn how to play, I learned to draw", and he happily shows me the mask that he has made for himself.

In other groups, there are younger boys and girls. There, they prepare themselves to watch "Good Night", a puppet presentation. This puppet show is about the moon having a conversation with a little monkey, and encourages them to fall asleep without being afraid. All the children, seated on a big

plastic sheet listen to the story and clap following the rhythm of the songs that are played.

Some mothers are in the surrounding area, watching the games and activities of the groups. They are waiting until their children finish the session of play therapy to go back home.

All in all, the experience is motivating and gratifying. The group of visitors from the Sub-Secretariat of Mental Health, World Vision, Plan International and UNICEF go back to their offices where they actually say that happiness has returned to the boys and girls living in La Barquita.

Return of Happiness in La Barquita

Process Coordination:

- **World Vision**
- **National Methodist Church**
- **Neighborhood Assembly (*Junta de Vecinos*)**

World Vision carried out a census of 350 homes and identified 500 children aged five to twelve. A total of 378 boys and girls participated in the programme

114 people were trained:

- **104 volunteers**
- **10 professionals**
- **Four educators**
- **Six psychologists**

UNICEF provided overall technical support, funds and materials for training as well as play materials and equipment.

Helping families and communities clean up and get back on their feet

Juana Reynoso is one of many people who were severely affected by the relentless passage of TS Noel through the municipality of Villa Altagracia, and more specifically her community of La Represa. She is an unmarried mother of six children, who has to struggle hard in order to have at least one meal per day.

Juana, like many inhabitants of her community, had her humble home built in a vulnerable and high risk area, a situation that turned her into one of the victims of the storm. Her house was completely flooded and all her household goods purchased through immense working efforts were damaged. Juana, along with her children had to take refuge in a shelter until the water and subsequently the mud were taken out of her home. But Juana was lucky. She did not lose her life, as some neighbors did. In the shelter, food was distributed three times a day but this was not always enough for her and her children. Also, there were only four foam mattresses for the whole family. This situation was difficult in the chaotic situation of the shelter. But Juana's main concern was the uncertainty of her future once she would leave the shelter, given that she had lost her livelihood.

Juana tells us that she felt that an opportunity had appeared a few days later, when she was informed that she had been selected by the community to join a working brigade in the clean-up and rehabilitation of roads and access to her community in exchange for financial help. In this little help, she saw the possibility of securing at least one daily meal for her family and of starting to recover her goods. In addition to that, her work would contribute to mitigate the effects of water, mud and rocks on her community, allowing vehicles to travel and people to avoid walking several kilometers to obtain basic products needed (food, medicine, drinking water etc.).



rehabilitation of her community.

At present, Juana Reynoso is involved in a process of rehabilitating roads and community infrastructure affected by TS Noel in the Municipality of Villa Altagracia. These actions are carried out within UNDP's "Project to support the spontaneous return of the population in isolated areas" that is being executed in several communities in three provinces of the Dominican Republic. Juana is working in the brigade of La Represa, one of the 20 brigades already established in the municipality of Villa Altagracia. The project has been very important for her because it has allowed her to get some money to survive and at the same time contributes to the

List of Acronyms

AIDS - Acquired Immunodeficiency Syndrome

CERF - Central Emergency Response Fund

COE - National Emergency Operations Centre

ECHO - European Commission's Humanitarian Aid Office

EFSA - Emergency Food Security Assessment

FAO- Food and Agriculture Organization of the United Nations

IFRC- International Federation of Red Cross and Red Crescent Societies

INAPA -National Institute for Drinking Water and Sewerage

IOM- International Organization for Migration

OCHA-Office of the Coordination of Humanitarian Affairs

PAHO-The Pan American Health Organization

UNAIDS- Joint United Nations Programme on HIV/AIDS

UNCT-United Nations Country Team

UNDAC- United Nations Disaster Assessment and Coordination

UNDMT-United Nations Disaster Management Team

UNETE- UN Emergency Technical Team

UNFPA- United Nations Population Fund

UNICEF-United Nations Children's Fund

UN-INSTRAW -United Nations Institute for Research and training for the Advancement of Women

WFP-World Food Programme