

## ANNUAL REPORT ON THE USE OF CERF GRANTS CHILE

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| <b>Country</b>                           | <b>CHILE</b>                             |
| <b>Resident/Humanitarian Coordinator</b> | <b>Enrique Ganuza</b>                    |
| <b>Reporting Period</b>                  | <b>1 January 2010 – 31 December 2010</b> |

### I. Summary of Funding and Beneficiaries

|                                       |  |   |                 |  |
|---------------------------------------|--|---|-----------------|--|
| <b>Funding</b>                        | Total amount required for the humanitarian response:   | US\$ 23,643,424   |                 |  |
|                                       | Total amount received for the humanitarian response:   | US\$ 23,643,424   |                 |  |
|                                       | Breakdown of total country funding received by source:   | CERF:   | US\$ 10,283,575 |  |
|                                       |  | CHF/HRF COUNTRY LEVEL FUNDS:  | US\$            |  |
|                                       |  | OTHER: (Bilateral/Multilateral)   | US\$ 13,359,849 |  |
|                                       | Total amount of CERF funding received from the Rapid Response window:  | US\$ 10,283,575   |                 |  |
|                                       | Total amount of CERF funding received from the Underfunded window:   | US\$  |                 |  |
|                                       | Please provide the breakdown of CERF funds by type of partner:<br>356,750 children under 5 years<br>2'364,285 female | a. Direct UN agencies/IOM implementation:   | US\$ 8,925,045  |  |
|                                       |  | b. Funds forwarded to NGOs for implementation (in Annex, please provide a list of each NGO and amount of CERF funding forwarded): | US\$ 1,358,530  |  |
|                                       |  | c. Funds for Government implementation:   | US\$            |  |
| <b>d. TOTAL:</b>                      |  | <b>US\$ 0,283575</b>  |                 |  |
| <b>Beneficiaries</b>                  | Total number of individuals affected by the crisis:  | 10,000,000 individuals<br>(2,000,000 directly and 8,000,000 indirectly)   |                 |  |
|                                       | Total number of individuals reached with CERF funding:   | 4,681,713 total individuals   |                 |  |
|                                       |  | Approximately: 356,750 children under 5   |                 |  |
|                                       |  | Approximately: 2,364,285 female   |                 |  |
| Geographical areas of implementation: | Communities of Maule and Biobío regions (central Chile)  |   |                 |  |

## II. Analysis

An earthquake with a magnitude of 8.8 struck Chile on 27 February 2010. The earthquake was the second most powerful in the history of the country and one of the five most intense ever registered worldwide.

The earthquake was 31 times stronger and released near 178 times more energy than the devastating earthquake in Haiti<sup>1</sup>. The Chilean earthquake was followed by a tsunami that hit the coastal regions of Chile where 13,000,000 (80 per cent) of the population are living. Regions affected included Valparaiso, Araucanía, O'Higgins, Maule, Bío Bío and the metropolitan region of Santiago. According to government figures, 2,000,000 people were directly affected and another 8,000,000 indirectly affected. The death toll reached 521. In addition, 200,000 homes were destroyed or seriously damaged, while overall losses were calculated to be US\$30,000,000,000.

In that context, the Government of Chile mobilised significant resources and led the overall relief effort. The Central Emergency Response Fund (CERF) supported the Government's efforts to address key humanitarian aspects of the emergency and filled some funding gaps. CERF funds were available rapidly after the earthquake/tsunami, which enabled a timely response to the emergency. The CERF allocation helped to mobilise additional resources to supplement the humanitarian response, amounting to as much as US\$13,359,849.

The United Nations Country Team (UNCT) did not have a humanitarian programme in place for Chile prior to the emergency. The CERF allocations allowed the UNCT to significantly improve its emergency response capacity. The CERF contributed to improved interagency coordination at the country level, with the process initiated within the UNCT and further developed by the United Nations Emergency Technical Team (UNETT) under the guidance of the Office for the Coordination of Humanitarian Affairs (OCHA). The projects' implementation enhanced cooperation and coordination between the UNCT and its governmental counterparts.

CERF funds permitted the implementation of the following initiatives:

### **Emergency Livelihoods**

CERF funding allocated to the Food and Agriculture Organization (FAO) was instrumental in the restoration of food production chains and improvement of the food security situation. Resources were allocated in close coordination with local authorities, fishermen's associations and humanitarian agencies. The project provided fishing equipment to help approximately 6,918 fishermen and their families in 16 affected poor and rural coves and helped nearby coves by creating employment opportunities and providing fish. The provision of equipment included: more than 1,800 nets, 104 sets of dive equipment, 25 compressors, 45 boats, 38 motors, 6 ice machines and 45 navigation kits. Equipment was distributed through fishermen's associations, which were responsible for the maintenance and operation of the equipment.

### **Emergency Telecommunications**

Lack of communication services was identified as a major obstacle to providing assistance in a timely manner. A large proportion of the affected population was isolated and emergency teams required reliable communications. The International Telecommunications Union (ITU) project aimed to address the significant gaps in communication coverage in the peripheral areas of the earthquake/tsunami-affected zones. CERF funds facilitated the ITU initiative to offer 32 Iridium satellite phones and prepaid service to UN operational agencies and their partners, as well as government entities.

### **Shelter and NFIs**

CERF funding enabled the International Organization for Migration (IOM) to rapidly provide emergency shelter and non-food items. Through the provision of CERF funds, IOM was able to provide 1,472 temporary houses, designed to become midterm solutions and to resist the hard Chilean winter season,

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<sup>1</sup> ECLAC, *The Chilean earthquake of 27 February 2010: an overview*. UN Publications, LC/R.2159, March 2010

which benefited around 7,500 people. The superior quality of the temporary houses minimised the impact of winter on the most vulnerable and affected population. In addition, 620 kits were distributed to families to repair their homes and there “tools banks” were established in affected communities to provide assistance to small-scale repairmen. CERF allocations combined with efficient logistics, active community participation and special agreements with key materials suppliers, allowed this project to increase capacity and reach beneficiaries in otherwise inaccessible areas.

The United Nations Development Programme (UNDP) used CERF funds to provide 656 efficient firewood consumption ovens and 656 efficient thermal stoves and kitchen tools sets. Energy efficiency workshops, trainings and courses to improve family diet were offered as part of the project. The beneficiaries' selection process was carried out with local authorities and 63 per cent of the UNDP beneficiary families were also part of the IOM housing project.

## **Health**

CERF funds were used by the Pan American Health Organization (PAHO)/World Health Organization (WHO) to provide health care services and prevent disease outbreaks. The project sought to reduce risks of morbidity and mortality and implement urgent public health measures to prevent disease outbreaks due to deteriorating housing and basic sanitation.

PAHO delivered medicines, supplies and medical materials, radio communication equipment, latrines, water tanks, containers for solid waste, equipment and supplies for vector control. PAHO also mobilised assessment and rapid response teams to support the recovery of health services. In addition, the distribution of biomedical and laboratory equipment helped authorities provide emergency services, diagnosis and surgery at affected health facilities.

CERF funding contributed to filling humanitarian assistance gaps in epidemiological surveillance, monitoring of the safety of food, vector control, social communication and disposal of excreta and solid waste in shelters and camps. Disrupted governmental services threatened public health and CERF resources prevented complications and a worsened situation. The project strengthened the health sector's coordination in areas including environmental health, mental health, health services and health promotion.

A complementary CERF health component was carried out by United Nations Population Fund (UNFPA) and the Joint United Nations Programme on HIV/AIDS (UNAIDS). The projects focused on restoring and strengthening the capacity of the local primary health system. In close collaboration with National Health authorities and 25 different NGOs, UN agencies delivered Post-HIV Exposure Kits, Rape Treatment kits, Clinical delivery kits, Dignity/hygiene kits, clean delivery kits for mothers, and clean delivery kits for birth attendants. The priority was to ensure the dignity of affected women, young people and other vulnerable groups. CERF funding allowed the projects to reach 366,996 vulnerable people living in the affected regions through the following activities:

- Detection and referral of cases of Sexually Transmitted Infections, HIV, pregnancies and Gender-Based Violence to appropriate health system;
- Delivery of reproductive kits to health care facilities to ensure the availability of emergency obstetric care;
- Raising awareness of reproductive health and HIV prevention and reception of dignity kits at shelters.

## **Education**

CERF funding enabled the United Nations Educational, Scientific and Cultural Organization (UNESCO) to reactivate primary and secondary schooling in communities affected by the earthquake through the provision of safe temporary learning spaces. The UNESCO project contributed to the protection of children and adolescents in the post-disaster context. The rapid allocation of funding helped to get children and youth back into school rapidly. The main initiatives involved:

- Emergency repairs to primary and secondary schools with minor damage;

- The construction of 62 provisional structures that served as temporary learning spaces, including furniture and sanitary installations, for primary and secondary schools;
- The provision of 14 water tanks for local schools, 6,250 basic school kits (school bags, stationery, etc.) and other teaching/learning materials;
- The provision and replacement of school furniture in educational establishments, such as student seats and tables, acrylic classroom boards and library shelves; and
- Support to 600 municipal education staff through the design and implementation of a comprehensive technical assistance model, and design and implementation of assistance and support to local management education teams.

The United Nations Children Fund (UNICEF) provided backpacks and school supplies to 40,000 children in the fifth poorest quintile of the Chilean population in all of the affected communities and 150 educational kits to health care facilities, rural posts and kindergartens in 57 cities, reaching 10,000 children and adolescents. UNICEF worked with the Ministry of Education (MoE) and UNESCO. UNICEF and the MoE organised a Disaster Preparation/Prevention Campaign for 1,500 schools/337,000 children located in disaster zones.

CERF funding helped UNICEF to address psycho-emotional care for children, parents and care-givers, providing children and adolescents with opportunities and activities. The 'Caravan of Happiness' toured 56 cities, reaching 30,000 children. 22 juvenile detention centres received essential recreational materials.

The project included an education and communication campaign focused on psycho-emotional care for children and families nationwide. Two videos and six radio messages were broadcasted nationwide through 26 local and national radio stations, 39 public and private channels. The videos were seen by over 25 per cent (4.3 million people) of the country's population, and radio announcements were heard in most of the affected area. Responding to a requested from national, regional and local governments, UNICEF carried out 102 psycho-emotional workshops to assist 2,652 professionals that worked directly with children including educators and health-care providers.

### **Water, Sanitation and Hygiene (WASH)**

UNICEF coordinated essential WASH-related relief activities with support from the CERF. UNICEF worked with OXFAM International and coordinated efforts with the Ministry of the Interior, the Ministry of Public Works, regional government offices and municipalities. The projects ensured provision of essential water, sanitation and hygiene solutions to affected populations, including children living in shelters and camps. UNICEF focused its efforts on the provision of water to communities in need. Working with OXFAM it ensured the distribution of 12 million litres of water with water trucks, the installation of 86 water tanks, distribution of 8,000 water kits, 10,000 water containers and 10,000 litres of chlorine. In addition, UNICEF provided 16 temporary chemical toilets, 14 permanent modules serving 352 families in affected villages, and assisted in connecting modules installed by Government counterparts to prevent the spread of diseases.

Modules reached 1,620 people living in villages constructed by the Government. UNICEF also provided 15 Portable Water Quality Laboratories in regional and rural areas, and trained 30 specialists to use them. These actions secured access to clean, drinkable water for 200,000 people. Working in close contact with the Ministry of Health, UNICEF delivered 8,000 hygiene kits and 35 community cleaning kits, in addition to creating hygiene promotion materials for 50,000 people. Public Service Messages focusing on hygiene practices were created and broadcasted nationwide through radio, TV, internet and movie theatres. UNICEF and OXFAM also trained 584 people to be Public Health Promoters and a further 22,500 community members in hand-washing, garbage collection, and home-based water management and treatment practices. Educational activities reached 4,776 families and contributed to the prevention of water born diseases, H1N1 cases, Acute Respiratory Infections and other illnesses.

### III. Results

| Sector/<br>Cluster           | CERF project<br>number and title<br>(If applicable,<br>please provide<br>CAP/Flash<br>Project Code)  | Amount<br>disbursed<br>from CERF<br>(US\$) | Total Project<br>Budget<br>(US\$) | Number of Beneficiaries<br>targeted with CERF<br>funding  | Expected Results/<br>Outcomes  | Results and improvements for<br>the target beneficiaries  | CERF's added value<br>to the project   | Monitoring and<br>Evaluation<br>Mechanisms   | Gender Equity  |
|------------------------------|--|--|-----------------------------------|---|--|---|--|--|--|
| Emergency Livelihood         | <p><b>10-FAO-019</b></p> <p>Food security through restored small scale fisheries in areas affected by the earthquake and tsunami</p>                       | 998,418                                    | 2,500,000                         | <p>Directly:<br/>6,918 fishermen and their families;</p> <p>Indirectly:<br/>approximately 18,000 other fishermen and their families that lived in 17 coves and coastal rural communities.</p> | <ul style="list-style-type: none"> <li>▪ Fishing capacity was improved by at least 40 per cent in selected coastal communities damaged by the earthquake.</li> <li>▪ Availability of fish for consumption ensured in at least 80 per cent of the cove population.</li> </ul> | <ul style="list-style-type: none"> <li>▪ With the acquisition of boats, motors, diving equipment, and ice machines the communities were able to improve their commercial situation. They were able to fish with better security.</li> <li>▪ In all 17 targeted communities, 40 per cent of the fishery capacity was restored</li> </ul>   | The affected fishermen received boats, motors and other equipment. CERF funds supplemented Government initiatives and increased their scope. | <ul style="list-style-type: none"> <li>▪ Consultant ensured monthly exchanges with organisations and the Ministry of Economy (Undersecretary for Fisheries)</li> </ul> | <ul style="list-style-type: none"> <li>▪ Special allocations were made to at least four women's organisations to improve their working conditions</li> </ul> |
| Emergency Telecommunications | <p><b>10-ITU-001</b></p> <p>Provision of Critical Emergency Telecommunications Equipment to UN agencies and partners during the emergency relief phase</p> | 126,300                                    | 250,000                           | Sub-secretary of telecommunications of the Chilean government, and UN operational agencies and their partners   | <ul style="list-style-type: none"> <li>▪ Communication ensured between operational agencies in areas not covered by terrestrial telecommunications services or with interrupted telecommunications.</li> </ul>   | <ul style="list-style-type: none"> <li>▪ 32 Iridium satellite and 32 US\$1,000 prepaid telephone cards were available to SUBTEL and ONEMI regional offices, which helped to ensure communication at the earliest stages of the emergency. Equipment also reinforced the emergency communications capability of the national emergency agency (ONEMI) in case of future emergencies</li> </ul> | Rapid allocation of funds  | <ul style="list-style-type: none"> <li>▪ Memorandum of understanding signed by the beneficiaries' authorities, which included Evaluation Mechanisms</li> </ul>         | <ul style="list-style-type: none"> <li>▪ Enhanced emergency telecommunications capability benefited man and women equally</li> </ul>                         |

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| <p style="text-align: center;"><b>Shelter and NFI</b></p> | <p style="text-align: center;"><b>10-IOM-012</b></p> <p>Assist the Government of Chile to provide Temporary Houses or Shelter Kits with Tools, NFIs (kitchen and hygiene kits) to allow beneficiary Families in Selected Areas to Return or Make Basic Repair to Homes and Obtain Basic Items to Ensure Survival in the Next Three Months</p> | <p style="text-align: center;">3,001,328</p> | <p style="text-align: center;">3,001,328</p> | <p>IOM's CERF project was directed to provide humanitarian help to families.</p> <p>Emergency houses:<br/>- 7,500 People Homeless as consequence of earthquake and tsunami.</p> <p>Non-food items:<br/>- 2,500 People affected by the earthquake and tsunami in Chile's VI and VII regions.<br/>- Of all beneficiaries of kitchen kits, 292 were women<br/>- Of all beneficiaries of Hygiene kits, 275 were women.</p> | <ul style="list-style-type: none"> <li>▪ 1,407 families received a Temporary House.</li> <li>▪ 620 families received Shelter Kits.</li> <li>▪ 620 families received Hygiene and Kitchen kits.</li> <li>▪ Beneficiary families have returned to a normal life while waiting for longer-term solutions provided by the Government of Chile.</li> </ul> | <ul style="list-style-type: none"> <li>▪ With the building of temporary houses for 1,472 families in areas affected by the earthquake, around 7,500 people received a place to live.</li> <li>▪ The supply of 1,340 kitchen and Hygiene Kits improved the living conditions of the beneficiary families, especially their health.</li> <li>▪ With the contribution of 620 repair kits, beneficiary families were able repair their homes.</li> <li>▪ The three tool banks were helpful to the communities where individuals needed to repair their homes.</li> <li>▪ The four psychosocial community centers provided by the Hogar de Cristo Foundation helped deliver not only the goods supplied but also much needed psychological support.</li> </ul> | <p>Rapid allocation of CERF funds allowed rapid provision of shelter and Non Food Items while the Government worked to provide long terms solutions.</p> <p>Provided higher quality shelter and involved the affected communities in the project.</p> <p>Helped families in countryside areas where other institutions did not have the capacity to operate.</p> | <ul style="list-style-type: none"> <li>▪ IOM supervised activities with Monitoring Officers (Architects and social assistants) who remained in the field and worked hand in hand with implementing NGOs, providing quality control, reporting, and holding periodic meetings with authorities to ensure that activities were properly coordinated and conducted.</li> <li>▪ The continued support and visits of IOM's Regional Emergency Coordinator to Santiago, Chile, ensured rapid and proper implementation.</li> <li>▪ A Finance Assistant was hired to strengthen the Administration Unit in Santiago, to ensure that procedures were respected and provide timely financial and programmatic reporting.</li> </ul> | <ul style="list-style-type: none"> <li>▪ The benefits were equal for women, girls, boys and men, but Non Food Items were prioritized for the elderly or families who had a member with mental or physical disability.</li> <li>▪ Many women worked to rebuild houses - a task usually performed mostly by men.</li> </ul> |
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| Shelter and NFI | <p>10-UDP-007</p> <p>Emergency Provision of Stoves for the Worst Affected Families in Artisanal Coves</p> | 528,580 | 620,000 | <p>656 families, 2,300 individuals,</p> <ul style="list-style-type: none"> <li>o 650 children under five</li> <li>o 1,300 women</li> </ul> | <p>656 vulnerable families received cooking stoves, ovens and kitchen kits, allowing the proper preparation of meals and ensuring proper food consumption (as less time will be spent collecting fire wood)</p> | <ul style="list-style-type: none"> <li>▪ Beneficiary families were selected in five communities in the Biobio and Maule region (near the epicentre of the earthquake).</li> <li>▪ The project was coordinated with IOM to complement aid delivery, ensuring that 63 per cent of UNDP beneficiary families also belonged to the IOM housing project.</li> <li>▪ The project delivered: <ul style="list-style-type: none"> <li>o 656 efficient firewood consumption ovens</li> <li>o 656 efficient stoves</li> <li>o 656 kitchen utensil sets</li> </ul> </li> </ul> | Rapid availability of funds | <ul style="list-style-type: none"> <li>▪ UNDP executed a monitoring process at three levels: UNDP team at the Country Office, professionals from El Canelo NGO and from the field consultant in the area</li> </ul> | <ul style="list-style-type: none"> <li>▪ UNDP worked with families, men and women; participation in the first training was mainly women and in the second training, a higher percentage of men were involved.</li> <li>▪ UNDP organized training in energy efficiency, use and repair of equipment, and courses to improve family diet</li> </ul> |
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| Health | 10-WHO-022<br>Responding to Post-Disaster Health Needs after the Earthquake in Chile | 2,000,151 | 6,500,000 | 4,681,713 people <ul style="list-style-type: none"> <li>o 356,750 children under 5 years</li> <li>o 2,364,285 females</li> </ul> | <ul style="list-style-type: none"> <li>■ Outcome 1 : Hospital equipment distributed and used in hospitals in Maule, Biobio and other affected areas</li> </ul> | <p>35 hospitals and three primary health care facilities received medical equipment: scanners, electrocardiographs, fetal heart detectors, oximetres, incubators, and medical instruments.</p> <ul style="list-style-type: none"> <li>■ PAHO provided laboratory equipment to eight hospitals and the National Health Institute to ensure laboratory functions and diagnosis capacity to identify potential epidemic outbreaks.</li> <li>■ Electrical generators were purchased and installed at the primary health care center in Talcahuano and in five hospitals (Hualañe, Molina, Linares, Chillan and Cañete).</li> <li>■ Small-scale interventions: recovery of the radiotherapy service in Grant Benavente, rehabilitation of the vacuum system in pediatric unit in Molina, rehabilitation of electrical system in Cañete and Molina. Installation of six electric generators in Hualañe, Molina, Linares, Chillan, Cañete y Talcahuano.</li> <li>■ Radio-communication equipment (15 VHF, 12 HF and 2 relays) were installed in health care facilities in Valparaiso, Maule, Bio Bio and Araucania.</li> </ul> | <p>CERF funding was essential to the rapid assessment and response to the most important health needs in five regions.</p> <p>Rapid allocation of CERF funds allowed the project to begin immediately after needs were identified by MoH and SEREMIS.</p> <p>CERF funding enabled PAHO to promptly support emergency activities to safe lives, limit damages and prevent outbreak of diseases.</p> <p>CERF funds helped fill gaps where mobilisation of resources by MoH was limited during emergency and early rehabilitation phases.</p> | <ul style="list-style-type: none"> <li>■ PAHO conducted frequently monitoring and evaluation activities with MoH to identify difficulties that could delay the implementation of the project.</li> <li>■ PAHO conducted regularly monitoring visits to field and meeting with SEREMIS and local authorities.</li> <li>■ Situation reports and information about the implementation of the project was shared on the website of PAHO in Chile. Assessment reports were shared with MoH and other national organizations.</li> </ul> | <ul style="list-style-type: none"> <li>■ Ensured the involvement of both genders and the support of the most vulnerable groups, such as women, pregnant women and newborns.</li> <li>■ The recovery of health care facilities emphasized the permanent provision of child and maternal services in the regions affected by the disaster.</li> </ul> |
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|  |  |  |  |  | <ul style="list-style-type: none"> <li>▪ Outcome 2: Ministry of Health had sufficient essential medicines and health supplies to restore services, and supplies and equipment to vaccinate persons against Hepatitis A, Influenza and other diseases.</li> </ul> | <ul style="list-style-type: none"> <li>▪ MoH received medicines for acute respiratory infections to ensure one-month-stockpile in health services of Arauco, Bio Bio, Concepción, Maule, Ñuble and Talcahuano.</li> <li>▪ MoH with PAHO supported the implementation of a new vaccination strategy using a special vehicle to reach the farthest affected population in Maule and Bio Bio.</li> </ul> | <p>Medical equipment and electrical generators that were given to hospitals and other health care facilities by PAHO helped to provide essential services for the diagnosis and treatment of people affected by the disaster.</p> | <ul style="list-style-type: none"> <li>▪ Evaluation meeting conducted with MoH and local authorities, weekly situation and monitoring reports, and field visit reports were provided.</li> </ul> |  |
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|  |  |  |  |  | <ul style="list-style-type: none"> <li>▪ Outcome 3: Environmental health was strengthened and safe water was provided at temporary shelters and camps</li> </ul> | <ul style="list-style-type: none"> <li>▪ PAHO in coordination with MoH and SEREMIS developed an integral action plan to reduce environmental risks associated with solid waste, water, vectors and disposal of excreta. To achieve this, 26 water tanks (5400-liter) for temporary shelters were distributed, 52 latrines were installed together with 24 containers for waste disposal, and 1,100 containers for hospital waste.</li> <li>▪ Reinforced SEREMIS's capacity with equipment (pneumatic spraying pumps) and supplies (pesticides and other chemical substances) for vector eradication</li> <li>▪ Quality control in feeding centers was ensured by PAHO through the distribution of instruments, supplies and equipment</li> <li>▪ MoH with PAHO support produced and disseminated health information focused on food quality, environmental health and hygiene.</li> </ul> | <p>The project helped to establish water storage and access to excreta and solid waste disposal mechanisms where the National Emergency Committee had problems setting up sanitary strategies at camps and shelters; as well as promoted practical hygiene measures in the affected area.</p> |  |  |
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|        |   |         |         |                          | <ul style="list-style-type: none"> <li>Outcome 4: Efficient collaboration with the Ministry of Health, NGOs and other key actors present in Chile for the implementation of humanitarian action in health and risk reduction</li> </ul>             | <ul style="list-style-type: none"> <li>PAHO in coordination with MoH mobilized local and international staff to provide technical support to health staff. International experts on mental health, waste hospital management and food safety worked with local authorities to design interventions.</li> <li>Regular coordination meetings with national and regional authorities were organized to prioritize needs, assess operational interventions, survey public health indicators and mobilize resources.</li> <li>Health staff and partners were trained on hospital safety, hospital waste management, food safety and mental health</li> <li>Post-disaster epidemiological surveillance for the timely identification of potential epidemic outbreaks implemented</li> </ul> | <p>Meetings in Maule, Concepción, Rancagua and Santiago were organized by MoH and SEREMIS with PAHO technical support to reduce the impact of the disaster on public health</p> |  |  |
| Health | <p>10-FPA-017</p> <p>Restore and strengthen the capacity of the local primary health system to provide emergency reproductive health services, including STI/HIV prevention, and ensure respect for the dignity of affected women, young people and other vulnerable groups</p> | 187,785 | 262,785 | 330,000 poor adult women | <ul style="list-style-type: none"> <li>To ensure availability of emergency obstetric care and life-saving RH (Reproductive Health) commodities</li> <li>To reach 25.000 poor women of reproductive age and 18,133 from vulnerable groups</li> </ul> | <ul style="list-style-type: none"> <li>The targeted population included poor women of reproductive age and vulnerable groups.</li> <li>The objective was reached completely, and the final number exceeded due to communication activities</li> </ul>   | <p>The rapid fund allocation allowed the intervention to take place, and provided the opportunity to work with civil society partners</p>                                       | <ul style="list-style-type: none"> <li>Several agency missions and financial control.</li> </ul> | <ul style="list-style-type: none"> <li>The focus was on poor women, of reproductive age, and vulnerable populations</li> </ul> |

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|  |  |  |  |  | <ul style="list-style-type: none"> <li>■ Outcome 1: Sexual and reproductive health services, including STI/HIV prevention needs, identified</li> </ul>  | <ul style="list-style-type: none"> <li>■ A database was integrated based on health service and civil society organization records with the following indicators: <ul style="list-style-type: none"> <li>○ Number of pregnant women, number of people living with HIV, number of deliveries and caesareans, number of sex workers. In addition a map of key stakeholders was constructed with the available data.</li> </ul> </li> </ul>  |  |  |  |
|  |  |  |  |  | <ul style="list-style-type: none"> <li>■ Outcome 2: Pregnant women in shelters and affected areas receive adequate prenatal and emergency obstetric care, including safe and clean delivery.</li> </ul>                   | <ul style="list-style-type: none"> <li>■ 90 kits for clean delivery and attention to victims of sexual abuse were distributed in close coordination with the MoH. Kits included 10 RH KIT N° 1A; 30 RH KIT N° 2A (Clean delivery); 30 RH KIT N° 2B; 10 RH KIT N° 6 (Delivery sub kit) 5 RH KIT N° 3A (Post-rape emergency contraception) and 5 RH KIT N° 3B. Kits were distributed in Maule, Arauco, Concepcion, Talcahuano and Los Angeles</li> </ul>   |  |  |  |
|  |  |  |  |  | <ul style="list-style-type: none"> <li>■ Outcome 3: 18,133 people, including those living with HIV and groups most vulnerable to HIV, granted access to life-saving health commodities for STI/HIV prevention.</li> </ul> | <ul style="list-style-type: none"> <li>■ In close coordination with the national AIDS programme and the regional ministerial secretariat of health, 218,000 male condoms were distributed through: <ul style="list-style-type: none"> <li>○ Massive educational actions and discussion in the shelter camps; Medical rounds organized with health services and the programme "health in field"; directly to 11,668 persons belonging to the most vulnerable populations, of which, 1,347 were activists of organizations belonging to these populations, who replicated activities in their own communities</li> </ul> </li> </ul> |  |  |  |

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|  |  |  |  |  | <ul style="list-style-type: none"> <li>▪ Outcome 4: Affected persons, health service providers, community leaders and those managing shelters received information and adopted preventive measures in RH and STI/HIV transmission</li> </ul> | <ul style="list-style-type: none"> <li>▪ 360 workshops were provided on sexual and reproductive health, on prevention of HIV/AIDS, on violence and pregnancies and on transmission of STIs, including HIV, in emergency contexts through community activities.</li> <li>▪ The workshops reached a total of 3,592 people</li> <li>▪ 226 men and 3,366 women reached in conjunction with 25 local NGOs</li> <li>▪ Printing of 33,500 different educational materials on i) prevention on GBV, with emphasis on prevention, complaint and treatment of sexual violence; ii) HIV/AIDS prevention in emergency situations</li> <li>▪ Radio campaign on prevention of GBV during an emergency and HIV/AIDS prevention reaching more than 100,000 persons</li> </ul> |  |  |  |
|  |  |  |  |  | <ul style="list-style-type: none"> <li>▪ Outcome 5: 5,000 poor affected women and their families received Dignity/Hygiene Kits.</li> </ul>   | <ul style="list-style-type: none"> <li>▪ In collaboration with ONEMI 7,000 Hygiene Kits were distributed to the affected population (mainly living in shelters). Each kit consisted of 1 toothbrush, 1 toothpaste, 4 rolls of toilet paper, 1 alcohol gel, 2 packages of feminine sanitary towels; 12 male condoms and an informative package on violence prevention and prevention of unscheduled pregnancies.</li> </ul>  |  |  |  |

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| Education | 10-ESC-001<br>Reactivation of Primary and Secondary Schooling in Communities Affected by the Earthquake | 1,279,720 | 1,450,720 | 3,374 students (primary education 47.8 per cent female; secondary education: 49.8 per cent female)<br><br>600 education personnel (estimated 30 per cent female) | <ul style="list-style-type: none"> <li>■ Outcome 1: At least 50 provisional classrooms (for max. 45 students) operational in the locations identified by the Ministry of Education and local authorities, providing learning spaces for approx. 2,250 students</li> <li>■ Outcome 2: At least 5,000 students received basic school kits (school bag, stationary, etc.)</li> <li>■ Outcome 3: At least 200 teachers and education personnel trained and providing psycho-social support through education.</li> </ul> | <ul style="list-style-type: none"> <li>■ Optimal use of available resources for funding and quality:</li> <li>■ Construction of 62 provisional structures which served as temporary learning spaces (including furniture and sanitary installation) for primary and secondary schools in the affected areas.</li> <li>■ Emergency repairs of TVET school with structural damages (almost 800 different technical careers benefited)</li> <li>■ 14 water tanks for local schools were provided</li> <li>■ 6,250 school kits were distributed in collaboration with UNICEF providers.</li> <li>■ 600 education personnel were trained (local education authorities, school principals, teachers) in the development of culturally sensitive tools and resources for the provision of psychosocial support through education (educational and training materials for teachers and students was developed and Radio-campaigns on psychosocial support were instigated); a Strategic Plan for the management of the Early Recovery and Reconstruction of the education systems at the local level was developed</li> </ul> | <p>Rapid allocation of CERF funds allowed the project to begin immediately after needs had been identified.</p> <p>Education was integrated into the response due to the understanding of the relevance of Education in the humanitarian response and emergency situations.</p> <p>The visibility of UNESCO and UN presence in Chile was strengthened.</p> <p>Through hiring local manpower and purchasing local materials for the provision of temporary learning spaces, UNESCO Santiago's Humanitarian Response played a significant role in the reactivation of the local economy in the affected areas.</p> | <ul style="list-style-type: none"> <li>■ Three qualified consultants were hired to implement and monitor all the local activities under the supervision of UNESCO Santiago and in close collaboration with the national government and educational local authorities.</li> <li>■ Four sectoral and interagency field missions to the affected areas were conducted for monitoring and evaluation of results.</li> <li>■ Several meetings with local education authorities were held.</li> </ul> | <ul style="list-style-type: none"> <li>■ Around 50 per cent of the students were females.</li> <li>■ Most of the education personnel in the country were women (teachers in primary education is 78 per cent, in secondary education, 55 per cent). However, at least 70 per cent of those involved with administrative and local education authority training were men.</li> <li>■ Separate toilets for boys and girls were provided at temporary learning spaces</li> </ul> |
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| Protection/Education | 10-CEF-022-A<br><br>Integrated protection and security of the rights of children and adolescents affected by the earthquake and tsunami | 929,188 | 2,258,463 | Direct: 834,777 families with an average of 2,504,330 children received materials and/or services.<br><br>Indirect: 4.3 million people; an average of 860,000 families/ 2,580,000 children watched or heard UNICEF's public service announcements nationwide. | <ul style="list-style-type: none"> <li>■ 500,000 families with information on health and emotional support for their children.</li> <li>■ 500,000 children of preschool age who had undergone a traumatic experience and were in the process of emotional recovery.</li> <li>■ 2,500 children in the juvenile justice and protection system and under protective custody that had undergone traumatic experiences and were in the process of emotional recovery.</li> <li>■ 50,000 children ready by the start of school year.</li> </ul> | <ul style="list-style-type: none"> <li>■ 500,000 families received information on health and emotional support for their children.</li> <li>■ 50,000 notebooks were provided to children aged 4-8 years old so they could express their emotions about the disaster.</li> <li>■ 30,000 guides were provided to families on how to rebuild children's lives.</li> <li>■ 10,000 guides for professional care-givers on how to rebuild children's lives were distributed.</li> <li>■ Two TV Spots and six Radio Messages about psycho emotional stress and support were created.</li> <li>■ Five Sesame Street TV Spots were created and focused on the psycho emotional health of children.</li> <li>■ Activities organised in 56 different cities to address psycho emotional health that reached 30,000 children and adolescents.</li> <li>■ 14 recreational kits provided to juvenile detention centres and reached 573 children and adolescents. Training given to officers that serve 2,500 children and adolescents in detention and protection centres.</li> <li>■ 40,000 backpacks and 40,000 sets of basic schools materials provided for children aged 4-15.</li> <li>■ 150 educational kits provided for 10,000 children aged 0-12.</li> </ul> | <p>Allocation of CERF funds allowed the project to begin soon after needs assessments were completed.</p> <p>CERF funds enabled an integrated response that ensured that: families had the necessary support to be able to take care of their children; child-care professionals received psycho emotional care, and the tools to address the needs of children; and Government counterparts received assistance.</p> <p>Allowed UNICEF to carry out a media campaign focused on the entire nation, not just on those directly affected by the disaster.</p> <p>Made it possible to contract professionals to travel to the affected regions and provide entertainment and psycho emotional support directly to children in far-away and worst-affected regions</p> | <p>Throughout the project, UNICEF:</p> <ul style="list-style-type: none"> <li>■ Had two regional coordinators monitoring the implementation of its assistance.</li> <li>■ The National Coordinator of CERF/ Protection travelled four times to affected areas to ensure implementation was being carried out efficiently and to address obstacles.</li> <li>■ The Information Focal Point travelled twice to affected areas to monitor the implementation of UNICEF's workshops and materials.</li> <li>■ All item deliveries included paperwork detailing its recipients and use.</li> <li>■ All 103 workshops were evaluated by attendees and co-trainers. Workshops were monitored and evaluated by supervisors from UNICEF's Country Office.</li> <li>■ Weekly situation reports were sent to the UNCT, UNICEF Regional Office and UNICEF's New York Headquarters.</li> </ul> | <ul style="list-style-type: none"> <li>■ 86 per cent of the 2,652 professionals trained were women.</li> <li>■ Distributed materials included text and illustrations reflecting gender parity.</li> <li>■ Prevention of GBV was a core theme of all workshops, as well as part of the national communication campaign.</li> </ul> |
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| WASH | <p>10-CEF-022-B</p> <p>Humanitarian Response to address Water, Sanitation and Hygiene (WASH) Needs in Affected Communities</p> | 1,232,105 | 1,242,041 | <p>Direct: 40,080 people (approximately 8,000 families and 80 people).</p> <p>Indirect: an additional 100,000 people (20,000 families) benefited indirectly from improved water supply and quality control. At least 50 per cent of beneficiaries were women, and vulnerable women-headed households were given priority</p> | <ul style="list-style-type: none"> <li>▪ Outcome 1: approximately 10,000 disaster affected families in the targeted areas have access to potable water and safe water storage, and 8,000 families have access to improved sanitation facilities in shelters.</li> </ul> | <p>In coordination with local authorities and communities:</p> <ul style="list-style-type: none"> <li>▪ Provided water by renting water trucks for 14 weeks in adequate quantity and quality according to internationally accepted standards, and distributed 12 million litres of water to 60,000 people.</li> <li>▪ Installed 86 water tanks (3,400 litres and ramp taps) in communities and camps for 11,050 people.</li> <li>▪ Distributed 8,000 safe water storage buckets (16 litres each) and 10,000 jerry cans (20 litres each) to families.</li> <li>▪ Provided temporary sanitation services through 12 portable toilets in camps.</li> <li>▪ Provided sanitation services to 352 families, setting up 14 sanitary modules in camps and 16 family solutions.</li> </ul> | <p>The CERF/WASH fund ensured the delivery of water and sanitation in camps that were not receiving support from the National Emergency Committee.</p> | <p>OXFAM carried out a Real-Time-Evaluation:</p> <ul style="list-style-type: none"> <li>▪ OXFAM provided a mid-term report of programmatic activities and expenditures.</li> <li>▪ Weekly situation reports were completed by OXFAM and UNICEF.</li> <li>▪ UNICEF sent reports to the TACRO and NYHQ.</li> <li>▪ UNICEF's WASH Specialist met with Oxfam's Technical Team and carried out on-going monitoring and evaluation of technical solutions during June and July.</li> <li>▪ UNICEF Administration monitored and evaluated financial processes used by OXFAM.</li> <li>▪ On-going weekly reporting to the Office of the Resident Coordinator, and presence at UNETT coordination meetings.</li> </ul> | <ul style="list-style-type: none"> <li>▪ Separate sanitary facilities built for men and women.</li> <li>▪ Sanitary pads included in all Hygiene Kits distributed.</li> <li>▪ Gender and women's issues were included in all hygiene promotion workshops.- Gender and women's visibility was included in all materials developed.</li> <li>▪ A total of 80 per cent of PHP (Public Hygiene Promoters) were women.</li> </ul> |
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|  |  |  |  |  | <ul style="list-style-type: none"> <li>Outcome 2: 8,000 disaster affected families aware of, and use, safe hygiene practices.</li> </ul>   | <ul style="list-style-type: none"> <li>Mobilisation and training of 584 Public Hygiene Promoters (PHP), volunteers, community leaders and other organizations about educational processes to reach affected populations. Also trained 4,776 families.</li> <li>Awareness raising campaign (TV and radio spots, printed material) reached more than 50,000 people with hygiene education at personal, family and community levels</li> </ul>   |  |  |  |
|  |  |  |  |  | <ul style="list-style-type: none"> <li>Outcome 3: A total of 30 personnel from local health authority (SEREMI of Health) trained in water quality testing and able to contribute to monitoring and improving the water quality in targeted areas during the emergency and post emergency phase.</li> </ul> | <ul style="list-style-type: none"> <li>Distributed 8,000 family hygiene kits to facilitate hygiene practices in households.</li> <li>Distributed 10,000 litres of chlorine in camps in Maule and Biobio Region.</li> <li>Distributed 35 community cleaning kits.</li> <li>Distributed 15 Delagua water kits to affected areas.</li> <li>Trained 30 local personnel on use of Delagua water kits.</li> <li>Carried out sampling of the water quality in camps and emergency water distribution systems.</li> <li>Monitored water quality in water supply systems in coastal towns within the intervention area.</li> </ul> |  |  |  |

## Annex 1: NGOS and CERF Funds Forwarded to Each Implementing NGO Partner

| NGO Partner         | Sector          | Project Number | Amount Forwarded (US\$) | Date Funds Forwarded         |
|---------------------|-----------------|----------------|-------------------------|------------------------------|
| Hogar de Cristo     | Shelter and NFI | 10-IOM-012     | 36,516                  | During implementation period |
| AVINA               | Shelter and NFI | 10-IOM-012     | 200,778                 | During implementation period |
| ONG Canelo de Nos   | Shelter and NFI | 10-UDP-007     | 80,000                  | 22 October 2010              |
| OXFAM International | WASH            | 10-CEF-022-B   | 728,868                 | 9 April 2010                 |
| OXFAM International | WASH            | 10-CEF-022-B   | 312,372                 | 4 June 2010                  |

## Annex 2: Acronyms and Abbreviations

|          |  |
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| CSW      | Commercial Sex Worker  |
| ECLAC    | (UN) Economic Commission for Latin America and the Caribbean     |
| FAO      | Food and Agriculture Organization                                |
| GBV      | Gender Based Violence  |
| H1N1     | Hemagglutinin 1 and Neuraminidase 1                              |
| HIV      | Human Immunodeficiency Virus                                     |
| IOM      | International Organization for Migration                         |
| ITU      | International Telecommunications Union                           |
| MIC      | Middle Income Country  |
| MIDEPLAN | Ministry of Planning   |
| MoH      | Ministry of Health   |
| NGO      | Non-Governmental Organization                                    |
| ONEMI    | National Emergency Office  |
| OREMI    | Regional Emergency Office  |
| OXFAM    | Oxfam Committee for Famine Relief                                |
| PAHO     | Pan American Health Organization                                 |
| PLWH     | People Living With HIV   |
| RH       | Reproductive Health  |
| SEREM    | Regional Ministerial Secretaries                                 |
| SEREMIS  | Regional Secretary's Offices of the Ministry of Health           |
| STI      | Sexual Transmitted infections                                    |
| TACRO    | The Americas and the Caribbean Regional Office                   |
| UNCT     | United Nations Country Team                                      |
| UNDP     | United Nations Development Programme                             |
| UNESCO   | United Nations Educational, Scientific and Cultural Organization |
| UNETT    | United Nations Emergency Technical Team                          |
| UNFPA    | United Nations Population Fund                                   |
| UNICEF   | United Nations Children's Fund                                   |
| WASH     | Water, Sanitation and Hygiene                                    |
| WHO      | World Health Organization  |