



United Nations

**CENTRAL
EMERGENCY
RESPONSE FUND**



A SOUND HUMANITARIAN INVESTMENT

RESIDENT/HUMANITARIAN COORDINATOR REPORT 2012 ON THE USE OF CERF FUNDS CUBA

RESIDENT/HUMANITARIAN COORDINATOR

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PART 1: COUNTRY OVERVIEW

I. SUMMARY OF FUNDING 2012

TABLE 1: COUNTRY SUMMARY OF ALLOCATIONS (US\$)		
Breakdown of total response funding received by source	CERF	5,522,753
	COMMON HUMANITARIAN FUND/ EMERGENCY RESPONSE FUND <i>(if applicable)</i>	0
	OTHER (Bilateral/Multilateral)	17,050,442
	TOTAL	22,573,195
Breakdown of CERF funds received by window and emergency	Underfunded Emergencies	
	<i>First Round</i>	0
	<i>Second Round</i>	0
	Rapid Response	
	Hurricane	5,522,753

II. REPORTING PROCESS AND CONSULTATION SUMMARY

<p>a. Please confirm that the RC/HC Report was discussed in the Humanitarian and/or UN Country Team and by cluster/sector coordinators as outlined in the guidelines. YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></p> <p>b. Was the final version of the RC/HC Report shared for review with in-country stakeholders as recommended in the guidelines (i.e. the CERF recipient agencies, cluster/sector coordinators and members and relevant government counterparts)? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> The report was shared with the CERF recipient agencies and the cluster/sector coordinators.</p>

PART 2: CERF EMERGENCY RESPONSE – HURRICANE (RAPID RESPONSE 2012)

I. HUMANITARIAN CONTEXT

TABLE 1: EMERGENCY ALLOCATION OVERVIEW (US\$)		
<i>Total amount required for the humanitarian response: 30,392,419</i>		
Breakdown of total response funding received by source	Source	Amount
	CERF	5,522,753
	OTHER (Bilateral/Multilateral)	17,050,442
	TOTAL	22,573,195

TABLE 2: CERF EMERGENCY FUNDING BY ALLOCATION AND PROJECT (US\$)			
Allocation 1 – Date of Official Submission: 5 November 2012			
Agency	Project Code	Cluster/Sector	Amount
UNICEF	12-CEF-127	Water and Sanitation	671,125
UNFPA	12-FPA-044	Health	102,249
WHO	12-WHO-079	Health	549,912
UNICEF	12-CEF-128	Education	254,823
UNDP	12-UDP-013	Shelter and Non-Food Items	1,762,001
FAO	12-FAO-043	Agriculture	399,811
WFP	12-WFP-077	Food	1,782,832
Sub-total CERF Allocation			5,522,753
TOTAL			5,522,753

TABLE 3: BREAKDOWN OF CERF FUNDS BY TYPE OF IMPLEMENTATION MODALITY (US\$)	
Type of Implementation Modality	Amount
Direct UN agencies/IOM implementation	5,522,753
Funds forwarded to NGOs for implementation	0
Funds forwarded to government partners ¹	0
TOTAL	5,522,753

On 25 October 2012, Hurricane Sandy lashed the eastern region of Cuba as a category 2 hurricane (approaching category 3) with winds reaching over 200 km/h. The provinces of Santiago de Cuba, Holguin, Guantánamo and Granma sustained the brunt of the damage. Despite the preparedness measures taken by the authorities and the evacuation of 330,000 people, there were 11 fatalities and 3 million people (20 per cent of the country's population) were affected. Over 226,000 homes were damaged and at least 17,000 destroyed across the region, with the province (and particularly the city) of Santiago de Cuba suffering the worst damage.

In the immediate aftermath, the impact on the city of Santiago de Cuba, with its population of close to half a million people, was of great concern. Severe damage to service infrastructure resulted in limited access to electricity (re-established by December 2012) and running water. Sanitation services were overwhelmed by the volume of solid waste that needed safe disposal. Warehouses, storage facilities and industrial and public institutions were damaged, which, given the city's importance as an economic hub for the region and the country as a whole, has had national-level consequences for reconstruction and the longer term.

The population's nutritional status was affected by the loss of food reserves and people's inability to prepare, store and transport food. Furthermore, Hurricane Sandy hit just weeks before the harvest: crop damage sustained during the event and from subsequent flooding reduced the country's overall production of staple crops by 30 per cent. Food availability in the affected areas is not expected to return to normal levels until after the 2013 harvests. Assistance is required to replace inputs and repair damaged agricultural infrastructure such as warehouses, irrigation channels, green housing and roofing for livestock units.

Although hospitals and health centres continued functioning, their capacity was reduced by damage to buildings and a loss of equipment. In Santiago de Cuba province, all hospitals and 74 per cent of health clinics sustained damage. This, coupled with a lack of access to water (both in quantity and quality) raised public health concerns in urban and rural areas and water treatment and hygiene/sanitation basic supplies were needed to prevent and reduce the spread of water-borne disease. This remains a priority at present, particularly in rural areas, as although water provision has been almost fully re-established, water quality is a concern.

Education is a high priority for the Government of Cuba. Over 2,100 schools suffered damage and substantial educational and recreational materials were lost. Emergency repairs and the use of alternative solutions (co-location of schools, extended hours, and use of public buildings or private homes) resulted in all students resuming education by mid-November 2012. This also contributed to mitigating the potential effects of the disaster on individuals and on the collective mental health of the communities, and contributed to the protection of children and adolescents. However, significant challenges remain to rebuild/repair and re-equip the 2,100 schools across the region.

Although the Cuban Civil Defence capacity is widely seen as one of the strongest and most advanced in the region, it faced challenges in the phase immediately after the impact of the hurricane due to the scale of the damage.

II. FOCUS AREAS AND PRIORITIZATION

¹ In the CERF Application Funding Agency Project Proposal for WFP (Project Budget, section 13 D), it states that US\$10,631 would be spent by the Government on counterpart travel. This was an error, as the funds were actually spent by WFP on transport for WFP and government staff.

Hurricane Sandy affected some 3 million people in the provinces of Santiago de Cuba, Holguin, Granma and Guantánamo and created urgent needs in the sectors of food security, shelter, education, water and sanitation and health. The impact on Cuba's second and third most populated cities (Santiago de Cuba and Holguin) was particularly devastating, and the urban context presented challenges for the response. In agreement with the Government of Cuba, the UN System made a request to CERF for assistance in five sectors, to be implemented in the city of Santiago de Cuba (some actions extend into Santiago de Cuba province, Holguin and Guantánamo provinces). Given the high quality of human resources and qualified personnel available in Cuba, the most immediate needs were materials for shelter, WASH, hygiene and kitchen kits and financial support to allow the existing human capacities to respond to the situation. The relevant assessment findings for each sector and the rationale for the geographical coverage of the actions were as follows:

a. Shelter: Recovery of partially damaged houses to allow people to return and improve current living conditions

Hurricane Sandy was the first hurricane to hit such densely populated areas in Cuba for 50 years, damaging over 226,000 houses (45 per cent lost their roofs) and totally destroying more than 17,000 houses. Santiago de Cuba province was the most badly affected, and within the province, Santiago de Cuba municipality had the greatest concentration of damage (61,000 houses damaged and 10,000 collapses). Many people were taken in by families or friends, staying in homes that were already accommodating a large number of people. The Government identified the need to resolve the housing situation as a priority, aiming to recover partially affected houses with rapid response mechanisms. The city of Santiago de Cuba is a priority, partly because of the level of destruction but also as it is an economic hub for the region and country. The project aims to provide emergency shelter, focusing on the most vulnerable groups, and to restore basic hygiene and sanitation conditions for food consumption and processing.

b. Agriculture and Food Security: Provision of immediate food to the affected population and provision of seeds for future harvesting in order to avoid food insecurity

The Government's regular system of food provision to the population was adversely affected by the loss of over 43,000 MT of stored food when warehouses were damaged, in addition to crop losses (fruit trees, sugarcane, vegetables, plantain) and damage to agricultural assets and infrastructure (loss of inputs and damage to 300 agricultural facilities, chicken farms, pig production units, greenhouses). There was an urgent need for food (500,000 people at risk) and for actions to restart food production amongst farming households. Priorities for food distributions were established using information from the local authorities and data from WFP's local monitors who are based in the area and who were present during the hurricane. The city of Santiago de Cuba was identified as high priority (although during implementation, beans were distributed to four more municipalities of the province at the government's request) as were storage facilities for the provinces of Santiago de Cuba, Holguin and Guantánamo. With regard to the agricultural sector, a Ministry of Agriculture assessment showed that 9 municipalities of Santiago de Cuba province were affected, with the greatest damage being incurred in Santiago de Cuba, Guamá, Contramaestre, Palma Soriano and San Luis. The project is focused on supporting producers located in the urban and suburban areas of Santiago de Cuba, aiming to restore production in the locations with the highest population density.

c. Water and sanitation: Provide adequate water, sanitation and hygiene in communities

Assessments conducted immediately after the hurricane indicated severe and widespread damage to energy, communication, transport, and water and sanitation infrastructure. In Santiago de Cuba municipality, preliminary reports showed that approximately 70 per cent of the population had limited access to running water, and the water from the city's reservoirs was unsafe and extremely turbid. This was aggravated by the lack of electricity and the destruction of basic water and sanitation infrastructure. In addition, 567 schools suffered damage and did not have access to safe water. The lack of clean water and sanitation, together with flooding, low hygiene and the overcrowding of the households due to the relocation of other family members meant that there was a risk of diarrheal water-borne and vector-borne disease already in existence to a lesser extent before the emergency. Actions supported by CERF targeted 3,000 families and 567 schools in Santiago de Cuba municipality, and were identified in coordination with other sector clusters in order to provide an integrated response. Activities comprised the distribution of water treatment and safe storage basic supplies among communities and schools, and hygiene promotion activities to include information on health related risks due to poor hygiene and sanitation.

d. Health: Provide medicines and strengthen local capacities for monitoring response to possible outbreaks

Although most hospitals and health centres continued functioning immediately after the hurricane, all hospitals and 74 per cent of clinics suffered damage, loss of diagnostic equipment and supplies, and were operating at reduced capacity. Of the 746 health institutions identified as affected across the eastern region in preliminary reports, 30 were hospitals and 10 were maternal homes. 369 of the damaged health institutions are in Santiago de Cuba. Initial reports from the Ministry of Public Health (MINSAP) indicated the urgent need for vaccines, antibiotics, water treatment/management and storage equipment, treated mosquito nets and hygiene kits. Epidemiological surveillance measures were needed, and supplies for the detection, control and treatment of possible outbreaks of diarrhoea-related diseases. Also, a general increase in acute respiratory illnesses was expected with the arrival of cyclical cold fronts. With regard to reproductive and maternal health services, damage and losses of equipment and medical instruments reduced obstetric and neonatal care capacities in Santiago de Cuba and Holguin provinces.

- e. Education and psychosocial rehabilitation in Emergency: Provide educational and recreational materials to provide a secure environment for children

Preliminary reports listed 2,106 schools (mainly primary and secondary) as having suffered structural damage of which 920 were in Santiago de Cuba Province. School materials have also been damaged or lost, and recreational activities reduced dramatically. Although the local authorities identified alternative settings for classes to resume (family homes, public buildings) there is a need to support these initiatives to allow children to benefit from continuity of education, to contribute to their psychosocial rehabilitation and to provide a safe environment while the adult population focuses on response and recovery. The schools targeted in conjunction with the Ministry of Education and local authorities are in Santiago de Cuba, Holguin and Guantánamo provinces.

III. CERF PROCESS

The UN System, led by the UN Resident Coordinator, worked in close coordination with the Ministry of Foreign Trade and Investment (MINCEX) to address the emergency officially. This coordination dialogue and response followed previously agreed mechanisms. OCHA deployed staff immediately after Hurricane Sandy to support Cuba's UN System response efforts.

The UN Disaster Management Team (UNDMT) decided to request support for Cuba through the CERF mechanism. Following the Government's agreement, staff from MINCEX participated actively in formulating the application document. Considering the scale of damage and the extensiveness of the areas affected, it was agreed that initial relief efforts would concentrate on the city of Santiago de Cuba, given the complexity of such an important urban area.

UN Technical Team (UNETE), led by pre-established agency sector leaders, worked with technical staff from government counterparts in designing the CERF application. Inter-cluster discussions were also held in order to maximise the impact of the planned intervention.

During the process, the UN System drew on the lessons learned from implementing a programme funded by CERF in 2008. As a result, a UN focal point was designated to deal with all issues relating to customs and logistics in coordination with the government. The UN System also facilitated, and continues to facilitate, coordination and information-sharing mechanisms with international humanitarian organisations in the country (the Red Cross, NGO, cooperation agencies and governments).

IV. CERF RESULTS AND ADDED VALUE

Of the seven projects funded by CERF, three concluded successfully within the original six month time frame, namely the reproductive health project implemented by UNFPA and the education, and water and sanitation projects implemented by UNICEF. Three agencies (WFP, UNDP and FAO) were granted no-cost extensions until 15 July 2013. These projects were all directly affected by delays in the arrival of imported inputs by maritime transportation owing to the restrictions placed on vessels entering Cuban ports. This had an impact on the delivery of WFP's beans, UNDP's final shipment of roofing sheets, and FAO's imported agricultural inputs. Furthermore, Santiago de Cuba port, which had suffered damage during the hurricane, was saturated by the volume of humanitarian assistance arriving by sea. The customs processes related to the reception, clearance and onward transportation of goods experienced delays that were beyond the agencies' control. FAO experienced an additional problem relating to the delay in receiving the importation permit for vegetable seeds from the local authorities. WHO made a request to reprogramme part of their project budget and extend the project until 15 July 2013 as some inputs originally requested were obtained by MINSAP from other sources. However, as MINSAP's remaining priorities were to replace water-damaged equipment and repair hurricane damage to buildings, these did not fall within CERF's funding remit. Part of the funds was therefore returned to CERF.

TABLE 4: AFFECTED INDIVIDUALS AND REACHED DIRECT BENEFICIARIES BY SECTOR*Total number of individuals affected by the crisis: 3,000,000*

The estimated total number of individuals directly supported through CERF funding by cluster/sector	Cluster/Sector	Female	Male	Total
	Water and Sanitation	81,424	77,915	159,339
	Health	572,003	243,053	815,056
	Education	125,993	133,549	259,542
	Shelter and Non-Food Items	36,559	27,581	64,140
	Agriculture	252,013	240,878	492,891
	Food	420,200	438,217	858,417

Beneficiary selection for the food distributions was a joint exercise by WFP and the Cuban Government and was initially planned to cover the whole population of Santiago de Cuba municipality. As the Government makes a food distribution to the whole population on a monthly basis using a ration book system and WFP's food was distributed through this mechanism, the number of beneficiaries was straightforward to establish. At the end of November 2012, after project approval, the Government requested that the population of four additional municipalities be covered by the bean distribution, thereby increasing the number of beneficiaries from 497,000 to 786,458. During the second phase of distribution, the number of beneficiaries decreased to 101,741 (of whom 71,959 had not been assisted in the first phase, bringing the total number assisted to 858,417) as the Government requested that the distributions target the most vulnerable groups that are part of the national safety net programmes for a four month period, namely children in day care centres and primary schools, women in maternity homes and the elderly in centres.

With regard to the agricultural interventions, the planned (and actual) number of beneficiaries in the proposal (492,891) corresponds to the total population of Santiago de Cuba municipality.

In the water and sanitation sector, beneficiary identification was done jointly by UNICEF and the Government of Cuba, particularly MINSAP. The main criteria were the degree of damage and the epidemiological profile of the area. The actions provided better access to safe water, in sufficient quantity for both consumption and the maintenance of basic hygiene to prevent water borne diseases. This protected the health of the beneficiary population, especially those most at risk, namely pregnant women, children and children under 5. The inclusion of schools in the WASH actions and the availability of more detailed information about population needs and damage have increased the number of beneficiaries from 18,000 to 159,339.

In the education sector the beneficiaries were children and adolescents in schools that were damaged in the provinces of Santiago de Cuba, Holguin and Guantánamo. The criteria for distributing the kits was established in coordination with the provincial departments of education giving priority to those children living in the worst affected areas, with emphasis on rural and mountain areas. Once the Ministry of Education obtained accurate information concerning the degree of damage to schools, the targeting of the intervention could be improved and this increased the number of beneficiaries from 151,756 to 259,542.

The number of direct beneficiaries of the shelter activities was estimated in conjunction with the Provincial Government and municipal authorities (the Housing and Physical Planning departments in particular) as they had conducted the initial assessments that provided the baseline data for the project. Numerous challenges were faced in obtaining accurate information, given the extent of the damage suffered by the population both in terms of the loss of personal belongings and housing. A total of 64,140 beneficiaries were reached by the end of the implementation period.

In the health sector, calculation of the number of women beneficiaries was done by UNFPA using Government statistics that provide the population of the target areas. Some men and children under 5 benefited from the hygiene kits; the basis used to calculate the number was using an average of two men and one child under 5 per household. WHO's actions were initially planned to benefit the whole population of Santiago de Cuba province. However, some activities planned were not implemented (purchase of drugs to combat respiratory diseases and purchase of chlorine tablets), and the distribution of the resources mobilised through the programme was concentrated on the city of Santiago de Cuba. The number of final beneficiaries was calculated using Government statistics for the population of the city.

The figure in Table 5 shows a much higher number of beneficiaries than planned. WFP distributed beans to four additional municipalities at the Government's request. The ration of beans distributed was smaller than planned, but a higher number of people benefitted.

TABLE 5: PLANNED AND REACHED DIRECT BENEFICIARIES THROUGH CERF FUNDING		
	Planned	Estimated Reached
Female	253,470	572,003
Male	243,530	438,217
Total individuals (Female and male)	497,000	1,010,220
Of total, children <u>under 5</u>	30,566	62,310

Water and sanitation

Twenty-five million water purification tablets were purchased, imported and distributed in coordination with the local authorities and MINSAP. They ensured safe water for human consumption for approximately 1,045,662 people who live in municipalities with a higher population density and a greater incidence of epidemic focus related to low water quality. UNICEF also procured 3,000 mosquito nets to prevent vector diseases; 3,567 jerry cans and 3,460 water tanks (1,000 litres capacity) to improve safe water storage. The local authorities have distributed all the inputs with the exception of 428 tanks to be distributed by the end of December, directly benefiting at least 3,000 families of the most affected communities. In coordination with the Ministry of Education 1,285 water tanks were distributed to schools benefiting approximately 152,955 children; 78,160 of them female, and 11,616 children under the age of 5 located in nine municipalities of the province of Santiago de Cuba. 100,000 copies of the leaflet "Hygiene is in your hands", which includes the steps for proper hand washing, and a leaflet called "Measures to prevent acute diarrheal diseases in the family" were designed and printed in collaboration with MINSAP. Both brochures were distributed through local health promoters and used for community training activities to promote basic hygiene and health education organised by MINSAP.

Health

One million doxycycline tablets were purchased and a range of laboratory diagnosis equipment. This allowed the authorities to monitor the quality of food and water provided to the affected population, and to provide safe laboratory diagnostics at a time when prevention of water-borne diseases was crucial. Items procured comprise 1,000 chlorine water level indicators and 300,000 DPD tablets; equipment, reagents and glassware for diagnostic laboratories; 450 thermos flasks for transporting water and food samples; and 15 microscopes, 15 spectrophotometers and 25 autoclaves for sterilisation. Resources were also mobilized from Global Links (transport costs covered by CERF) which sent 3 containers full of items such as disposable equipment (syringes, bandages), hospital equipment and furniture, medical clothing (disposable gloves, face masks, towels) and hygiene consumables. Planned activities that were not finally implemented using CERF funds were the purchase of medicines to treat respiratory infections (sufficient stocks in-country), water purification tablets (those procured by UNICEF were sufficient), vaccinations and health education and promotion actions.

In order to restore and maintain maternal and neonatal health services across Santiago de Cuba, Holguin and Guantánamo provinces, 15 "Type 11A referral level kits" and 15 "Type 11B referral level kits" were provided by UNFPA's procurement unit in Copenhagen. The kits were delivered within one month, and were distributed to two hospitals in Holguin (Mayan and Banes), 6 hospitals in Santiago de Cuba (Palma Soriano, Hospital Materno Sur, Hospital Materno Norte, Hospital J.B.Zayas, San Luis and Contramaestre) and one in Guantánamo (Baracoa). Although several types of kit had been proposed initially, the Government asked that all funds be dedicated to Referral Level kits to enable the hospitals to manage pregnancy complications; perform caesarean sections; carry out obstetrical surgical interventions; resuscitate mothers and newborns; and start IV antibiotic treatment for puerperal sepsis and pelvic inflammatory disease. As a result, no oral and injectable contraceptives were provided, and fewer family hygiene (dignity) kits than planned (2,626 rather than 3,000). A small balance of funds remained from the initial procurement so following consultations with MINSAP, 5 more kits were

purchased from the approved list of kits: Kit 6A and Kit 6B (Clinical Delivery Assistance), Kit 8 (Management of complicated miscarriages), Kit 11A and Kit 11B. Workshops were held in Santiago de Cuba and in Holguin for 55 national health professionals working in the maternal and reproductive health services. Training was given on the Minimum Initial Service Package (MISP) for Sexual and Reproductive Health in emergency situations and on the use of RH kits. Additional information was provided from the Manual for Inter-Agency Reproductive Health Kits in a humanitarian response phase. Monitoring visits were made to beneficiary hospitals in Santiago de Cuba and Holguin.

Education

198 UNICEF recreation kits arrived within the first two months from prepositioned stocks in Panama and were used by 10,048 students in primary and special education living in the most affected areas of the nine municipalities of Santiago de Cuba province. These kits allowed educational and recreational psychosocial rehabilitation activities to be organised in the students' own schools and communities. A further 911 recreational kits, 944 school kits and 110 early childhood development kits were imported and distributed by the Ministry of Education to contribute to the continuity of the school year, the psychosocial rehabilitation of children and provide an adequate learning environment in 1,588 schools and 110 nurseries (kindergartens for children under 5). All kits were sent by UNICEF's supply division from prepositioned stocks located in warehouses in Copenhagen and Panama. Due to the large number of kits, there was not sufficient availability in Panama which led to the importation process taking longer than expected. Local distribution is being organised by the Ministry of Education and UNICEF has been provided with the list of beneficiary schools and nurseries. The distribution is in progress and is being coordinated by the provincial government and the education authorities of Santiago de Cuba, Holguin and Guantánamo. 125,993 girls and 133,549 boys are benefitting directly.

Shelter

3,495 tarpaulins were distributed by the local authorities to 3,495 families (20,970 people) who had lost their roofs in part or completely. Municipal staff and social workers identified the most vulnerable families through a detailed household needs assessment. 53,817 metal roofing sheets arrived at Santiago port, which represents 6,393 fewer than originally planned owing to price increases. UNDP planned to distribute roofing sheets to households whose homes lost their roofs but retained walls and basic structures to cover at least 35 m² as a temporary emergency measure. For some buildings, enough roofing sheets were planned to cover 70 m² so that the structure could be used as a "shelter home" for two households. As fewer sheets arrived than expected, UNDP and the local authorities decided to increase the proportion of "shelter homes". The local authorities provided logs and purlins, and some families were able to recoup some construction materials from their damaged homes. A total of 3,866 houses were roofed, of which 1,375 were "shelter homes", benefitting a total of 5,241 families. Tools to create 903 roofing tool kits were purchased. Upon arrival, 790 complete kits were constituted and distributed to 13 government construction companies engaged in the effort to repair damaged houses in the target areas. The remaining 1,713 tools were distributed to the same companies according to need rather than in the form of complete kits and were used in the wider recovery effort both in the city of Santiago and in the 21 municipalities where the domestic roofing was done. Additional buildings repaired using the tools included health and educational establishments. In order to complement the house roofing activities, 8,800 kitchen/cooking kits were procured of which 8,159 were complete on delivery. These were distributed to 8,159 families to improve basic living conditions, and optimise the hygiene and sanitary conditions in which food was prepared and consumed. 641 kits only contained bowls upon delivery. These were distributed to institutions caring for the elderly.

Agriculture

In order to support the food production capacities in the city of Santiago de Cuba and farmer households in the province, FAO procured essential agricultural inputs from the region and from Europe in line with the technical specifications defined by the Ministry of Agriculture. The inputs comprised 460 wheelbarrows, 1,440 crates, 500 kg of seed (250 kg of carrot and 250 kg of beet), and 1,600 tool kits, 340 rolls of plastic meshing to provide shade, 240 water tanks and 160 silos. All items had been received by May with the exception of the seeds. A small balance of funds remaining for inputs was used to procure 25,000 metres of hosepipes that arrived in June. The carrot and beet seeds were imported from Europe by air once the necessary importation and phytosanitary permits had been issued by the authorities in May. Quality tests were conducted in government laboratories and the seeds arrived in Santiago de Cuba in September. In order to ensure that the 160 beneficiary production units received seeds in time for the sowing season which started in November 2013, the Ministry of Agriculture provided seeds from its reserves, and used the seeds received from FAO to replace its stocks. The other inputs were distributed between May and October with exception of some (hosepipes, some water tanks, rolls of plastic meshing and wheelbarrows) distributed by the end of December.

Food

1,386.3 MT of food was delivered in two phases. In December 2012 WFP delivered 793 MT of food (227 MT of beans, 453 MT of rice and 113 MT of vegetable oil) for immediate distribution to the affected population through the Government's regular ration distribution system of household food baskets. The food complemented Government rations and benefitted 786,458 people (49 per cent women) across five municipalities of Santiago de Cuba Province. To meet the Government's request of distributing beans to an additional four municipalities, WFP reduced the ration of beans initially planned across all areas. The rice and vegetable oil were distributed as foreseen to the original target group in Santiago de Cuba municipality alone. The food distributed in December 2012 represented around

10 per cent of the average daily caloric requirements of the population over a 30-day period. The second phase started in June 2013 when 593.3 MT of food (382.2 MT of beans and 211.1 TM of vegetable oil) were delivered by WFP to the most vulnerable groups in the provinces of Santiago de Cuba, Holguin and Guantánamo. The 101,741 beneficiaries were identified through the national safety net programmes in children's day-care centres, maternity homes and centres for elderly people. Support was also provided to primary schools that operate a half and full board system. WFP's staff based in Santiago de Cuba, Holguín and Guantánamo monitored the arrival and distribution of the food at three different levels: delivery to the provincial warehouse, onward delivery to the municipal level storage facilities (all visited), and then arrival of the food at the final distribution points (bodegas) (a sample visited in each municipality). During the second phase monitoring visits were made to primary schools, day-care centres, maternity homes and centres for elderly people in these provinces. To improve food storage facilities, 15 temporary storage facilities (WiikHalls) were delivered. Five were installed in Santiago de Cuba port (the main entry point for commodities for all five eastern provinces), three at provincial warehouses and the remaining seven in locations belonging to institutions involved in food processing.

CERF funds were essential in allowing a number of agencies to deliver assistance more quickly than would have been possible through other funding mechanisms. As there are limitations surrounding other funding sources available both to the Government and the UN system in Cuba, the CERF funds were even more highly significant. The securing of the grant meant that WFP was able to negotiate food loans, firstly from WFP Haiti, followed by an internal loan from the Government of Cuba. This allowed food distributions to start on 1 December 2012 through the household food baskets. The food that was shipped to Cuba from WFP Haiti only arrived in Santiago port on 2 December. In the health sector, WHO took delivery of antibiotics before the end of November and was able to initiate the shipping of essential medical equipment from Global Links as CERF covered the transport costs. CERF funds also allowed UNFPA and UNICEF to mobilize prepositioned stocks of health, water and sanitation, and education inputs from Panama and Copenhagen, which allowed a faster and more efficient response in coordination with local authorities, despite the challenges in obtaining accurate information. The funds contributed to improving access to safe water and hygiene in communities and schools, continuing the school year in a safe environment and supporting the psychosocial rehabilitation of children within the first 3 months after the emergency.

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

YES PARTIALLY NO

UNICEF succeeded in mobilizing further resources in the few months after Hurricane Sandy for complementary actions such as school rehabilitation and the purchase of water pumps, but the CERF funds were the first to be received and were crucial in mobilizing prepositioned supplies in Panama and Copenhagen. This was also true for UNFPA, which was able to mobilize prepositioned health kits from stocks in Panama, allowing 9 hospitals' maternal and neonatal services to be maintained and/or restored as quickly as possible. WHO took delivery of a first purchase of antibiotics by the end of November and CERF's coverage of transport costs for containers of health supplies from Global Links accelerated the arrival of essential equipment and supplies for hospitals and health centres. With regard to shelter, tarpaulins and cooking/kitchen kits arrived swiftly from UNDP's suppliers in the region once funds had been secured. CERF funds helped re-establish food production capacity through the provision of basic inputs, although the speed of delivery was affected by the particular constraints of importing items for agricultural programmes.

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

YES PARTIALLY NO

In the shelter sector, CERF funds helped respond to time-critical needs by providing tarpaulins for immediate shelter and cooking kits to safeguard the population's health. In the WASH sector supplies contributed to the prevention and reduction of water-borne and vector-borne diseases that were already a challenge prior to the hurricane. In the health sector, the swift delivery of antibiotics, health kits and laboratory materials to hospitals and health centres ensured that life-saving reproductive health and other services could be maintained/resumed as fast as possible. The efforts in education contributed to the continuation of the school year, and children's psychosocial rehabilitation especially through the recreation kits.

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

YES PARTIALLY NO

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

In addition to the CERF funds, and within the framework of the Plan of Action for Cuba, several UN agencies were successful in mobilizing funds that complemented the activities funded by CERF. For example, UNICEF received \$ 750,000 from Sweden for school rehabilitation, \$193,050 from Luxemburg for WASH, and \$1,000,000 from the Russian Federation to complement efforts in both the education and WASH sectors. ECHO approved \$1,392,653 for a shelter/WASH programme to be implemented jointly by UNDP, UNICEF and UN Habitat. With CERF funds WHO supported the shipment of 3 containers from Global Links with a total value of \$ 470,245 in medical equipment and other goods.

d) Did CERF improve coordination amongst the humanitarian community?

YES PARTIALLY NO

The application for CERF funds for Hurricane Sandy did improve coordination with the Government between UN agencies, and with other international NGOs present in Cuba. It built on the country’s first experience of such an exercise in 2008 following Hurricanes Gustaf, Ike and Paloma. Joint logistics reduced costs for procurement and distribution.

V. LESSONS LEARNED

TABLE 6: OBSERVATIONS FOR THE <u>CERF SECRETARIAT</u>		
Lessons Learned	Suggestion For Follow-Up/Improvement	Responsible Entity
CERF provided crucial assistance following the hurricane owing to the limited number of alternative donors to Cuba.	Continue deepening understanding of complex national contexts in order to carry on providing essential humanitarian assistance.	CERF
The rapid approval of CERF funds and the level of funds approved resulted in time-critical assistance being provided to the population affected by the hurricane.	UNS to continue to work with the National Authorities on disaster response mechanisms, to include CERF application processes and requirements.	UNS/ National Authorities
The CERF request was prepared on the basis of very preliminary figures of hurricane damage, and official data was only available later.		

TABLE 7: OBSERVATIONS FOR <u>COUNTRY TEAMS</u>		
Lessons Learned	Suggestion For Follow-Up/Improvement	Responsible Entity
The dialogue that took place between the UNS and the Government on disaster preparedness and response	<ul style="list-style-type: none"> In order to build on progress, the agencies must continue to work together and with the Government in disaster preparedness and keep up to date with changes to UN response mechanisms. 	UNDMT/UNETE/ National Authorities

<p>prior to October 2012 permitted a rapid and effective response when the Hurricane Sandy struck. A substantial improvement was noted compared to the hurricane response in 2008.</p>	<ul style="list-style-type: none"> • A more efficient mechanism is needed to ensure that the UN agencies are provided with relevant information following a disaster in order to allow a faster response. • A workshop on lessons learned from the response to Hurricane Sandy was organised in June 2013, and a training workshop was held in September 2013. Participants included the UN agencies, OCHA, national and local authorities and, during some sessions, other humanitarian actors. Response mechanisms were discussed and action points agreed to take the work forward. 	
<p>The presence of permanent UNICEF and WFP field officers near Santiago de Cuba has allowed regular contact with authorities, and the monitoring of distributions.</p>	<ul style="list-style-type: none"> • Maintain the presence of UNICEF and WFP field officers, and consider replicating the strategy amongst other UN agencies to support the monitoring activities and ensure good contact with local authorities. 	<p>UNS in Cuba/ Local and National Authorities</p>
<p>Need to find a way of making procurement more efficient whilst taking into account the challenges presented by the Cuban context and the limited availability of inputs in local markets.</p>	<ul style="list-style-type: none"> • Create a prepositioning facility in Cuba. During the September 2013 training workshop, preliminary discussions were held with the Government on prepositioning issues. • Improve the database of suppliers to improve procurement assessing their capacity to deliver quality products within short timeframes, and their ability to supply items to Cuba. • Update UNS LTA locally. 	<p>UNS</p>
<p>The agencies noted that most items procured were purchased internationally. The non-availability of basic supplies in the local market and the long importation processes slow project implementation.</p>	<ul style="list-style-type: none"> • Investigate the possibility of accelerating the purchasing procedures for emergency actions. • UN country team explore the possibility of creating a prepositioning facility in the Caribbean with Regional Directors. 	<p>UNS</p>
<p>An interdisciplinary team was created at community level with members from local government, social workers and community organisations to ensure a personalised and organised distribution of humanitarian aid.</p>	<ul style="list-style-type: none"> • Maintain this distribution mechanism as it ensures an efficient, effective and traceable delivery of aid. 	<p>National/ Local Authorities</p>
<p>The availability of pre-positioned supplies in UNICEF warehouses in Panama and Copenhagen accelerated procurement, avoiding the bidding process that can delay purchase and arrival of supplies. 90% of the total supplies are already in Santiago. Distribution of some is complete, others in progress.</p>	<ul style="list-style-type: none"> • Storage and distribution of supplies should be improved so as to reach the beneficiaries more rapidly. 	<p>UNICEF/ National authorities</p>
<p>The timeframe for project identification and input</p>	<ul style="list-style-type: none"> • Increase the procurement timeframe as the necessary inputs could not be purchased locally in Cuba, making 	<p>FAO</p>

procurement is too short for projects in the agriculture sector.	international purchasing necessary.	
The purchase of seeds requires securing importation documents that delay project implementation.	<ul style="list-style-type: none"> It is difficult to find ways of accelerating this process owing to the legislation surrounding the importation of plant matter. 	All agricultural sector actors
Need to speed up the process of input selection and beneficiary identification for agricultural projects.	<ul style="list-style-type: none"> Rapid identification of the technical specification of the inputs requested. Rapid beneficiary identification. 	MINAG
Obtaining the necessary permits to import the drugs contained within health kits requires time.	<ul style="list-style-type: none"> Obtain the list of drugs contained in health kits before the kits arrive in-country so as to start the clearance process as early as possible. This will speed up the release and distribution of the kits once they arrive. 	UNPFA
Improve access to information regarding the health sector: damage assessment, needs, detail of populations benefitting from the actions and the evolution of the health situation.	<ul style="list-style-type: none"> Coordinate with local authorities in the health sector to improve access to detailed information at each stage of project development and implementation. 	WHO, MINSAP and MINCEX
UNDP's direct implementation that was negotiated with the National Authorities facilitated procurement of project inputs.	<ul style="list-style-type: none"> Review the practice of carrying out direct implementation in an emergency context, and replicate in similar situations in the future. 	UNDP/ National Authorities
Need to undertake a joint reflection with the local authorities on ways of identifying a wider range of needs as they emerge following the onset of an emergency, and pertinent actions to address them.	<ul style="list-style-type: none"> Organise a workshop on lessons learned from the response to Hurricane Sandy in order to update response mechanisms in the areas of needs identification and risk assessment. In October 2013, UNDP organised a workshop called "Risk in Cities - Sharing Tools for Urban Resilience" in Santiago de Cuba. It was attended by a wide range of actors including Cuban Civil Defense; Government line ministries; the provincial authorities from the cities of Santiago de Cuba, Havana, Camagüey and Holguin; NGOs; UN agencies; and regional and international experts. 	UNDP/ Local authorities

VI. PROJECT RESULTS

TABLE 8: PROJECT RESULTS			
CERF PROJECT INFORMATION			
1. Agency:	World Food Programme	5. CERF Grant Period:	9 Nov 2012 –15 July 2013
2. CERF Project Code:	12-WFP-077	6. Status of CERF Grant:	<input type="checkbox"/> On going
3. Cluster/Sector:	Food Security		<input checked="" type="checkbox"/> Concluded
4. Project Title:	Emergency food assistance for population affected in Santiago de Cuba		
7. Funding	a. Total project budget:	US\$ 7,194,377	
	b. Total funding received for the project:	US\$ 2,121,793	
	c. Amount received from CERF:	US\$ 1,782,832	
RESULTS			
8. Total number of <u>direct beneficiaries</u> planned and reached through CERF funding (provide a breakdown by sex and age).			
<i>Direct Beneficiaries</i>	<i>Planned</i>	<i>Reached</i>	<i>In case of significant discrepancy between planned and reached beneficiaries, please describe reasons:</i>
a. Female	240,779	420,000	Initially, WFP planned to assist the entire population of Santiago de Cuba municipality which was considered to be the most severely affected. However, the actual number of beneficiaries reached during the first phase was higher as the Government asked WFP to increase coverage to another four municipalities in the Province of Santiago de Cuba that were also badly affected in addition to Santiago de Cuba municipality. A WFP-supplied bean ration was therefore distributed in Palma Soriano, Contramaestre, II Frente and III Frente. The number beneficiaries totalled 768,458 (384,566 female and 401,892 male).
b. Male	251,611	438,217	
c. Total individuals (female + male):	492,390	858,417	
d. Of total, children <u>under 5</u>	29,013	67,284	During the second phase the number of beneficiaries was lower than initially planned owing to the Cuban Government's request that the food distributions prioritize the most vulnerable groups in need of emergency food assistance. WFP therefore targeted people covered by specific national social safety net programmes who require food that is additional to the items distributed through the monthly ration system. 101,741 people (50,275 female and 51,466 male) benefitted, located in maternity homes, centres for elderly people, children's day-care centres and primary schools. Of these, 29,782 people had benefitted during the first phase, meaning that 71,959 were additional to the 768,458 assisted during the first phase. (Please note that the figures for planned female and male beneficiaries were inverted in the original application document.)
9. Original project objective from approved CERF proposal			
To avoid the deterioration of food security and nutritional status of the population of Santiago de Cuba municipality.			

10. Original expected outcomes from approved CERF proposal	
<ul style="list-style-type: none"> • Timely supply of food to Santiago de Cuba municipality (quantity of food disaggregated by type of food and time coverage, number of beneficiaries who receive WFP food assistance disaggregated by gender). • Safe warehousing in the municipalities of Santiago de Cuba, Guantánamo and Holguin. 	
11. Actual outcomes achieved with CERF funds	
<ul style="list-style-type: none"> • 793 MT of food were delivered in December 2012, representing 227 MT of beans, 453 MT of rice and 113 MT of vegetable oil. The distribution was carried out by the local authorities and complemented food made available to households through the Government's regular ration distribution system. The system uses a booklet issued to heads of households, and a network of distribution points (bodegas). • 786,458 people benefitted, across five municipalities of Santiago de Cuba Province. In order to meet the Government's request of distributing beans to four municipalities in the Province in addition to the original target group (the population of Santiago de Cuba municipality), WFP had to reduce the ration of beans initially planned. The rice and vegetable oil were distributed as foreseen to beneficiaries in Santiago de Cuba municipality alone. The food distributed by WFP in December represented around 10% of the average daily caloric requirements of the population over a 30-day period. • A further 593.3 MT of food were delivered in June 2013, representing 382.2 MT of beans and 211.1 MT of vegetable oil. Distribution was carried out by the local authorities targeting the most vulnerable groups through the national social safety net programmes in the provinces of Santiago de Cuba, Holguin and Guantánamo. 101,741 people benefitted, located in children's day-care centres, maternity homes and centres for elderly people. Support was also provided to primary schools with half board and full boarding facilities. • WFP monitored the delivery of the food to the provincial warehouses and the onward delivery to the municipal warehouses. Visits were then made to a random selection of the final distribution points (bodegas). During the second phase visits were made to children's day care centres, maternity homes, centres for elderly people and primary schools. 15 temporary storage facilities (500 MT WiikHalls) were assembled in Santiago de Cuba municipality, providing a significant increase to storage capacity. 5 were installed in Santiago de Cuba port (the main entry point for commodities for all five eastern provinces), 3 at the provincial warehouse and the remaining 7 in locations belonging to institutions involved in food processing. 	
12. In case of significant discrepancy between planned and actual outcomes, please describe reasons:	
<p>The initial 793 MT of food was delivered in December 2012 as the result of a loan from WFP Haiti which was in turn advanced locally by the Government of Cuba (see section 11). With the balance of the CERF contribution, WFP procured 382.2 MT of beans from El Salvador, and 211.1 MT of oil locally. No further rice was purchased owing to constraints faced in international procurement, and the funds were allocated to a greater volume of vegetable oil. Delays were experienced with regard to the shipping of the beans, obtaining special clearance for a local purchase and the counterpart's initial limitations with regard to storage capacity for the oil. In order to complete the intervention, WFP was granted a non-cost extension of the contract from 2 May until 15 July 2013.</p>	
13. Are the CERF-funded activities part of a CAP project that applied an IASC Gender Marker code?	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
<p>If 'YES', what is the code (0, 1, 2a, 2b): n/a</p> <p>If 'NO' (or if GM score is 1 or 0): The food distributed during the first phase of the intervention was delivered to the entire population of five municipalities of Santiago de Cuba Province, regardless of sex, race and age and complemented the aid that was given by the Government of Cuba to all those affected by Hurricane Sandy. During the second phase, the distributions targeted the most vulnerable groups which included young children (in day-care centres and primary schools), the elderly (in centres) and women in maternity homes.</p>	
14. M&E: Has this project been evaluated?	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
No evaluation is planned.	

TABLE 8: PROJECT RESULTS

TABLE 8: PROJECT RESULTS			
CERF PROJECT INFORMATION			
1. Agency:	UNICEF	5. CERF Grant Period:	10 Nov 2012 – 10 May 2013
2. CERF Project Code:	12-CEF-127	6. Status of CERF Grant:	<input type="checkbox"/> On going
3. Cluster/Sector:	Water and Sanitation		<input checked="" type="checkbox"/> Concluded
4. Project Title:	Improve access to safe water and hygiene in affected communities of Santiago de Cuba		
7. Funding	a. Total project budget:	US\$ 4,082,094	
	b. Total funding received for the project:	US\$ 671,125	
	c. Amount received from CERF:	US\$ 671,125	
RESULTS			
8. Total number of <u>direct beneficiaries</u> planned and reached through CERF funding (provide a breakdown by sex and age).			
<i>Direct Beneficiaries</i>	<i>Planned</i>	<i>Reached</i>	<i>In case of significant discrepancy between planned and reached beneficiaries, please describe reasons:</i>
a. Female	9,200	81,424	The number of beneficiaries increased after receiving additional information from the authorities and including schools in the response.
b. Male	8,800	77,915	
c. Total individuals (female + male):	18,000	159,339	
d. Of total, children <u>under 5</u>	6.15%	11,616	UNICEF also assumed that each family would benefit from all items supplied, but monitoring visits and meetings with local authorities have shown that some families only need tablets and jerry cans and that water tanks can be shared between 2 or more families. Furthermore, the 25 million purification tablets assisted a much larger number of beneficiaries than originally stated, as have the 100,000 educational leaflets. As the actual cost of tanks was lower than foreseen in the original quotations, 718 additional water tanks are being purchased for use in schools, thereby benefitting 152,955 students.
9. Original project objective from approved CERF proposal			
Prevent morbidity and mortality caused by unsafe water consumption and poor hygiene, diarrheal and water-borne diseases and other vector-related diseases for 3,000 families in communities and 567 schools in the municipality of Santiago de Cuba.			
10. Original expected outcomes from approved CERF proposal			
<ul style="list-style-type: none"> Improve the access to adequate quantity and quality of safe water for 3,000 affected families and 567 schools in Santiago de Cuba. Prevent morbidity and mortality from waterborne and vector-related diseases for 3,000 families and the students of 567 schools in the municipality of Santiago de Cuba. 			
11. Actual outcomes achieved with CERF funds			

- 25 million water purification tablets purchased, imported and distributed in coordination with the local authorities and MINSAP to ensure safe water for human consumption of people living in municipalities with higher population density and greater incidence of epidemic focus related to low water quality and vectors. The total population of these municipalities is of 1,045,662.
- 3,000 mosquito nets and 3,567 jerry cans were procured and were distributed by the local authorities to at least 3,000 families in the most affected communities of Santiago de Cuba municipality. 3,460 water tanks (1,000 litre capacity) were also purchased. 3,032 tanks have been distributed to families in line with epidemiological criteria established by the health authorities and the remaining 428 tanks will have been distributed before the end of 2013.
- 1,285 water tanks (1,000 litre capacity) were installed in schools (usually two tanks per establishment) in coordination with the local Ministry of Education authorities and are benefiting approximately 152,955 children (78,160 of them female and 11,616 under 5 years old) in nine municipalities of Santiago de Cuba province.
- Awareness-raising material in the form of two leaflets was produced and 100,000 copies printed. UNICEF and MINSAP redesigned existing Ministry templates to tailor the information to the specific needs of the beneficiaries in a post emergency context. The leaflets cover the steps for proper hand washing ("Hygiene is in your hands") and "Measures to prevent acute diarrheal diseases in the family" and were used for community training activities to promote basic hygiene and health education. The distribution was organised by MINSAP through their network of local health promoters.

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

The only discrepancy between the planned and actual outcomes is in the number of beneficiaries who will benefit from the actions.

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

YES NO

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

If 'NO' (or if GM score is 1 or 0): UNICEF has its own gender equality policy, and the main criteria to identify the beneficiaries are equity and gender equality. The Cuban Constitution establishes the right to health and access to safe water with no distinction of race, sex, or economic situation.

14. M&E: Has this project been evaluated?

YES NO

There has not been an evaluation of the project. However monitoring was done on a continuous basis through field trips, meetings with authorities and contact with beneficiaries. UNICEF has a field officer based in the province of Santiago de Cuba and several field visits were made by other UNICEF staff in order to strengthen coordination with local authorities for the distributions.

TABLE 8: PROJECT RESULTS

TABLE 8: PROJECT RESULTS			
CERF PROJECT INFORMATION			
1. Agency:	UNICEF	5. CERF Grant Period:	10 Nov 2012 – 10 May 2013
2. CERF Project Code:	12-CEF-128	6. Status of CERF Grant:	<input checked="" type="checkbox"/> <input type="checkbox"/> On going
3. Cluster/Sector:	Education		<input type="checkbox"/> <input checked="" type="checkbox"/> Concluded
4. Project Title:	Children continue the school year in a safe environment		
7. Funding	a. Total project budget:		US\$ 1,500,000
	b. Total funding received for the project:		US\$ 254,823
	c. Amount received from CERF:		US\$ 254,823
RESULTS			
8. Total number of <u>direct beneficiaries</u> planned and reached through CERF funding (provide a breakdown by sex and age).			
<i>Direct Beneficiaries</i>	<i>Planned</i>	<i>Reached</i>	<i>In case of significant discrepancy between planned and reached beneficiaries, please describe reasons:</i>
a. Female	76,030	125,993	Owing to the potential use of the different kits (especially the recreational kits) by a large number of children, there were more direct beneficiaries than originally expected. The educational and recreational material contributed to the continuity and the quality of the school year and the psychosocial rehabilitation of approximately 41.6per cent of the total child population in the provinces of Santiago de Cuba, Holguin and Guantánamo. Schools for children with special education needs were also included. For children under 5 years, UNICEF can confirm the number of children attending formal nurseries (<i>circulos infantiles</i>) but not those who participate in the more informal community/family based preschool programmes, meaning that the number of direct beneficiaries is probably higher. The ECD kits covered all affected formal nurseries in the 3 affected provinces.
b. Male	75,726	133,549	
c. Total individuals (female + male):	151,756	259,542	
d. Of total, children <u>under 5</u>	20,900	15,669	
9. Original project objective from approved CERF proposal			
Re-establish minimal conditions for guaranteeing safe education activities, facilitating the emotional recovery of children and adolescents.			
10. Original expected outcomes from approved CERF proposal			
<ul style="list-style-type: none"> • More than 150,000 students affected by the hurricane receive educational and recreational materials within the first two months. • Teachers of the affected school receive didactic-learning materials. • 1,124 schools receive recreational equipment within the first two execution months. 			
11. Actual outcomes achieved with CERF funds			
<ul style="list-style-type: none"> • 10,048 primary and special needs students living in the most affected areas of the nine municipalities of Santiago de Cuba province were able to start using 198 recreational kits within the first two months. The kits allowed educational and 			

<p>recreational psychosocial rehabilitation activities to be organised in the students' own schools and communities.</p> <ul style="list-style-type: none"> • 1,109 recreational kits, 944 school kits and 110 early childhood development kits were mobilized by UNICEF's supply division from stocks that were prepositioned in warehouses in Copenhagen and Panama. They were distributed by the Ministry of Education and contributed to the continuity of the school year and the provision of an adequate learning environment in 1,588 schools and 110 nurseries (children under 5 years old). It took longer to import the kits than foreseen as the number of kits needed exceeded availability in Panama, making it necessary to transport the balance from Copenhagen. • The local distribution of the kits was organised by the Ministry of Education and a list of beneficiary schools and nurseries was provided to UNICEF. The distribution was completed in May and was coordinated by the provincial government and education authorities of Santiago de Cuba, Holguin and Guantánamo, and benefitted 125,993 girls and 133,549 boys directly. 	
<p>12. In case of significant discrepancy between planned and actual outcomes, please describe reasons:</p>	
<p>The only discrepancy between the planned and actual outcomes is in the number of beneficiaries which was higher than expected. Once the Ministry of Education had obtained accurate information concerning the degree of damage to schools in the provinces of Santiago de Cuba, Holguin and Guantánamo, the targeting of the intervention was improved. Priority was given to those children living in the worst affected areas, with emphasis on rural and mountain areas. This increased the number of beneficiaries from 151,756 to 259,542.</p> <p>The only discrepancy between the planned and actual outcomes is in the number of beneficiaries who will benefit from the actions.</p>	
<p>13. Are the CERF-funded activities part of a CAP project that applied an IASC Gender Marker code?</p>	<p>YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p>
<p>If 'YES', what is the code (0, 1, 2a, 2b): n/a</p> <p>If 'NO' (or if GM score is 1 or 0): UNICEF has its own gender equality policy, and the main criteria to identify the beneficiaries are equity and gender equality.</p>	
<p>14. M&E: Has this project been evaluated?</p>	<p>YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p>
<p>There has not been an evaluation of the project. However monitoring was done on a continuous basis through field trips, meetings with authorities and contact with beneficiaries. UNICEF has a field officer based in the province of Santiago de Cuba. In addition, several field trips were made by UNICEF staff in order to strengthen coordination with local authorities for the distributions and to visit schools where recreational kits had been received. The visits showed how beneficial the materials were for children and adolescents.</p>	

TABLE 8: PROJECT RESULTS

TABLE 8: PROJECT RESULTS			
CERF PROJECT INFORMATION			
1. Agency:	FAO	5. CERF Grant Period:	6 Dec 2012 – 15 Jul 2013
2. CERF Project Code:	12-FAO-043	6. Status of CERF Grant:	<input type="checkbox"/> On going
3. Cluster/Sector:	Agriculture		<input checked="" type="checkbox"/> Concluded
4. Project Title:	Recovery of agricultural livelihoods for people living in urban and suburban areas of the city of Santiago de Cuba		
7. Funding	a. Total project budget:	US\$ 3,200,000	
	b. Total funding received for the project:	US\$ 399,811	
	c. Amount received from CERF:	US\$ 399,811	
RESULTS			
8. Total number of <u>direct beneficiaries</u> planned and reached through CERF funding (provide a breakdown by sex and age).			
<i>Direct Beneficiaries</i>	<i>Planned</i>	<i>Reached</i>	<i>In case of significant discrepancy between planned and reached beneficiaries, please describe reasons:</i>
a. Female	252,013	252,013	The number of beneficiaries reached corresponds to the total population of Santiago de Cuba municipality.
b. Male	240,878	240,878	
c. Total individuals (female + male):	492,891	492,891	
d. Of total, children <u>under 5</u>	30,284	30,284	
9. Original project objective from approved CERF proposal			
To implement emergency activities for the immediate recovery of farmers' livelihoods and help reduce food vulnerability in the afflicted population.			
10. Original expected outcomes from approved CERF proposal			
<ul style="list-style-type: none"> 80 production units recover their capacity of production (50 urban and 30 suburban). 9,000 farmer households affected by Hurricane Sandy improve their food security situation and are not at risk during the next cropping season. 			
11. Actual outcomes achieved with CERF funds			
<ul style="list-style-type: none"> The authorities identified 160 production units to benefit from the distributions which included Cooperative Basic Production Units, Credit and Services Cooperatives, urban farms and household level production units (family farms). Following a visit by an Emergencies Technician from regional office in Panama, FAO revised the type of inputs that had originally been foreseen for the project. The final quantities purchased of each input were: 460 wheelbarrows, 1,440 crates, 500 kg of seed (250 kg of carrot seed and 250 kg of beet seed), 1,600 toolkits, 340 rolls of plastic meshing to provide shade, 240 water tanks and 160 silos. FAO spent a small balance on 25,000 metres of hosepipes. The Ministry of Agriculture defined the technical specification of each purchase. All the inputs had arrived in Santiago de Cuba by May with the exception of the seeds that were delayed by the need for importation and phytosanitary permits. The permits were received in May and the seeds imported by air from a supplier in Europe, arriving in Havana in mid-July. Following a mandatory quarantine period in government laboratories, the seeds were delivered to Santiago de Cuba in September. The tools were distributed between May and October with exception of some inputs (hosepipes, some water tanks, rolls of 			

plastic meshing and wheelbarrows) distributed by the end of December. These inputs will be needed by the beneficiary production units from December onwards.

- In order to ensure that the producers received seeds in time for the sowing season which started in November 2013 and to ensure a rotation of emergency stocks, the Ministry of Agriculture provided seeds from its reserves and used the seeds received from FAO to replace its stocks for the next cropping season. FAO conducted a monitoring visit to 10 beneficiary production cooperatives between 25th and 29th June. All had received the majority of the inputs expected, and all confirmed that the items were in good condition. FAO also visited the warehouses where the balance of the inputs was being stored prior to distribution. Interviews with beneficiaries showed high levels of satisfaction with the items received.

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

There are no significant discrepancies between planned and actual outcomes. A number of changes were made with regard to the inputs purchased (within the same overall budget) in order to increase the long-term resilience of the beneficiary production units. Permission was also sought to extend the project timeframe owing to delays in receiving the importation permits for the seeds.

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

YES NO

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

If 'NO' (or if GM score is 1 or 0): The assistance is provided to farmers in Santiago de Cuba province who have been affected by Hurricane Sandy, regardless of sex, race and age.

14. M&E: Has this project been evaluated?

YES NO

No evaluation is planned.

TABLE 8: PROJECT RESULTS

TABLE 8: PROJECT RESULTS			
CERF PROJECT INFORMATION			
1. Agency:	UNFPA	5. CERF Grant Period:	16 Nov 2012 – 16 May 2013
2. CERF Project Code:	12-FPA-044	6. Status of CERF Grant:	<input type="checkbox"/> On going
3. Cluster/Sector:	Health		<input checked="" type="checkbox"/> Concluded
4. Project Title:	Restore and revitalize the capacity to provide emergency Reproductive Health Services of the local health system in Santiago de Cuba and Holguin provinces.		
7. Funding	a. Total project budget:		US\$ 401,047
	b. Total funding received for the project:		US\$ 205,449
	c. Amount received from CERF:		US\$ 102,249
RESULTS			
8. Total number of <u>direct beneficiaries</u> planned and reached through CERF funding (provide a breakdown by sex and age).			
<i>Direct Beneficiaries</i>	<i>Planned</i>	<i>Reached</i>	<i>In case of significant discrepancy between planned and reached beneficiaries, please describe reasons:</i>
a. Female	572,273	572,003	570,690 women of reproductive age benefitted from the reproductive health kits, and 1,313 girls from the hygiene kits.
b. Male	5,500	3,938	
c. Total individuals (female + male):	627,273	575,941	2,626 hygiene (or dignity) kits were distributed. The number of hygiene kit beneficiaries was estimated on the assumption that there were two men and one child under 5 per household. More hygiene kits had been planned, but MINSAP asked to use some of the funds budgeted for hygiene kits on type 11A/B reproductive medical kits.
d. Of total, children <u>under 5</u>	10,000	2,626	
9. Original project objective from approved CERF proposal			
<ul style="list-style-type: none"> To strengthen the capacity of sexual, reproductive and maternal health services to save lives of populations in vulnerable conditions, particularly the population of reproductive age, pregnant women, young people and girls. Ensure motherhood and avoid maternal morbidity and mortality, prevent unplanned pregnancies among people affected by the hurricane. To improve the living conditions of families affected through hygienic commodities. 			
10. Original expected outcomes from approved CERF proposal			
Neonatal and maternal death avoided through restoring quality and newborn health services in Santiago de Cuba and Holguin provinces.			
<ul style="list-style-type: none"> 90 per cent of basic maternal and neonatal care capacities restored with Clinical Delivery Assistance, drugs and reusable and disposable equipment. 100 per cent of community health centres strengthened with oral and injectable contraception. Access to hygienic commodities of affected ensured. 3,000 families benefit from hygiene kits. 			
11. Actual outcomes achieved with CERF funds			

- Maternal, neonatal and newborn health services were strengthened in Santiago de Cuba province (6 hospitals), Holguín province (2 hospitals) and Guantánamo (Baracoa hospital) through Clinical Delivery Assistance, drugs, and reusable and disposable equipment. Of the 6 types of kits originally planned, actual spend was concentrated on two types of kit (11A and 11B referral level kits). CERF funds purchased 15 of each type, and 4 additional kits of each extra was purchased with UNPFA’s own resources. MINSAP deemed that these kits were of the highest priority, particularly as the eastern provinces have a higher maternal mortality rate than the rest of Cuba.
- Subsequently, following consultations with MINSAP, UNFPA were able to use savings made during the initial procurement to purchase 5 kits of types that had been requested in the approved budget. The kits arrived on 9 May and comprised one Kit 6A (Clinical Delivery Assistance/ Reusable Equipment), one Kit 6B (Clinical Delivery Assistance – Drugs and Disposable Equipment), one Kit 8 (Management of complicated miscarriages), one Kit 11A and one Kit 11B.
- No oral and injectable contraception were supplied to health centres as originally planned, as the authorities requested that the funds be used to purchase additional reproductive health kits (section 12 below).
- Hygiene commodities (hygiene/dignity kits) were provided to 2,626 affected families. Fewer were provided than originally planned owing to the concentration of resources on referral level kits
- Two training workshops were held for national health professionals working in the maternal and reproductive health services. The first took place in the province of Santiago de Cuba on 14th and 15th March 2013 and was attended by 34 people. The second took place in the province of Holguín on 14th and 15th May and was attended by 21 people. Training was given on the Minimum Initial Service Package (MISP) for Sexual and Reproductive Health in emergency situations and on the use of RH kits. Additional information was provided from the Manual for Inter-Agency Reproductive Health Kits in a humanitarian response phase.
- Monitoring visits to maternal health services at “Materno Norte”, “Materno Sur” and “Juan Bruno Zayas” hospitals (Santiago de Cuba) were carried out on 13th, 14th and 15th March. Monitoring visits to maternal health services at “Lenin General Hospital” in Holguín took place on 14th and 15th May.

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

- The health authorities requested that the oral and injectable contraception that had been planned in the original proposal be replaced with Reproductive Health Kits (11A and 11B - Referral Level kits) to enable them to manage complications of pregnancy; perform caesarean sections; perform obstetrical surgical interventions; resuscitate mothers and new-borns; and start IV antibiotic treatment for puerperal sepsis and pelvic inflammatory disease. Consequently the “supplies/commodities” budget was concentrated in these areas, with some funds being used for hygiene kits. As some savings were made during the initial procurement of 30 referral level kits (11A and 11B), UNFPA was able to purchase 5 additional kits. MINSAP defined the types most urgently needed from within list approved by the project budget.
- In addition to the hospitals in Holguín and Santiago de Cuba provinces that were identified in the original proposal, the Government requested that kits be distributed to the hospital in Baracoa (Guantánamo Province).

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

If ‘YES’, what is the code (0, 1, 2a, 2b): n/a
 If ‘NO’ (or if GM score is 1 or 0): All the project activities are focused on saving the lives of women of reproductive age and pregnant women. They ensure safe motherhood with an emphasis on emergency obstetric care, including the supply of commodities to provide prenatal, neonatal and maternal care. UNPFA seeks to use all opportunities presented during distributions and training sessions to include a gender perspective in the activity.

14. M&E: Has this project been evaluated? YES NO

No evaluation is planned.

TABLE 8: PROJECT RESULTS

TABLE 8: PROJECT RESULTS				
CERF PROJECT INFORMATION				
1. Agency:	UNDP		5. CERF Grant Period:	04 Dec 2012 - 15 July 2013
2. CERF Project Code:	12-UDP-013		6. Status of CERF Grant:	<input type="checkbox"/> On going <input checked="" type="checkbox"/> Concluded
3. Cluster/Sector:	Shelter and non-food items			
4. Project Title:	Immediate response to create shelter conditions for families affected by Hurricane Sandy in the capital city of Santiago de Cuba			
7. Funding	a. Total project budget:		US\$ 6,500,000	
	b. Total funding received for the project:		US\$ 1,762,001	
	c. Amount received from CERF:		US\$ 1,762,001	
RESULTS				
8. Total number of <u>direct beneficiaries</u> planned and reached through CERF funding (provide a breakdown by sex and age).				
<i>Direct Beneficiaries</i>	<i>Planned</i>	<i>Reached</i>	<i>In case of significant discrepancy between planned and reached beneficiaries, please describe reasons:</i>	
a. Female	36,559	36,559	N/A	
b. Male	27,581	27,581		
c. Total individuals (female + male):	64,140	64,140		
d. Of total, children <u>under 5</u>	5,067	5,070		
9. Original project objective from approved CERF proposal				
<ul style="list-style-type: none"> To support the immediate fitting out of emergency shelter in the city of Santiago de Cuba, with priority on women, children and senior citizens, in order to diminish the impact of Hurricane Sandy, in support of the territory's response plan. To provide immediate assistance to restore basic hygiene and sanitation conditions for food processing and consumption for families staying in shelter homes, prioritizing services for women, children and the elderly. 				
10. Original expected outcomes from approved CERF proposal				
<ul style="list-style-type: none"> Immediate basic habitability conditions created for 10,690 families (64,140 people) disrupted by the loss of houses in the wake of Hurricane Sandy. Hygienic-sanitary conditions of 8,790 families improved for food processing through the supply of kitchen/cooking kits. 				
11. Actual outcomes achieved with CERF funds				
<ul style="list-style-type: none"> The local authorities conducted detailed household assessments to identify houses that could be roofed with tarpaulins or roofing sheets in order to provide emergency accommodation (shelter homes or temporary facilities). The most vulnerable households were identified and prioritized for assistance with roofing materials and cooking/kitchen kits. 3,495 tarpaulins and 8,800 kitchen/cooking kits were purchased from a supplier in Panama who had sufficient stock to provide fast delivery. The tarpaulins were distributed by the local authorities to 3,495 families (20,970 people) who had lost their roofs in part or completely. 8,159 kitchen/cooking kits were distributed to 8,159 families to improve basic living conditions, optimising the hygiene and sanitary conditions in which food is prepared and consumed. The remaining 641 kits were incomplete when delivered, and contained only bowls. These were distributed to institutions caring for elderly people. 				

<ul style="list-style-type: none"> • The population was trained in how to rehabilitate and strengthen structures that were rendered vulnerable by the hurricane in order to reduce the risk of collapse. • 53,817 roofing sheets were delivered and used to roof 3,866 houses of which 1,375 were “shelter homes” accommodating two families. The local authorities provided logs and purlins, and some families were able to recoup some construction materials from their damaged homes. A total of 5,241 families benefitted from the roofing activities. • The authorities asked that the 903 roofing tool kits that were procured from Panama be given to local government construction companies that are engaged in the effort to repair damaged houses in the target areas rather than the individual families. When the tools arrived in Cuba, 790 complete kits were constituted and distributed to 13 government construction companies engaged in the effort to repair damaged houses in the target areas. The remaining 1,713 tools were distributed to the same companies according to need rather than in the form of complete kits. They were used in the wider recovery effort both in the city of Santiago and in the 21 municipalities where the domestic roofing was done. Additional buildings repaired using the tools included health and educational establishments. 	
12. In case of significant discrepancy between planned and actual outcomes, please describe reasons:	
<ul style="list-style-type: none"> • The number of roofing sheets is lower than planned (53,817 rather than 60,210) for the emergency facilities owing to price increases. As fewer sheets arrived than expected, UNDP and the local authorities decided to increase the number of “shelter homes” to 1,375. It was necessary to spend more than foreseen on importing the roof sheets (particularly on maritime transport) owing to the limited number of shipping lines that can deliver to Cuba. Furthermore, the national production level of roof sheets is unable to meet the high demand created by the post-hurricane reconstruction in the east of the country. • Adjustments were made to strategy for distributing roofing tool kits and the cooking/kitchen kits in response to needs on the ground. 1,713 tools were distributed individually rather than as complete kits, and items from 641 incomplete cooking/kitchen kits were distributed to institutions caring for the elderly rather than individual families. 	
13. Are the CERF-funded activities part of a CAP project that applied an IASC Gender Marker code?	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
<p>If ‘YES’, what is the code (0, 1, 2a, 2b): n/a</p> <p>If ‘NO’ (or if GM score is 1 or 0): As noted in the project proposal, the project aims to prioritise those families whose household heads are women, and these are expected to account for 40% of beneficiary families. One of the project indicators selected was the percentage of beneficiary families led by single mothers.</p>	
14. M&E: Has this project been evaluated?	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
No evaluation is planned.	

TABLE 8: PROJECT RESULTS

TABLE 8: PROJECT RESULTS			
CERF PROJECT INFORMATION			
1. Agency:	WHO	5. CERF Grant Period:	19 Nov 2012 – 19 May 2013
2. CERF Project Code:	12-WHO-079	6. Status of CERF Grant:	<input type="checkbox"/> On going
3. Cluster/Sector:	Health		<input checked="" type="checkbox"/> Concluded
4. Project Title:	Response to hygienic-sanitary emergency caused by damage left in the wake of Hurricane Sandy in Cuba		
7. Funding	a. Total project budget:	US\$ 5,000,000	
	b. Total funding received for the project:	US\$ 549,912	
	c. Amount received from CERF:	US\$ 549,912 (\$256,205 returned to CERF – see section 12)	
RESULTS			
8. Total number of <u>direct beneficiaries</u> planned and reached through CERF funding (provide a breakdown by sex and age).			
<i>Direct Beneficiaries</i>	<i>Planned</i>	<i>Reached</i>	<i>In case of significant discrepancy between planned and reached beneficiaries, please describe reasons:</i>
a. Female	524,000	251,737	The number of beneficiaries reached represents the population of the city rather than the whole province of Santiago de Cuba.
b. Male	523,000	240,653	
c. Total individuals (female + male):	1,047,000	492,390	
d. Of total, children <u>under 5</u>	65,000	31,814	
9. Original project objective from approved CERF proposal			
<ul style="list-style-type: none"> To ensure the proper quality of drinking water and its collection in enough quantities to prevent waterborne diseases. To ensure environmental hygiene and sanitation conditions, as well as the proper care for patients and the prompt, safe diagnostics from the laboratories. To protect the people disrupted by the hurricane from acute respiratory infections, as well as from the proliferation of pests and disease outbreaks. 			
10. Original expected outcomes from approved CERF proposal			
<ul style="list-style-type: none"> 10 per cent decrease in morbidity due to water-borne diseases, food-transmitted diseases and acute respiratory infections. Drinking water treated for six months in a population group (3,000 families). 15,000 people trained in health protection and disease prevention actions. Supplies from three containers (including donations of medical equipment and furniture) mobilized and distributed. 			
11. Actual outcomes achieved with CERF funds			
<ul style="list-style-type: none"> WHO took delivery of a first purchase of antibiotics (doxycycline) on 26 November and of a second purchase on 2 March. One million tablets were purchased in total, and MINSAP distributed them to health centres and hospitals. Initially, WHO had planned to purchase Oseltamivir to combat respiratory diseases during winter period, but in the event this medicine was not required as MINSAP had a sufficient quantity in country. The chlorine tablets that were provided through UNICEF's water and sanitation action were sufficient to cover water purification needs. Hygienic-sanitary measures to reduce morbidity caused by water-borne diseases and food-transmitted diseases were taken and benefited the population of the city of Santiago de Cuba in general and, specifically, boys, girls, women and other vulnerable groups. WHO procured 1,000 chlorine water level indicators and 300,000 DPD tablets; equipment, reagents and glassware for diagnostic laboratories; 450 thermos flasks for transporting water and food samples; and 15 microscopes, 15 			

spectrophotometers and 25 autoclaves for sterilisation. These items allowed the authorities to verify the quality of water and prepared food that were being distributed to the population in the aftermath of the hurricane. This was important as the east of the country was affected by an outbreak of cholera and it was essential to protect the urban population.

- Indeed, at the time of Hurricane Sandy, an outbreak of acute diarrheal disease had been notified in Bayamo and Manzanillo (Granma Province), two towns that have strong communications links with the cities of Santiago de Cuba and Holguin. Some of the diagnostic resources were therefore sent to laboratories in these locations in order to control the disease and ensure that it did not spread to the hurricane-affected urban areas.
- Resources were successfully mobilized from Global Links using the CERF funds to cover transport costs. Global Links sent 3 containers that comprised a range of items to include disposable equipment (syringes, bandages and towels), hospital equipment and furniture, mattresses, medical clothing (disposable gloves, face masks, towels) and hygiene consumables. . The resources were distributed to three hospitals in the city of Santiago de Cuba, namely Saturnino Lora, Hospital Infantil Sur and Clínico Quirúrgico “Juan Bruno Zayas”.Activities that had been planned as part of this action, but that were not finally implemented using CERF funding were vaccinations and health education and promotion actions.

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

A number of the inputs that were originally requested were not purchased because of a change in needs (MINSAP received sufficient quantities of Oseltamivir from other sources), or because Global Links were able to provide a proportion of the items identified (mattresses, glass tubes for laboratories). . Although substantial needs remain within the health sector in order to replace laboratory and medical equipment that suffered water damage and repair damage to buildings, these actions did not fall within CERF’s funding remit. Consequently, WHO returned the unspent balance of funds (\$256,205).

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

YES NO

If ‘YES’, what is the code (0, 1, 2a, 2b): n/a

If ‘NO’ (or if GM score is 1 or 0): The project was designed to assist the total population of Santiago de Cuba province, both male and female. The actions are therefore based on the gender balance in the province, taking into account the important needs of mothers and women in general when they are living in precarious conditions and caring for their dependents following the partial or total loss of their homes and belongings.

14. M&E: Has this project been evaluated?

YES NO

No evaluation is planned.

ANNEX 1: CERF FUNDS DISBURSED TO IMPLEMENTING PARTNERS: None.

CERF Project Code	Cluster/ Sector	Agency	Partner Name	Partner Type	Total CERF Funds Transferred To Partner US\$	Date First Installment Transferred	Start Date Of CERF Funded Activities By Partner	Comments/ Remarks

ANNEX 2: ACRONYMS AND ABBREVIATIONS (Alphabetical)

CERF	Central Emergency Response Fund
FAO	Food and Agriculture Organisation
MINCEX	Ministry of Foreign Trade and Investment
MINSAP	Ministry of Public Health
MT	Metric Ton
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
WFP	World Food Programme
WHO	World Health Organisation