

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

Country	Guatemala
Humanitarian / Resident Coordinator	René Mauricio Valdés
Reporting Period	Noviembre 2008 a Febrero 2009

I. Executive Summary:

Tropical Depression no. 16 affected the departments of Alta Verapaz, Izabal, El Petén and Quiché; generated adverse humanitarian conditions for more than 1.3 million inhabitants, and affected over 180,000 persons directly. These persons live in the northern region, which due to its territorial extension and climate conditions, is considered the zone of the highest production of basic grains in the country, whereas, it is the region with the lowest human development indexes on national average.

The affected area was flooded for more than 15 days. The floods caused the loss of means of subsistence due to the destruction of 67,119 hectares of crops, destruction of water sources and supply zones, destruction of areas for managing solid waste, proliferation of vectors and risk of development of diseases such as EDAs, ARI (Acute Respiratory Infections), dengue fever, malaria, skin diseases and others.

The state of public calamity was declared by the government of the Republic of Guatemala by acting President Doctor Rafael Espada, on November 3rd, 2008. This action enabled international aid agencies and the United Nations' System to set up coordination mechanisms to respond immediately aimed at reducing the impact of the aftermath of Tropical Depression no. 16.

The United Nations' System, in coordination with SE-CONRED, SEGEPLAN, and *Red Humanitaria* (Humanitarian Network) elaborated and validated a proposal to apply for CERF funds for a total of 1.5 million US Dollars, out of which USD1,483,541.00 were allocated to carry out actions in the areas of water and sanitation, agriculture, health, reproductive health, and food aid. These actions were led by agencies including FAO, PAHO, WFP, UNICEF, UNFPA, in coordination with implementing partners such as the Ministry of Health, the Ministry of Agriculture and NGOs with presence in these areas. Geographic zones were prioritized in consultation with municipal authorities.

CERF funding enabled making a difference upon being invested immediately to benefit those families affected by the depression and who lost everything. They were able to recover their means for subsistence, sources of safe water for consumption, keeping a very close epidemiologic supervision enabling the prevention of epidemiologic diseases and to provide assistance to the target population according to required demands, providing food rations pursuant to international humanitarian standards.

It is important to highlight the difficulties faced due to the fact that the coordination of actions and allocation of funds had to be carried out at the end of the year, during the holiday season, which turned into an opportunity for the United Nations' System to build on its mechanisms for association and coordination with partner organizations, transforming these opportunities into significant benefits, and generating positive impacts as a result of joint implementation of projects of water and sanitation, food aid, health and nutritional assistance.

(a) Please complete the matrix below:

Total amount of humanitarian funding required and received during the reporting year	REQUIRED: RECEIVED:	\$ \$		
Total amount requested from CERF	FUNDS (IN TOTAL REQUESTED):	\$2,892,761.00		
Total amount of CERF funding received by funding window	RAPID RESPONSE: UNDERFUNDED:	\$1,483,541.00 \$1,409,220.00		
	GRAND TOTAL:	\$2,892,761.00		
Total amount of CERF funding for direct UN agency / IOM implementation and total amount forwarded to implementing partners	UN AGENCIES/IOM: NGOS: GOVERNMENT: OTHER: (International Cooperation)	\$ 831,000.00 \$ 58,315.53 \$ \$2,788,000.00		
	TOTAL(Must equal the total CERF funding allocated):	\$3,677,315.50		
Approximate total number of beneficiaries reached with CERF funding (disaggregated by sex/age if possible)	TOTAL	under 5 years of age	Female (If available)	Male (If available)
	37,142	10,150	13,475	13,517
Geographic areas of implementation targeted with CERF funding (please be specific)	<p>Department of El Petén: Municipalities of San Luis: Communities of Rosatitlán, La Laguna, Quebrada Seca, San Martín, Raxujá, Chiripepec, Trece Aguas, Mahogany II and Joventé Tzuncal.</p> <p>Municipalities Sayaxché: Communities of La Felicidad, El Chorro, Barrio el Pescador, San Francisco Tumbo, San Juan Acular, Entre Rios, Barrio Mendez and Saragoza.</p> <p>Municipalities of Poptun</p> <p>Department of Izabal: The municipalities of Puerto Barrios, Livingston, El Estor, Morales, Los Amates.</p> <p>Department of Quiché: The municipalities of Chajul, Cunén, Nebaj, Chicaman, Ixcán.</p> <p>Department of Alta Verapaz: The municipalities of Cobán, Panzós, San Pedro Carchá, Chisec, Raxruja.</p>			

II. Background

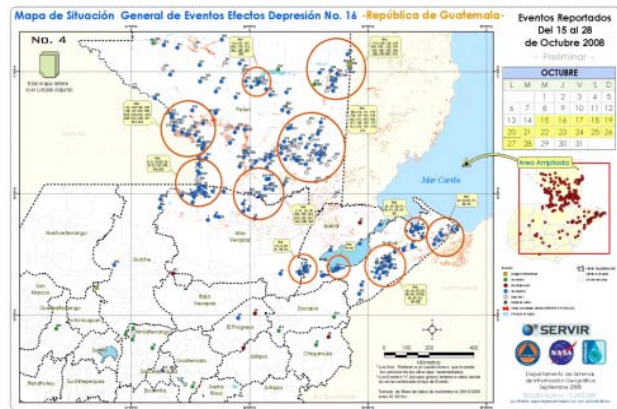
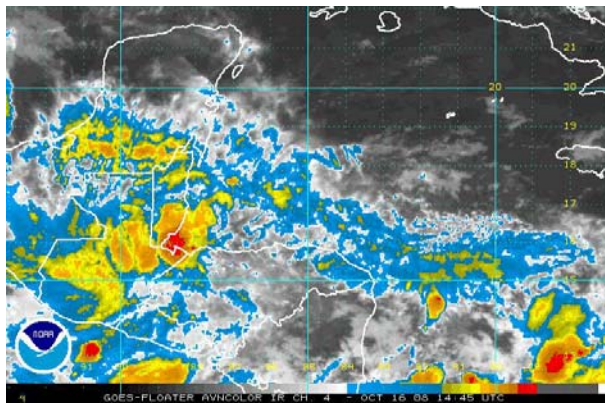
The presence of Tropical Depression no. 16 in the Caribbean Sea on October 14th, accompanied by a low-pressure system in the Atlantic coast of Guatemala, caused strong rains for 15 consecutive days, translating into floods, overflow of the most important rivers and damages in 27 municipalities corresponding to four (4) departments¹ in the northern area of the country.

¹ Territorial division of the Republic of Guatemala
ANNUAL REPORT CERF
Guatemala, March 2009

As a result, on November 3rd, the government of the Republic, through governmental agreements numbers 9 and 10-2008 declared and ratified a state of public calamity in the following departments and municipalities:

- a) **Department of Alta Verapaz:** The municipalities of Cobán, Panzos, San Pedro Carchá, Chisec, Raxruja.
- b) **Department of Izabal:** The municipalities of Puerto Barrios, Livingston, El Estor, Morales, Los Amates.
- c) **Department of El Petén:** The municipalities of Flores, San José, San Benito, San Andrés, La Libertad, San Francisco, Santa Ana, Dolores, San Luis, Sayaxche, Melchor de Mencos, Poptún.
- d) **Department of El Quiché:** The municipalities of Chajul, Cunen, Nebaj, Chicaman, Ixcán.

The area of influence of Tropical Depression number 16 corresponds to 57% of the national territory. This area is characterized by the fact that the persons who live there are poor, and dispersed in rural areas. It is also a hard to reach area, with a significant number of indigenous inhabitants and with limited social services, as well as limited geographic access, and a human development index (HDI) lower than the average for the country, identifying municipalities with HDI of 0.393 in the zone of the department of El Quiché.



The Agencies, Funds and Programs of the United Nations' System in order to respond to the declaration of public calamity and the request for cooperation submitted by the government of the Republic of Guatemala, in coordination with SE-CONRED, SEGEPLAN, NGOs and municipal authorities, formulated an action plan prioritizing sectors and geographic zones for intervention, giving priority to the following sectors:

- Agriculture
- Water and Sanitation
- Health and Reproductive Health
- Food Aid



The process of coordination with municipal authorities of the affected municipalities, led by the municipal mayor with the support of the MPO (Municipal Planning Office), enabled further prioritization of those municipalities and communities where saving lives was considered indispensable, implement all the projects as a whole in this regard were attended the 27 municipalities and 4 apartments in a state of calamity declared by government authorities.

III. Implementation and results:

AGRICULTURAL

The affected area is the largest producers of basic grains (maize and beans). Damage was estimated at an approximate area of 67,119 hectares, and an approximate loss of \$ 2,578,179.00 for the area Peten. The affected population did not have enough food for consumption during the coming months, jeopardizing their safety food.

FAO's support was aimed at restoring the production of basic grains for the families affected by Tropical Depression No. 16 in San Luis municipalities, Sayaxche Department of Petén.

Initially support was provided to three departments and three municipalities; however there is another government institution by providing similar support, the decision was made to focus support in areas where more support was needed.

The project supports families located in the affected areas, selected by the Municipal Office of Planning (OMP), COCODES, institutions of government and United Nations program on planting corn and beans.

It covered approximately 600 families from 17 communities and two municipalities.

Each family was provided with seed corn (25 pounds) for planting of 0.7 has, and beans (50 pounds) for planting of 0.35 hectare. Fertilizer was delivered to improve the production of maize (300 pounds of 15-15 -15 and 200 pounds of urea).

As part of monitoring activities, training courses were developed on the technology of crops and other issues related to agricultural management

Given the importance of having the storage of grain quality for consumption is provided to beneficiaries of metal silos with a capacity of 1200 pounds for post-harvest handling.

FOOD ASSISTANCE

The overall objective of the project was to save lives and reduce acute malnutrition of populations affected by the Tropical Depression No 16 through immediate food distribution, with special focus on children and pregnant/lactating women,

Under the CERF a total of 721mt of food commodities has been provided to 34,301 flood affected people through general food distributions (GFD). The food basket provided consisted of 560 grams per person and day, which included black beans, maize and blended food (CSB) as well as fortified veg. oil. The latter helped addressing the high prevalence of micronutrient deficiencies in the region. WFP also provided individual food rations to people living in temporary and improvised shelters at the onset of the emergency.

Commodity	Metric Tons
Vegetable Oil	32mt
Maiz	510mt
Black Beans	51mt
CSB	128mt
TOTAL	721mt

As the actual number of beneficiaries was higher than the data estimated during the initial assessment, CERF funds covered 1.5 out of three months. The remaining food needs were provided through WFP own resources.

Food assistance was implemented in line with the WFP's ongoing Protracted Relief and Recovery Operation (PRRO 10444.0) and, as previously agreed with the Government of Guatemala. At the provincial level, food distributions were carried out under the overall coordination and execution of 'Provincial Disaster Management Teams' under the Ministry of Agriculture (MAGA) through VISAN. Responsibility of coordinating, supervision and monitoring the activities was assumed by the Centre for Information and Coordination (CCI/SESAN) together with the participation of national counterparts, the National Coordinator for Disaster Reduction (CONRED) the National Peace Fund (FONAPAZ) and the First Lady Secretariat of Social Works (SOSEP).

To ensure rapid assistance to the affected populations, required resources were immediately borrowed from on-going programmes, while waiting for CERF contribution to be confirmed. The majority of food commodities were procured locally through competitive tendering, which has proven to be more cost and time efficient. The total amount of US Dollar 603,297 approved for WFP under the CERF fund was fully utilized for the procurement of food commodities and implementation of the emergency response.

HEALTH

During the three months after the flooding the CERF funds helped the health authorities in the affected areas to evaluate and guarantee medical emergency care (medical brigades, provide medicines) as well as setting up an epidemiological surveillance systems in order to reduce health risks and ensure interventions in a timely manner.

The main objective of the interventions was to help reduce the lost of human beings and risks to diseases in the population impacted by the floods caused by the rains in the departments of Alta Verapaz, El Quiché and Petén. Additionally, cooperate with the Ministry of Health and the health sector at local level, for the effective health response in the mortality and care reduction of the health problems caused by the floods, with emphasis in the most vulnerable populations groups.

For the health cluster we had an important collaboration of the Ministry of Public Health, CONRED and the local health areas. This coordination was permanent since the disaster occurred with daily written and telephone communications. We made several field

monitoring visits, with frequent updated reports of affected people, lodged people and health needs. We worked together with all the involved UN agencies and coordination with SEGEPLAN that helped us stay in close contact other donors.

A strong work was developed at local level by the Ministry of Public Health with civil society, especially with groups of women by fortifying its bond and encouraging working closely with municipal authorities in the management of health and health promotion within their communities.

Within the project of "Attention and medical assistance to victims in the departments of Petén, Alta Verapaz and El Quiché", the CERF funds helped the attendance to 35 shelters in the affected municipalities, where they were lodged near 5,775 people during almost 4 weeks in some cases. Forty two medical brigades were performed and transfer several injured patients to the main hospitable in the area.

There was a close monitoring and epidemiological surveillance for disease outbreaks such as: diarrhea, respiratory infections, dengue, and malaria, during and following the emergency. There were no reports of disease outbreaks and the health facilities managed to take care of increase of demand of health services. The most common causes of consultation were: diarrhea and respiratory infections, and skin diseases, but in any of those cases were complications, and the number of cases registered were not highly significant compared with the previous epidemiological weeks of the same period of the past year.

Extensive campaigns of information, education and communication were done promoting prevention messages and signs of alert for when to attend to the health centers, including also preventive measures to preserve sanitary conditions at home: potable water, good use of waste disposals, latrines, among other.

Personnel from PAHO/WHO Guatemala and the Ministry of Public Health visited the affected zones, to give technical cooperation and to verify the project execution and the reception and use of the provided aid (equipment, medicines and supplies).

REPRODUCTIVE HEALTH

The project was implemented in coordination with the Ministry of Health, who defined areas, hospitals and health posts concerned and the needs identified to complement government efforts. The kits were distributed through the logistics channels of the Ministry of Health, taking care to maintain the cold chain for drugs that required it.

The funds for this project support the exercise of the rights of women access to reproductive health services at minimum quality emergency situation.

WATER, SANITATION AND HYGIENE

One of the first actions was the formation of "Advance Brigades" who carried out visits to social-technical assessment of the situation and coordinating with other institutions working on water and sanitation in the affected departments concerned.

The intervention was based on four strategic areas:

- Supply and consumption of safe water in communities, schools and hostels (conventional rehabilitation systems consisted in the reconstruction of part of its collection, transmission and distribution. Cleaning of wells
- Sanitation and solid management in communities, schools and shelters affected (Construction of ditches and drains health with the installation of demonstration models of latrines

- Implementation of information processes, education, communication and social mobilization (PHAST methodology in its English acronym mean transformation participatory hygiene and sanitation. With this methodology the people of the communities are identifying the risks and propose solutions water and sanitation in disasters, based on the experience of the participants achieved the interest, commitment and involvement from them.
- Strengthening of institutions leads to the decentralization strategy. Labor provided by the Ministry of Health in coordination with local governments, communities, NGOs, civil society and international cooperation in emergency situations are incorporated into the work.

MSPAS through the Directorates of Health Areas were the implementers. MSPAS is the rector of the Water and Sanitation sector in the country and this has led to attention on this Ministry provides emergency actions directed to the axis of work .. Its strengths are a team that has the resources and knowledge. Implementing financial weaknesses.

Women's participation in the care of the emergency was an important pillar for ensuring access to safe water and solid waste management. Its incorporation into the direct action facilitates the tasks at the community level and household

Monitoring the actions implemented are made in coordination with the health areas through field visits to affected communities continued to observe the progress of the actions carried out in water, sanitation and hygiene.

IV. Lessons learned:

- a) CERF funds enabled the implementation of immediate humanitarian relief activities, to benefit more than 30,000 families affected by the floods.
- b) CERF funds enabled carrying out an exercise of inter-agency actions within the United Nations' System, inclose coordination with the government, municipalities authorities and NGOs.
- c) The declaration of a state of public calamity by the government of Guatemala was belated, which did not allow for influencing even more the officers of the Secretariat in charge of managing CERF funds, to provide more funds or formulate a Flash Appeal, due to the magnitude of the situation.
- d) Short time periods for implementation of CERF funds, during the holiday season, complicated execution of the same.

V. Results:

Sector/ Cluster	CERF projects per sector (Add project nr and title)	Amount disbursed (US\$)	Number of Beneficiaries (by sex/age)	Implementing Partners and funds disbursed	Baseline indicators	Expected Results/Outcomes	Actual results and improvements for the target beneficiaries
Agricultural	Restoration of production of basic grains for the families affected by Tropical Depression No. 16 in the Department of El Peten.	287,528	600 families (an average of 6 persons per family)	<ul style="list-style-type: none"> ■ Municipalities of San Luis and Sayaxché (OMPS) ■ MAGA ■ ICTA ■ Project Post-Harvest 	<ol style="list-style-type: none"> 1) Increase in yield of 40 bushels of corn per hectare 2) Increased yield of 10 bushels of beans per hectare 3) Quality Grain Storage (600 silos) 	<ul style="list-style-type: none"> ■ Minimized the impact of food insecurity of affected households ■ Restored farming activities of maize and beans ■ Hectares of corn and beans restored. ■ Assessment of the lives of families affected. 	<ul style="list-style-type: none"> ■ Restored 420 hectares of corn and 210 hectares of beans equivalent to a production of 4.2 million pounds of corn and 25.1 million pounds of beans. ■ The production yield of maize increased by 4 thousand pounds more than it normally (3 thousand pounds) harvest the families. Por its part, the production of beans increased by over 10 thousand pounds. These aspects provide food for families and will also generate income from the sale of small surpluses of staple grains. ■ Equipped with 600 silos for grain storage, a bin for each family. ■ Facilitate technical assistance through agricultural training. ■ Carried out an assessment on the current status of the livelihood of families who were affected by the phenomenon.
Food Assistance	<i>Emergency assistance to food-insecure households affected by the tropical storm</i>	603, 297.	Total: 34,301; <i>Adults: 13,721, Male:6,723 Female 6,998 (expecting 1,166 women and 548 lactating women), Children:20,580</i>	<ul style="list-style-type: none"> ■ <i>MAGA/VISAN, CCI/SESAN; FONAPAZ, CONRED, SOSEP</i> 	<ul style="list-style-type: none"> ■ 30,000 families living in shelter /hostels, many of those had lost their livelihood (mainly corps) 	<ul style="list-style-type: none"> ■ Provide access to food for the affected population in affected regions. ■ Save lives and reduce acute malnutrition of the affected population with special focus on children and lactating women. 	<ul style="list-style-type: none"> ■ A total of 721 mt of mixed food commodities were provided to 34,301 flood victims under the general food distribution to cover their immediate food needs. ■ Total number of around 20,580 children and 1,714 pregnant/lactating women received fortified food rations, thus preventing acute malnutrition.
Health	"Health assistance to victims in the departments of petén, Alta Verapaz y and Quiché	213,809	Peten: Sur Occ: 8,532 Sur Ori: Alta Verapaz 19,082 El Quiché. 6,047	<ul style="list-style-type: none"> ■ Ministry of Health ■ Health Areas (Alta Verapaz, Ixcán, Peten suroccidental, Petén Suroriental 		<ul style="list-style-type: none"> ■ Support and maintain the health conditions and health network services for the population on the affected areas 	<ul style="list-style-type: none"> ■ The project supported the most affected municipalities by the flooding of 4 health areas in 3 departments ■ Health workers (physicians, nurses, TSA) were contracted for 14 health brigades. Temporarily there was an extension of

						<ul style="list-style-type: none"> ■ Provide supplies and necessary drugs ■ Help control the epidemic outbreaks in the affected areas ■ Support epidemiological surveillance in the affected areas ■ Support the operation and health conditions in the shelters after the emergency ■ Support the health workers with biosafety and protection equipment 	<p>operating hours of the public health centers and posts, which permitted the attention of the increase demand of services</p> <ul style="list-style-type: none"> ■ The project supported the management and functioning of the shelters provided by the municipalities. Psychological services and other mental health activities were given ■ Provision of equipment, furniture, and supplies for the 14 health units that were affected (Sayaxché and La Libertad) ■ 4 affected Health Areas were provided with drugs and supplies (17 products) ■ Activities of IEC for prevention of epidemic outbreaks and control of vectors were carried out. No epidemic outbreaks were reported ■ Activities of environmental sanitation and vector control were supported (treatment with Abate, spraying, environmental cleaning); additionally personnel was contracted and purchase of equipment, supplies and logistical assistance for mobilization was provided ■ Procurement of biosafety and protection equipment for health workers, no injuries reported
Reproductive Health	"Reducing maternal mortality in affected areas"	68,022	46,180 pregnant women.	Ministry of Public Health and Social Care		<ul style="list-style-type: none"> ■ Reduced maternal and neonatal deaths by establishing minimum capacities in hospitals and health centers in the affected areas to provide obstetric and neonatal services. 	<ul style="list-style-type: none"> ■ 17 care kits 9 kits and delivery of equipment and materials for caesarean sections were distrib-8 hospitals and 9 health centers, which improved the ability to meet delivery, pregnancy complications and obstetric surgeries.
Water, Sanitation and Hygiene	Water, sanitation and environmental hygiene in affected communities.	US \$ 290,506 .39	31,048 Children under 5 girls 266 boys 355 Schools Girls 1828 Boys 1607 Womens	MoH Ministry of Health		<p>Improved accessibility to water and hygiene-sanitation conditions for the most vulnerable groups, amongst them children and pregnant women. Reduced vulnerability to the spread of</p>	<p>15 municipalities, 85 communities and 102 projects attended for Water, Sanitation and Hygiene. MOH worked on maintenance of water supply and provided emergency water supply to shelters, households and schools.</p>

			13,475 Mens 13,517			gastrointestinal diseases due to water contamination	
--	--	--	-----------------------	--	--	--	--

VI. CERF IN ACTION:

a) AGRICULTURAL

Given the extent of damage in agriculture caused by the floods, one of the prime objectives of FAO was to reestablish livelihoods, ensuring agricultural production, strengthening the capacity of farmers through technology transfer processes to agricultural production and providing the means for managing the post through the provisioning silos.



b) Food Assistance

The loss of agricultural production in two consecutive seasons by months of heavy rains in May and October by the presence of Tropical Depression No. 16 processes of food insecurity, generating spaces of immediate action to provide food rations to meet the international standards for humanitarian assistance to affected populations.



c) HEALTH

PAHO / WHO focused its efforts to care and health care of the injured, with medical teams and moving injured patients to major hospitals. He kept a close surveillance to eliminate or reduce the impact that could generate the EDAs, IRA's, dengue, malaria.

In the municipality of Sayaxche, Petén, all the environmental, sanitation and vector control activities were performed jointly with the community. Community leaders and the community itself were motivated to work together with the presence of the health authorities and all the equipment and supplies provided by PAHO/WHO. These activities in addition with the education and communication campaigns for prevention of epidemic outbreaks and vector control, encouraged people to clean their homes, latrines and water wells. Health authorities will monitor these activities and will include them in their regular programming.



d) WATER, SANITATION AND HYGIENE

UNICEF focused its efforts to ensure safe water for consumption, sanitation and solid waste management in communities, schools and shelters, taking over information processes and the institutional strengthening of the health areas.



LIST OF ACRONYMS

- CCI:** Centre for Information and Coordination (on food security)
- CERF:** Central Emergency Response Fund
- CSB:** Corn, Soya Blend
- COCODES:** Community Council for Development
- CONRED:** National Coordinator for Disaster Reduction
- FAO:** United Nations Food and Agricultural Organization
- FONAPAZ:** National Peace Fund
- GFD:** General food distributions
- ICTA:** Institute of Agricultural Science and Technology
- IRA's:** Acute Respiratory Infections
- MAGA:** Ministry of Agriculture, Livestock and Food
- MoH:** Ministry of Health
- MSPAS:** Ministry of Health and Welfare
- NGO:** Non-governmental organization
- OCHA:** Office for the Coordination of Humanitarian Affairs
- OMPs:** Municipal Planning Office
- OXFAM:** Non-Governmental Organization
- PAHO:** Pan American Health Organization
- PRRO:** Protracted Relief and Recovery Operation
- SE-CONRED:** Executive Secretariat of the National Coordinator for Disaster Reduction
- SEGEPLAN:** Secretariat of Planning and Programming of the Presidency
- SESAN:** Secretariat for Food and Nutritional Security
- SOSEP:** The First Lady Secretariat of Social
- TSA:** Environmental Health Technical

UNFPA: United Nations Population Found

UNICEF: United Nations Children´s Fund

VISAN: Viceministry of food security

WFP: World Food Programme

WHO: World Health Organization