

ANNUAL REPORT ON THE USE OF CERF GRANTS HAITI

Country	Haiti
Resident/Humanitarian Coordinator	Nigel Fisher
Reporting Period	1 January 2010 – 31 December 2010

I. Summary of Funding and Beneficiaries

Funding	Total amount required for the humanitarian response:	US\$ 1,502,221,330		
	Total amount received for the humanitarian response:	US\$ 1,107,598,204		
	Breakdown of total country funding received by source:	CERF:	US\$	36,564,849
		CHF/HRF COUNTRY LEVEL FUNDS:	US\$	82,000,000
		OTHER: (Bilateral/Multilateral)	US\$	989,033,355
	Total amount of CERF funding received from the Rapid Response window:	US\$ 36,564,849		
	Total amount of CERF funding received from the Underfunded window:	US\$		
	Please provide the breakdown of CERF funds by type of partner:	a. Direct UN agencies/IOM implementation:	US\$	31,260,761
		b. Funds forwarded to NGOs for implementation (in Annex, please provide a list of each NGO and amount of CERF funding forwarded):	US\$	5,304,088
		c. Funds for Government implementation:	US\$	
d. TOTAL:		US\$ 36,564,849		
Beneficiaries	Total number of individuals affected by the crisis:	Over 3 million people		
	Total number of individuals reached with CERF funding:	Over 3 million people		
		Approximately 500,000 children under 5		
		Over 2 million females		
Geographical areas of implementation:	Port-au-Prince metropolitan area, Leogane, Jacmel			

II. Analysis

The 12 January 2010 earthquake, the strongest earthquake in the country in more than 200 years, was also the most significant natural disaster requiring a large-scale, multi-sectoral international humanitarian response since the Pakistan earthquake in 2005. The earthquake struck the Ouest Province of Haiti around an epicentre 17 km south-west of the capital city Port-au-Prince and affected several cities in the surrounding areas, including Carrefour, Jacmel and Léogane. In Léogane, over 70 per cent of houses were destroyed. The exact number of people who lost their lives will probably remain unknown but according to Government sources and humanitarian aid organizations, at least 222,570 people died, 300,572 were wounded and over 1.5 million lost their homes. Overall, the number of people who have been affected by the quake is estimated at 3 million.

This critical humanitarian situation was compounded by underlying vulnerabilities in Haiti, such as systemic poverty, structural challenges, weak governance and almost annual exposure to floods, hurricanes and related disasters. Two additional disasters, the cholera epidemic that started in late October and Hurricane Tomas, which hit the country in early November, amplified the devastation and hindered the humanitarian response to the earthquake.

In 2010, the Central Emergency Response Fund (CERF) funds allocated in Haiti focused on responding to the earthquake. The CERF allowed United Nations (UN) agencies to implement immediately life-saving projects in response to the unprecedented crisis caused by the earthquake. The allocation of CERF funds was done in three phases.

The first portion of CERF funding totalling \$10,933,690 marked the beginning of the humanitarian response. CERF funds enabled the recipient agencies to launch major programmes aimed at responding to the urgent needs of the affected population. The priorities identified by the Humanitarian Country Team (HCT) were emergency telecommunications and logistics because of their centrality to the coordination of humanitarian actors and support services, food provision, health care and shelter.

The first recipients of CERF funds were:

- the World Food Programme (WFP), for food, support and coordination services;
- the World Health Organization (WHO), for health services;
- the United Nations Children's Fund (UNICEF), for water, sanitation, nutrition and health services; and
- the International Organization for Migration (IOM), for the delivery of shelter and non food items services.

The second portion of CERF allocations of \$15,099,196 funded projects related to logistics improvement and coordination of relief operations, such as the provision of air services, in response to the earthquake.

CERF funding allowed:

- WFP to procure and distribute food assistance;
- WHO to establish a health response and secure the availability of adequate drugs and medical supplies;
- UNICEF to orchestrate camp coordination and camp management, as well as to provide shelter and non-food items (NFIs) assistance;
- IOM to ensure access to safe water and sanitation; and
- The United Nations Development Programme (UNDP) to institute time-critical rubble removal from the streets, houses and public utilities through cash for work programmes.

The second phase of grants addressed funding gaps, including the prevention and response to family separation, protection, human rights and the rule of law. The recipients included:

- UNICEF and the Office of the High Commissioner for Human Rights (OHCHR) for the prevention and response to family separation projects;
- The United Nations Population Fund (UNFPA) ensured the provision of essential reproductive health services to the victims of the earthquake.

The third portion of CERF allocations, which totalled \$10,529,963, funded several projects, including camp management, agriculture, housing security assessment, urgent demolitions and transitional camps at the neighbourhood level, health services, shelter and NFIs services. These grants allowed the

agencies to scale up their response activities beyond the delivery of basic relief items, by launching several projects such as the housing security assessment, camp coordination and camp management operations and the support provided to the agricultural sector. The recipients included the Food and Agriculture Organization (FAO), WHO, IOM and UN-HABITAT.

Added value of the CERF funding

The greatest benefit of the grants was the rapidity of allocation of the funds, which catalysed a rapid response and helped meet the most critical needs of the affected population during the first weeks after the earthquake. CERF funding enabled the recipient agencies to launch quickly humanitarian response activities to provide basic humanitarian services. The disbursement of the first grants was completed less than a week after its approval. This allowed a timely deployment of staff and assets to carry out humanitarian response activities, a provision of emergency telecommunication services to the humanitarian actors, and the provision of basic humanitarian services such as food, water, sanitation and health care to the affected population.

As one of the first donors, CERF's contribution was particularly critical in the early stages of the emergency phase to ensure availability of drugs and medical supplies while health centres and facilities were non-functional or with reduced capacity. CERF funds also served to restore access to health services to over 500,000 citizens in Port-au-Prince and surrounding areas of the Ouest Province through the provision of services by the International Medical Corps (IMC).

CERF funding was critical to IOM to implement its activities in internally displaced persons (IDPs) camps. The timeliness of CERF funding was essential in starting the emergency operations such as water trucking, which required a significant seed investment and food provision by WFP and ready-to-eat meals by UNICEF. The initiative was pivotal in preventing a surge or the deterioration of malnutrition levels among children. In addition, the separation of children from their families was a major concern, CERF support allowed to rebuild rapidly the capacity for adequate coordination of child protection activities. CERF funds enabled to initiate Cluster coordination efforts despite serious challenges due to the scope and nature of the disaster. In the agricultural sector, CERF funding allowed FAO to deliver inputs on time for the summer 2010 season and to begin activities for the preparation of the hurricane season. The distribution of small harvest equipment was critical for the beneficiaries in the targeted villages.

It is worth noting that during the first five days following the earthquake, CERF was the largest single source of funding, which illustrates how crucial CERF was in the early stage of the crisis. Moreover, with a total funding of \$36.5 million CERF grants constituted the tenth-largest largest institutional funding source for humanitarian action in Haiti in 2010. During the first two months after the earthquake, CERF was the fourth-largest institutional funding source, representing 5.4 per cent of the Haiti flash earthquake appeal.

Context and results of the CERF funding

CERF funds allocated through the rapid response window enabled the humanitarian actors to address quickly the most urgent needs of the over 3 million affected population. This section summarizes the major results grouped by sector.

Health and Nutrition

Given the magnitude of the earthquake, the repercussions on the health sector were significant. Over 300,000 people were injured, including some requiring urgent treatment. CERF funding was critical to enable WHO to acquire emergency health kits to cover the needs of 10,000 people for three months. The kits were distributed to primary health care facilities, such as mobile clinics, field hospitals, and other relief agencies. Programme de Médicaments Essentiels (PROMESS) distributed over \$2 million of medicines in inventories, including 345,000 boxes of essential medicines, to over 250 organizations.

The impact of the earthquake on children was one of the major concerns of relief organizations. CERF funding was crucial to UNICEF to prevent the deterioration of malnutrition levels among children, especially those under-five years of age. Throughout the first six months, more than 550,000 children under-five and pregnant and lactating women benefited from the distribution of ready-to-eat meals. Over 1 million children benefited from Vitamin A supplementation and more than 500,000 women received iron and folic acid supplements. An additional 13,500 children with severe acute malnutrition (SAM) without medical complication were admitted to 159 outpatient therapeutic feeding programmes and 1,560 children suffering from SAM with medical complications received

facility-based nutritional care in 28 nutrition stabilization units.

Coordination and Support Services-Logistics and Emergency Telecommunications

The widespread destruction of critical infrastructures seriously affected the distribution of humanitarian services, CERF funding was critical to rebuild the capacity of the Logistics Cluster. CERF funds enabled the Cluster to establish an overland supply route from Santo Domingo to Port-au-Prince. The UN humanitarian response depot allowed the immediate distribution of logistics support equipment. At least 13,000 metric tons of lifesaving relief items were dispatched from Port-au-Prince to areas in need: 79 per cent by land, 9 per cent by air and 12 per cent by sea. 1,300 truckloads were dispatched from the Dominican Republic to Haiti, delivering more than 9,300 metric tons of relief items. Overall, 108 organizations benefited from the Logistics Cluster common transport services. Warehouse facilities were established in Port-au-Prince, Cap Haïtien, Gonaïves, Les Cayes and Jacmel. The project allowed at least 50 organizations to use inter-agency storage in Port-au-Prince.

CERF funding was instrumental in ensuring effective telecommunications within the humanitarian community, while avoiding the duplication of systems and maximizing the use of local telecommunications resources. Over 80 organizations, including all UN agencies and Non-Governmental Organizations (NGOs) using ETC services, benefited from the CERF-funded common emergency telecommunications services project.

Shelter and Camp Management

At least 1.5 million people became homeless following the destruction of their homes. Consequently, shelter and camp management was a priority and emergency shelter needs were assessed by IOM. During the early phase of the emergency response, IOM targeted 200,000 people among the most vulnerable population for shelter provision. CERF funds allowed IOM and its implementing partners to provide 27,130 families with shelter toolkits and distribute family tents, plastic sheets, kitchen kits and mosquito nets to individuals in need.

CERF funds were also critical to UN-Habitat's project on vulnerable neighbourhood and housing assessment, urgent demolitions and transitional camps. CERF contributed 83 per cent of the total budget, \$2,529,963. The project supported by the CERF allowed 20,200 families, consisting of about 101,000 persons, to benefit from building assessment.

With CERF allocations, IOM developed several sites, including Santo 17 in Croix des Bouquets and Tabarre Issa in Pétienville to host IDPs. In Santos and Tabarre, 15.2 hectares were prepared with all the facilities needed in accordance to international standards to host IDPs.

CERF funding also enabled IOM to distribute some grants to partners such as the AMI Foundation and the American Refugee Committee (ARC) to serve as Camp Management Agencies (CMA). CERF funds enabled the coordination of the overall Camp Coordination and Camp Management (CCCM) by Camp Management Operations (CMO) teams, as well as the distribution of humanitarian supplies. CERF funds also allowed IOM to develop a comprehensive Data Management System through the Displacement Tracking Matrix (DTM). This operational system allowed IOM and partners to register all camps in the affected areas and to monitor conditions at the sites on a regular basis.

UNWOMEN utilized CERF funds to strengthen the response capacity of shelters providing services to victims of gender-based violence (GBV). The project targeted a population of 150,000 people living in IDPs sites. Legal services were provided to women and girls who were registered as victims of GBV. At least 768 women benefited from the legal counsels, 546 cases were taken before the courts for judiciary action and 143 cases were submitted before civil courts for legal separation and requests for child support. Awareness raising activities also helped increase the knowledge of GBV and protection measures available to its victims.

Food

CERF funds enabled WFP to distribute food for the consumption of the earthquake victims. Fixed distribution points were established in the Port-au-Prince metropolitan area, Leogane, and Jacmel. Children, as well as pregnant and lactating women, were identified as priority beneficiaries. The total number of beneficiaries covered by the general food distribution has been estimated at 4 million people, including 2,073,247 women.

Agriculture

CERF funding allowed FAO to implement two agricultural projects to support food production. The first enabled the preparation of 400 hectares of land through the distribution of 192 metric tons of fertilizers, 130 tons of beans, 30 tons of sorghum, 28 metric tons of maize, 4 metric tons of peas and 775 kg of vegetable seeds. FAO also supplied 620 water tanks, 100 water pumps, 535 small harvest equipments and 98,338 tools, such as pick axes, hoes, machetes. The number of beneficiaries was 10,000 households for the post harvest equipment and 11,000 households for the seeds and tools distribution. The second project comprised of the distribution of 52 metric tons of maize and 18,741 tools to benefit 9,360 households in the Ouest and Sud-Est provinces. The distributions resulted in the production of 7,200,000 metric tons of sorghum, 1,950,600 metric tons of beans, 1,296,000 metric tons of maize and 72,000 metric tons of peas.

Water and Sanitation

CERF contributed to the funding of the UNICEF water trucking project, which sought to provide between 5 litres and 7 litres of clean water to approximately 680,000 people per day. The project to expand emergency sanitation options reached 800,000 people with the construction or installation of 11,300 latrines. A total of 5,100 community mobilizers were trained to communicate hygiene messages to 709,000 camp residents and 92,000 hygiene kits were distributed. The Water Sanitation and Hygiene (WASH) Cluster was quickly established and it was co-led by the Direction Nationale de l'Eau Potable et de l'Assainissement (DINEPA) with over 60 national and international partners.

Economic recovery and infrastructure

CERF funding enabled UNDP to provide affected households with immediate access to income to cover urgent needs. CERF funds helped orchestrate a rapid intervention by securing a minimum funding for early recovery activities in the first three months after the disaster. The project led to the improvement of the livelihoods of at least 7,874 households. Short-term employment opportunities were created for 7,874 people that worked in debris removal, clearing of drainage of canals and the cleaning of roads and public areas.

Protection/Human Rights/Rule of Law

The report will be submitted once the assessment of the results is completed.

CERF and humanitarian coordination

The efficiency of the CERF funding mechanism allowed UN agencies to deploy staff in surge capacity and initiate critical response activities in the immediate aftermath of the earthquake.

The second portion of allocations was granted less than two weeks after the earthquake. They were initiated and coordinated from the field but would not have been possible without the support and significant contribution of UN headquarters, the CERF Secretariat and the regional offices of the recipient agencies. The third portion of CERF grants followed the consultation process at the Humanitarian Country Team (HCT) and Cluster levels. The decisions were based on a review of the funding statuses of sectors, time critical requirements and gaps in the overall strategic response to the Haiti earthquake.

All Clusters were re-established or scaled up and were functional within the first two weeks following the earthquake. The twelve functional Clusters coordinated the response by bringing together multiple actors, maximizing the resources and developing coherent coordination mechanisms. In a context where the Government was particularly weakened by the impact of the quake, the Clusters were critical in bringing together humanitarian actors to address the needs of the affected population.

In this particular context, the role of the Humanitarian Coordinator (HC) was critical in providing a strategic vision and guidance to the humanitarian community. He played a critical role in establishing and maintaining a comprehensive coordination mechanism, which included all relevant operational humanitarian actors. The HC played a leadership role in the division of responsibilities amongst the United Nations agencies and acted as the main liaison with the Government of Haiti, which contributed to the efficiency of the humanitarian response supported by the CERF.

III. Results

Sector/ Cluster	CERF project number and title (If applicable, please provide CAP/Flash Project Code)	Amount disbursed from CERF (US\$)	Total Project Budget (US\$)	Number of Beneficiaries targeted with CERF funding	Expected Results/ Outcomes	Results and improvements for the target beneficiaries	CERF's added value to the project	Monitoring and Evaluation Mechanisms	Gender Equity
Water and Sanitation	<p>10-CEF-004-B</p> <p>Provide access to safe water and sanitation facilities to families affected by the earthquake HT1-10/WF/31373/124</p>	1,201,075	46,200,000	507,500 earthquake affected people (especially children and women)	<ul style="list-style-type: none"> Children, women and their families have access to safe drinking water and sanitation facilities and practice proper hygiene practices, especially hand washing. Collective WASH response strategies and action plans developed to respond to the situation. Necessary materials and equipment are prioritized to provide an adequate response and to be able to respond rapidly to any changes in the situation. 	<ul style="list-style-type: none"> From January until May 2010 UNICEF water trucking of between five and seven litres of clean water was delivered to close to 680,000 people per day. UNICEF's contribution amounted to more than half the effort by the WASH Cluster and reached 1.2 million people. UNICEF's support to expanding emergency sanitation options reached 800,000 people through the construction and/or installation of 11,300 latrines. UNICEF trained 5,100 community mobilizers that communicated hygiene messages to 709,000 camp residents. The initiative was complemented with the distribution of 92,000 hygiene kits. The WASH Cluster, co-led with DINEPA, was promptly established following the earthquake with over 60 national and international partners. It set and disseminated technical guidance on waste disposal, water trucking, and dislodging. 	<p>The timeliness of CERF support was essential in starting emergency operations, notably for water trucking, which required a significant seed investment. CERF support was also pivotal to initiate Cluster coordination efforts in a context of serious challenges to coordination.</p>	<ul style="list-style-type: none"> UNICEF and the UNICEF-coordinated WASH Cluster worked alongside each other to identify gaps in the collective response Provided 4W matrices, produced thematic maps on available services to monitor and evaluate targeting of interventions and guide efforts throughout the response. 	<ul style="list-style-type: none"> UNICEF worked to ensure its efforts were gender-responsive and sensitive with the construction of gender-segregated latrines and through its participation in the Gender Response Working Group, which prepared recommendations on how to strengthen the gender responsiveness of overall programmes.
	<p>10-CEF-006-A</p> <p>Provide access to safe water and sanitation and hygiene facilities to families affected by the earthquake HT1-10/WF/31373/124</p>	1,354,620							

Nutrition	10-CEF-004-A	850,292	40,400,000	403,000 children under- five years of age, including 71,000 less than one year of age	<ul style="list-style-type: none"> ■ Children 6 to 35 months receive blanket supplementary feeding rations. ■ Children 6 to 59 months receive micro-nutrients ■ Pregnant and lactating women receive micro-nutrient supplementation. ■ Children 6 months to 7 years of age receive Vitamin A supplementation. 	<ul style="list-style-type: none"> ■ Throughout the first six months, more than 550,000 children under-five and pregnant and lactating women benefited from ready-to-eat supplementary foods through blanket feeding. ■ More than 13,500 SAM children without medical complications were admitted to 159 Outpatient Therapeutic Programmes. ■ More than 1,560 children suffering from SAM with medical complications received facility-based nutritional care in 28 Nutrition Stabilization Units. ■ 107 Baby-Friendly Tents were made operational, with more than 102,000 children and over 48,900 mothers reached in nutritional counselling. ■ Over 1 million children benefited from vitamin A supplementation and de-worming and more than 500,000 women received iron and folic acid supplements. ■ 145 trainers were trained on the national protocol for management of SAM. 	Rapid responses were essential in preventing a surge or deterioration of malnutrition levels among children, in a context where the situation could have escalated rapidly.	<ul style="list-style-type: none"> ■ Monitoring and evaluation was conducted in partnership with the UNICEF-led Nutrition Cluster, the Ministry of Health and WHO. ■ Rapid screening in the first months of the crisis was conducted, moving onto standard nutrition surveys in May and June to confirm no surge in malnutrition. ■ Led to an updated strategy to adjust responses and focus on capacity building for treatment of malnutrition. 	<ul style="list-style-type: none"> ■ UNICEF's focus in nutrition was strongly devoted to helping poor, vulnerable mothers with counselling on Infant and Young Child Feeding. ■ Interventions through Baby-Friendly Tents were also a means to ensure women had a safe space to breastfeed, outside of the context of cramped conditions in camps and concerns of sexual and GBV.
	10-CEF-006-B	903,479			<ul style="list-style-type: none"> ■ Training of health workers and nutrition workers within government and NGOs. ■ Counselling on mother-infant pairs, infant and young child feeding. ■ Cases of acute malnutrition are treated. 				

Child Protection	10-CEF-006-C Prevention and response to family separation HT1-10/P-HR-RL/31380/124	502,900	1,500,000	Children and families affected by the earthquake	<ul style="list-style-type: none"> ▪ Effective child protection coordination is established under UNICEF leadership with the support of national child protection mechanisms; ▪ Rapid assessment of child protection issues; ▪ Effective MHPSS coordination between and within the Clusters established ▪ Effective GBV coordination; ▪ Age and sex appropriate referral services are available for a range of child protection needs, including psychosocial, health, social protection, HIV/AIDS, and protection and legal services 	<ul style="list-style-type: none"> ▪ The Child Protection Sub-Cluster was activated and co-lead by UNICEF and the <i>Ministère des Affaires Sociales et du Travail</i>, with a total of 130 partner organizations. UNICEF also supported the GBV Sub-Cluster led by UNFPA and co-chaired the MHPSS Group with IOM. ▪ The Sub-Cluster organized trainings on family tracing and reunification, and advocated to ensure a preventive presence of HNP/MINUSTAH in IDP camps covering 236,000 people. ▪ 5,088 children were registered and 1,303 reunited (with others supported to find appropriate alternative care solutions). ▪ 1,000 children were screened at informal border crossing to prevent trafficking by CERF-financed UNICEF supported partners. ▪ The Cluster worked to upgrade referrals for child protection cases, linking actions by government, UN and NGO actors, ensuring mapping of services to mainstream child protection in all sectors. 	The quake triggered a unique child protection emergency, and children separation was a major concern. CERF support was essential to quickly rebuild capacity for adequate coordination.	<ul style="list-style-type: none"> ▪ The UNICEF coordinated Child Protection Sub-Cluster led efforts to map services in camps and in border areas related to child protection concerns, helping not only in monitoring of interventions but also in adjusting efforts to meet needs and address gaps in responses. 	<ul style="list-style-type: none"> ▪ A key element of UNICEF's efforts overall in Child Protection was to assess and help re-establish capacity to prevent and respond to GBV, with UNICEF working in close partnership with the Ministry for Women's Affairs, and reaching 1.5 million people with messages on prevention of GBV (through radio, referral cards, community sensitization, etc.)
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Shelter	10-HAB-001									
	Vulnerable Neighbourhood and Housing Security Assessment, Urgent Demolitions and Transitional Camps at Neighbourhood Level	2,529,963	3,029,963	<p>700,000 affected people in informal settlements and camps:</p> <p>420,000 children</p> <p>140,000 women</p> <p>Other target groups to be supported:</p> <p>200 Haitian architects, engineers, technicians and community leaders</p>	<ul style="list-style-type: none"> ■ 144,000 families return to their safe homes or safe land. ■ 70 per cent of damaged and destroyed buildings, homes and service buildings, assessed in neighbourhoods within a three month period ■ 200 Haitian architects, engineers and technicians trained (male and female) for damage assessments and site identification. ■ Shelter sites and shelter solutions are provided for 96,000 families before the onset of the rains and hurricane season. ■ Provision of transitional shelter in 20 neighbourhoods (shelter kits to be provided by partners) ■ Demolition of dangerous buildings in 20 informal settlements 	<ul style="list-style-type: none"> ■ Immediate habitability assessments benefited 20,200 families (about 101,000 persons). ■ 40 Haitian engineers benefited from assessment-related training. ■ Partners outreached through the Housing and Neighbourhoods Working Group, composed of 130 organisations NGOs, bilateral and multilateral agencies, central government departments, municipalities, etc.) ■ Local coordination committees with improved capacities to coordinate and monitor safe returns in their respective neighbourhoods ■ 150,000 awareness-raising campaign beneficiaries ■ Activities focused on integrated neighbourhood assessments and initial work was undertaken to secure neighbourhoods in line with policy options adopted by the Government of Haiti to return affected populations to safe neighbourhoods. ■ The Ministry of Public Works has received substantial support by the World Bank and UNOPS to train engineers in rapid assessment techniques and to carry out the said assessments (primarily in Port-au-prince). Our support in this component was therefore directed to selected secondary cities only and we had to reorient the scope of our work towards further complementary habitability works. 	<p>CERF funding allowed the implementing of key activities required for creating conditions for a safe return from self-settled camps to neighbourhoods of origin. These activities were critical to UN-Habitat actions and advocacy to shift the attention of humanitarian partners on neighbourhoods of origin instead of a sole focus on camps.</p>	<ul style="list-style-type: none"> ■ MTPTC structural damage assessment database ■ Bi-monthly Housing and Neighbourhoods meetings to establish a common approach for the return to safe houses and neighbourhoods, to discuss challenges and monitor progress ■ Bi-monthly Local Coordination Meetings with community leaders to coordinate and monitor progress of the return strategy at the neighbourhood level ■ Regular progress reports from implementing partners ■ Field evaluation missions by UN-Habitat 	<ul style="list-style-type: none"> ■ Gender differentiated data collected and referenced through enumeration allowing to identify female headed households for improved secure tenure and ad hoc housing solutions 	

Economic Recovery	<p>10-UDP-001</p> <p>Time-critical rubble removal for streets, houses and public utilities through cash for work in Port-au-Prince metropolitan area affected communities HTI-10/ER/31387/776</p>	1,000,000	35,000,000	<p>7,874 affected households, including 39,370 people, of which 19,212 were women</p> <p>Implementing partners: Viva Rio & Concern</p>	<ul style="list-style-type: none"> ■ Stabilize livelihoods of 7,900 households ■ Short term employment opportunities for 7,900 people ■ Remove, treat and reuse up to 56,000 cubic metres of debris 	<ul style="list-style-type: none"> ■ Livelihoods have been improved for 7,874 households ■ Short term employment opportunities created for 7,874 people (945 people were employed for 78 days in one project while 6,929 people were employed for 24 day rotations in another project) ■ In total around 14,310 cubic metres of debris is reported to have been removed.* ■ 4km of drainage canals have been cleared ■ Roads and public areas cleaned of waste and debris on a daily basis in Gran Bel Air, St. Martin and Martissant ■ Community participation and organization strengthened in three neighbourhoods of Port-au-Prince ■ Local economy in three neighbourhoods revitalized by introducing \$665,340 directly into the economy 	CERF funds allowed for lifesaving livelihoods activities to start up within a month of the disaster providing families immediate access to cash	<ul style="list-style-type: none"> ■ UNDP carried out regular field visits to monitor progress made by the implementing partners in the field. Both implementing partners were asked to produce an interim report on results achieved in the first phase in order to receive the second instalment of funds. 	<ul style="list-style-type: none"> ■ At least 40 per cent of all cash for work beneficiaries were female. Women head of households were also specifically targeted for this programme. ■ Women's special needs and capacities were also taken into account in the distribution of the cash for work tasks within each group of workers.
Shelter and Non-Food Items (NFIs)	<p>10-IOM-002</p> <p>NFI Assistance for Vulnerable Earthquake Victims in Haiti</p>	1,243,875	12,000,000	200,000 earthquake affected individuals	<ul style="list-style-type: none"> ■ 200,000 affected individuals supported through the ongoing distribution of household and other basic non-food items (NFIs). 	<ul style="list-style-type: none"> ■ IOM and its implementing partners sought to meet the immediate needs of earthquake affected populations. Initially IOM intended to procure basic NFIs (jerry cans, kitchen kits, hygiene kits, etc.). ■ Following assessments regarding damage extent and emergency shelter needs were prioritized. IOM procured tents for distribution to the most vulnerable families (20,754 families comprising of 103,770 individuals). 	CERF funds supported the provision of dignified life to the remaining caseload of displaced persons that are in the IDP camps in Port-au-Prince metropolitan area, Petit Goave, Leogane and Jacmel	<ul style="list-style-type: none"> ■ The Shelter and NFI Cluster was working with the CCCM and Protection Clusters in tracking and monitoring the distribution of NFIs to the targeted beneficiaries. ■ Field data was shared with other Cluster partners 	<ul style="list-style-type: none"> ■ Special attention was given to female-headed and special needs (in terms of protection) households. Mosquito nets were particularly useful to pregnant and nursing mothers.

Shelter and Non-Food Items (NFIs)	<p>10-IOM-014</p> <p>NFI Assistance for Vulnerable Earthquake Victims in Haiti HTI-10/S-NF/31409/R</p>	500,000	41,500,000	32,500 earthquake affected individuals	<ul style="list-style-type: none"> 6,500 families benefit from kits for the construction or improvement of their shelters 	<ul style="list-style-type: none"> 27,130 families benefited from the 6,357 shelter toolkits distributed by IOM and its partners to repair houses that were damaged, which enabled families to relocate from the IDP camps into habitable and safe homes. 	<p>CERF funds have supported the return process of families that had titles to land, or whose homes suffered minimal to medium damage. These families were able to move back into their homes.</p>	<ul style="list-style-type: none"> The Shelter and NFI Cluster was working with the CCCM and Protection Clusters in tracking and monitoring the return process through the Displacement Tracking Matrix (DTM). Field data was shared with other Cluster partners 	<ul style="list-style-type: none"> Special attention was given to female-headed households and those with special protection needs.
Shelter and Non-Food Items (NFIs)	<p>10-IOM-001</p> <p>Immediate Shelter and NFIs Assistance to Vulnerable Earthquake Victims in Haiti HTI-10/S-NF/31409/298</p>	1,154,081	12,000,000	27,000 earthquake affected individuals	<ul style="list-style-type: none"> 27,000 affected individuals supported through the ongoing distribution of household and other basic but essential non-food items (NFIs). 	<ul style="list-style-type: none"> IOM and its implementing partners have provided life-saving basic supplies to 32,400 individuals (8,480 families) through the procurement and distribution of: <ul style="list-style-type: none"> 800 family tents; 8,480 Plastic sheets; 3,540 Kitchen Kits; and 41,637 mosquito nets. 	<p>CERF funds supported the provision of NFIs to people in the IDP camps in the metropolitan area of Port-au-Prince.</p>	<ul style="list-style-type: none"> The Shelter and NFI Cluster was working with the CCCM and Protection Clusters in tracking and monitoring the distribution of NFIs to targeted beneficiaries. Field data was shared with other Cluster partners on a regular basis. 	<ul style="list-style-type: none"> Special attention was given to female-headed households and those with special protection needs.

Camp Coordination Camp Management (CCCM)	<p>10-IOM-003</p> <p>Camp Coordination and Camp Management for Vulnerable Earthquake Victims in Haiti</p> <p>HTI-10/CSS/31455</p>	2,487,750	2,487,750	200,000 individuals	<ul style="list-style-type: none"> ■ Provide assistance and protection to individuals living in self-settled camps close to their permanent houses and IDPs have alternative options. ■ Maintain international standards of protection and assistance in IDP camps. ■ Coordinate the delivery of humanitarian services in each camp. ■ Systematic participation of IDP community in each camp using participatory assessments with women, men, girls and boys achieved. ■ Establish an effective information management system to gather, analyse, and disseminate information at the inter- and intra-camp levels. 	<ul style="list-style-type: none"> ■ IOM's Site Planners developed two sites to provide 3,901 individuals with improved living conditions in Santo 17 (Croix des Bouquets) and Tabarre Issa (Petionville). ■ Protection officers engaged to guarantee a rights-based humanitarian assistance approach in all activities in close coordination with relevant partners. ■ A grant was allocated to the AMI Foundation to serve as a Camp Management Agency (CMA) in camps (Henfrasa, Palais de l'Art and Parc Colofer / Port-au-Prince) to guarantee basic service provision. ■ Grant allocated to the American Refugee Committee (ARC) to serve as CMA in camp <i>Ancient Aeroport Militaire</i>, to guarantee basic service provision. ■ Camp Management Operations (CMO) teams coordinated the overall CCCM response in all sites and camps in affected areas, and implemented direct site interventions where no responding agency was present. ■ Distribution of humanitarian assistance and office supplies in support of IDPs and Camp Committees included 100 tents, 500 folding chairs, 100 folding tables, 100 white boards, 200 marker pens, and 100 tripods for white boards. These items enabled camp populations to be actively involved in CCCM tasks and decision-making processes. ■ IOM developed a comprehensive Data Management System allowing the registration of information and data gathered through the DTM. This fully operational system allowed IOM and partners to register all camps in the affected areas and to monitor conditions in sites on a regular basis. General updates and reports were shared with stakeholders including Camp Management Agencies (CMAs) and service providers, enabling CCCM partners to accurately plan targeted activities in camps. The latest DTM report is available on the CCCM website (www.cccmhaiti.info) while past reports can be provided upon request. 	<p>CERF funds allowed the immediate provision of humanitarian assistance and supported IOM and CCCM partners to rapidly identify and respond to the multiple humanitarian needs of the earthquake affected population in an effective and timely manner.</p>	<ul style="list-style-type: none"> ■ Internal monitoring mechanisms were used to track progress of the activities implemented ■ Regular on-site monitoring and assessments were used to supervise the situation in camps and identify humanitarian needs and gaps. ■ Regular CCCM Cluster meetings with UN agencies, NGOs, and national and local authorities allowed IOM to coordinate interventions and provide partners with camp status updates. 	<ul style="list-style-type: none"> ■ IOM's interventions benefited both men and women affected by the earthquake. ■ Registration information provided details of female and male camp residents, enabling IOM and partners to have demographic information prior to the implementation of emergency activities. ■ Special attention was given to both boys and girls, in particular to unaccompanied minors that might have lost their parents during the earthquake ■ Vulnerable IDPs – including female-headed households – were prioritized during the project's implementation.
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Camp Coordination Camp Management (CCCM)	<p>10-IOM-013</p> <p>Camp Coordination and Camp Management for Vulnerable Earthquake Victims in Haiti</p> <p>HTI 1 0/CSS/31812/R</p>	3,000,000	3,000,000	30,000 IDPs	<ul style="list-style-type: none"> ■ A minimum of 100 hectares available to host IDPs and allow them to leave at-risk and spontaneous sites. ■ Facilitate the smooth relocation of at least 30,000 IDPs and decongestion of current camps. ● Provide regular updates to the CCCM Cluster and relevant humanitarian actors. ● Provision of relocation and humanitarian assistance as well as protection needs met through the DTM. ● IDP registration in 17 camps. 	<ul style="list-style-type: none"> ■ A total of 15.2 hectares were prepared to host IDPs in planned camps (sites Santo 17 and Tabarre Issa) with all the facilities needed in accordance with international standards. The number of hectares expected was not reached due to unpredictable constraints such as land tenure disputes and lack of land availability. ■ To facilitate IDP spontaneous sites access and services distribution, a total of 215,205 cubic metres of rubble was removed from the streets of Port-au-Prince. Although it was not an expected result, it is part of the risk reduction priorities of IDP sites. ■ A total of 2,381 IDPs were relocated to Tabarre Issa and 192 IDPs relocated to Santo 17. Due to lack of government land availability for massive relocation, a preference among affected populations to stay in areas close to homes and mitigation activities carried out to reduce the need to relocate people, the relocation effort did not reach the beneficiary target. Remaining funds were allocated towards direct IDP assistance at the camp level and improved camp operations. ■ DTM updates, reports, maps, site sheets and analyses were provided to partners regularly via general distribution in CCCM meetings, on the CCCM website, the CCCM mailing list, as well as responding to particular requests from individual partners. ■ This project contributed to 15 per cent of the total funds received by IOM to carry out registration operations. The information gathered through the registration process was shared with partners to guide the planning and implementation of a targeted humanitarian response. Phase 1 (Emergency Registration) was completed in October 2010, with a total of 321,235 IDP Households (1,360,319 individuals) registered within 1,165 Camps. The final report for Phase 1 is available on the CCCM website (www.cccmhaiti.info). Site specific reports are available to partners upon request. 	<p>CERF funds allowed the immediate provision of humanitarian assistance and helped IOM and CCCM partners to rapidly identify and respond to the multiple humanitarian needs of the earthquake affected population s in an effective and timely manner.</p>	<ul style="list-style-type: none"> ■ Internal monitoring mechanisms were used to track the progress of activities in the camps. ■ Regular on-site monitoring and assessments were used to supervise the situation in the camps and identify humanitarian needs and gaps. ■ Regular CCCM Cluster meetings with UN agencies, NGOs, and national and local authorities allowed IOM to coordinate interventions and provide partners with camp situation updates. 	<ul style="list-style-type: none"> ■ IOM's interventions benefited both men and women affected by the earthquake. ■ Registration information provided details on female and male camp residents, enabling IOM and partners to have demographic information prior to implementing emergency activities. ■ Special attention was given to boys and girls, and especially to unaccompanied minors that might have lost their parents during the earthquake ■ Vulnerable IDPs, including female headed households, were prioritized during the project's implementation.
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Agriculture	<p>10-FAO-005</p> <p>Rapid Restoration of food production HTI/10/A/31372/12 3</p>	500,000	10,000,000		<ul style="list-style-type: none"> 6,500 households affected by the earthquake have received agricultural inputs for the spring 2010 planting season and have reduced their dependence on international food aid. 	<ul style="list-style-type: none"> 52 metric tons of Maize and 18,741 tools have been distributed to 9,360 households in the Ouest and Sud-Est departments. FAO used a program approach for the Spring 2010 agricultural season, pooling together the resources of various projects, allowing joint procurement and hence reducing unit cost and delivery time. FAO was thus able to reach more beneficiaries than initially intended. 	<p>Rapid allocation of CERF funds (this was the second project to open after the earthquake) has allowed a quick response. A programme approach was put in place because of this fast availability of funds, allowing a more integrated response.</p>	<ul style="list-style-type: none"> The project was implemented through LoAs with local and international organisations, which FAO has monitored throughout the project. FAO is also the lead agency of the Agricultural Cluster, which is held at centralised and decentralised level, and allows a close monitoring of the activities of all partners in the agricultural sector 	<ul style="list-style-type: none"> 60 per cent of the beneficiaries were women.
Agriculture	<p>10-FAO-020</p> <p>Support d'urgence aux petits agriculteurs affectés par le tremblement de terre et les inondations de 2010</p>	3,000,000	10,000,000		<ul style="list-style-type: none"> 500 hectares cultivated with inputs distributed to 500 households in the Ouest department; 2,000 silos distributed in earthquake affected areas; 12,000 households in displacement areas will receive agricultural inputs; 1,500 households have access to post-harvest equipment. 	<ul style="list-style-type: none"> 400 hectares of land was prepared and 192 metric tons of fertilizers were distributed that produced 28 MT of Maize, 130 MT of beans, 4 MT of peas, 30 MT of sorghum and 775 kg of vegetable seeds. 98,338 tools (pick axes, hoes, machetes, etc) as well as 620 water tanks, 100 water pumps and 535 units of small post harvest equipment were distributed. 10,000 households received post harvest equipment and 11,000 beneficiaries benefited from the seeds and tools distributed. This enabled the ploughing of 2,784 hectares. 1,950,600 metric tons of beans, 1,296,000 metric tons of maize, 72,000 metric tons of peas and 7,200,000 tons of sorghum were produced. the project has enabled FAO to create strategic stocks of tools and seeds for the hurricane season. 	<p>CERF funding allowed FAO to deliver agricultural inputs on time for the Summer 2010 season and to kick start activities for the preparation for the hurricane season.</p>	<ul style="list-style-type: none"> The project was implemented through LoAs with local and international organisations, monitored by FAO throughout the project. FAO was also the lead agency of the Agricultural Cluster, which was held at centralized and decentralized levels, and allowed a close monitoring of the activities of all partners in the agricultural sector 	<ul style="list-style-type: none"> 60 per cent of the beneficiaries were women.

Logistics	<p>10-WFP-010</p> <p>Logistics Augmentation and Coordination for Relief Operations in Response to the Earthquake in Haiti & Provision of Humanitarian Air Services in response to the Earthquake in Haiti</p>	5,000,000	<p>Two projects: one is for 117,500,000 and the other one is for 33,027,705</p>	The humanitarian community	<ul style="list-style-type: none"> ■ For the logistics part of the project : <ul style="list-style-type: none"> ○ A coordinated logistics response that ensures timely delivery of humanitarian cargo to the most needy; this will be achieved through identification of gaps in the logistics response, and filling those gaps with provision of common logistics services and equipment. ○ Smooth coordination of the logistics chain for a timely and efficient response of the humanitarian community to the current crisis. ○ Adequate secure facilities and residential accommodation for UN agencies in Port-au-Prince. ○ Surge capacity and emergency equipment immediately accessible. ■ For the UNHAS part of the project : <ul style="list-style-type: none"> ○ Provision of aircraft transport on behalf of the humanitarian community to implement emergency relief activities in inaccessible areas. ○ Transportation of passengers and humanitarian relief cargo. ○ Ensure an organized supply-chain at the Port-au-Prince airport for humanitarian cargo. ○ Provide capacity for timely assessments and medical evacuations. 	<ul style="list-style-type: none"> ■ For the logistics part of the project : <ul style="list-style-type: none"> ○ In the aftermath of the earthquake, the Logistics Cluster established an overland supply route from Santo Domingo to Port-au-Prince. ○ The UN Humanitarian Response Depot Network (UNHRD) immediately dispatched logistics support equipment. ○ 13,000 mt of life-saving relief items were dispatched from Port-au-Prince to the areas in need: 79 per cent by land, 9 per cent by air and 12 per cent by sea. 1,300 truck loads were dispatched from the Dominican Republic to Haiti, delivering more than 9,300 mt. To date, 108 different organizations have utilised the Logistics Cluster common transport services. ○ During the hurricane season, from June to November, a chartered 1,500 mt barge provided a viable alternative to road transport. ○ Warehouse facilities were established throughout the country: in Port-au-Prince (4,500m² and 20,000m² of open storage space); Cap Haitien (3,532m²), Gonaives (7,560m²), Les Cayes (550m²), Jacmel (2,480m²). 50 organizations have used inter-agency storage in Port-au-Prince. ○ From February to September, temporary accommodation for 450 Humanitarian workers was established and managed by the International humanitarian Partnership (IHP). Additional accommodation for 226 Humanitarians was provided by a floating hotel, chartered from January to May. ■ For the UNHAS part of the project : <ul style="list-style-type: none"> ○ In 2010, one fixed-wing aircraft LET 410 and three helicopters have been made available by UNHAS in order to implement emergency relief activities. The number of aircraft available reduced overtime depending on the needs. ○ UNHAS transported over 14,700 humanitarians and some 300 people from different UN Agencies, donors, NGOs, governments, embassies and media institutions. ○ UNHAS helicopters have flown assessment missions to more than 100 isolated villages and have delivered over 1,200 metric tons of relief cargo. ○ A dedicated Air Cargo Movement Officer facilitated the reception of inter-agency cargo at the airport in Port-au-Prince. 	The CERF allocation supported the immediate deployment of the staff and assets to implement the activities during the first stages of the operation	<ul style="list-style-type: none"> ■ Weekly staff meetings were carried out to assess the project's progress 	
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Food	<p>10-WFP-005</p> <p>Rapid Restoration of food production HTI/10/A/31372/12 3</p>	2,893,426	<p>Two projects: one is for 246,039,060 and the second one is for 246,039,060</p>	<p>4,000,000 million, of which 2,073,247 were females and 1,940,083 were male</p>	<ul style="list-style-type: none"> ■ Adequate food consumption among the affected populations over a period of three months 	<ul style="list-style-type: none"> ■ WFP was able to distribute ready to eat meals while working with partners to establish fixed distribution points near to locations where large numbers of people were congregating in key locations in Port-au-Prince, Leogane, and Jacmel,. ■ Temporary community kitchens provided hot meals while the populations had limited access to cooking facilities. 	<p>The Rapid allocation of CERF funds allowed the project to begin immediately after the needs were identified.</p>	<ul style="list-style-type: none"> ■ WFP and partners assessed the number of affected people and identified the proper locations for general food distribution points and community kitchens on a regular basis. 	<ul style="list-style-type: none"> ■ Households benefited from this project including women, girls, boys and men but special attention was given to women and children. Due to the security situation at the food distribution points, WFP issued coupons in women's names to collect food. ■ Military escorts were also provided to ensure the safety of beneficiaries and execution of distributions.
	<p>10-WFP-09</p> <p>Food Assistance to Earthquake Affected Populations in Haiti HTI-10/F/31422</p>	2,001,882							

Emergency Telecommunication Cluster	<p>10-WFP-007</p> <p>Common emergency telecommunication services to the humanitarian community in Haiti</p> <p>HTI-10/CCS/31421</p>	782,460	782,460	<p>All UN agencies and NGOs that are using ETC services</p> <p>Approximately 80 organizations with 1,800 staff benefited from the project</p>	<ul style="list-style-type: none"> ▪ Operational IT facilities and common emergency telecommunication network providing security voice and data communications ▪ Optimal use of existing MINUSTAH IT network facilitated by humanitarian organizations ▪ Humanitarian workers trained in the use of telecommunication equipment and common networks. 	<ul style="list-style-type: none"> ▪ Improved the capability of the humanitarian community to respond and operate in the affected area ▪ Ensured the availability of IT and telecommunications infrastructure and services covering both data and operational voice communications (satellite connectivity and radio networks) ▪ Ensured effective telecommunications within humanitarian community while avoiding duplication of systems and maximizing the use of local telecommunications resources. 	<p>The rapid disbursement of CERF funds allowed a timely provision of emergency telecommunication services by ETC to the humanitarian community</p>	<ul style="list-style-type: none"> ▪ A set of indicators were established to monitor the progress of the project ▪ A number of local humanitarian organizations were included in the common networks ▪ Number of training programmes conducted ▪ Results based evaluation process is set to evaluate project progression based on the achievements of individual activities 	<ul style="list-style-type: none"> ▪ N/A
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Gender based violence	<p>10-FEM-001</p> <p>Strengthening the response capacity of shelters providing services to victims of gender-based violence</p> <p>CAP/Flash project code: HTI-10/S-NF/31 468</p>	199,020	257,270	<p>150,000 individuals</p> <p>517 women and girls</p> <p>Four partner organizations GARR, SOFA, Kay Fanm and APROSIFA</p>	<ul style="list-style-type: none"> ■ GBV victims and displaced women and their families have access to food, medical and sanitary supplies and shelter ■ The four community-based organizations offer an effective and efficient emergency rapid response system to address the needs of GBV victims and displaced women and their families through adequately trained personnel and the provision of commodities ■ Women organisations have sufficient operational capacity to respond to extraordinary community demand for shelter, humanitarian supplies and counselling services ■ Operational networks of reference are in place in the targeted communities and among the implementing partners 	<ul style="list-style-type: none"> ■ Total population living in the targeted IDP sites: 150,000 people ■ Contribution to legal services benefiting 768 women and girls victims of GBV were registered ■ 768 women were able to benefit from professionals counselling, of which 157 cases of sexual violence were documented and files were opened for each case ■ 546 cases taken before the court for judiciary actions ■ 143 cases were submitted before civil courts for legal separation and or requests for child support ■ Kay Fanm, SOFA, APROSIFA and GARR capacities were reinforced in service provision particularly legal aid to women and girls survivors of violence ■ Female survivors of sexual violence and their children were provided with shelter and accompaniment (five transitional shelters built to replace the premises of Reviv, a safe house, destroyed by the earthquake) ■ 6,500 women and men in 72 IDP sites have an increased knowledge of GBV and protection measures. ■ Statistics maintained and data was fed into the national database on GBV. 	Rapid allocation of CERF funds allowed the project to begin immediately after the needs were identified	<ul style="list-style-type: none"> ■ UNIFEM assured programme coordination (four partners organizations SOFA, KAY FANM, APROSIFA and GARR) ■ Follow-up and monitoring weekly meetings with psychosocial and sensitization mobile teams ■ Field visits on the IDP sites. ■ Three coordination meetings with three partner organizations. ■ Internal final evaluation conducted 	<ul style="list-style-type: none"> ■ The project targeted the IDP population as a whole but focused on women and girls security and living conditions in a post-disaster setting ■ Both men and women benefited from sensitization sessions on GBV and their knowledge on the issue was reinforced. ■ Sessions addressing protection measures drew attention to the application of international standards in terms of IDP setting thus creating a more secure environment.
Health	<p>10-FPA-001</p> <p>Ensuring Essential Reproductive Health Services for Earthquake Affected Populations.</p> <p>HTI-10/H/31472</p>	306,020	2,707,231	The project assessed 111 nurses and midwives, with the intent to provide services to an estimated number of 750,000 women and girls of reproductive age	<ul style="list-style-type: none"> ■ Deploy skilled reproductive health professionals (midwives, nurses, obstetrician and gynaecologists) to support emergency obstetric care and other reproductive health services in hospitals, permanent and mobile clinics. 	<ul style="list-style-type: none"> ■ 111 health services providers were evaluated for their capacities to deliver life-saving reproductive health services. The evaluation outcomes showed that they needed greater capacity building 	CERF enabled to assess rapidly the national capacities	<ul style="list-style-type: none"> ■ A final evaluation report was submitted by the organisation performing the evaluation, JHPIEGO 	<ul style="list-style-type: none"> ■ The project focused on women and girls

Health	<p>10-WHO-002</p> <p>Saving Lives and Reducing Suffering for the Affected Population in the Haiti Earthquake</p>	2,054,356	6,700,000	Persons affected by the 12 January earthquake	<ul style="list-style-type: none"> ▪ Emergency kits distributed immediately and used in the affected areas ▪ Risk of epidemics of communicable diseases in the affected areas controlled and reduced ▪ Epidemics of communicable diseases immediately identified and reported and containment measures initiated promptly ▪ Hospital and health facilities in affected areas have sufficient essential medicines ▪ Efficient collaboration for implementation of humanitarian action in health 	<ul style="list-style-type: none"> ▪ Essential medicines were delivered to health facilities that treated the affected population, including diuretics, antifungals, analgesics and anti-inflammatory medicines, antibiotics, antiallergics, anti-epileptics, medicines for heart failure and treatments for other chronic diseases ▪ Emergency health kits to cover the needs of 10,000 persons for three months were acquired and distributed to primary health care facilities targeting the affected and most vulnerable population. ▪ Tramadol kits to address psychological and mental disorders were also delivered. ▪ PROMESS distributed over \$2.5 million of medicines in inventories, including 345,000 boxes of essential medicines to over 250 different organizations ▪ Treatment and preventative medicines for water-borne and food-borne diseases – including oral rehydration, anti-malarial medications, drugs to treat acute respiratory diseases, measles and meningitis – were acquired and stocked for future distribution to health partners ▪ Inter-UN agency cooperation with WFP and logistical coordination with the PAHO/WHO office in Dominican Republic enabled ▪ PROMESS to remain fully functional to provide medicines to 30 to 35 clients per day. ▪ Collaboration with health partners – for-profit and non profit institutions, UN, multilateral and bilateral agencies – through the humanitarian Cluster system guaranteed the implementation of an efficient health response 	<p>The rapid availability of CERF funds allowed for the procurement and continuous availability of essential medicines in PROMESS to be distributed to the affected population.</p>	<ul style="list-style-type: none"> ▪ PAHO and the Ministry of Health managed stocks of essential medicines and health supplies in Haiti's central procurement agency for drugs and pharmaceutical supplies (PROMESS). ▪ They also monitored communicable disease outbreaks through emergency surveillance and routine disease reporting systems 	<ul style="list-style-type: none"> ▪ Special attention was given to vulnerable populations, including pregnant women and children under-five ▪ Drugs and medical supplies were distributed to facilities providing free obstetrical and neonatal care (SOG/SIG) benefiting directly women and mothers
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Health	<p>10-WHO-003</p> <p>Health Response and availability of adequate drugs and medical supplies to Haiti earthquake</p>	1,500,140	3,200,000	Persons affected by the 12 January earthquake	<ul style="list-style-type: none"> ■ Provide drugs and medical supplies to national institutions, NGOs and other organizations working in the response operations ■ Ensure the proper functioning of PROMESS, the PAHO-managed Haiti central pharmacy ■ Ensure that drugs and medical supplies air-lifted to Port-au-Prince and left by the different organizations and governments in the turnpike of Haiti airport are classified, and if considered useful for the treatment of people, transported to PROMESS for immediate delivery to health partners ■ IMC-proposed activities to be reported by IMC 	<ul style="list-style-type: none"> ■ Procurement of essential drugs included antibiotics, painkillers, antioxytocics, antifungals, medicines for respiratory tract, and anti-infective agents. ■ Emergency health kits (10,000 persons) were acquired, as well as diarrhoeal disease kits ■ Medicines were organized and distributed to over 250 health partners, including public health facilities, for-profit and nonprofits institutions, multi- and bilateral agencies. ■ Communication and Logistics were ensured for PROMESS to remain functional to provide medicines to 30-35 clients per day. ■ Rehabilitation consultant contracted to provide technical advice and expertise and work with the rehabilitation sub-Cluster (part of the Health Cluster). ■ Access to health services restored for over 500,000 citizens of Port-au-Prince and surrounding areas of the Ouest Province through the provision of health services by International Medical Corps (IMC) ■ LOA for rehabilitation established with Handicap International, leader of the rehabilitation sub-Cluster. 	<p>As one of the first donors, the rapid availability of CERF funds was critical in the early stages of the emergency phase in Haiti to ensure availability of drugs and medical supplies while health centres and facilities were impacted or non functional.</p>	<ul style="list-style-type: none"> ■ PAHO and the Ministry of Health assessed needs of, stocked and managed essential medicines and health supplies in Haiti's central procurement agency for drugs and pharmaceutical supplies (PROMESS) to ensure the continuous availability of medical supplies 	<ul style="list-style-type: none"> ■ Special attention was paid to vulnerable populations, including pregnant women and children under-five, through the provision of medical supplies to the facilities offering obstetrical and neonatal care free of charge
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Health	<p>10-WHO-023</p> <p>Availability of essential drugs in health institutions providing services free of charge, drugs for the treatment of tuberculosis, drugs for management of acute malnutrition at hospital level; and laboratory reagents for diagnostic</p>	1,500,000	25,184,000	Persons affected by the 12 January earthquake and those living in areas hosting displaced populations	<ul style="list-style-type: none"> ■ Increased access to essential drugs in public health facilities ■ Children with severe malnutrition in hospitals have access to necessary drugs ■ More patients receiving laboratory confirmed diagnosis of malaria and other diseases 	<ul style="list-style-type: none"> ■ A diverse range of essential drugs were provided to health facilities that offered care free of charge in the months following the earthquake. ■ Essential medicines were delivered to health facilities that treated the affected population ■ Morbidity and mortality rates were reduced by the provision of essential medication. Particularly, there were reductions in the rate of respiratory infections, as this illness has being the number one reported disease among the affected population. ■ IDP camps experiencing malnutrition, or the potential for malnutrition, were assisted through the provision of folic acid and dextrose ■ Testing for HIV, and other sexually transmitted infections was undertaken – thus helping identify and isolate diseases among the affected population. This and other testing helped establish a surveillance system for diseases. ■ Testing for chronic diseases such as diabetes, arthritis, gout, and liver and kidney disorders allowed for treatment and care 	The rapid availability of CERF funds was instrumental in ensuring the availability of essential drugs in health facilities.	<ul style="list-style-type: none"> ■ The Health Cluster worked with health partners (Ministry of Health, NGOs and other national partners providing free care) to identify needs related to essential medicines and supplies. ■ A pharmacist was brought at PROMESS to ensure efficient drug management, to coordinate drugs donations and monitor stocks of medical supplies; ■ The pharmacist was supported through a PAHO/WHO run programme and LSS Suma 	<ul style="list-style-type: none"> ■ Special attention was paid to vulnerable populations, including pregnant women and children under-five. ■ Supplements purchased like folic acid and dextrose helped treat and prevent acute malnutrition cases among children and pregnant women
OHCHR	<p>10-CHR-01¹</p> <p>OHCHR Earthquake Intervention Haiti</p> <p>HTI-10/P-HR-RL/31377</p>	99,510	N/A	N/A	N/A	Results will be provided once the project is complete	N/A	N/A	N/A

¹ Waiting for OHCHR to submit their report on the project.

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

Agency	NGO Partner	Sector	Project Number	Amount Forwarded (US\$)	Date Funds Forwarded (US\$)
UNICEF	ACTED	Wash	HTI-10/WF/31373/124	97,894	February 2010
	SOLIDARITES			525,000	February 2010
	FONDEFH	Nutrition	HTI-10/H/31450/124	183,618	March 2010
	PESADEV			96,300	April 2010
	ACF			435,002	February 2010
	AVSI			157,698	April 2010
	Foyer L'Escale	Child Protection	HTI-10/H/31380/124	139,315	February 2010
	Heartland Alliance			209,315	March 2010
	IDEJEN			27,378	March 2010
UNDP	VIVA RIO	Early Recovery	10-UDP-001	492,934	February 2010
	Concern	Early Recovery	10-UDP-001	441,645	February 2010
UN HABITAT	Habitat for Humanity	Shelter	10-HAB-001	805,753	July 2010
	Pan American Development Foundation	Shelter	10-HAB-001	199,426	July 2010
	Fondation Architectes de l'Urgence	Shelter	10-HAB-001	644,565	August 2010
	Tamise	Shelter	10-HAB-001	80,000	September 2010
IOM	AMI Foundation	CCCM	HTI-10/CSS/31455 (10-IOM-003)	208,934	Transferred to NGO by IOM in different instalments between 1 February 2010 to 31 December 2010
	American Refugee Committee (ARC)	CCCM	HTI-10/CSS/31455 (10-IOM-003)	278,000	Transferred to NGO by IOM in different instalments between 1 May 2010 to 30 September 2010
UNFPA	JHPIEGO	Health	HTI-10/H/31472	82,187	February 2010
UN WOMEN	GARR / Groupe d'Appui aux Réfugiés et aux Rapatriés /	Protection/GBV	BAR/PCA/09UNIFEM /06	46,500	19 February 2010: 1 st disbursement : \$41,850.00 26 October 2010: 2 nd disbursement: \$4,650.00
	APROSIFA / Association pour la promotion de la santé intégrale de la famille	Protection/GBV	BAR/PCA/09UNIFEM /09	46,500	19 February 2010: 1 st disbursement / \$41,850.00 27 October 2010: 2 nd disbursement / \$4,650.00
	SOFA / Solidarité Fanm Ayisyen	Protection/GBV	BAR/PCA/09UNIFEM /10	46,500	10 March 2010: 1 st disbursement: \$41,850.00 27 October 2010: 2 nd disbursement: \$4,650.00
	Kay Fanm	Protection/GBV	BAR/PCA/09UNIFEM /13	46,500	10 March 2010: 1 st disbursement: \$ 41,850.00 24 January 2011: 2 nd disbursement:

					4,650.00
FAO	Tèt Kole Peyizan Masson	Agriculture	10-FAO-020	4.375	01 June 10
	Tèt Kole Peyizan Masson	Agriculture	10-FAO-020	4.375	05 October 2010
	OLD –Organisation Leoganaise pour le Développement Durable	Agriculture	10-FAO-020	4.375	05 October 2010

Annex 2: Acronyms and Abbreviations

ACTED	Agence d'Aide à la Coopération Technique Et au Développement
ACF	Action Contre la Faim
AMI	Foundation: American Meat Institute Foundation
APROSIFA	Association pour la Promotion de la Santé Intégrale de la Famille
ARC	American Refugee Committee
AVSI	The Association of Volunteers in International Service
CCCM	Camp Coordination and Camp Management
CERF	Central Emergency Response Fund
CMA	Camp Management Agency
CMO	Camp management Operation
DINEPA	Direction Nationale de l'Eau Potable et de l'Assainissement
FAO	Food and Agriculture Organization
FONDFH	Fondation pour le Développement de la Famille Haïtienne
GARR	Groupe d'Appui aux Rapatriés et Réfugiés
GBV	Gender Based Violence
HCT	Humanitarian Country Team
HNP	Haitian National Police
HRF	Humanitarian Response Fund
IDEJEN	Initiative pour le Développement des Jeunes
IDP	Internally Displaced Person
IDPSS	Internally Displaced Persons Settlement Sites
IOM	International Organization for Migrations
JHPIEGO	Johns Hopkins Program for International Education in Gynaecology and Obstetrics
LSS/SUMA	Logistics Support System/ Humanitarian Supply Management System
MINUSTAH	Mission des Nations Unies pour la Stabilisation en Haïti
NFI	Non-Food Item
NGO	Non-Governmental Organization
OHCHR	Office of the High Commissioner for Human Rights
PAHO/WHO	Pan-American Health Organization/World Health Organization

PESADEV	Perspectives pour la Santé et le Développement
PROMOESS	Programme de Médicaments Essentiels
SOFA	Solidarité Fanm Ayisyen
UNDP	United Nations Development Program
UNFPA	United Nations Population Fund
UN-HABITAT	The United Nations Agency for Human Settlements
UNHRD	United Nations Humanitarian Response Depot
UNICEF	United Nations Children's Fund
WFP	World Food Programme