



United Nations

**CENTRAL
EMERGENCY
RESPONSE FUND**



A SOUND HUMANITARIAN INVESTMENT

**RESIDENT / HUMANITARIAN COORDINATOR
REPORT ON THE USE OF CERF FUNDS
THE REPUBLIC OF SERBIA
RAPID RESPONSE
FLOODS**

RESIDENT/HUMANITARIAN COORDINATOR

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REPORTING PROCESS AND CONSULTATION SUMMARY

- a. Please indicate when the After Action Review (AAR) was conducted and who participated.

Consultations with the UN agencies were conducted on several occasions:

- 4th December (UNICEF, UNFPA and UNDP)
- During January individual consultations with all UN participating agencies were conducted
- 5th March and 27th March final review of the report by all participating agencies

- b. Please confirm that the Resident Coordinator and/or Humanitarian Coordinator (RC/HC) Report was discussed in the Humanitarian and/or UN Country Team and by cluster/sector coordinators as outlined in the guidelines.

YES NO

- c. Was the final version of the RC/HC Report shared for review with in-country stakeholders as recommended in the guidelines (i.e. the CERF recipient agencies and their implementing partners, cluster/sector coordinators and members and relevant government counterparts)?

YES NO

All participating UN Agencies have consulted with their national partners while preparing this report.

I. HUMANITARIAN CONTEXT

TABLE 1: EMERGENCY ALLOCATION OVERVIEW (US\$)		
Total amount required for the humanitarian response:		
Breakdown of total response funding received by source	Source	Amount
	CERF	2,164,278
	COMMON HUMANITARIAN FUND/ EMERGENCY RESPONSE FUND (if applicable)	N/A
	OTHER (bilateral/multilateral) Including recovery activities in 2014	16, 879,598
	TOTAL	19,043,876

TABLE 2: CERF EMERGENCY FUNDING BY ALLOCATION AND PROJECT (US\$)			
Allocation 1 – date of official submission: 30-May-14			
Agency	Project code	Cluster/Sector	Amount
UNICEF	14-RR-CEF-088	Water and sanitation	262,685
FAO	14-RR-FAO-020	Agriculture	290,179
UNFPA	14-RR-FPA-027	Health	114,913
IOM	14-RR-IOM-029	Camp Management	116,930
UNDP	14-RR-UDP-007	Water and sanitation	388,143
WFP	14-RR-WFP-038	Food	755,313
WHO	14-RR-WHO-039	Health	236,115
TOTAL			2,164,278

TABLE 3: BREAKDOWN OF CERF FUNDS BY TYPE OF IMPLEMENTATION MODALITY (US\$)	
Type of implementation modality	Amount
Direct UN agencies/IOM implementation	2,046,459
Funds forwarded to NGOs for implementation	117,819
Funds forwarded to government partners	N/A
TOTAL	2,164,278

HUMANITARIAN NEEDS

During the week of 12-16 May 2014, heavy rains hit Serbia and neighbouring Bosnia and Herzegovina and Croatia, causing large scale flooding. According to the Red Cross data, devastating floods and landslides affected more than 1.6 million people. Flooding of the river Sava and its tributaries caused tens of thousands of hectares of farmland to be inundated and many houses and buildings destroyed or damaged. These are the worst floods the central European region has suffered in a century.

The Government of Republic of Serbia (GoS) declared a state of emergency on 15 May 2014 that lasted until 23 May 2014. In some municipalities the state of emergency remained until end of June 2014. The Government reported a total of 51 flood related deaths of which 24 were due to drowning, about 32,000 people were displaced, some of whom moved to stay with relatives or friends and others were given shelter in nearby unaffected facilities such as hotels or army barracks. It was estimated that about 1,600,000 men, women, boys and girls living in 38 municipalities/cities mostly located in central and western Serbia were affected. According to the last census data (2011), there are 7.2 million inhabitants in Serbia of which 51.2 per cent are women. The age structure of the directly affected was: 0-2 years: 2 per cent, 2-10 years: 8 per cent, 10-18 years: 10 per cent, 19-45 years: 29 per cent, 46-65 years: 32 per cent and over 65 years: 19 per cent. The World Health Organization (WHO) declared the Balkan flood emergency as a grade 2 emergency according to the WHO Emergency Response Framework.

In Serbia, almost 32,000 people were evacuated from the areas affected by floods and located in 140 collective centres, out of which 47 were located in Belgrade. With over-crowding conditions, initially the 140 collective accommodation centers were also at great risk for water-borne and hygiene related diseases, as well as respiratory diseases, including tuberculosis. Fortunately, no large outbreaks of infectious diseases were registered. However, in evacuation centres around Belgrade, increased cases of diarrheal diseases, as well as hygiene-related diseases like scabies and pediculosis were reported and a further increase was expected later on. At special risks were informal settlements (shacks) in and around Belgrade, mainly inhabited by Roma populations (about 150 families), which were not directly flooded but destroyed by the heavy rain falls. Many people, whose houses were flooded, now live at relatives or friends in over-crowded and unsanitary conditions.

According to the initial assessments by the Ministry of Interior 2,260 buildings were flooded and over 30,000 households were without electricity. Overall, 39 Serbian municipalities with total populations of over 1 million people were affected. In terms of infrastructure, main highways suffered the biggest damage, followed by rail tracks, 52 public objects and over 300 business premises.

In the aftermath of the floods, water supplies were polluted or clogged and sewage systems clogged presenting immediate and life threatening challenges due to risk of dehydration and the dangers associated with infectious and communicable diseases. In all, 240,296 Serbian citizens, 10,661 of them children, were at risk.

Furthermore the catastrophic effects of flooding in the most affected communities caused psychological distress amongst the affected families with children bearing the heaviest brunt. Children were experiencing disruption of education, normal play and recreational activities in the known environment and were suffering from the adverse conditions in collective accommodation centres, including lack of privacy, space for learning, playing and recreation as well as usual interaction with peers, families and other social actors.

In the western parts of Serbia, the floods had severely damaged health facilities, medical equipment and medicine stocks with at least 14 health facilities, serving approximately 150,000 people reportedly being damaged. In those areas approximately 700,000 people were in urgent need of drinking water due to the breakdown of local water distribution systems, pumps and power supply. Also, access and service delivery of all health care facilities located in those areas were partly or completely disrupted. Local health centres and pharmacies providing services to about 65,000 people were shut down due to the floods, affecting primary health care services as well as the continuity of services for chronically ill including the regular delivery of medicines, treatments and check-ups as well as the care for pregnant women and infants.

The heavy rainfall severely affected the field crops as well as livestock production. According to local reports, 80 000 hectares of arable land were flooded and thousands of livestock died. Preliminary assessments indicated that floods damaged spring crops, such as maize, barley, soybeans, sunflowers as well as horticulture products. This largely affected the household food and nutrition security of the vulnerable population due to the risk of losing the entire or most of the harvest. Furthermore, the income generated by the farmers through the sale of surplus produce was also lost, which largely impacted on their day-to-day running of the livelihoods. Food stock, infrastructures, processing facilities and farm equipment were also lost or damaged. The worst impact of the floods was felt by the vulnerable segment of the population that had no other means of income or livelihoods. Many

families had to leave their houses due to landslides and floods, while some are still living in houses that do not meet basic safety and health standards. Reserves of food and animal feed were also destroyed together with already planted crops. It is important to note that agriculture has been the only source of income for many of these families.

II. FOCUS AREAS AND PRIORITIZATION

The CERF-funded activities covered all 24 flood-affected municipalities in the following areas: water and sanitation, agriculture, health, food and camp management.

UNICEF:

UNICEF's response to the current flood emergency focused on the areas of water, sanitation and hygiene (WASH), child protection and education, in line with its Core Corporate Commitments and its designated leadership areas. Since the start of the emergency, UNICEF participated in the UNCT activities aimed at assessing the needs and ensuring coordination of the emergency response and engaged in regular dialogue and coordination with the Government on the most urgent needs, notably the Ministries of Health (MoH), Education, and Social Welfare, the Belgrade City authorities, as well as with UN sister agencies, NGO partners including Red Cross, Save the Children and direct implementing partners. Furthermore, UNICEF planned its intervention on the basis of the data on flood affected population and needs assessment provided by the Red Cross, UNICEF partner networks and its own field assessments

FAO:

FAO led the agriculture sector team in the post disaster needs assessment together with the UN, World Bank and the EU. The team consulted veterinary departments and crisis management teams on municipal level and Ministry of Agriculture and Ministry of Social Affairs at the national level to determine the type of assistance most suited in the immediate aftermath of the flooding. The Rapid Needs Assessment (RNA) carried out in June/July 2014 reported an estimated 11,943 ha land as useless for production for a season and an estimated area of 4,815 ha requiring removal of debris. Farm machineries and equipment were damaged by submersion, and about 1,500 greenhouses were fully or partly destroyed. The total damages were estimated to amount 107 Million Euros excluding damages to farm housing, irrigation and agro-processing industries. The largest share (72%) of damages was related to the land rendered useless, followed by damage to flood control works with 22 per cent of the total damages. The overall estimate of losses amount 120 Million Euros, with a large share related to the agricultural production sub-sector accounting for over 97 per cent of the total figure. With the Ministry of Agriculture and Environmental Protection the delivery of four type of animal feed was planned. By the time CERF funds were available, the priority changed in the municipalities and the Government requested FAO to focus on cattle food. A standard package size of 320 kg per family was designed. CERF funds allowed jump-starting the assistance while the larger donor conference was organized and EU funding secured.

UNFPA:

UNFPA CO was part of the health cluster team contributing to the process of developing a Recovery Needs Assessment in Serbia, an exercise supported by United Nations, World Bank and European Union. Report supported by UNFPA highlighted that: although health system of the Republic of Serbia responded to the SRH needs during crisis, there is still a need to strengthen the capacities of health service providers in the recovery phase in flood affected areas, as well as to reconsider options for Building Back Better (BBB); Needs for contraceptive supplies were also highlighted during the assessment. Having this in mind, the UNFPA focused on improving access to lifesaving RH/hygiene supplies needed in the acute phase of the disaster, and at a later stage within displaced population by implementing the Minimum Initial Services Package (MISP) and distributing RH/dignity kits tailored to the needs of entire families. The area of intervention is fully in line with the mandate of UNFPA encompassing gender equality, SRH and youth empowerment.

IOM:

IOM carried out a rapid psychosocial impact assessment that revealed an urgent need to provide direct counselling to the affected population, where one of the main findings was that it would be very important that displacement and additional reallocation processes should be accompanied whenever possible by consideration of the psychosocial needs of displaced persons, and by means of activities that would help their psychosocial wellbeing, such as smooth re-definition of their social, professional, family and interpersonal roles in order to prevent psychological and social malaises. Upon a public call in the media for the immediate psychosocial support to the affected population, IOM engaged psychosocial mobile teams to assist Roma families who were accommodated at their relatives in the Roma settlements in Belgrade (40 families). Collection of data on

scattered Roma families was completed by Roma NGOs and Roma coordinators. The Roma NGO “Roma Community Center” was subcontracted to carry out damage, displacement and needs assessment of Roma settlements within the affected areas, so that the delivery of aid was able to reach the most vulnerable.

UNDP:

At the first donor conference in Belgrade, on 22 May 2014, the Government of Serbia, Ministry of Agriculture and Environmental Protection stressed the need to urgently repair water systems. The MoH stressed these as an immediate priority cleaning water from sewages, drainages and water supply with a view to preventing epidemic diseases.

UNDP’s main partners were the Government Office for Reconstruction and Flood Relief as well as the 6 Local Self-Governments (Ub, Lajkovac, Sabac, Vladimirci, Smederevska Palanka and Kosjeric) and their Public Utility Companies responsible for water and sewage systems in order to support relief efforts. The preliminary assessment, conducted in the period from 23 June till 27 June, 2014, enabled the expert UNDP team to estimate disaster effects – damages and losses – and impacts in the area of water and sewage as well as the financial requirements to undertake recovery and reconstruction. The assessment revealed that these six municipalities experienced substantive flood damage to water supply and sewage infrastructure. Flash floods had caused serious structural damage to pump houses (both water and sewage), water and sewage pipes and in most cases damage was primarily to electrical and mechanical components, pumping machinery, transformers, building foundations, requiring extensive cleaning, de-clogging etc.

WFP:

Following a request from the Government of Serbia for humanitarian assistance in response to the severe flooding situation affecting the country, WFP in close coordination with the United Nations Country Team (UNCT), responded by urgently providing emergency life-saving assistance, including food and logistics support, augmenting the capacity of the Government of Serbia to meet the most urgent needs of those affected, including initial search and rescue operations. Part of WFP’s response was conducted through the activation of the United Nations Humanitarian Response Depots (UNHRDs) of Brindisi (Italy) and Dubai, which provided the bulk of the rapid response stocks and equipment that was supplied to the Government of Serbia.

WHO:

The Government declared 24 municipalities to be most seriously affected by flooding of which 16 municipalities¹ reported to the MoH and Institute of Public Health of Serbia (IPHS) that health facilities had been damaged. Following visits to all 16 municipalities, the Post Disaster Need Assessment (PDNA) health sector group confirmed that a total of 74 facilities (primary health care centres, health posts, and clinics) were damaged. Loss of assets such as equipment, medicines and supplies were reported. Debris from the flood affected health facilities, located at ground floors and basements, was comprised mainly of mud, internal furnishings and equipment that had been damaged by flood waters. The total value of the damaged equipment and furniture was estimated at \$9,000,000. Approximately 150,000 people that are potential beneficiaries of those health care institutions had partly or completely disrupted access and service delivery of all health care facilities located in those areas during the first 4 days of the floods period. In addition, major public health challenges were related to post flood cleaning efforts, as infections through injuries or inhaling of pathogens. Water and vector - borne diseases (mainly mosquitoes and rats) had therefore posed a high risk to the entire affected population in the whole area. Disinfection and pest control measures were urgently needed. There was a real threat of outbreaks of non-endemic diseases, such as the West Nile Fever in the previous year, due to the forecasted rise in temperatures that could lead to increased mosquito breeding in the region. Lastly, chemical spills, released through the floods and animal cadavers contaminated the ground and surface water and soil quality and posed another health risk to the population. The flood related, and potential epidemic concerns were respiratory tract infections, diarrhoea, hepatitis, polio, measles, meningitis and the West Nile Virus.

III. CERF PROCESS

Already on 14 May 2014, the Resident Coordinator (RC) had the following two internal coordination mechanisms in place: UNCT Heads of Agency group as the main coordination body and the UNCT DRR group including the programme staff in charge of the DRR. Both groups included, since the beginning of the crisis, members from the relevant agencies that are not usually members of the UNCT: WFP, OCHA, UN Habitat, FAO.

¹ Obrenovac, Lazarevac, Sabac, Sid, Krupanj, Valjevo, Ub, Kosjeric, Koceljeva, Jagodina, Paracin, Svilajnac, Smederevska Palanka, Loznica, Vladimirci, Ljubovija

Since the very beginning of the emergency the Heads of Agencies chaired by the RC met regularly, sometimes two times a day to review the situation and agree on the next steps. Thanks to UNDP TRAC 3 contribution additional resources for coordination were received and overall coordination systems strengthened. An emergency communication unit was formed with the aim of allowing for timely and effective communication with external audiences.

At the request of the RC, a United Nations Disaster Assessment and Coordination (UNDAC) Team was mobilised by UN OCHA and deployed to Serbia on 18 May 2014. The Team was composed of a Team Leader, a Deputy Team Leader and Information Management expert, and experts in the fields of flood management, logistics and infrastructure, environmental impact, and population displacement. Two mapping and GIS experts from Map Action were attached to the UNDAC Team. The Team also received support from a landslide expert from Swiss Humanitarian Aid. Throughout its mission, the Team received invaluable support from the Office of the RC, UNCT, SEESAC, and UNMIK (transport), without which the mission would not have succeeded. The UNDAC Team based its assessments on a combination of information obtained from reports from the Serbian authorities, the Red Cross, the EU CP Team, satellite imagery, and, not least, own observations during aerial surveys by helicopter and site visits by vehicle. UNDAC team worked closely with UN CP Team and was based in the Centre for Emergency Management in the Ministry of Interior of the Government of Serbia.

The RC called regularly briefed partners, including key national and international partners. A brochure summarizing the needs and related emergency and early recovery response by UNCT and International Financial Institutions was compiled and presented by the UN RCO.

The RC made the decision to request CERF funding following the initial assessments on the ground and consultations with the UNDAC team. The Chapeau document of the CERF application was developed in close consultation with the UNDAC team. The needs determined steamed from the UNDAC reports; a UN agency assessment; and partnership network which was established with affected municipalities and NGOs already operating in these municipalities.

IV. CERF RESULTS AND ADDED VALUE

TABLE 4: AFFECTED INDIVIDUALS AND REACHED DIRECT BENEFICIARIES BY SECTOR				
Total number of individuals affected by the crisis:				
	Cluster/Sector	Female	Male	Total
The estimated total number of individuals directly supported through CERF funding by cluster/sector	Water and sanitation	151,455	136,500	287,955
	Agriculture	4,563	4,400	8,963
	Health	44,782	42,659	87,441
	Camp Management	1,800	1,450	3,250
	Food	3,600	3,400	7,000

BENEFICIARY ESTIMATION

Although six UN agencies were involved in the implementation of the CERF fund and having in mind that huge areas and numerous municipalities were hit by the floods there were slight overlaps in the areas covered, but not in terms of beneficiaries. For example, UNDP covered the purchase of water and sewage built in pumps which are linked to the urban part of municipalities and where households are linked to the municipal water and sewage systems. If FAO was operating in the same municipality, the targeted beneficiaries were not the same since they had been dealing with rural households of that particular municipality which are not linked to water and sewage systems. The possibility of overlap was possible only in the case of agencies which were working with beneficiaries in collective centers, but that was avoided on the basis that one UN agency was working only with children and the other with mothers and the fathers of the families.

TABLE 5: PLANNED AND REACHED DIRECT BENEFICIARIES THROUGH CERF FUNDING		
	Planned	Estimated Reached
Female	271,694	206,200
Male	249,404	188,409
Total individuals (Female and male)	521,098	394,609
Of total, children <u>under</u> age 5	26,661	28,141

CERF RESULTS

UNICEF:

Essential hygiene materials (toilet paper, detergent, shampoo, soap, baby soap, wet wipes, sanitary napkins, toothbrush and toothpaste, bucket, rubber gloves and disinfectant) were provided as a package to affected families in the 17 municipalities for which it was assessed that the impact of the floods would last the longest. Distribution of the hygiene kits was assured by the Red Cross, having the mandate and distribution network for life-saving supplies. Purchasing of hygiene kits for 7,250 families reaching an estimated 29,000 individuals (with around 5,600 children) was completed by the end of July while distribution by the Red Cross was realized in August².

Maternal and child health, nutrition and hygiene have been disseminated in the form of leaflets for children and adults (60.000), posters (500) and 4 thematic TV-clips for children³. Printed material was distributed through the Red Cross (for further distribution to collective sites and individual households), Republic Institute for Public Health (for further distribution to primary health care centres) and Regional school administration units (for further distribution to pupils) – all in 17 of the most affected municipalities by the end of June. Four thematic TV-clips have been distributed widely through the local media (TV) network and social networks (UNICEF facebook, twitter, youtube) by the end of July. The total of directly reached individuals is 60.000, while an estimated number of indirectly reached individuals are up to 2 times higher.

In partnership with the Centre for Interactive Pedagogy and in coordination with the Save the Children, psychosocial support was provided to a total of 560 children displaced in 6 collective centres from 9th June to 30th September 2014. The support provided presents a continuation of activities initiated immediately after the floods (19th May) in 17 collective centres with around 700 children. Following the return of families to their homes and closure of most of the collective sites, child friendly spaces remained active in 6 collective centres providing daily structured activities to 208 children. The content of work was continuously adjusted to the needs of children having in mind not only their age and gender, but also individual needs. It means that apart from specific

² <https://www.youtube.com/watch?v=xllXmqDRyY4>

³ <https://www.youtube.com/watch?v=XoEhnwe9TBY> (personal hygiene), <https://www.youtube.com/watch?v=tzvHzegroD4> (health protection), <https://www.youtube.com/watch?v=GbHqJBycJg4> (safety after the floods) and <https://www.youtube.com/watch?v=vYQwEJczy0k> (emergency numbers).

activities for preschool and school children, as well as activities for youth, special attention was paid to children requiring additional individual support who were referred to specialized social and health services. The needs of small children (0-3) have been particularly addressed through the counselling of 40 mothers in the areas of health, hygiene and parenting skills. In addition, related supporting activities have been provided to some 120 parents of older children and especially to Romas with a view of strengthening their capacities to claim their rights. Most of the displaced people went back to their homes during the second part of June and the number of collective sites remained stable during July and August (with smaller number of beneficiaries than initially foreseen). So, in addition to providing structured psychosocial support in those collective sites and with a view of ensuring continuity of psychosocial support for those children who got back a total of four public / street events were organized during weekends in July and August in Obrenovac and Lazarevac reaching additional 352 children and youth, but also parents of small children. Direct supporting activities were provided by 50 trained co-workers organized in 10 teams and continuously supported by 10 supervisors. The project was evaluated as contributing to overcoming psychosocial distress among children but also parents. Experience gained and lessons learned has helped developing a framework which would later on act as a basis for designing a guide for providing psychosocial support to children and their parents in emergencies.

FAO

A total of 2,383 household from nine municipalities of Moravicki and Kolubarski district municipality received 320 kg of animal feed of standard quality each, which mixed with locally available hay allowed the beneficiary families to feed 2 heads of their livestock for about 2 months. This assistance was crucial given the scale of damages the families suffered on their assets, lives and livelihoods and their larger needs. Animals are crucial to the rural families in Serbia for basic nutrition elements (e.g. milk, other dairy products and meat) and without the feed the households would have been at even greater risks as they might have been forced to sell their livestock heads at significantly lower price. This would not only threaten the food security of the family, but also leave a large number of women and children without basic daily nutrition. The CERF grant managed to reach out a large number of families. Apart from providing the animal feed, it also managed to provide a psychological support and a sigh of relief to the people in larger needs for housing, food, and medicines, and reassurance of a long-term viability of family farming in Serbia.

UNFPA

UNFPA reached approximately 24,000 women and men, boys and girls. A total of 6,000 RH/dignity kits were provided tailored to meet the needs of entire families. Items were procured locally and distributed to the hardest hit areas in two municipalities - Sabac and Obrenovac. Furthermore, disadvantaged groups such as ethnic minorities and older people received special attention by UNFPA. In cooperation with UNOPS office that was already operating in these municipalities, UNFPA delivered over 300 dignity kits to Roma families in settlements around Belgrade. Additionally, UNFPA delivered dignity kits for older people in homes for older people, both Sabac and Obrenovac. Due to its field presence, Red Cross assisted in the logistics and distribution of supplies to the most vulnerable.

One of the reasons for reaching lower number of beneficiaries than planned is the fact that the majority of the target beneficiaries were no longer in collective centres by the time second and third aid distributions took place. On the other hand, the content of the RH/dignity kits was tailored to the needs of entire families, enabling UNFPA to reach not only women of reproductive age, but also to address the needs of people living in protracted displacement.

IOM

IOM's main focus was in the area of supporting local institutions in implementing services and assistance in reception/temporary accommodation centres and outreach to the most vulnerable families upon return. Regular capturing and maintaining of information on displacement and provision of support services that matched the needs in communal settings were enabled. Site management and coordination systems were improved, and provision of psychosocial support to vulnerable families both upon return to their homes and in the collective centres was provided. Necessary humanitarian assistance was delivered to scattered Roma families in rural or suburban areas in the locations affected by the floods that were not accommodated in the collective centres. For the collective centre coordination and management, the majority of the support was provided in municipalities (Obrenovac, Lazarevac) that had had difficulties in assisting increasing numbers of beneficiaries moved from temporary accommodation in Belgrade and faced with the mid-term displacement. During the field monitoring and visits to the beneficiaries, crucial information was collected and discussed at the coordination meetings and it was especially useful and valuable in order to respond properly to the most urgent needs.

In particular, municipal staff, local youth offices and volunteers (197) from 13 flood affected municipalities were involved in coordination meetings, trainings and workshops (Displacement Tracking Mechanism presented to the local self-governments as

a tool to better coordinate displacement in similar crisis situations, data collection mechanism improved; assessment of the coordination mechanism in the Collective Center Kasarna in Obrenovac carried out and report with the recommendations for better management and coordination of support delivered to designated municipal structures; over 1,500 beneficiaries in Obrenovac and Lazarevac regularly assisted and informed on the available support and humanitarian aid delivery schedule; living conditions in three collective centers improved through the provision of necessary equipment for common rooms, laundry, toilets; 250 Roma families affected by the floods in more remote, rural areas assisted with the return packages; 400 individuals provided with psychosocial support through mobile team visits to the rural areas and through direct counselling/workshops in the collective centres.

UNDP

After the floods, the immediate and most pressing health risks in affected municipalities were due to the polluted or clogged water supply system and clogged sewage system. The lives of 240,296 citizens of Serbia, 10,661 of them children, were directly affected, because they were exposed to dehydration and dangers associated with infectious and communicable diseases, stemming from either clogged sewage systems or polluted water supply system.

UNDP worked on unclogging and cleaning water and sewage systems in 6 affected municipalities through emergency repair and community mobilization, within a total budget of US\$388,143. These municipalities were: Šabac, Ub, Kosjerić, Vladimirci, Smederevska Palanka and Lajkovac. The UNDP interventions in Smederevska Palanka, Vladimirci and Sabac municipalities resulted in abolishment of daily water cuts and provision of regular water supply for over 180,000 inhabitants. At the same time, water supply systems and sewage networks were cleaned and made functional again. The key results are:

- In Šabac submersible water pumps were purchased and cleaning carried out on four large water-wells (depths of 28m and 30m) connected to the main water supply system.
- In the municipality of Ub, the main sewage collector was unclogged in the length of 2km; A further 415 private water-wells were cleaned. Purchased electro-material for the pumps in the water factory enabled Ub municipality to function in the way it was functioning before the floods.
- In Lajkovac, 120 private water-wells were cleaned. Furthermore, 3km of clogged sewage in the very center of this municipality was unclogged thus preventing further clogging of private houses.
- In the municipality of Vladimirci, electro-material for the working of the pumps was procured for the main water-well; as for the sewage system, 3km of sewage was cleaned and unclogged which is next to the residential area which was flooded during the May floods.
- In Kosjerić, reconstruction works had been performed on the town's water purification plant as well as to the adjacent water network.
- In Smederevska Palanka, four motor pipes were procured and five motor-starters for the five municipal wells, ensuring regular water supply for 50,000 people; the 300m long sewage was cleaned and 13 new manholes were constructed, thus preventing any possible future flooding of that area.
- A further 10 water and mud pumps, as well as generators had been provided to the six municipalities for disaster risk reduction and preparedness.

WFP

Within 36 hours of the Government's request for assistance, WFP airlifted life-saving NFIs to Belgrade from the United Nations Humanitarian Response Depot (UNHRD) in Italy, where a strategic stockpile of relief items were prepositioned for immediate response. This was the first assistance provided by the United Nations for the flood response in Serbia. WFP provided support for logistics assessment and coordination with the UNDAC logistics expert and UNCT for airlifting humanitarian cargos to Serbia. Four WFP aircrafts and two commercial cargo airliners loaded with the UNHRD cargo delivered the urgently needed humanitarian assistance to Serbia. WFP delivered 75 water tanks, 24 generators, 3 water purification systems, 3 motor pumps, 10 boats, 12,000 blankets, 2,400 jerry cans, 180 sets of cooking equipment and 4,800 bars of soap.

WFP provided food assistance to 7,000 people affected by the floods in Serbia. Although the assistance was a one-time distribution, it was required in order to ease the food insecurity of those affected and to support the efforts of the Government during the search and rescue operations. Within days of the onset of the emergency, WFP provided a one-time food assistance to 7,000 people affected by the floods with high-energy biscuits (HEBs) of 100 g per person (700 kg HEBs distributed in total) to meet their food needs.

WHO

The CERF grant of US\$ 236,115 provided lifesaving support to address the health care needs of more than 60,000 people affected and displaced by flooding. In addition, about 16,260 health care users living in the areas covered by health care institutions where damaged equipment was replaced will benefit from the interventions in the coming years by using health care services.

The Under-Secretary-General and Emergency Relief Coordinator approved a reprogramming request for the WHO health project on 7 August 2014. The main reasons for reprogramming were due to the fact that the MoH adapted and revised the health needs for the flood affected areas following the completion of the health sector's PDNA in July 2014. The MoH reported as priority reconstruction needs the replacement of equipment and furniture that was seriously damaged and/or destroyed in order to ensure continued access to essential emergency, surgical care and primary health care services. Following the request made by the MoH, WHO decided to respond to their urgent need and purchased 3 portable ventilators, 3 mobile bed-side monitors and 2 mobile electrocardiographs to replace the ones that were damaged in the health facilities in most flood affected areas. This lifesaving equipment will enhance the overall quality of services delivered to the target population. Meanwhile, WHO, on the request of the MoH, cancelled the initially requested 3 Interagency Emergency Health Kits (IEHK) and the Interagency Diarrheal diseases basic kits, as these commodities were no longer considered urgently needed. In addition, CERF funds were used for purchasing 8,000 kg of disinfectants and more than 45,000 pcs of different type of Personal Protective Equipment (PPE), gloves, masks, coveralls with hood AND rubber boots, which were used for safety clearing of the ground in 19 municipalities (including health facilities) 4 covering a territory of 9,191 km² with about 900,000 inhabitants.

The CERF project had included the WHO expert support to the local authorities to address the main challenges in the post floods cleaning efforts, including the recovery of damaged health facilities through technical support during preparation of the PDNA. Moreover, WHO expertise action focused on surveillance and prevention of health risks and control of the outbreak of infectious diseases with special focus on the endemic West Nile Fever, hepatitis A and B, measles, polio, water and food-borne diseases related to poor hygiene and sanitation as well as on assistance to the MoH in health information management in the context of the flooding.

CERF's ADDED VALUE

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

YES PARTIALLY NO

With the CERF funds, UN partner agencies were able to rapidly assist their partner and relevant Ministries and local authorities in clearing the ground from mud, and various other wastes, enabling regular functioning of water and sewage systems in 6 municipalities, provide essential hygiene materials, nutrition and hygiene leaflets, psychological support to children, as well as psychosocial support through mobile team visits to the rural areas and through direct counselling/workshops in the collective centres, humanitarian help to Roma families, timely procurement and restoration of destroyed medical equipment in 6 health care institutions. Above all, the CERF was crucial in the overall efforts to decrease the affected population's exposure to health risks and further loss of lives. CERF funding was very critical for the provision of animal feed for the small farming families. The timely delivery of assistance largely helped these vulnerable families keep the health and nutrition level of their livestock for certain period of time.

b) Did CERF funds help respond to time critical needs⁵?

YES PARTIALLY NO

The CERF-funded activities were able to support responding to critical needs through deployment of rapid response and expert assistance, distribution of personal protective equipment and disinfectants as well as through procurement of life-saving medical

⁴ Obrenovac, Lazarevac, Sid, Sabac, Vladimirci, Loznica, Ljubovija, Koceljeva, Mali Zvornik, Krupanj, Valjevo, Ub, Kosjeric, Bajina Basta, Cacak, Jagodina, Paracin, Svilajnac, Smederevska Palanka

⁵ Time-critical response refers to necessary, rapid and time-limited actions and resources required to minimize additional loss of lives and damage to social and economic assets (e.g. emergency vaccination campaigns, locust control, etc.).

equipment that replaced those destroyed in health care institutions in most flood affected areas. Additionally, the interventions being provision of:

- Basic hygiene packages, the Minimum Initial Services Package
- Animal feeds
- Recreational activities and psychological support
- Necessary equipment for collective centers, return packages
- Water and sewage sanitation activities
- Food assistance

they all responded to the critical needs of flood-affected families.

The CERF funding was approved at the most critical time. UN agencies could immediately address critical gap and needs in agriculture, water and sewage, health etc sectors through various activities which were very instrumental in protecting the livelihoods of the vulnerable families.

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

YES PARTIALLY NO

The quick, visible and good results produced during the implementation of CERF funds definitely helped the resource mobilization from other sources. The agency involved had the good knowledge of what was done in the field and were the additional needs in the area of health, water and sanitation, affected families, children and collective centers needs.

Therefore, the following funds were raised:

- WHO received a donation from the Kingdom of Norway as well as the WHO core funds related to the floods,
- UNDP received BCPR (UNDP funds) for debris removal and capacity development activities; United Arab Emirates fund for construction of 40 houses, and Romanian funds which is pure replication of UNDP-CERF funded activities but in Eastern Serbia which was hit by floods in September 2014.
- FAO managed to mobilize good resources from its own internal resources as well as from other donors, specifically from the European Union to support around 17,000 flood-affected small-scale vulnerable farming families in 24 municipalities.
- UNICEF managed to mobilize its internal core resources, UNICEF National Committees and PSFR as well as from SDC to support over 7 000 the most vulnerable children and their families from affected areas.

d) Did CERF improve coordination amongst the humanitarian community?

YES PARTIALLY NO

The CERF funds have definitely had good impact on coordination. The RC organized bi-weekly and later monthly CERF meetings with UN Agencies which contributed to the coordinated and streamlined work of the UN and synergy with other relief efforts on the ground.

e) If applicable, please highlight other ways in which CERF has added value to the humanitarian response

The coordinated humanitarian response reinforced by the CERF funds enabled the participating UN agencies to demonstrate to the people and the Government of Serbia professionalism and expertise in their individual activity fields, but also the capacity to effectively function as a single team in the most critical situations. The humanitarian response and later recovery activities undertaken with the help of the CERF funds had a pivotal influence on the UNCT's subsequent participation in post-disaster recovery and reconstruction activities as well as the Government's strategic planning in terms of DRR and DRM. The community resilience building outcomes are now a part of the draft UNDAF (2016-2022), with a special focus on the local level.

In that respect, the CERF funds have reinvigorated the concept of early warning, disaster risk reduction and resilience building in the local municipalities. The municipalities have pledged to streamline their work and reduce the risk of future disasters and mainstream DRR in their future development planning. The CERF funds used to support the most vulnerable groups (women, children, Roma, PWDs, refugees, IDPs) during the humanitarian response enabled the UN agencies to advocate special attention to these groups in all future strategic plans and activities at the local and national levels.

V. LESSONS LEARNED

TABLE 6: OBSERVATIONS FOR THE CERF SECRETARIAT

Lessons learned	Suggestion for follow-up/improvement	Responsible entity
Quick and timely response through CERF induced very positive feelings among beneficiaries (in several municipalities beneficiaries informed the UN agencies to be the first ever agencies to come and respond to livelihood issues after the flood, which was highly appreciated.)	Even in middle income countries, saving livelihoods is very important. CERF should always give emphasis on saving livelihoods to eventually save lives.	CERF Secretariat, UNCT
The involvement and collaboration of key actors familiar with the community, in the implementation and follow-up of the response is key to the success of interventions in favour of persons in life-threatening situations.	The adopted participatory approach, constant involvement of stakeholders, partner institutions and other organizations as well as the subsequent extensive dialogue established amongst them ultimately lead to higher impact and sustainability. This should be advised and requested by CERF when applying for CERF funds.	CERF Secretariat, UNCT

TABLE 7: OBSERVATIONS FOR COUNTRY TEAMS

Lessons learned	Suggestion for follow-up/improvement	Responsible entity
<ul style="list-style-type: none"> Cooperation with municipal officials at local level is of great importance that not only puts them on the driving seats, but also helps reduce the operational costs so that maximum benefits can go to the local population. Involvement of municipality officials in selection and finalization of beneficiaries have made them more accountable to the local people. There is a need to establish a good monitoring system for monitoring the use of assistance packages. A proper complain mechanism with a hotline would also be useful at the local level. 	Municipal officials need to be trained on selection of beneficiaries strictly following the selection criteria agreed upon, collection of information, monitoring, receiving complaints and addressing such complaints.	UNCT in collaboration with relevant Government line ministries and municipalities

VI. PROJECT RESULTS

TABLE 8: PROJECT RESULTS			
CERF project information			
1. Agency:	UNICEF	5. CERF grant period:	02.06.2014 – 01.12.2014
2. CERF project code:	14-RR-CEF-088	6. Status of CERF grant:	<input type="checkbox"/> Ongoing
3. Cluster/Sector:	Water and sanitation		<input checked="" type="checkbox"/> Concluded
4. Project title:	Ensuring the protection and well-being of flood-affected children and families		
7. Funding	a. Total project budget:	US\$ 262,685	d. CERF funds forwarded to implementing partners:
	b. Total funding received for the project:	US\$ 262,685	▪ NGO partners and Red Cross/Crescent: US\$ 72,080
	c. Amount received from CERF:	US\$ 262,685	▪ Government Partners: US\$ 0
Results			
8. Total number of <u>direct beneficiaries</u> planned and reached through CERF funding (provide a breakdown by sex and age).			
<i>Direct Beneficiaries</i>	<i>Planned</i>	<i>Reached⁶</i>	<i>In case of significant discrepancy between planned and reached beneficiaries, please describe reasons:</i>
a. Female	42,000	42,000	
b. Male	33,000	33,000	
c. Total individuals (female + male):	75,000	75,000	
d. Of total, children <u>under</u> age 5	13,000	13,000	
9. Original project objective from approved CERF proposal			
<ul style="list-style-type: none"> 28,000 individuals (of whom 5,600 are children) in communities heavily affected by floods in Serbia have their basic hygiene needs met and 75,000 individuals have sufficient knowledge on public and environmental health risks to children related to flooding; 300 most vulnerable children in targeted 10 collective sites in and around Belgrade have access to safe recreation, play and psychosocial support while in temporary displacement. 			
10. Original expected outcomes from approved CERF proposal			
<ul style="list-style-type: none"> Six thousand (6,000) households have access to hygiene kits (Indicator: Number of households benefiting from hygiene kits) 75,000 individuals benefit from child health, nutrition and hygiene messages (Indicator: Number of individuals benefiting from information related to health, nutrition and hygiene) Three hundred (300) children benefit from structured recreational activities and psychosocial support through child friendly spaces in a maximum of collective sites. (Indicator: Number of children benefiting from support provided through CFS) 			
11. Actual outcomes achieved with CERF funds			

⁶ Please note that the numbers presented are an estimation of total number of beneficiaries reached by all interventions. This was done to avoid double counting and that's why these figures do not match figures listed under 11 'Actual outcomes of achieved with CERF funds' (where figures relate to separate interventions while considerable number of beneficiaries benefited from more than one at the same time).

<ul style="list-style-type: none"> • 29,000 individuals (of whom 5,800 are children) in 7,250 households in communities heavily affected by floods have their basic hygiene needs met and up to 120,000 individuals have sufficient knowledge on public and environmental health risks to children related to flooding. • A total of the 560 most vulnerable children benefited from structured recreational activities and psychosocial support through child friendly spaces in 6 collective sites and outings/public events in and around Belgrade. 	
12. In case of significant discrepancy between planned and actual outcomes, please describe reasons:	
<ul style="list-style-type: none"> • Since the number of collective sites has decreased and stabilized faster than expected, the total number of child friendly spaces (6) and total number of children involved in regular daily-run activities (208) was lower than planned. However, with a view of reaching also those children who came back from collective centres to their homes but still were in need of support through recreational activities, during July and August 4 big street events (on Saturdays) were organized in Obrenovac and Lazarevac actively involving additional 352 children. Also, having in mind that those families who remained in collective centres belong to the most vulnerable groups (mainly Roma) psychosocial support has been also extended to involve parents (120) thus additionally contributing to strengthening family resilience. 	
13. Are the CERF funded activities part of a CAP project that applied an IASC Gender Marker code?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
If 'YES', what is the code (0, 1, 2a or 2b): 1 If 'NO' (or if GM score is 1 or 0):	
14. Evaluation: Has this project been evaluated or is an evaluation pending?	EVALUATION CARRIED OUT <input checked="" type="checkbox"/>
Psychosocial support / child friendly spaces evaluated – positive effects in diminishing of psychological distress documented. Full document available in Serbian only.	EVALUATION PENDING <input type="checkbox"/>
	NO EVALUATION PLANNED <input type="checkbox"/>

TABLE 8: PROJECT RESULTS

CERF project information			
1. Agency:	FAO	5. CERF grant period:	02.07.2014 – 01.01.2015
2. CERF project code:	14-RR-FAO-020	6. Status of CERF grant:	<input type="checkbox"/> Ongoing
3. Cluster/Sector:	Agriculture		<input checked="" type="checkbox"/> Concluded
4. Project title:	Emergency assistance for immediate food security through provision of critical livestock inputs in the flood affected areas of districts Macvanski and Kolubarski and the municipality of Obrenovac, Serbia		
7. Funding	a. Total project budget:	US\$ 933,179	d. CERF funds forwarded to implementing partners:
	b. Total funding received for the project:	US\$ 933,179	▪ NGO partners and Red Cross/Crescent: US\$ N/A
	c. Amount received from CERF:	US\$ 290,179	▪ Government Partners: US\$ N/A
Results			
8. Total number of <u>direct beneficiaries</u> planned and reached through CERF funding (provide a breakdown by sex and age).			
<i>Direct Beneficiaries</i>	<i>Planned</i>	<i>Reached</i>	<i>In case of significant discrepancy between planned and reached beneficiaries, please describe reasons:</i>
a. Female	7,000	5,167	At the time of project design, delivery of four different types of livestock feeds was planned as prioritized by the Ministry of Agriculture and Environmental Protection. However, since it took few weeks to get the CERF proposal approved, the priority changed in the municipalities and the Government requested FAO to focus on only cattle feed. The field assessment showed that a standard package of 320kg per family was enough to cover two-month period. Due to the standard and uniform package size as well as reduced total budget of the project, the total number of individuals was slightly less than planned.
b. Male	5,500	4,982	
c. Total individuals (female + male):	12,500	10,149	
d. Of total, children <u>under</u> age 5	1,500	1,132	
9. Original project objective from approved CERF proposal			
<p>The overall objective is to provide time critical emergency livestock assistance for ensuring immediate food and nutrition security livelihoods of the flood-affected vulnerable small scale farmers.</p> <p>In particular, the proposed project activities funded by CERF will provide urgently needed livestock feed to enable 2,500 flood affected small-scale livestock holding beneficiaries families to ensure the survival of essential livestock assets thus protecting an essential source of food and nutrition and income, and to reduce the risk of distress sale of livestock or death.</p>			
10. Original expected outcomes from approved CERF proposal			
Overall Impact: Household level food and nutrition security of flood affected small scale livestock holder families improved.			
11. Actual outcomes achieved with CERF funds			
<p>The project supported 2 383 small-scale farming households directly benefitting 10 149 persons and the beneficiary families were small-scale farming households with 3-7 heads of livestock. Each family received 320 kg of animal feed of standard quality, which mixed with locally available hay allowed the beneficiary families to feed 2 heads of their livestock for about 2 months. This assistance was crucial given the scale of damages the families suffered on their assets, lives and livelihoods and their larger needs. During the delivery of the feed, many beneficiary families in the targeted municipalities expressed that given the tremendous needs in every aspect of their life, every Dinar was to be carefully spent, and the assistance in form of livestock feed was extremely critical</p>			

to keep their livestock alive, which was not only important for saving their livelihoods, but also for ensuring their household level food and nutrition security as well as their income. The project thus was largely able to achieve the project Outcome.	
12. In case of significant discrepancy between planned and actual outcomes, please describe reasons:	
13. Are the CERF funded activities part of a CAP project that applied an IASC Gender Marker code?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
If 'YES', what is the code (0, 1, 2a or 2b): 1 If 'NO' (or if GM score is 1 or 0):	
14. Evaluation: Has this project been evaluated or is an evaluation pending?	EVALUATION CARRIED OUT <input type="checkbox"/>
No evaluation is planned by FAO at this stage. An ex-ante quantified evaluation of the technical, economic and social impact of the project was not possible at this stage. FAO is currently implementing other complementary projects of the same nature, including a EUR 8 million EU-funded project under which an allocation for evaluation has been made. This allocation includes a contribution to the evaluation of the whole emergency program that will be conducted towards the end of the operation by the FAO's Evaluation Service and a provision for an internal evaluation aiming at estimating the main technical, social and economic effects of the programme.	EVALUATION PENDING <input type="checkbox"/>
	NO EVALUATION PLANNED <input checked="" type="checkbox"/>

TABLE 8: PROJECT RESULTS

CERF project information			
1. Agency:	UNFPA	5. CERF grant period:	19.05.2014 - 18.11.2014
2. CERF project code:	14-RR-FPA-027	6. Status of CERF grant:	<input type="checkbox"/> Ongoing
3. Cluster/Sector:	Health		<input checked="" type="checkbox"/> Concluded
4. Project title:	Lifesaving reproductive health and emergency relief to flood affected population in Serbia		
7. Funding	a. Total project budget:	US\$ 114,913	d. CERF funds forwarded to implementing partners:
	b. Total funding received for the project:	US\$ 114,913	▪ NGO partners and Red Cross/Crescent: US\$ 0
	c. Amount received from CERF:	US\$ 114,913	▪ Government Partners: US\$ 0
Results			
8. Total number of <u>direct beneficiaries</u> planned and reached through CERF funding (provide a breakdown by sex and age).			
<i>Direct Beneficiaries</i>	<i>Planned</i>	<i>Reached</i>	<i>In case of significant discrepancy between planned and reached beneficiaries, please describe reasons:</i>
a. Female	46,557	12,300	The majority of target beneficiaries were no longer in collective centres by the time second and third aid distributions took place.
b. Male	37,245	11,700	
c. Total individuals (female + male):	83,802	24,000	
d. Of total, children <u>under</u> age 5	0	At least 480 children under 2 ⁷	At the same time, the content of the RH/dignity kits was tailored to the needs of entire families, enabling UNFPA to reach not only women of reproductive age, but also higher proportion of men and children than planned.
9. Original project objective from approved CERF proposal			
The overall objective of the project is to ensure that severely affected women and girls, men and boys of reproductive age living in flood affected areas are provided with adequate life-saving emergency obstetric care and other emergency reproductive health services by implementing minimum initial service package (MISP).			
10. Original expected outcomes from approved CERF proposal			
Women and girls, men and boys of reproductive age in the affected areas have improved access to lifesaving reproductive health services and information; through quick and immediate implementation of MISP			
Indicators:			
<ul style="list-style-type: none"> • Number of women and couples in the affected areas who have access to RH services (including safe delivery, family planning, STI/HIV prevention and diagnostic, gender based violence, post miscarriage care) <ul style="list-style-type: none"> ○ baseline: 0 (currently the health facilities and services in the flood affected areas cannot provide RH services) ○ target :17 health facilities currently affected by floods to enable such facilities to provide the minimum life-saving RH services including emergency obstetric care required for implementation of MISP through the distribution of emergency reproductive health kits and midwifery medical kits in coordination with WHO and Ministry of Health in Serbia 			
11. Actual outcomes achieved with CERF funds			

⁷ There is no specific data on children under 5, but according to Red Cross assessment, children under 2 constitute approx. 2%

Women and girls, men and boys of all ages in the affected areas have improved access to lifesaving RH/hygiene supplies needed in the acute phase of the disaster, and at a later stage within displaced population by implementing the Minimum Initial Services Package (MISP)	
12. In case of significant discrepancy between planned and actual outcomes, please describe reasons:	
n/a	
13. Are the CERF funded activities part of a CAP project that applied an IASC Gender Marker code?	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
If 'YES', what is the code (0, 1, 2a or 2b): If 'NO' (or if GM score is 1 or 0): RH/dignity kits were tailored to meet the most immediate needs of women, enabling them to restore their dignity and increase mobility during crisis situations.	
14. Evaluation: Has this project been evaluated or is an evaluation pending?	EVALUATION CARRIED OUT <input type="checkbox"/>
Throughout project cycle, UNFPA conduct regular monitoring visits and oversaw the distributions in flood affected areas.	EVALUATION PENDING <input type="checkbox"/>
	NO EVALUATION PLANNED <input checked="" type="checkbox"/>

TABLE 8: PROJECT RESULTS

CERF project information			
1. Agency:	IOM	5. CERF grant period:	20.05.2014 – 19.11.2014
2. CERF project code:	14-RR-IOM-029	6. Status of CERF grant:	<input type="checkbox"/> Ongoing
3. Cluster/Sector:	Camp Management		<input checked="" type="checkbox"/> Concluded
4. Project title:	Emergency Support to the Flood-Affected Population in Central Serbia		
7. Funding	a. Total project budget:	US\$ 1,725,030	d. CERF funds forwarded to implementing partners:
	b. Total funding received for the project:	US\$ 1,608,100	▪ NGO partners and Red Cross/Crescent: US\$ 45,739
	c. Amount received from CERF:	US\$ 116,930	▪ Government Partners: US\$ 0
Results			
8. Total number of <u>direct beneficiaries</u> planned and reached through CERF funding (provide a breakdown by sex and age).			
<i>Direct Beneficiaries</i>	<i>Planned</i>	<i>Reached</i>	<i>In case of significant discrepancy between planned and reached beneficiaries, please describe reasons:</i>
a. Female	3,000	1,800	The reached number of beneficiaries is smaller than the planned one due to the fact that the majority of temporary reception centres at the territory of Belgrade with the highest number of people accommodated immediately after the floods were closed and people started returning to their homes or were moved to the collective centres established in the affected municipalities in the first couple of weeks of CERF implementation. The project managed to provide envisaged support to the families in the collective centres, who experienced protracted displacement.
b. Male	2,000	1,450	
c. Total individuals (female + male):	5,000	3,250	
d. Of total, children <u>under</u> age 5	N/A	N/A	
9. Original project objective from approved CERF proposal			
The objective of this project is to contribute to the efforts of the Government of Serbia and local authorities, to provide lifesaving assistance to displaced vulnerable populations in the flood-affected communities in Central Serbia through provision of displacement tracking mechanism and strengthened capacities for reception/temporary accommodation centres management.			
10. Original expected outcomes from approved CERF proposal			
<ul style="list-style-type: none"> • Staff of the municipal crisis HQs trained for further adaptation and use of the Displacement Tracking Mechanisms; • Displacement Tracking Mechanism available in all official reception/temporary accommodation centres; • Regular reports generated and submitted to relevant institutions and partners on the needs and changes in reception centres; • DTM adapted to local needs and handed over to the government; • Beneficiaries in collective centers benefited from reception/temporary accommodation centres management information and support services, including improved living conditions; • Roma families from the affected areas accommodated in the surrounding Roma settlements will be identified and provided with the most urgent assistance; • Psychosocial support provided to match immediate needs and necessary follow up process of the most vulnerable families within the temporary accommodation. 			

11. Actual outcomes achieved with CERF funds	
<ul style="list-style-type: none"> • 12 coordination meetings/info sessions and 4 three-day workshops organized for a total of 197 municipal staff, local youth offices and Red Cross volunteers from 13 flood affected municipalities. The training sessions and coordination meetings focused on options and procedures of data collection in emergencies, displacement tracking mechanism presented as a tool for better coordination and management in crisis situations, coordination of collective centres, psychosocial approach in emergency interventions; • DTM experts provided necessary information and recommendations for the Displacement Tracking Mechanism to the local self-governments; a model of a questionnaire that can be easily adapted to the specific local context for the profiling of displaced families developed; • Assessment of the coordination mechanism in the Collective Center Kasarna in Obrenovac carried out and a report with the recommendations for better management and coordination of support delivered to designated municipal structures; • Assessment of data collection capacities and available data resources after the damage suffered in almost all relevant local institutions, data base model developed, adapted to the available information sources and analysis of recommendations for the most urgent needs in this area carried out and handed over to the municipal IT sector; • Over 1,500 beneficiaries in Obrenovac and Lazarevac regularly assisted and informed on the available support and humanitarian aid delivery schedule; • Living conditions in three collective centers improved through the provision of necessary equipment for common rooms, laundry, toilets (19 stoves, 5 washing machines for the laundry room, 30 beds, 30 sets of drawers, 450 pillows, 900 towels, 10 toilet/shower batteries, 30 shower paravans, kitchen sets of pots and pans); • 250 Roma families (approx. 1,250 individuals) affected by the floods in more remote, rural areas assisted with return packages; • 400 individuals provided with psychosocial support through mobile team visits to the rural areas and through direct counselling/workshops in the collective centres. Following the supervision sessions of mobile teams, the guide on psychosocial interventions in emergencies was prepared and shared with relevant social structures. 	
12. In case of significant discrepancy between planned and actual outcomes, please describe reasons:	
<ul style="list-style-type: none"> • N/A 	
13. Are the CERF funded activities part of a CAP project that applied an IASC Gender Marker code?	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
If 'YES', what is the code (0, 1, 2a or 2b): If 'NO' (or if GM score is 1 or 0): Gender was mainstreamed in the design of support activities, including psychosocial support.	
14. Evaluation: Has this project been evaluated or is an evaluation pending?	EVALUATION CARRIED OUT <input type="checkbox"/>
	EVALUATION PENDING <input type="checkbox"/>
	NO EVALUATION PLANNED <input checked="" type="checkbox"/>

TABLE 8: PROJECT RESULTS

CERF project information				
1. Agency:	UNDP		5. CERF grant period:	10.06.2014 – 09.12.2014
2. CERF project code:	14-RR-UDP-007		6. Status of CERF grant:	<input type="checkbox"/> Ongoing
3. Cluster/Sector:	Water and sanitation			<input checked="" type="checkbox"/> Concluded
4. Project title:	Facilitating Access to Water and Reducing Threat of Pollution in Seven Flood-Affected Municipalities			
7. Funding	a. Total project budget:	US\$ 388,143	d. CERF funds forwarded to implementing partners:	
	b. Total funding received for the project:	US\$ 388,143	▪ NGO partners and Red Cross/Crescent:	US\$ 0
	c. Amount received from CERF:	US\$ 388,143	▪ Government Partners:	US\$ 0
Results				
8. Total number of <u>direct beneficiaries</u> planned and reached through CERF funding (provide a breakdown by sex and age).				
<i>Direct Beneficiaries</i>	<i>Planned</i>	<i>Reached</i>	<i>In case of significant discrepancy between planned and reached beneficiaries, please describe reasons:</i>	
a. Female	121,537	121,537		
b. Male	118,759	118,759		
c. Total individuals (female + male):	240,296	240,296		
d. Of total, children <u>under</u> age 5	10,661	10,661		
9. Original project objective from approved CERF proposal				
Unclogging and Cleaning water and sewage systems in affected municipalities through emergency repair and community mobilization.				
10. Original expected outcomes from approved CERF proposal				
<ul style="list-style-type: none"> • Health risks associated with clogged water/sewage supply systems in affected municipalities minimized; • Indicators: • 6 Experts and 6 firms contracted for cleaning/unclogging; • 6 water/sewage systems in affected municipalities unclogged/cleaned;; 				
11. Actual outcomes achieved with CERF funds				
<p>The preliminary assessment, conducted in the period from 23 June till 27 June, 2014, enabled the expert team to estimate disaster effects – damages and losses – and impacts in the area of water and sewage as well as the financial requirements to undertake recovery and reconstruction.</p> <p>The methodology for assessment that was utilized involved collecting available information from the Government Office for Reconstruction and Floods Relief and Public Utility Companies (PUCs) from six municipalities, verified and supplemented by field visit by the UNDP assessment team, to estimate the value and extend of water and sewage systems destroyed. Six municipalities and PUCs were included in the preliminary assessment by conducting semi-structured interviews and field checks where flood damage occurred.</p>				

The assessment revealed that these six municipalities experienced substantive flood damage to water supply and sewage infrastructure. Flash floods had caused serious structural damage to pump houses (both water and sewage), water and sewage pipes and in most cases damage was primarily to electrical and mechanical components, pumping machinery, transformers, building foundations, requiring extensive cleaning, de-clogging etc.

UNDP worked on unclogging and cleaning water and sewage systems in 6 flood affected municipalities through the engagement of 6 Public Utility Companies and 6 water and sewage experts and started rehabilitation works as early as July 2014.

- In Šabac submersible water pumps were purchased and cleaning carried out on four large water-wells (depths of 28m and 30m) connected to the main water supply system.
- In the municipality of Ub, the main sewage collector was unclogged in the length of 2km; A further 415 private water-wells had been cleaned; Purchased electro-material for the pumps in the water factory enabled Ub municipality to function in the way it was functioning before the floods.
- In Lajkovac, 120 private water-wells were cleaned; Furthermore, 3km of clogged sewage in the very center of this municipality was unclogged thus preventing further clogging of private houses.
- In the municipality of Vladimirci, electro-material for the working of the pumps was procured for the main water-well; as for the sewage system, 3km of sewage was cleaned and unclogged which is next to the residential area which was flooded during the May floods.
- In Kosjerić, reconstruction works had been performed on the town's water purification plant as well as to the adjacent water network.
- In Smederevska Palanka, four motor pipes were procured and five motor-starters for the five municipal wells, ensuring regular water supply for 50,000 people; the 300m long sewage was cleaned and 13 new manholes were constructed, thus preventing any possible future flooding of that area.
- A further 10 water and mud pumps, as well as generators had been provided to the six municipalities for disaster risk reduction and preparedness.

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

The works on cleaning the water-wells, septic tanks as well as sewage and water systems could only be conducted by the local PUCs, as they have the necessary expertise and the maintenance is in their jurisdiction, thus the engagement of volunteers did not happen. Furthermore, the budgeted amount for CSOs and volunteers was transferred to the contractual budget line (engagement of PUCs) since the costs were higher than initially envisaged.

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

YES NO

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

If 'NO' (or if GM score is 1 or 0): No special attention could be paid to gender since water and sewage systems are for the whole population, therefore, men, women and children were equally reached and supported.

14. Evaluation: Has this project been evaluated or is an evaluation pending?

EVALUATION CARRIED OUT

During the project implementation, 6 engaged consultants conducted monitoring and evaluation of the conducted works together with regular monitoring and evaluation by UNDP Project Manager. Regular updates to UN RC were provided as well.

EVALUATION PENDING

NO EVALUATION PLANNED

TABLE 8: PROJECT RESULTS

TABLE 8: PROJECT RESULTS			
CERF project information			
1. Agency:	WFP	5. CERF grant period:	23.05.2014 – 22.11.2014
2. CERF project code:	14-RR-WFP-038	6. Status of CERF grant:	<input type="checkbox"/> Ongoing
3. Cluster/Sector:	Food		<input checked="" type="checkbox"/> Concluded
4. Project title:	Immediate Response Emergency Operation Response to Serbia Floods 2014		
7. Funding	a. Total project budget:	US\$1,500,000	d. CERF funds forwarded to implementing partners:
	b. Total funding received for the project:	US\$1,500,000	▪ NGO partners and Red Cross/Crescent: US\$ 0
	c. Amount received from CERF:	US\$ 755,313	▪ Government Partners: US\$ 0
Results			
8. Total number of <u>direct beneficiaries</u> planned and reached through CERF funding (provide a breakdown by sex and age).			
<i>Direct Beneficiaries</i>	<i>Planned</i>	<i>Reached</i>	<i>In case of significant discrepancy between planned and reached beneficiaries, please describe reasons:</i>
a. Female	3,600	3,600	
b. Male	3,400	3,400	
c. Total individuals (female + male):	7,000	7,000	
d. Of total, children <u>under</u> age 5	0	0	
9. Original project objective from approved CERF proposal			
<ul style="list-style-type: none"> • support and augment the emergency response capacity of the Government to assist affected populations in food security and logistics • Ensure a timely and uninterrupted delivery of life saving assistance to the affected population. 			
10. Original expected outcomes from approved CERF proposal			
WFP's food assistance and logistics support and coordination has urgently provided life-saving emergency assistance to the flood-affected population in Serbia, especially to about 7,000 people trapped by the floods along the river basins. Although the assistance was a "one-time" round, it was critical at easing the food insecurity situation of those affected by the floods as well as augment the efforts of the Government of Serbia during the search and rescue operations.			
11. Actual outcomes achieved with CERF funds			
<ul style="list-style-type: none"> • WFP within 36 hours airlifted life-saving Non-Food Items (NFIs) to Belgrade from the UN Humanitarian Response Depot (UNHRD) in Brindisi, Italy, where a strategic stockpile of relief items are prepositioned for immediate response. This was the first UN assistance to the flood response. • WFP also provided logistic support and coordination with UNDAC Logistics Expert and United Nations Resident Coordinator's office (UNRC) team on the humanitarian assistance that has been airlifted to Serbia. Four WFP aircrafts and two commercial cargo airliners loaded with the United Nations Humanitarian Response Depot cargo delivered urgently needed humanitarian assistance to Serbia. Totally, WFP delivered non-food items of 75 water tanks, 24 generators, 3 water purification systems, 3 motor pump, 10 boats, 12,000 blanket, 2,400 Jerry can, 180 kitchen set, and 4,800 soap bar. These non-food items were handed to the Government of Serbia through the UNRC team and fully utilized in the search and rescue operations as well as the provision of emergency assistance for vulnerable people. This 			

<p>equipment was also extensively used in further emergency situations since the May floods: September 2014 flash floods in eastern Serbia affecting further 20,000 people in three municipalities (Tekija, Kladovo, Negotin) with widespread destruction of homes and public facilities; and December 2014 ice storm in eastern Serbia (Majdanpek) affecting more than 15,000 people. The equipment was kept maintained by the Emergency Sector of the Ministry of Interior in case of further emergencies in this country.</p> <ul style="list-style-type: none"> WFP successfully provided food assistance to the flood affected people in Serbia as life-saving assistance. In cooperation with the Government of Serbia and the Serbian Red Cross, WFP assisted 7,000 people with HEBs with 100g per person (in total, 700kg) as one time round in a timely manner. The HEBs were handed over to the Serbian Red Cross (31 May 2014), within days of the Government's request for assistance. HEBs were distributed to the population of the worst affected municipality of Obrenovac (in the city itself), two large evacuation centers in Belgrade (Sports hall Arena and Fairgrounds) and a number of smaller ones (storage exit declaration attached). The evacuation centres predominantly held the most vulnerable population: women and children, elderly, Roma, people with disabilities and the economically deprived who mostly those unable to find accommodation elsewhere. At the peak of the crisis there were over 5,500 people in the collective centres. The distribution of these food items were a part of a larger humanitarian food drive. 	
12. In case of significant discrepancy between planned and actual outcomes, please describe reasons:	
13. Are the CERF funded activities part of a CAP project that applied an IASC Gender Marker code?	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
<p>If 'YES', what is the code (0, 1, 2a or 2b): If 'NO' (or if GM score is 1 or 0): Although no gender indicators were planned for this project due to its very short duration, WFP sensitised Serbian Red Cross to ensure gender parity as a key principle during distributions.</p>	
14. Evaluation: Has this project been evaluated or is an evaluation pending?	EVALUATION CARRIED OUT <input type="checkbox"/>
There is no WFP presence in Serbia, and the operation was completed through the partnership of Serbia Red Cross and the Government of Serbia. Hence, WFP did not implement evaluation on our activity.	EVALUATION PENDING <input type="checkbox"/>
	NO EVALUATION PLANNED <input checked="" type="checkbox"/>

TABLE 8: PROJECT RESULTS

CERF project information				
1. Agency:	WHO		5. CERF grant period:	19.05.2014 – 18.11.2014
2. CERF project code:	14-RR-WHO-039		6. Status of CERF grant:	<input type="checkbox"/> Ongoing <input checked="" type="checkbox"/> Concluded
3. Cluster/Sector:	Health			
4. Project title:	Life-saving health interventions, access to essential health services and emergency public health actions for flood affected communities in Serbia			
7. Funding	a. Total project budget:	US\$ 625,000	d. CERF funds forwarded to implementing partners:	
	b. Total funding received for the project:	US\$ 104,000	▪ NGO partners and Red Cross/Crescent:	US\$ 0
	c. Amount received from CERF:	US\$ 236,115	▪ Government Partners:	US\$ 0
Results				
8. Total number of <u>direct beneficiaries</u> planned and reached through CERF funding (provide a breakdown by sex and age).				
<i>Direct Beneficiaries</i>	<i>Planned</i>	<i>Reached</i>	<i>In case of significant discrepancy between planned and reached beneficiaries, please describe reasons:</i>	
a. Female	25,000	32,482	Increase in the number of beneficiaries is a result of higher than expected beneficiaries in need of assistance. A significant proportion of the project resources were used for purchase of disinfectants and personal protective equipment for the purpose of clearing the ground safely in the Sremski, Macvanski, Kolubarski, Zlatiborski, Moravicki, Podunavski, and Pomoravski districts and City of Belgrade district – Obrenovac. In addition, health equipment was procured to replace the equipment within health institutions that was damaged with floods in Obrenovac, Valjevo, Smederevska Palanka, Svilajnac, Sabac and Paracin. Moreover, additionally about 16,260 health care users, living in the territory covered by health care institutions where damaged equipment has been replaced will benefit annually from the interventions in the coming years by using health care services. These patients were not calculated in the total number of final beneficiaries.	
b. Male	25,000	30,959		
c. Total individuals (female + male):	50,000	63,441		
d. Of total, children <u>under</u> age 5	3,000	3,000		
9. Original project objective from approved CERF proposal				
The CERF project aims to restore service delivery of primary and secondary health care facilities, respond to the immediate health risks for water-borne, vector-borne and epidemic-prone diseases to the population of Serbia affected by the floods.				
10. Original expected outcomes from approved CERF proposal				
Overall outcome is that the affected population will receive critical health services through coordination of the health sector and provision of technical advice, expertise and selected medical supplies to the Ministry of Health of SRB in a timely manner.				
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11. Actual outcomes achieved with CERF funds

- During the implementation of the project, 5 WHO technical missions, funded by CERF, were conducted by mobilizing experts from both the Regional office and the WHO headquarters in Geneva:
 - First mission was conducted with the aim to support the Government of Serbia/MoH in the preparation of the PDNA.
 - Second mission was conducted with the purpose of helping the MoH in processing the development of the comprehensive Public Health Needs Assessment.
 - Third mission's goal was to provide technical guidelines to the MoH and IPHS in vector surveillance and control interventions to prevent a West Nile Virus outbreak.
 - Fourth mission was organized to provide technical support by emergency experts from EURO WHO in the field of environmental health risks due to the floods and health sector response to environmental health risks.
 - Fifth mission aimed to assist in the response of the health sector in emergency and recovery activities.In addition to these, one National Project Officer for technical support and supplies management was recruited.
- Instead of purchasing 3 IEHK and one Interagency Diarrheal diseases basic kits, following MoH request and approval for redeployment of funds made by the Under-Secretary-General and Emergency Relief Coordinator dated 7 August 2014, health equipment was purchased to replace the ones that were damaged in the health care facilities in most flood affected areas:
 - 3 portable ventilators for General Hospitals (GH) in Valjevo and Smederevska Palanka, and Primary Health Care Center (PHC) in Svilajnac (it is estimated that around 900 patients will use the services on annual basis in these 3 health care institutions).
 - 3 mobile bed-side monitors for GH in Valjevo, Sabac and Paracin (it is estimated that around 360 patients will use the services on annual basis in these 3 health care institutions).
 - 2 mobile electrocardiographs for PHC in Obrenovac (it is estimated that around 15,000 patients will use the services on annual basis in this health care institution).Four GHs and two PHCs that reported damaged equipment due to floods in five districts upgraded their life-saving capacities through revitalizing normal functions with provided health equipment ensured continued access to essential emergency, surgical care and primary health care services. Based on the patient load that these health care institutions had in previous times, it is estimated that about 16,260 patients will benefit annually. These patients were not calculated in the total number of final beneficiaries.
- 8,000 kg of disinfectant (Sodium dichlorosocyanurate, dihydrate) and following PPE were purchased for the purpose of clearing the ground safely in close collaboration with MoH:
 - 22,600 pairs of chemical resistance gloves.
 - 4,650 pcs of chemical resistant coverall with hood.
 - 22,600 pcs of disposable horizontal fold flat masks.
 - 1,000 pairs work boots.PPEs as listed above, were procured for the Institute for Biocides and Medical Ecology in Belgrade (IBMEB), which was the national institution carrying most of the work regarding clearing during and after the floods. After the withdrawal of the rivers, a lot of mud and various other wastes, including infectious, remained and needed to be cleaned. Of special concern were also environmental hazards like the amount of animal cadavers and disrupted waste management. The clean-up, done by public health professionals from IBMEB and regional IPHS, helped in reducing and preventing the spread of all causes for communicable disease outbreaks of epidemic character that could arise with lack of sanitation. Cleaning, which included clearing of public and private buildings as well as health care institutions was done in Obrenovac, Lazarevac, Sid, Sabac, Vladimirci, Loznica, Ljubovija, Koceljeva, Mali Zvornik, Krupanj, Valjevo, Ub, Kosjeric, BajinaBasta, Cacak, Jagodina, Paracin, Svilajnac, Smederevska Palanka, with a total of about 900,000 inhabitants on a territory of 9,191 km². It is estimated that the clean-up was of benefit to 7% of all inhabitants, approximately 63,441 individuals on 2% of flooded territory (about 183 km²).
- WHO factsheets produced and applied by the MoH in addressing major immediate post flooding health risks:
 - Public Health Risk Assessment: Flood in Serbia, May 2014.
 - Post Disaster Need Assessment –Health Sector Report.
 - European Centre for Disease Prevention and Control (ECDC) – Rapid Risk Assessment, Floods in BiH, Croatia and Serbia: communicable disease risks.
 - Vector surveillance and control interventions to prevent West Nile Virus outbreak.
 - Vaccination recommendation related to the Hepatitis A.
 - Recommendations for the Brochure on the proper cleaning of wells.
 - Communication facts sheets on prevention of vector-and food-borne diseases with focus on mosquito control.
 - Daily Situation Reports over a period of one month.

<ul style="list-style-type: none"> ○ Recommendation for quality of water supplies. ○ Leaflets with public health advice for the affected communities developed jointly with the MoH and IPHS were distributed for community education. The population in the affected areas (women, men, boys and girls) all received timely and efficient support which facilitated prevention of an epidemic outbreak of water borne diseases. <p>In addition, IPHS prepared epidemiological reports to monitor disease trends and detect potential outbreaks, and reported to the MoH and GoS on daily basis.</p>	
12. In case of significant discrepancy between planned and actual outcomes, please describe reasons:	
<p>The Under-Secretary-General and Emergency Relief Coordinator approved a reprogramming request for the WHO health project on 7 August 2014. The main reasons were due to the fact that the MoH had adapted and revised the health needs for the flood affected areas following the completion of the health sector's PDNA in July 2014. The MoH reported as priority reconstruction needs the replacement of equipment and furniture that was seriously damaged and/or destroyed in order to ensure continued access to essential emergency, surgical care and primary health care services. Following the request made by the MoH, WHO decided to respond to their urgent need and purchased 3 portable ventilators, 3 mobile bed-side monitors and 2 mobile electrocardiographs to replace the ones that were damaged in the health facilities in most flood affected areas. That lifesaving equipment will enhance the overall quality of services delivered to the target population. Meanwhile, WHO, upon request by the MoH, had cancelled the initially requested 3 IEHK and the Interagency Diarrheal diseases basic kits, as these commodities were no longer considered urgently needed.</p>	
13. Are the CERF funded activities part of a CAP project that applied an IASC Gender Marker code?	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
<p>If 'YES', what is the code (0, 1, 2a or 2b): If 'NO' (or if GM score is 1 or 0): The project respects gender equity by implementing emergency response activities targeting both men and women.</p>	
14. Evaluation: Has this project been evaluated or is an evaluation pending?	EVALUATION CARRIED OUT <input type="checkbox"/>
<p>No impact evaluation was carried out due to the nature of the project. However, WHO in coordination with the MoH working group for distribution of the humanitarian aid did undertake regular monitoring of the distribution to the end user of all procured equipment and goods. In addition, WHO participated in various flood related coordination meetings organized by the UNCT where progress on project implementation and challenges were brought to the attention of various stakeholders. Additionally, WHO organized lessons learned sessions for Bosnia and Herzegovina, Croatia and Serbia, to assess and reflect the implementation of the emergency response in order to improve future humanitarian preparedness and response intervention. WHO also held a risk communications workshop for countries in the Balkan region.</p>	EVALUATION PENDING <input type="checkbox"/>
	NO EVALUATION PLANNED <input checked="" type="checkbox"/>

ANNEX 1: CERF FUNDS DISBURSED TO IMPLEMENTING PARTNERS

CERF Project Code	Cluster/Sector	Agency	Implementing Partner Name	Sub-grant made under pre-existing partnership agreement	Partner Type	Total CERF Funds Transferred to Partner US\$	Date First Installment Transferred	Start Date of CERF Funded Activities By Partner*	Comments/Remarks
14-RR-IOM-029	Camp Management	IOM	Roma Community Centre 8 April	Yes	NNGO	\$29,239	23-Jun-14	18-Jun-14	Partner pre-financing
14-RR-IOM-029	Camp Management	IOM	Association of Systemic Therapists	Yes	NNGO	\$16,500	23-Jun-14	18-Jun-14	Partner pre-financing
14-RR-CEF-088	Child Protection	UNICEF	Centre for Interactive Pedagogy	Yes	NNGO	\$72,080	23-Jun-14	9-Jun-14	

ANNEX 2: ACRONYMS AND ABBREVIATIONS (Alphabetical)

AAR	After Action Review
BBB	Building Back Better
DIM	Displacement Tracking Mechanisms
ECDC	European Centre for Disease Prevention and Control
GoS	Government of Serbia
HEB	High-Energy Biscuits
IBMEB	Institute for Biocides and Medical Ecology in Belgrade
IEHK	Interagency Emergency Health Kits
MISP	Minimum Initial Services Package
MoH	Ministry of Health
PHC	Primary Health Care
PUC	Public Utility Company
RNA	Rapid Needs Assessment
UNDAC	United Nations Disaster Assessment and Coordination
UNHRD	United Nations Humanitarian Response Depot
WASH	Areas of water, sanitation and hygiene