

## ANNUAL REPORT ON THE USE OF CERF GRANTS COLOMBIA

<b>Country</b>	<b>Colombia</b>
<b>Resident/Humanitarian Coordinator</b>	<b>Bruno Moro</b>
<b>Reporting Period</b>	<b>1 January 2010 – 31 December 2010</b>

### I. Summary of Funding and Beneficiaries

<b>Funding</b>	Total amount required for the humanitarian response:	Approximately US\$ 54,300,000		
	Total amount received for the humanitarian response:	US\$ 8,429,768		
	Breakdown of total country funding received by source:	CERF:	US\$ 6,607,366	
		CHF/HRF COUNTRY LEVEL FUNDS/ERF:	US\$ 1,822,402	
		OTHER: (Bilateral/Multilateral):	US\$ 6,270,000	
	Total amount of CERF funding received from the Rapid Response window:	US\$ 3,640,647		
	Total amount of CERF funding received from the Underfunded window:	US\$ 2,966,719		
	Please provide the breakdown of CERF funds by type of partner:	a. Direct UN agencies/IOM implementation:	US\$ 3,964,420	
		b. Funds forwarded to NGOs for implementation (in Annex, please provide a list of each NGO and amount of CERF funding forwarded):	US\$ 2,642,946	
		c. Funds for Government implementation:	US\$	
<b>d. TOTAL:</b>		<b>US\$ 6,607,366</b>		
<b>Beneficiaries</b>	Total number of individuals affected by the crisis:	Approx. 2,700,000 individuals		
	Total number of individuals reached with CERF funding:	167,925 total individuals		
		Approximately 40 per cent children under 5		
		Approx 51 per cent females		
Geographical areas of implementation:	Departments of: Cauca, Nariño, La Mojana, Depresion Momposina, Cordoba, Choco, Norte de Santander			

## I. Analysis

CERF funding requested in 2010 was justified with the increase of humanitarian needs along the Pacific Coast as a direct consequence of the internal armed conflict, and the quick response to humanitarian needs in the areas most affected by floods after heavy rains caused by La Niña. The CERF underfunded grant projects implemented in the Pacific Coast were determinant in ensuring humanitarian assistance to isolated indigenous and afro-descendant communities, living in hardly accessible locations where armed groups sustain continued pressure and perpetrate attacks against unprotected civilians. Health, nutritional and sanitation conditions were greatly ameliorated for 52,489 persons, in parallel to protection actions to reduce their vulnerability to the conflict (Timbiquí and López de Micay in Cauca, and El Charco in Nariño departments). Emphasis was placed on pregnant and lactating women, as well as on children.

CERF rapid response grant projects were critical to address the needs of 115,000 victims of floods in the most affected rural areas (Caribbean coast, La Mojana, Depresión Momposina, Brazo de Loba (which is part of the Depresión Momposina), and the departments of Nariño, Córdoba, Chocó, Cauca and North of Santander). Reports by the Government Strategy and Response Room (December of 2010) established that 2,155,386 persons were affected by heavy rains in 714 municipalities out of 1,100 of Colombia. It is estimated that about 40 per cent of the total population affected are under the age of 18.

The rainy season is not over yet and it is expected that the number of emergency events and people affected will continue to increase during the first semester of 2011. The overlapping impact of conflict and floods in several parts of the country makes it even more difficult for authorities to reach victims. The CERF-funded actions were therefore critical to complement government-led response efforts by filling response gaps in these areas. Rapid response projects were concentrated in municipalities devastated by floods that left thousands of families displaced.

Escalating violence in these areas is tied to armed groups vying for territorial control. The FARC is increasing their presence in the hilly areas where entire peasant communities are pressured into cultivating and harvesting coca, whereas new groups partly conformed of holdouts of former self-defence blocks, fight to control drug trafficking routes, often through methods as cruel as selectively murdering social leaders to intimidate entire communities. Illegal economies add further complexity to the humanitarian situation and therefore require implementation strategies that build on local capacities to ensure access and sustainability while minimizing hazards for beneficiary communities. The department of Córdoba is a case in point, where actions were implemented through partners with longstanding presence and recognition in the targeted areas like the Pastoral Social.

CERF underfunded projects were carried out in rural municipalities of Timbiquí and López de Micay in the department of Cauca, and El Charco in the department of Nariño, and complemented the humanitarian and emergency response actions that agencies like UNICEF, PAHO and UNHCR are implementing in the municipalities along the Colombian Pacific Coast. The geographic areas were chosen based on the low coverage of clean water (less than 40 per cent of homes with access to clean water) and population without health coverage (up to 65 per cent), as well as the high impact of the armed conflict and internal displacement. CERF resources allowed the coverage to increase from 11 to 25 rural communities in the Pacific Coast; improve coordination with local authorities; and cover gaps in access to basic services for indigenous and afro descendant families. The response was closely coordinated with WFP, PAHO, UNHCR and local authorities.

CERF interventions in the above contexts bare great significance and value. Not only have the funds allowed filling critical response gaps, but it also increased the capacity of UN agencies, international NGO partners and local actors to reach out at-risk communities.

A key to successfully implementing CERF-funded projects is the commitment of leading agencies to articulate their actions throughout the programme cycle (i.e. planning together based on commonly identified needs and priorities, and implementing together to maximize operational capacities). In this sense, the availability of CERF funding was also a pull factor that created an incentive for agencies and NGOs to work together. Should such funding not be available, the actual possibility of implementing joint actions would not have been feasible in a timely and coordinated manner.

Floods caused by the cold wave (La Niña) far surpassed national and local response capacities in a moment of institutional transition (i.e. new government). Looking back, emergency response was tardy

and disarticulated, as well as driven by the urge to make macro investments on the recovery of damaged and destroyed infrastructure, betting on economic recovery rather than on reaching the most affected and vulnerable victims with humanitarian assistance. The Government of Colombia launched a private fundraising campaign and allocated over approximately \$15 billion from the national budget for a period of four years to address the consequences of this emergency that left over 2.2 million directly affected. Of this amount, \$1.3 billion (less than 10 per cent) were destined for humanitarian assistance; \$3 billion were destined for early recovery and \$12.2 billion for reconstruction. This denotes great commitment, as well as fiscal capacity. However, the Public Ministry and the international humanitarian community have serious concerns over the effective transference of funds to the affected areas, most of which lack the technical capacity and human resources to implement actions that can timely tackle humanitarian needs. In fact, the total allocation of \$15 billion, only \$124 million have been transferred to date (15 March), which does not necessarily mean this resources have been invested.

It was clear that the national response system collapsed and the Government had to call on the international community to provide additional support. However, this support was requested mostly in terms of technical assistance and to complement the recovery phase, as well as on overseeing the transparent use of public resources. The Humanitarian Country Team responded by putting together a response plan pledging \$49.3 million. However, the Government refused to launch a Flash Appeal or other resource mobilization efforts fearing that would portray institutional weaknesses and affect the image of Colombia. Nonetheless, the plan was presented to donors locally and to the National Government who welcomed it. The extent of donors and the GoC's support for this plan was unclear.

Field missions of UN agencies and INGOs underlined a lack of articulation among Government entities at the national level, and between Bogota and the regions. As information systems were not integrated, response decisions were not made strategically. To a large extent, those provinces with greater capacity to best channel information to the capital, are the ones obtaining the larger allocations without them necessarily being the worst affected. The HCT therefore made a cross-geographical analysis assessing the amount of resources allocated to affected areas with their transparency index and provided donors with an approximate idea of the risks of transferring large amounts of money to areas characterized by weak governance and corruption. As is the case with CERF allocation decisions, the HCT Flood Response Strategy would seek to support and complement Government efforts by making sure humanitarian aid reaches the most affected populations settled in the most vulnerable, conflict-prone and poorest areas.

While the bulk of victims have not been reached and their needs subsist, the first rain cycle of 2011 threatens to severely aggravate their conditions. According to IDEAM predictions, precipitation should continue and increase in northern and central Colombia, with the possibility of flash flooding, landslides, floods and avalanches. In fact, early rains in 2011 have increased the accumulated toll of affected persons to 2.5 million. Therefore, the HCT response plan should remain as the principal tool for humanitarian response at this stage. In an operational context characterized by a prolonged complex emergency, as well as by the increasing propensity to be affected by extreme weather variability in a massive scale, compounded by institutional reluctance to mobilize emergency response funds, the added value of the CERF is tangible in many respects:

### **Humanitarian financing**

CERF funding in 2010 in Colombia was \$6.6 million. Despite enormous difficulties and limited access to larger funding sources, the HCT implemented CERF projects of \$8.4 million in addition to ongoing programmes and projects funded bilateral contributions and agency-specific emergency funds (grants/loans). CERF rapid response grant projects and ERF projects (\$5.4) were close to 11 per cent of the HCT response plan. The \$3 million CERF underfunded grant to Colombia in 2011 that will be used in Cordoba department, as well as the \$2.2 million from the ERF for 2011 provide continuity to the response started in 2010. While humanitarian financing gaps remain a challenge that neither CERF nor ERF can fill, it is clear that these sources of funding have been useful in reaching the most vulnerable.

### **Visibility of the humanitarian situation**

By addressing the humanitarian needs of often isolated, scattered, vulnerable and forgotten communities, with little or no access to basic services and structural conditions, which suffer from conflict and disasters disproportionate to urban population ensures that the humanitarian crisis remains visible. This is important also in the sense that it allows demonstrating the value added of principled humanitarian action. CERF life-saving criteria, which are similar to the ERF guidelines, ensure that resources are maximized

and that the bulk of the investment goes to victims rather than organizations. CERF and ERF funding also enable humanitarian organizations to leverage public investments. The PAHO and UNICEF projects for health and water and sanitation influenced the Ministry of Social Protection to rethink their models in the remote villages of the Pacific Coast. The local population cannot move to urban centres to receive assistance and , and by shifting the focus to for example finding local water and sanitation solutions, bringing medical staff and medicines by boat to villages, etc they could be supported.

### **Strengthened humanitarian coordination**

Over the years, the HCT has perfected its method to rationalize access to and maximize the use of CERF funding. As earlier mentioned, the availability of CERF funding in a rather financially arid context, is an incentive/pull factor for HCT agencies and INGO partners to coordinate around specific actions.

Decisions on the use of CERF funds are made by the HCT at strategic level and by clusters at the programmatic level. Based on existing information on the emergency, the Humanitarian Coordinator recommends to the HCT how best to allocate the grants, focusing on broad criteria/categories such as geographic and demographic targeting, articulated actions, involvement of INGOs in all phases of the process and priority sectors. After his recommendations are endorsed by the HCT, OCHA coordinates and facilitates the planning process and the preparation of proposals. This includes

- activating local humanitarian teams in the targeted areas to quickly provide updated information and deploy rapid needs assessment missions;
- arrange weekly meetings with the team (leading agencies and NGOs depending on targeted areas and sectors) at the capital level to define activities;
- make inter-agency programmatic and operational arrangements (usually informal agreements on who does what when and where); and
- establish budgetary amounts.

Within two weeks, first drafts based, on needs and broad agreements, are put on the table for revision and discussion. Adjustments are made and proposals are again presented to the HC and the HCT before submission. It is worth highlighting that humanitarian coordination is strengthened when the process shows there are clear existing needs and common objectives and is supported by the availability of funds to tackle those needs and obtain common results. It is also important to note that there are limitations, including insufficient international presence on the ground, not enough operational capacity to address large-scale emergencies and a need to ensure that CERF-funded interventions are strategically articulated to regular programmes.

### **Meeting time critical needs**

Floods in 2010 showed that much work is still needed in terms of prevention and preparedness, but also that the existing response capacities and schema are insufficient. The propositioning of stock (food and NFIs) in the most at-risk areas should be a priority, as well as better contingency planning at the local levels. The CERF and ERF were the main tools for rapid response in 2010. A flexible approach was key because targeted areas and populations mostly affected by floods are also affected by the ongoing armed conflict. These are areas where state and government institutions often have limited or no access. As a result, humanitarian assistance delivered by the government usually comes late or not at all in these areas. This provides an opportunity to the humanitarian community to complement government-led efforts by focusing on the areas/communities where HCT agencies and INGOs can more easily enter.

Summary of Outstanding Results CERF Rapid Response and Underfunded Projects in 2010

Agency	Rapid Response (Implementation ongoing)	Underfunded
UNICEF	<ul style="list-style-type: none"> <li>▪ 20 prioritized communities received health kits</li> <li>▪ 6,500 children has received school kits</li> </ul>	<ul style="list-style-type: none"> <li>▪ 3,109 children under 5 received basic health and nutrition</li> <li>▪ Safe water supply re-established for 12 communities</li> </ul>
UNHCR	N/A	<ul style="list-style-type: none"> <li>▪ Two community protection plans developed</li> <li>▪ Indigenous and Afro-Colombians communities have a community space in all sites with completed centres</li> </ul>
PAHO	<ul style="list-style-type: none"> <li>▪ Immediate Response Teams fully operational in the North of Santander and Chocó</li> <li>▪ 180 households benefited from the installation of rainwater harvesting systems</li> </ul>	<ul style="list-style-type: none"> <li>▪ 196 pregnant women cared for / 214 pregnant women identified. Achievement: 91.58 per cent</li> <li>▪ 2,061 children under five years of age vaccinated / 3,684 susceptible children, 55,94 per cent against the susceptible population estimated by DANE (National Administrative Department of Statistics)</li> </ul>
WFP	<ul style="list-style-type: none"> <li>▪ Food access and availability was improved for 67,377 persons critically affected by flooding in the departments of Bolivar, Cesar, Sucre and Magdalena</li> </ul>	<ul style="list-style-type: none"> <li>▪ 4,112 persons received emergency relief rations for at least 90 days</li> <li>▪ 4,760 primary school children reinitiated /continued school activities and received food rations for at least nine months while situation was normalised</li> </ul>
FAO	<ul style="list-style-type: none"> <li>▪ Rapid allocation of most resistant varieties of seeds such as maize provided in Cordoba, along with a distribution for rapid production of food and seeds for the next sowing season on July 2011</li> <li>▪ By the end of April 2011, at least 90 per cent of families targeted will establish vegetable production plots</li> </ul>	<ul style="list-style-type: none"> <li>▪ A total of 2 575 families were targeted and supported by the project in municipalities of Lopez de Micay (Cauca), Timbiquí (Cauca), El Charco and Tumaco. 100 per cent families have received tools, seeds and materials to restore/recover their agricultural livelihoods during 2010</li> </ul>
IOM	<ul style="list-style-type: none"> <li>▪ 750 families with individual sheltering solutions expected by the end of the project</li> </ul>	N/A

## II. Results

Sector/ Cluster	CERF project number and title	Amount disbursed from CERF (US\$)	Total Project Budget (US\$)	Nr. 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
<b>UNDERFUNDED PROJECTS</b>									
Water, Sanitation, Hygiene, Health, Nutrition	10-CEF-019  UNICEF Protection of children affected by emergencies on the Colombian Pacific Coast	503,328	540,380	<p>Total: 5,950</p> <p>600 pregnant women</p> <p>Girls: 2,906 (49 per cent) girls</p> <p>Women: 3,044(51 per cent)</p> <p>Boys: 3,109 (52 per cent) under five</p> <p>983 (17 per cent) indigenous children and adolescents</p> <p>4,967 (83 per cent) Afro-descendant children and adolescents</p>	<ul style="list-style-type: none"> <li>■ Humanitarian assistance for 5,200 infants, young children and pregnant and lactating women affected by internal displacement in four municipalities on the Colombian Pacific coast (Water, Sanitation, Hygiene, Health and Nutrition)</li> </ul>	<ul style="list-style-type: none"> <li>■ 3,109 children under the age of five received basic health and nutrition care</li> <li>■ Health kits to 2,100 families with children between 0 and 5 years and pregnant women, including de-worming treatment and re-hydration salts</li> <li>■ 3,109 children under 5 yrs and 610 pregnant and lactating women received micronutrients and health and nutrition care</li> <li>■ 1,640 families of prioritized communities received mosquito nets impregnated with insecticide (LLIN)</li> <li>■ Midwives and health community agents of 30 prioritized communities received basic "basket" of medicine for community level treatment of diarrhoea and respiratory diseases in children under five and pregnant women.)</li> <li>■ WASH, 1,640 families benefited with water of good quality and sufficient quantity, and continuity of the gravity-fed systems;</li> <li>■ 12 prioritized communities benefited with the re-establishment of safe water supply systems and received basic sanitation supplies for the adoption of culturally adapted good sanitation and hygiene practices</li> </ul>	<p>CERF resources allowed to increase the coverage from eleven to twenty five rural communities in the Pacific Coast, improve coordination with local authorities and cover gaps in access to basic services for indigenous and afro descendant children</p>	<ul style="list-style-type: none"> <li>■ Monitoring and evaluation plan was included in the implemented partners' proposals. Plans included collecting base line data, source of data, and timeliness of monitoring and use of information</li> <li>■ UNICEF assigned officer and consultant for permanent technical assistance during the implementation and technical committees were carried out to assess the project's progress</li> </ul>	<ul style="list-style-type: none"> <li>■ Special attention was paid to differential assessment of the impact and needs of girls, adolescents, pregnant and lactating women</li> <li>■ Although indigenous girls and women have fewer opportunities to participate, the project focused on achieving a greater participation of them. By the end of the project, a 49 per cent of women participation (89 per cent of the expected goal) was achieved</li> </ul>

Health	<p>10-WHO-019</p> <p>WHO/PAHO Health Access for Vulnerable and at risk Populations in the El Charco Municipality, Nariño, Colombia</p>	566,027	594,590	<p>11,696 persons</p> <p>5,330 women,</p> <p>6,366 men, of which 1,392 are children under five years</p>	<ul style="list-style-type: none"> <li>■ Commitment of local authorities and health providers for the sustainability of the health access model achieved through an official document</li> <li>■ Number of pregnant women attended/ total number of pregnant women identified in the selected communities during the execution of the project.</li> <li>■ Number of children under age five immunized/ total number of children under age five in the selected communities</li> <li>■ Immunization coverage in the selected communities</li> <li>■ Beneficiaries of the project effectively cared for</li> </ul>	<ul style="list-style-type: none"> <li>■ Five technical committees carried out/ five technical committees programmed (Achievement: 100 per cent)</li> <li>■ 196 pregnant women cared for/ 214 pregnant women identified. Achievement: 91.58 per cent, from a risk management perspective</li> <li>■ 2,061 children under five years of age vaccinated/ 3,684 susceptible children: Achievement: 55.94 per cent against the susceptible population estimated by DANE (National Administrative Department of Statistics) 2005.</li> </ul>	<p>CERF funding allowed for the coverage of the basic health needs of the affected by conflict or at-risk populations of El Charco, through a particular Model of Health Provision that permitted the access to communities located in extremely difficult-to-reach areas that had previously little if any real access to health by the operation of Mobile Teams; thus implemented actions represent protection measures</p>	<ul style="list-style-type: none"> <li>■ The field officials provided monthly reports and several verification visits took place in order to secure the smooth execution of the project. Given the security difficulties, mechanisms of implementation were adapted accordingly</li> </ul>	<ul style="list-style-type: none"> <li>■ Gender Equity has been promoted by PAHO-WHO throughout the execution of the project, addressing the specific needs of men and women when implementing the activities. The project benefited a great number of Vulnerable Pregnant women</li> </ul>
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Food security and Nutrition	10-WFP-023 WFP Emergency Food Assistance for confined and blockaded communities and recent IDPs; Mother and child health assistance for nutritional recovery and school feeding in emergencies	720,066	1,800,000	Total individuals 10,730 Female 6,350 Male 4,380 Children under 5 3,020	<ul style="list-style-type: none"> <li>Communities and affected persons have access to a balanced food basket and nutritional supplements to complement their daily kilocalorie requirements</li> <li>Communities that are suffering from the consequences of the conflict and violence and are not being assisted by the Government are given visibility and possibilities to access official assistance</li> <li>3,050 persons receive emergency relief rations for at least 90 days</li> <li>3,680 primary school age children reinitiate /continue school activities and receive food rations for at least nine months while situation is normalised and local authorities take over. (Ten schools)</li> <li>2,160 children under five years of age and 1,840 pregnant and lactating mothers at risk of malnutrition receive health assistance through emergency health centres, a fortified ration during nine months and vitamin and mineral supplements from UNICEF</li> </ul>	<ul style="list-style-type: none"> <li>Together with UN organizations and NGOs present in the area, WFP provided assistance in three modalities: Emergency school feeding, Relief and Mother and Health programmes.</li> <li>With WFP's assistance, local government and national government institutions were mobilised to these communities (Health sector, mayor's offices, ICBF and Acción Social).</li> <li>4,112 persons received emergency relief rations for at least 90 days.</li> <li>4,760 primary school age children reinitiated /continued school activities and received food rations for at least nine months while situation is normalised and local authorities take over (19 schools).</li> <li>951 children under five years of age and 1,171 pregnant and lactating mothers at risk of malnutrition received health assistance through emergency health centres, a fortified ration during nine months and vitamin and mineral supplements from UNICEF</li> </ul>	<p>The presence of various UN agencies on the Pacific Coast supporting different complementary sectors in an integrated approach was an important factor to the support provided to these communities. These actions also provided a visibility of the situation in the communities, that were communicated at the national and international levels</p>	<ul style="list-style-type: none"> <li>A permanent presence of a field monitor in these communities, to provide information, monitoring of actions, support and education.</li> <li>Meetings with local authorities were regularly held to follow-up on their support to actions in health, education and emergency. Meetings with other UN agencies.</li> <li>The use of the Buenaventura Logistics Platform was key to an efficient and rapid support to these communities</li> </ul>	<ul style="list-style-type: none"> <li>Violence affected and displaced primary school age children: displaced afro and indigenous communities: lactating and pregnant women and children under five year of age</li> </ul>



<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Agriculture in emergencies and food security</p>	<p>10-FAO-016</p> <p>FAO Food Security emergency support for Internally Displaced People and vulnerable persons at risk of displacement</p>	<p>518,298</p>	<p>2,000,000</p>	<p>12,875 persons affected by violence and displacement in Cauca and Nariño departments in Colombia.</p> <p>5,120 children</p> <p>6,950 Women</p>	<ul style="list-style-type: none"> <li>■ 2,200 vulnerable families are identified and food security kits defined (community and individual kits)</li> <li>■ Implement school orchards in at least ten schools in López de Micay and Charco regions</li> <li>■ Organize at least two barter and small-suppliers fairs in Cauca and Nariño</li> <li>■ At least 90 per cent of targeted vulnerable families will obtain food security kits<sup>1</sup></li> <li>■ At least 80 per cent of farmers are trained and apply food production techniques</li> <li>■ Community Risk Reduction management approach will be adopted in all interventions, in order to enable communities to increase their capacity to respond to emergencies such as massive displacements (providing food to displaced communities and seeds to quickly restart productive activities)</li> <li>■ At least 80 per cent of beneficiary households are able to produce food for their own consumption (food diversity measurement)</li> </ul>	<ul style="list-style-type: none"> <li>■ 2,575 families were targeted and supported by the project in municipalities of Lopez de Micay (Cauca), Timbiquí (Cauca), El Charco and Tumaco. 100 per cent families have received tools, seeds and materials to restore/recover their agricultural livelihoods during 2010</li> <li>■ The security situation in the region, especially in the rural areas of El Charco (Nariño) has produced important constraints in targeting the planned families in el Charco. For this reason and after exploring different ways to approach communities, FAO consulted with OCHA and participating agencies in the underfunded round about the possibility to include families affected by violence and food insecurity in rural areas of Tumaco, near the municipality of El Charco and has proceeded to support 1,080 displaced families or families in risk of displacement</li> <li>■ All communities have received a complete training session on food production, storage, disease control and mechanisms to overcome better the future shocks (new displacements, natural disasters, etc)</li> <li>■ In agreement with the international NGO Diakonien Katastrophenhilfe, at least four seeds and animal fairs were organized with indigenous and Afro-Colombian families in López de Micay and Timbiquí municipalities. Likewise, 11 community plots were installed to produce seeds and to train communities in food production techniques</li> <li>■ The food diversity of households have shown advances, creating more option in the consumption of protein (vegetal and animal) and generating savings for the most deprived communities, which were dependent on food assistance before FAO/CERF underfunded supported intervention</li> </ul>	<p>The availability of CERF funds from the Underfunded Window in the Pacific region in Colombia has been key in order to cover the most urgent needs of targeted beneficiaries</p> <p>The efficient availability of funds has made possible the purchase and pre-positioning of good quality materials and technical assistance in the most deprived rural areas</p> <p>It is important that those resources continue to be mobilized in Colombia: the increase of humanitarian needs in the Pacific region is huge, and funds from CERF' Underfunded Window constitutes the main source of support in several areas</p>	<ul style="list-style-type: none"> <li>■ Extensive work in the setup of technical assistance and social mapping has been conducted by FAO staff in the regions in order to provide a technical package according with family' needs</li> <li>■ FAO has enhanced its local staff in order to provide technical assistance for local institutions, communities and families in food production techniques. Each community is being visited at least eight times during the intervention period</li> <li>■ FAO implemented two field partnership alliances with an international NGO in Cauca (Diakonien Katastrophenhilfe) to coordinate actions with relevant stakeholders such as UNHCR and WFP to support community-based organizations, especially indigenous groups</li> </ul>	<ul style="list-style-type: none"> <li>■ The project created a special mechanism to support women organizations and has promoted training activities in social rights through agreement with UNFPA and WFP</li> <li>■ Special efforts have been made to involve indigenous communities in design of the intervention and its sustainability using traditional knowledge and practices</li> </ul>
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<sup>1</sup> Report on the indicator outstanding. Waiting for response from participating agency August 2011

Protection	<p>10-HCR-013</p> <p>UNHCR Protection response in the Departments of Cauca and Nariño, with emphasis on humanitarian infrastructure, strengthening of community organizations and response to SGBV</p>	659,000	1,100,000	<p>12.600 Colombian IDPs and people at risk of displacement.</p> <p>2,000 children</p> <p>6,300 women</p>	<ul style="list-style-type: none"> <li>■ 5 community centres built</li> <li>■ 1 protection strategy for each centre agreed</li> <li>■ 1 support plan for each centre approved, defining management and protection activities</li> <li>■ 2 community protection plans developed</li> <li>■ Indigenous and Afro-Colombians communities have a community space</li> <li>■ Indigenous and Afro-Colombian communities have tools and skills for durable solutions</li> <li>■ Participatory assessments completed</li> <li>■ SGBV response Action Plans elaborated (Cauca), in coordination with UNFPA and UNIFEM</li> <li>■ SGBV response protocols revised, socialized and implemented (Nariño), in coordination with UNFPA and UNIFEM</li> </ul>	<ul style="list-style-type: none"> <li>■ Four Community centres built. One in the Municipality of El Charco, Nariño, could not be completed because of security problems related to worsening of the armed conflict locally. Completion pending.)</li> <li>■ Protection strategies for all completed centres agreed.</li> <li>■ Support Plans for all completed centres approved.</li> <li>■ 2 community protection plans developed</li> <li>■ Indigenous and Afro-Colombians communities have a community space in all sites with completed centres.</li> <li>■ Indigenous and Afro-Colombian communities have tools and skills for durable solutions (One restoration plan in Timbiquí and one return plan in López de Micay elaborated, activities still pending in El Charco because of security problems).</li> <li>■ Participatory assessments completed</li> <li>■ Follow-up on SGBV response Action Plans ongoing (Cauca)</li> <li>■ Revision and implementation of El Charco protocol pending because of security situation (Nariño)</li> </ul>	<p>The allocation of CERF additional funds allowed to expand and consolidate UNHCR presence and projects in the municipalities</p>	<ul style="list-style-type: none"> <li>■ UNHCR carried our regular monitoring visits and maintained constant planning and operational coordination with implementing partners.</li> </ul>	<ul style="list-style-type: none"> <li>■ All activities where implemented with differential approach to the different needs of women, children, men, elderly and people with disabilities (UNHCR AGDM approach)</li> <li>■ With respect to SGBV response Action Plans and protocols, UNHCR support work was specifically intended for the benefit of women and girls</li> </ul>
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CERF RAPID RESPONSE PROJECTS

<p>Water and Sanitation, Health, Nutrition, Education in Emergencies and Child Protection</p>	<p>10-CEF-068  UNICEF Integrated Response to ensure the Survival, Education in Emergencies and Protection of the Children and Families Most Affected by the Floods in La Mojana Region of Colombia.</p>	<p>853,125</p>	<p>1,199,856</p>	<p>25,495; 7,397 children  356 pregnant and lactating women.  3,662 (49.5%) girls &lt; 12 yrs; 3,735 (50.5%) Boys &lt; 12 yrs; 897 (12%) under 5 years  <i>Although the initial target was 30,236, the numbers above correspond to the beneficiaries that were actually reached</i></p>	<ul style="list-style-type: none"> <li>■ Full protection of 7,560 boys, girls, and women affected by the flooding emergency in Colombia through access to basic utilities and services (education in emergencies, water, sanitation, hygiene, health and nutrition), and strengthening of their protective environments</li> </ul>	<ul style="list-style-type: none"> <li>■ 20 prioritized communities received health kits including de-worming treatment and re-hydration salts for families with children between 0 and 5 years and pregnant and lactating women</li> <li>■ 897 children under the age of five and 356 pregnant and lactating women received micronutrients and basic health and nutrition care</li> <li>■ 2,500 families of prioritized communities received mosquito nets impregnated with insecticide (LLIN)</li> <li>■ 6,500 children has received school kits,</li> <li>■ 3,200 children between 5 and 12 years have had access to temporary schools, school-in-a box, recreational kits, water of good quality and sanitation services, education in hygiene and hygiene kits and had access to child-friendly spaces</li> <li>■ 1,200 children and adolescents has received psychosocial support based on the <i>Return to Happiness</i> Strategy</li> <li>■ 1,400 prioritized families has had access to safe water (filters and education)</li> <li>■ Five prioritized communities benefited with the re-establishment of safe water supply systems and received basic sanitation supplies for the adoption of culturally adapted good sanitation and hygiene practices</li> </ul>	<p>The CERF funding has helped to meet time critical needs of children in the areas of Health and Nutrition; Water, Sanitation and Hygiene, Education in Emergencies and Child Protection</p>	<ul style="list-style-type: none"> <li>■ Monitoring and evaluation plan was included in the implemented partners' proposals. Plans included collecting base line data, source of data, and timeliness of monitoring and use of information</li> <li>■ UNICEF assigned two officers and one consultant for permanent technical assistance during the implementation and technical committees</li> </ul>	<ul style="list-style-type: none"> <li>■ Special attention was paid to differential assessment of the impact and needs of girls, adolescents, pregnant and lactating women</li> <li>■ The participation of girls in all project activities with a special emphasis in indigenous communities was promoted</li> </ul>
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Health	<p>10-WHO-079</p> <p>WHO/PAHO Support to emergency response in order to cover basic health, water and sanitation needs</p>	597,667	3,500,000	<p>5.000 persons</p> <p>2,600 women</p> <p>2,400 men,</p> <p>of which 500 are children under five years of age</p>	<ul style="list-style-type: none"> <li>■ Basic medication kits and medical supplies for emergency medical care purchased and distributed</li> <li>■ Immediate Response Teams- IRT operating in Nariño, Chocó, and north of Santander</li> <li>■ Epidemiological Surveillance activated at the Institutional level</li> <li>■ Health Leaders and communitarian agents trained in Community- based Epidemiological Surveillance</li> <li>■ Community- based Epidemiological Surveillance activated</li> <li>■ Kits for the management of dehydration and acute respiratory diseases (In Colombia: UROCs) purchased and distributed</li> <li>■ Situation reports permanently compiled and updated</li> <li>■ National Crisis Room at the Ministry of Social protection functioning and generating data</li> <li>■ Technical coordination of actions related to water and sanitation</li> <li>■ Rainwater Harvesting systems installed/improved</li> <li>■ Water home filters delivered to the affected communities</li> <li>■ Training in healthy homes strategy carried out</li> </ul>	<ul style="list-style-type: none"> <li>■ 50 Basic Medication kits were purchased and distributed</li> <li>■ Immediate Response Teams were fully operational in the North of Santander and Chocó. They effectively assessed health damages and needs resulting from the flooding and updated Epidemiological Profiles of affected populations.</li> <li>■ Epidemiological Surveillance system at the institutional level was activated and strengthened through training workshops for the personnel of local health authorities and technical consultants.</li> <li>■ 100 Health Leaders and communitarian agents have been trained in Community- based Epidemiological Surveillance</li> <li>■ Capacity building interventions were carried out at the community level to strengthen the reporting skills of the local institutions and personnel.</li> <li>■ 20 UROCs were purchased and distributed. Additional training was provided to ensure the proper use of the UROC's.</li> <li>■ 5 Situation reports were issued</li> <li>■ 2 Epidemiologists and 1 Systems Engineer were hired to support the operation of the National Crisis Room. The National Crisis Room was fully functional and generated updated data on the health impact of the rainy season</li> <li>■ A Consultant was hired to facilitate coordination activities. Technical report on the implementation of water and sanitation interventions is under construction</li> <li>■ 180 households benefited from the installation of rainwater harvesting systems (coverage of 20 per cent of the target population)</li> <li>■ 220 water home filters were delivered to the affected populations and are functioning</li> <li>■ 70 people were trained in the healthy homes strategy. The rest of the trainings are already programmed for the remaining implementation period. The total number of families that effectively implement Healthy Homes Strategy actions will be defined at the end</li> </ul>	<p>CERF funding allowed for the interventions of the immediate response which helped to assess needs in affected communities, thus allowing to provide life saving assistance</p>	<ul style="list-style-type: none"> <li>■ Monthly reports were provided by the field officials and several verification visits took place in order to secure the smooth execution of the project</li> </ul>	<ul style="list-style-type: none"> <li>■ Gender Equity has been promoted by PAHO-WHO throughout the execution of the project, addressing the specific needs of men and women when implementing the activities</li> </ul>
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Food security and nutrition	<p>10-WFP-082</p> <p>WFP Emergency food assistance to persons affected by floods and violence in the departments of Bolivar, Cesar, Sucre and Magdalena</p>	1,000,000	5,000,000	<p>38,615 women</p> <p>26,835 men</p> <p>18,326 children under 5</p>	<ul style="list-style-type: none"> <li>■ Food security situation of 65,450 persons supported during three months.</li> <li>■ Food access and availability improved for 65,450 persons critically affected by flooding.</li> <li>■ The targeted population will receive food rations for 40 days to complement their daily nutritional requirements, while they restart their livelihoods and productive cycle.</li> <li>■ Number of persons in the targeted municipalities that receive WFP food rations (with ethnic, sex and age desegregation) over total planned.</li> <li>■ Number of communities supported in rural areas (70 per cent).</li> <li>■ More than 55 per cent of beneficiaries are women and girls.</li> <li>■ Percentage of communities jointly supported by the UNETT team activities</li> </ul>	<ul style="list-style-type: none"> <li>■ The project is on-going as activities started in December 2010<sup>2</sup>. Preliminary results show that the food security situation of 67,377 persons was supported during 40 days.</li> <li>■ Food access and availability was improved for 67,377 persons critically affected by flooding in the departments of Bolivar, Cesar, Sucre and Magdalena. WFP emergency assistance reached isolated and difficult to access rural communities that were hard hit by the floods. WFP continues distributing the food assistance and the distributions will finish on March.</li> <li>■ Food rations distributed to beneficiaries consisted of a package that lasted 40 days.</li> <li>■ 67,377 persons in the targeted municipalities that receive WFP food rations (distributions will finish on March)</li> <li>■ 2,375 indigenous beneficiaries of food assistance</li> <li>■ 15,287 women assisted (23 per cent)</li> <li>■ 17,849 men assisted (26 per cent)</li> <li>■ 15,214 girls assisted (23 per cent)</li> <li>■ 19,027 boys assisted (28 per cent)</li> <li>■ Number of communities supported in rural areas (100 per cent).</li> <li>■ More than 46 per cent of beneficiaries are women and girls.</li> </ul>	<p>The availability of CERF funding allowed for rapid targeting and assistance to the most affected and isolated communities in the rural areas of the selected departments</p> <p>Excellent levels of coordination with local authorities were also an important factor in these actions</p>	<ul style="list-style-type: none"> <li>■ The presences of a field monitor providing support in the targeting, implementation and monitoring activities. WFP staff was present in all distribution sites. Weekly meetings with UN agencies and local authorities.</li> <li>■ Weekly meetings with implementing partners</li> </ul>	<ul style="list-style-type: none"> <li>■ Groups receiving assistance were isolated rural communities that were not receiving official assistance. Special attention was given to women</li> </ul>
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<sup>2</sup> Report on the project to be submitted in the RC/HC report 2011 August 2011

Agriculture in emergencies and food security	<p>10-FAO-052</p> <p>FAO Emergency assistance for immediate food security through provision of critical agricultural inputs and livestock in Cordoba and Chocó departments</p>	490,396	3,000,000	<p>11,000 persons affected by recent floods and rains in Cordoba and Chocó departments in Colombia.</p> <p>4,950 children</p> <p>6,050 women</p>	<ul style="list-style-type: none"> <li>■ 90 per cent of the 2,200 targeted families are able to restore their small plots and animal rearing activities, increasing the possibility to meet their basic food needs;</li> <li>■ At least 70 per cent of beneficiary families are able to produce food for their own consumption and reduce their household food expenses or food assistance dependence; and</li> <li>■ At least 90 per cent of households establish vegetable production plots within one month from the provision of the goods by FAO, on a minimum surface of 1,000 square metres</li> </ul>	<ul style="list-style-type: none"> <li>■ Nearly 2,200 families have been identified by FAO staff in Cordoba (1,200) and Chocó (1,100) in close partnership with international NGOs (such as OXFAM Great Britain in Cordoba) and local government institutions such as CORPOICA, ICA and municipal agricultural secretariats, using certain vulnerability criteria for targeting.</li> <li>■ All targeted communities have been involved in the intervention design, using the technical assistance from FAO and partners to enhance their capacity to overcome new shocks in the upcoming rainy season of April 2011.</li> <li>■ Rapid allocation of most resistant varieties of seeds (such as maize V.144 provided by CORPOICA in Cordoba) has been conducted along with a distribution for rapid production of food and seeds for the next sowing season on July 2011.</li> <li>■ Deliveries of seeds, tools and materials are ongoing in partnership with OXFAM GB (Int. NGO in Cordoba) and COCOMACIA (in Quibdó). All materials have been included as part of community and familiar modules which aim to provide households with productive capacity and preparation for future shocks.</li> <li>■ By the end of April 2011<sup>3</sup>, at least 90 per cent of families targeted will establish vegetable production plots with technical assistance from FAO in Cordoba and Chocó.</li> </ul>	<p>The allocation of CERF Rapid Response Funds enabled FAO to design a rapid intervention in the most vulnerable communities of Chocó in order to facilitate the rapid rehabilitation of production capacities of families most affected and overcome the dependence on food assistance.</p> <p>The efficient availability of funds has made possible the purchase and preposition of good quality materials and technical assistance in the most deprived rural areas</p>	<ul style="list-style-type: none"> <li>■ Extensive work on technical setup and social mapping has been conducted by FAO staff in the region in order to develop a technical assistant package according with family' needs after the rainy season. These processes constitute a "navigation map" for agreements and targeting process</li> <li>■ FAO has enhanced its local staff in order to provide technical assistance for local institutions, communities and families in food production techniques. Each community is being visited at least three times during the intervention period</li> <li>■ FAO has implemented two field partnership alliances with an international NGO in Cordoba (OXFAM Great Britain) and national Community Based organization COCOMACIA in Chocó in order to provide closer monitoring and technical support to families and local institutions</li> </ul>	<ul style="list-style-type: none"> <li>■ The project is trying to support households headed by women and those with young children and elderly</li> <li>■ The small gardens and plots have been prioritized by women and the project aims to promote the rapid production of vegetables, key for family nutrition</li> </ul>
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<sup>3</sup> Report on the project to be submitted in the RC/HC report 2011 August 2011

Shelter	<p>10-IOM-034</p> <p>IOM Construction of single family shelters</p>	699,459	699,459	3,750 persons (9,370 families)	<ul style="list-style-type: none"> <li>■ Two (2) municipalities with family solutions of temporary shelters in order to face emergency necessities</li> <li>■ At least 750 families with individual sheltering solutions.</li> <li>■ Reduction of the diseases transmitted by vectors (flies, mosquitoes, lice, etc.)</li> <li>■ Increase of nutritional conditions for breastfeeding babies.</li> <li>■ Prevention of recruitment into illegal armed groups for children and youth of the affected families.</li> <li>■ Delivery of 750 non- food items</li> </ul>	<ul style="list-style-type: none"> <li>■ Project is currently being implemented</li> </ul>	It allows families in the rural areas to count on safe and dignified shelter allowing them to live adequately throughout the flood seasons	<ul style="list-style-type: none"> <li>■ Field visits are done in order to verify with local authorities the census taken of the beneficiary families. The benefited families are visited and verification is done of the materials that each family should receive for a single-family shelter. The families are visited during the building phase to ensure proper technical construction.</li> </ul>	<ul style="list-style-type: none"> <li>■ The shelters include a nuclear family consisting of the father, mother and their children</li> </ul>
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## **Annex 1: Acronyms and Abbreviations**

AGDM	Age, Gender, Diversity Mainstreaming Approach
CERF	Central Emergency Response Fund
DANE	National Administrative Department of Statistics
ERF	Emergency Response Fund
FAO	Food and Agriculture Organisation
GoC	Government of Colombia
GSRR	Government Strategy and Response Room
HC	Humanitarian Coordinator
HCR	Humanitarian Country Team
IDEAM	Instituto de Hidrológica, Meteorología y Estudios Ambientales de Colombia
INGO	International Governmental Organisation
IOM	International Organisation for Migration
NGO	non -governmental organisation
OCHA	Office of Coordination of Humanitarian Affairs
PAHO	Pan American Health Organization
UNETT	United Nations Emergency Technical Team
UNIFEM	United Nations Development Fund for Women
UNHCR	United Nations High Commission for Refugees
UNFPA	United Nations Development Programme (UNDP)
UNICEF	United Nations Children’s Fund
WASH	Water Sanitation and Hygiene
WFP	World Food Programme
WHO	World Health Organisation