

ANNUAL REPORT ON THE USE OF CERF GRANTS GUATEMALA

Country	Guatemala
Resident/Humanitarian Coordinator	René Mauricio Valdés
Reporting Period	May 2010 to March 2011

I. Summary of Funding and Beneficiaries

Funding	Total amount required for the humanitarian response:	US\$ 16,701,505		
	Total amount received for the humanitarian response:	US\$ 8,103,006 (as of 17 February 2011)		
	Breakdown of total country funding received by source:	CERF:	US\$ ¹ 3,376,068	
		CHF/HRF COUNTRY LEVEL FUNDS:		
		OTHER: (Bilateral/Multilateral)	US\$ 4,726,938	
	Total amount of CERF funding received from the Rapid Response window:	US\$ 3,376,068		
	Total amount of CERF funding received from the Underfunded window:	US\$		
	Please provide the breakdown of CERF funds by type of partner:	a. Direct UN agencies/IOM implementation:	US\$ 2,542,978	
		b. Funds forwarded to NGOs for implementation (in Annex, please provide a list of each NGO and amount of CERF funding forwarded):	US\$ 833,089	
		c. Funds for Government implementation:	US\$	
d. TOTAL:		US\$ 3,376,068		
Beneficiaries	Total number of individuals affected by the crisis:	470812 individuals ²		
	Total number of individuals reached with CERF funding ³ :	651087 total individuals		
		81286 children under 5		
		160279 females		
Geographical areas of implementation:	All 22 departments			

¹ Please note, 2009 Food Insecurity Project 09-FAO-031 requested a no-cost extension through 13 February 2010 and 09-WHO-054 requested the same through 8 February 2010. These two are included in 2010 annual report's table, but not in financial summary or cluster analysis.

² ECLAC's report, as of 30 June 2010

³ Individuals, children and females reached by UNFPA's health project are not included due to the consideration of indirect beneficiaries.

II. Analysis

The first tropical storm of the 2010 Pacific hurricane season, Agatha, made landfall on the Pacific Coast of Guatemala on 29 May, dumping more than 426 mm of rain in 24 hours, affecting 21 of the 22 departments of the country, a phenomenon not registered since 1948. Agatha's search, rescue and humanitarian operations were limited and delayed by the closing of the international airport after the eruption of the Pacaya volcano on 27 May. Additionally, the volcanic ash aggravated the situation and damaged the water drainage system, the streets, and blocked access to main roads and bridges. Several rivers, including the country's longest river, the Motagua, topped their banks, causing some 280 flood-related events and leaving many communities severely affected and isolated.

The overall situation was exacerbated by the food security and acute malnutrition emergency, which had begun in September 2008. The same month, the Central Emergency Response Fund (CERF) had allocated US\$5,000,000 for the prolonged drought because of El Niño phenomenon. Furthermore, an international appeal for approximately \$34 million was launched in March 2009.

On 29 May 2010, the President of the Republic of Guatemala declared the State of National Calamity (Gubernatorial Decree 15-2010). Two days later, the Government appealed to the international community with a list of immediate needs. An emergency cash grant totalling \$50,000 was requested and approved as an immediate response. At the same time, the United Nations agencies, funds and programmes responded within their mandate to the disasters and mobilised resources from their regular emergency funds to support life-saving operations in coordination with local counterparts. A CERF application was submitted on 8 June for \$3,376,068. On 16 June, a \$15.5 million appeal for international assistance was launched. By then, 166 people had been reported dead, 105 were missing and 226,600 were affected.

Because of the emergencies, floods and landslides that followed government counterparts, donors, UN agencies and the Humanitarian Network launched a revised Flash Appeal of \$16 million in September. By February 2011, total contributions, including from the CERF, reached almost \$7.7 million and accounted for 46 per cent of the revised requirements.

The National Coordinator for Emergency Disaster Reduction (CONRED) assessed the primary and humanitarian needs as a result of Agatha to determine the areas of intervention and developed an action plan to address the needs. In June, a Post Disaster Needs Assessment was conducted by the Economic Commission for Latin America and the Caribbean (ECLAC) and was later joined by Government institutions, United Nations agencies, the World Bank and the Inter-American Development Bank. The report concluded that the infrastructure, housing and education had suffered the greatest destruction while the environment and agricultural sub-sectors suffered the highest losses. The same report estimated that 470,812 people had been affected by the disasters. Economic loss was set at \$982 millions (2.6 per cent of GDP). Further assessments were necessary to analyze the interventions as storms continued over the rainy season.

Under the leadership of the Resident Coordinator, the United Nations agencies, funds and programmes in coordination with the Government of Guatemala and the humanitarian network supported these first actions. The affected population could be immediately assisted because CERF funding was available quickly. These efforts were carried out within a humanitarian assistance framework with a focus on life-saving operations. An action plan was formulated prioritizing the sectors of agriculture, food, health, shelter and protection and water, sanitation and hygiene.

Agriculture

Cluster Lead: Food and Agriculture Organization (FAO)

- Immediate assistance to restore food production and livelihoods of the most vulnerable families was conducted in communities situated in the basins of Motagua and Polochic's rivers (Department of Alta Verapaz and Izabal), reaching over 22,110 individuals (9,210 more than originally planned due to the optimization of economic resources for the purchase of agricultural inputs and favourable pricing related to wholesale).
- Main achievements included:
 - the establishment of 945 hectares of crops, cultivated by 2,100 infra and subsistence farmers;

- the provision of technical assistance on issues such as disease and pest control, fertilizer use and management; and
- the implementation of training activities in all four municipalities attended through the project to ensure the harvest of over 3,500 metric tons of maize and their respective post-harvest management in coordination with representatives of the local offices of the Ministry of Agriculture, Livestock and Food (MAGA).
- Backyard component included in the project achieved:
 - the establishment of 1,200 gardens, with an average area of 50 m²;
 - the promotion of women's involvement as these activities were carried out by women; and
 - the use of vegetables both for personal consumption and community-level sale.
- Similarly, livestock component allowed establishing 1,200 shelters for poultry, by the provision of materials such as mesh, livestock kits and dual-purpose hens.
- Small income generation activity was activated, thus supporting the next production cycle.

Food

Cluster Lead: World Food Programme (WFP)

- Food cluster lead estimated an initial caseload of 47,500 people (9,500 families) to be covered of which 12,000 people (2,400 families) were taking refuge in shelters. However, as the emergency unfolded, the number of people in need of food assistance increased from 9,500 to 24,331 families. Modifications to the food ration and logistics optimisation ensured that a maximum of the vulnerable population were reached efficiently.
- Under CERF funding, WFP provided 1,538.91 metric tons of food assistance to 24,331 families (121,655 people). The majority of beneficiaries were subsistence farmers who had lost their harvest, food reserves stocks and livelihoods and had been identified through the WFP monitoring system. WFP operated in close coordination with the Government and non-governmental organization (NGO) partners (MAGA, Ministry of Health (MoH), the Secretariat for Food Security and Nutrition, SESAN-, SHARE, CARE, CRS, Plan International, Defensores of Wildlife).
- At the start of the emergency, WFP field staff was increased to assure adequate monitoring of the food distribution operations in the 22 departments of Guatemala.
- Cooperation between WFP and other humanitarian actors was successful as NGOs contracted by WFP distributed 40 per cent of the total resources in the target areas.

Health

Cluster Lead: Pan-American Health Organization (PAHO)/ World Health Organization (WHO)

- All CERF Health Cluster projects were implemented in close partnership with national and local authorities from the Ministry of Public Health and Social Care (MSPAS).
- PAHO's project saved the lives of the affected population in 11 priority departments, which were selected because of their poverty levels, limited access to health services and high rates of malnutrition.
- CERF funds permitted the implementation of emergency sanitary services and epidemiological surveillance (respiratory infections, diarrhoea, leptospirosis and vector-borne dengue and malaria). CERF enabled the provision of food safety mechanisms and mental health services to affected individuals.
- A total of 397,808 people were assisted, which was a significant increase from the 154,000 people originally targeted). The projects focused mainly on children, teenagers, women, pregnant women, elders, people living with HIV, homeless individuals, handicapped people and men and women with physical and mental problems. MSPAS' optimization of resources permitted direct and indirect coverage of people in need and resulted in an increase in the number of beneficiaries.
- For the first time in Guatemala's emergencies record, a component addressing HIV was incorporated into the response. As such, the project orchestrated by the Joint United Nations Programme on HIV/AIDS (UNAIDS) aimed to ensure the continuity of treatment of people affected by HIV in nine prioritized departments. The activities included:
 - The distribution of masculine condoms to high-risk populations and the provision of sexual violence kits in shelters were carried out. All purchases were coordinated with the National Programme of AIDS (PNS).
- The total amount of individuals reached totalled 60,000, from which 30,000 were women and 40 were children under the age of five.

- All actions carried out by the United Nations Population Fund (UNFPA) prioritized women needs due to the increase of illnesses in the departments of Alta Verapaz, Izabal, Jalapa, Jutiapa, San Marcos, Huehuetenango, Sololá, Escuintla, El Quiché and Totonicapán.
 - UNFPA purchased and distributed medical and laboratory supplies, emergency kits, other essential drugs and medical care in the affected areas in order to provide sexual and reproductive health support. The objective was to reduce maternal and neonatal morbidity and mortality, as well as to ensure the prevention and management of sexual violence.
 - Health promotion, information and communication was also enabled through CERF funding and implemented in cooperation with local authorities. The number of beneficiaries reached with the culturally-tailored activities was 154,000 people.

Shelter and Protection

Cluster Lead: International Organization for Migration (IOM)

- IOM initially targeted 2,400 families to benefit from the distribution of non-food items (NFIs), such as hygiene, kitchen, shelter and tools kits as well as the physical restoration of ten shelters. CERF funding enabled IOM to reach 3,357 families, a 40 per cent increase from the initial objective. IOM assistance benefited 7,437 women, 7,569 men, and 1,213 boys and 1,088 girls between under-four years of age.
- UNFPA and the United Nations Children's Fund (UNICEF) provided assistance to affected families living in shelters. CERF funds allowed UNFPA to provide psychological support to women and adolescents victims of abuse in 27 shelters. Hygiene kits were distributed and educational material was supplied to 2,400 families. Hygiene needs and education focusing on social reintegration, as well as the prevention of violence against women were also provided. UNICEF created ten psychosocial brigades to assist children in shelters and the most affected communities. All UNICEF actions were carried out in 23 communities in coordination with CONRED, Judiciary, MSPAS and NGOs (Guatemalan League for Mental Hygiene, Refugio de la Niñez and Human Rights Office of the Archdiocese of Guatemala) benefiting 4,500 families.

Water, Sanitation and Hygiene (WASH)

Cluster Lead: UNICEF

- UNICEF assisted 493,538 people living in 560 communities across Guatemala, prioritizing care to children particularly in indigenous areas. The appropriate use of inputs permitted UNICEF to address a larger population than originally intended. For example, an increase in the number of cleaned and disinfected wells (54,602) benefited 244,121 people.
- CERF funded repairs to water systems and basic sanitation and enabled sanitation and hygiene campaigns in shelters.
- The project was implemented in cooperation with the MoH, the Water and Sanitation Programme, NGOs (Save the Children, OXFAM and CRS), as well as with the United Nations system in Guatemala. UNICEF acquired the supplies through CERF funding and the Ministry of Health distributed it to the most affected areas.
- PAHO ensured the provision of drinking water supplies in proper quantities.
 - Eleven priority departments were covered and 154,000 individuals were reached. Proper environmental equipment and instruments were used to ensure good potable water. The equipment was delivered to the Regulation Department of Environmental and Health Program (DRPSA) of the MSPAS.
 - Production, printing and distribution of health information was enabled by the reception of CERF funding. MSPAS' optimization of resources ensured an increase in the number of beneficiaries.

III. Results

Sector/ Cluster	CERF project number and title (If applicable, please provide CAP/Flash Project Code)	Amount disbursed from CERF (US\$)	Number of Beneficiaries targeted with CERF funding	Implementing Partners and funds disbursed	Expected Results/ Outcomes	Results and improvements for the target beneficiaries	CERF's added value to the project	Monitoring and Evaluation Mechanisms	Gender Equity
AGRICULTURE	<p>10-FAO-029</p> <p>Immediate assistance to restore food production and livelihoods affected by the storm in Guatemala</p>	562,671	22,118 individuals	Municipalities , MAGA, NGOs (COOPI)	<ul style="list-style-type: none"> ■ Corn production restored and backyard activities carried out to save the livelihoods of 2,150 families located in communities around the basins of Motagua and Polochic's rivers. ■ 525 hectares planted with improved maize seeds, benefiting 1,500 families, with a projected production of 2,025 tonnes in August and September 2010. ■ Backyard production system recuperated for 650 families to provide nutrients, micronutrients, proteins and minerals necessary to their diet covering three months. 	<ul style="list-style-type: none"> ■ Corn production restored and backyard activities carried out to protect the livelihoods of 3,353 families in targeted areas. ■ 945 hectares cultivated. ■ Establishment of 1,200 gardens, which permitted the availability of food for children, mothers and fathers. ■ Reactivation of livestock production in 1,200 families through investments in the poultry industry, enabling the availability of animal proteins into the diets and improving productive skills. ■ Implementation of Good Agricultural Practices by 2,100 families. ■ Food availability provided to 2,100 families. 	CERF enabled FAO to implement its project rapidly and efficiently.	<ul style="list-style-type: none"> ■ Weekly monitoring visits were carried out by FAO trained-community promoters that conducted all activities with beneficiaries in Mayan languages. ■ FAO Emergency and Rehabilitation professionals conducted monthly field visits to monitor the implementation of the project. ■ Upon completion of the project, an evaluation was conducted for measurement of short-time achievements. 	<ul style="list-style-type: none"> ■ Backyard component project was carried out by women throughout the attended communities.

FOOD	<p>10-WFP-039</p> <p>Food assistance to people affected by floods, landslides and crop losses</p>	1,212,840	<p>121,655 individuals, including:</p> <p>25,876 women</p> <p>11,026 children under five</p>	<p>MAGA, MoH, SESAN and NGOs (SHARE, CARE, CRS, Plan International, Defensores of Wildlife). Funds disbursed are described in annex 2.</p>	<ul style="list-style-type: none"> ■ 47,500 people (9,500 families), of which 12,000 people (2,400 families) living in shelters, provided with food assistance. ■ Target subsistence-farmer families with children affected by acute malnutrition and food insecurity. 	<ul style="list-style-type: none"> ■ Modification of the food ration and logistics optimisation permitted to reach the total amount of families in need. ■ 1,538.91 MT of food distributed 	<p>Rapid availability of resources allowed to start life- saving operations to assist affected populations within 48 hours.</p>	<ul style="list-style-type: none"> ■ WFP established both distribution and post-distribution monitoring systems in close coordination with the government and NGO partners. ■ Data was compiled and analyzed every month to adjust the implementation arrangements and strategy. ■ With the start of the emergency, WFP increased the number of field staff to ensure adequate monitoring of food distributions in all 22 departments. 	
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HEALTH	<p>10-WHO-038</p> <p>Life-saving and health protection of involved population by the tropical storm Agatha in Guatemala</p>	<p>365,405</p>	<p>397,808 individuals, including:</p> <p>89,722 women:</p> <p>26,177 children under-five</p> <p>MSPAS' optimization of resources permitted direct and indirect coverage of affected people, increasing number of initially targeted beneficiaries.</p>	<p>MSPAS</p>	<ul style="list-style-type: none"> ■ Medical and laboratory supplies, emergency kits, other essential drugs and medical care supplies provided. ■ Morbidity and mortality in affected areas reduced ■ Epidemiological surveillance, early warning, rapid response, prevention and reinforced control of outbreaks mechanisms provided ■ Mental health services to vulnerable individuals and communities living in shelters provided. ■ Health promotion, information and communication advocated. 	<ul style="list-style-type: none"> ■ Drugs and equipment provided (oral re-hydration salts, Hartman solutions, neonatal and paediatric stethoscopes, digital ear thermometers among others). ■ Morbidity and mortality in targeted areas reduced as stated in post-Agatha MSPAS' weekly epidemiological bulletins (weeks 28 and 29). ■ Strengthening of the cold chain, critical component of the strategy on enlarged programme for immunization completed. ■ Strengthening of the epidemiological surveillance in coordination with the National Health Laboratory and the National Programme of Diseases Transmitted by Vectors carried out in order to prevent and control outbreaks of diseases transmitted by vectors. ■ Psycho-therapeutic activities developed in coordination with the National Programme of Mental Health of the Ministry of Public Health and Social Care. ■ Information, communication and education materials distributed to promote health and prevent diseases. 	<p>Over a three-month period, cooperation was centralized to improve emergency medical services. CERF funds enabled WHO to reach its objectives.</p>	<ul style="list-style-type: none"> ■ Mechanisms to monitor and evaluate the implementation included: <ul style="list-style-type: none"> ○ The creation of an internal committee to monitor and evaluate financial assets ○ Meetings every two weeks to evaluate progress ○ Field visits to different Directions of Health Areas to check the allocation and use of grants. 	<ul style="list-style-type: none"> ■ Project addressed gender needs caused by Agatha.
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HEALTH	<p>10-AID-003</p> <p>Saving lives and protecting the health of the population affected by Tropical Storm</p>	43,335	<p>60,000 Individuals, including:</p> <p>30,000 women</p> <p>40 children under-five</p>	National AIDS Programme	<ul style="list-style-type: none"> ▪ Medical and laboratory supplies, emergency kits, other essential drugs and medical care supplies provided. ▪ Health promotion, information and communication implemented. ▪ Morbidity and mortality rates in areas affected by the emergency reduced ▪ Epidemiological surveillance system, early warning, rapid response, prevention and control of outbreaks strengthened ▪ Mental health services to vulnerable communities and population living in shelters improved. 	<ul style="list-style-type: none"> ▪ Medical and laboratory supplies, emergency kits, other essential drugs and medical care supplies provided. ▪ Health Promotion, information and communication implemented. 	CERF allowed the response to start immediately after the needs were identified.	<ul style="list-style-type: none"> ▪ A member of UNAIDS was in charge of implementing the project, supervise the implementation and supplies' purchases. ▪ Focal points were hired in each of the departments to monitor the supervision of activities at a local level 	<ul style="list-style-type: none"> ▪ Half of the 60,000 individuals who benefited from CERF funding were women.
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HEALTH	<p>10-FPA-023</p> <p>Saving lives and protecting the health of the population affected by Tropical Storm</p>	172,052	154,000 individuals	Local authorities of targeted regions	<ul style="list-style-type: none"> ■ Sexual and reproductive health guidance given to reduce maternal and neonatal morbidity and mortality ■ Prevention and management of sexual violence cases ■ Morbidity and mortality rates in areas affected by the emergency reduced. ■ Medical and laboratory supplies, emergency kits, other essential drugs and medical care supplies provided. ■ Epidemiological surveillance system, early warning, rapid response, prevention and control of outbreaks strengthened. ■ Mental health services to vulnerable communities and population living in shelters improved. ■ Health promotion, information and communication implemented. 	<ul style="list-style-type: none"> ■ Morbidity and mortality rates in affected areas reduced. ■ Medical and laboratory supplies, emergency kits, other essential drugs and medical care supplies provided. ■ Health promotion, information and communication, culturally adapted, distributed. ■ Community and family talks given to 31,410 people (6,282 families), 5,760 living in temporary shelters. ■ Sexual reproductive talks provided to 2,100 community leaders. ■ Documentation of 227 references related to pregnancy and birth delivery related problems. <p>Guides and protocols provided to MSPAS.</p> <p>Purchase and distribution of emergency kits in affected areas</p> <p>Sexual health training provided to people living in affected communities</p> <ul style="list-style-type: none"> ■ 227 references of women with problems linked with sexual health obtained and transmitted to health services. 	CERF allowed a rapid and efficient response	<ul style="list-style-type: none"> ■ Employment of personnel in charge of coordination, supervision, monitoring and evaluation of interventions. ■ Meetings every 15 days to assess progress. 	<ul style="list-style-type: none"> ■ All actions carried out by UNFPA were carried out prioritizing women needs.
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SHELTER AND PROTECTION	<p>10-IOM-019</p> <p>Establishment and maintenance of basic living and sanitary conditions in temporary shelters for populations affected by Tropical Storm Agatha and the eruption of Pacaya Volcano in Guatemala</p>	438,979	3,357 families (15,006 individuals)	<p>NGOs such as CRS, CARE, SHARE, COOPI and ESFRA, in coordination with local authorities. Funds disbursed are described in annex 2.</p>	<ul style="list-style-type: none"> ■ Humanitarian assistance and NFIs provided to 2,400 families (14,400 individuals). ■ Ten emergency shelters repaired to meet minimum acceptable accommodation and living standards. 	<ul style="list-style-type: none"> ■ Humanitarian assistance and NFIs provided to 15,006 individuals, which accounts for 40 per cent more than the initial goal. ■ Fifteen emergency shelters repaired, five more than initially planned. 	CERF allowed a rapid and efficient response	<ul style="list-style-type: none"> ■ Work was distributed among five monitoring team, each one of them monitoring each of the kits' deliveries. 	<ul style="list-style-type: none"> ■ Special attention was given to indigenous women in rural areas.
	<p>10-FPA-022</p> <p>Establishment and maintenance of basic living and sanitary conditions in temporary shelters for populations affected by Tropical Storm Agatha and the eruption of Pacaya Volcano in Guatemala</p>	102,977	2,400 families	ECAP	<ul style="list-style-type: none"> ■ Social, psychological and psychosocial assistance provided in seven temporary shelters over six months. ■ Identification of gender-based violence victims: affected girls, adolescents and women provided with medical, psychological and legal support. ■ 34 women's groups psychosocially assisted and 1,119 people participated ■ Hygiene kits provided ■ 20 boxes with teaching material distributed ■ Materials for violence against women prevention printed and distributed. 	<ul style="list-style-type: none"> ■ Detection of 10 gender-based violence cases and provision of support services to the victims. ■ Appropriate and participatory assistance methodology focused on creating confidence was instituted ■ Community management supported 	CERF allowed a rapid and efficient response	<ul style="list-style-type: none"> ■ Monitoring and evaluation technical assistance provided by a responsible coordinator. ■ Coordination between IOM and NGO partners to select communities and target population. ■ Effective communication and monitoring processes implemented by NGOs responsible to evaluate the situation in shelters participated in municipality and development councils. 	<ul style="list-style-type: none"> ■ Free of violence spaces formation processes permitted the participation of men and women, especially indigenous populations. ■ Training processes with women included auto-help and support techniques. ■ Focus on the inclusion of women, especially in decision-making processes.

<p style="text-align: center;">SHELTER AND PROTECTION</p>	<p style="text-align: center;">10-CEF-034-B</p> <p>Establishment and maintenance of basic living and sanitary conditions in temporary shelters for populations affected by Tropical Storm Agatha and the eruption of Pacaya Volcano in Guatemala</p>	<p style="text-align: center;">112,350</p>	<p>4,500 families 4,500 women: 6,350 children under-five and teenagers</p>	<p>CONRED, Judiciary, MSPAS and NGOs (Guatemalan League for Mental Hygiene, Refugio de la Niñez and Human Rights Office of the Archdiocese of Guatemala</p>	<ul style="list-style-type: none"> ■ Psychosocial assistance provided to 6,350 children and teenagers living in shelters. ■ Orientation and psychological assistance provided to 4,500 parents. ■ Support in the establishment of community-based safe environments for children and women, including child-friendly spaces, with a focus on girls, adolescents and their caregivers. ■ Provision of early childhood development activities provided in 100 shelters. 	<ul style="list-style-type: none"> ■ 22 psychologists recruited to provide psycho-social care in shelters and affected communities. ■ 10 psychosocial support brigades created to cooperate with CONRED, Judiciary and MSPAS. ■ 573 risk-prevention and mitigation activities carried out ■ 445 spaces to express feelings and emotions created, providing psychosocial support to children and women affected by the emergency. ■ Child abuse and negligence cases detected and addressed. ■ Local networks strengthened through 228 individuals and social resilience workshops. ■ Recreational material provided for psychology purposes in shelters. ■ Training to MSPAS psychologists provided. ■ 900 psychological supplies kits provided, including form-friendly and alternative learning spaces for children and adolescents. 	<p>CERF allowed a rapid and efficient response</p>	<ul style="list-style-type: none"> ■ Monitoring and evaluation procedures were carried out by the psychosocial support brigades 	<ul style="list-style-type: none"> ■ Special attention was given to abandoned children separated from their parents due to the emergency.
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WASH	10-CEF-034-A Water, sanitation and environmental hygiene in affected communities	262,364	7,500 families (493,538 individuals) 212,222 women 113,514 children under-five	Ministry of Health, the Water and Sanitation Programme, NGOs such as Save the Children, OXFAM and CRS	<ul style="list-style-type: none"> ■ 7,500 families from the most vulnerable groups benefit from improved access to water and sanitation. ■ Gastrointestinal diseases' risk due to water contamination reduced in 7,500 families located in permanent shelters and communities. ■ Water and sanitation facilities and hygiene provisions ensured in affected prioritized communities to avoid health damages. 	<ul style="list-style-type: none"> ■ Water and hygiene-sanitation accessibility and conditions improved for 7,500 families ■ Gastrointestinal diseases' risk due to water contamination reduced in 7,500 families residing in permanent shelters and communities. ■ Water and sanitation facilities and hygiene provisions ensured in affected prioritized communities to avoid health damages. ■ Reduction of water-related diseases outbreaks. Control and reduction of cases of acute diarrhoeal diseases in children under-five of age. 	CERF allowed a rapid and efficient response	<ul style="list-style-type: none"> ■ Field visits to monitor and evaluate the implementation of the project carried out. 	<ul style="list-style-type: none"> ■ Special attention given to girls and women in rural areas.
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WASH	<p>10-WHO-039</p> <p>Water, sanitation and environmental hygiene in affected communities</p>	103,095	<p>154,000 individuals, including:</p> <p>89,722 women</p> <p>26,177 children under-five</p>	Regulation Department of Environmental and Health Program	<ul style="list-style-type: none"> ■ Proper potable water access ensured in the targeted communities ■ Health promotion, information and communication advocated. ■ 7,500 families from the most vulnerable groups benefit from improved access to water and sanitation. ■ Reduced risk among affected families of gastrointestinal disease spread linked to water contamination. ■ Reduced risks among 7,500 families of disease outbreaks that develop in permanent shelters and communities. ■ Ensured the provision of safe water and sanitation facilities in affected communities to avoid health damages. 	<ul style="list-style-type: none"> ■ Potable water access ensured in targeted communities and temporary shelters in 11 departments through the acquisition of equipment and environmental instrumentation donated to the DRPSA. ■ Distribution of information materials to promote health education ■ Information materials addressed water, solids and excreta management, water and sanitation and water disinfection. Safe water posters and gold rules posters printed and publicized. ■ Formation of health brigades to implement activities related to secure water surveillance. 	CERF funding permitted three months actions.	<ul style="list-style-type: none"> ■ Implemented mechanisms to monitor and evaluate included: <ul style="list-style-type: none"> ○ Creating an internal committee to monitor and evaluate activities. ○ Meetings every two weeks to assess progress ○ Field visits to different Directions of Health Areas to verify the allocation and use of grants. 	
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<p style="text-align: center;">AGRICULTURE (2009)</p>	<p style="text-align: center;">09-FAO-031</p> <p>Immediate assistance to re-establish food production and the livelihoods of the vulnerable farmers affected by the drought in Guatemala</p>	<p style="text-align: center;">804,524</p>	<p style="text-align: center;">41,706 individuals</p>	<p style="text-align: center;">Municipalities MAGA ICTA</p>	<ul style="list-style-type: none"> ▪ Rehabilitation of short-cycle food crops production ▪ Improvement of vegetable production ▪ Restart maize production ▪ Small livestock production established ▪ Distribution of maize certified seeds to 4,725 families ▪ 	<ul style="list-style-type: none"> ▪ 600 families achieved rehabilitation of short-cycle food crops and vegetables production ▪ 1,314 families improved the availability of carbohydrates in family diets. ▪ 2,000 families re-established harvesting rainwater conditions for agricultural production. ▪ Availability of local seed ensured through the identification, selection and characterization of local maize seed. ▪ 315 producers received materials and information on storage of corn seed. ▪ 715 bushels of corn planted on 80 small-farms. ▪ 4,725 families received commercial grain production for home consumption. ▪ Technical skills for agricultural production improved for 2,309 small farmers. ▪ 9.6 per cent more people were reached than initially expected due to the optimization of resources. 	<p>CERF funds permitted FAO to save the life of 6,954 families suffering from extreme food insecurity in the dry corridor of Guatemala and permitted greater resilience.</p>	<p>Field assessments were conducted.</p>	
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HEALTH (2009)	<p>09-WHO-054</p> <p>Decrease the mortality from severe acute malnutrition and related diseases, 11 departments of Guatemala's "dry corridor"</p>	833,512	3,845,161 individuals	MSPAS, PROSAN CNE (National Emergency Commission)	<ul style="list-style-type: none"> ▪ Mortality and morbidity rates reduced in 11 prioritized departments, mainly among women of childbearing age, pregnant and breast-feeding women, newborns, infants, children, older people and those with immunosuppressive diseases. ▪ MSPAS' response capacity increased ▪ MSPAS' nutritional epidemiological surveillance and early warning system improved. 	<ul style="list-style-type: none"> ▪ Mortality and morbidity rates reduced due to the recruitment of physicians, nutritionists and facilitators in the 11 health areas targeted. ▪ Services provided in areas with a high prevalence of under nourishment strengthened through the provision of inputs to improve the implementation of protocols and the training of personnel. ▪ The response capacity of health care facilities was improved through the training of national nutrition surveillance system personnel (132 epidemiologists and statisticians of all health areas were trained) and the distribution of medications and supplies. ▪ Milk banks were established and personnel was trained in three hospitals. ▪ Campaign to promote breastfeeding launched ▪ Nutritional surveillance strengthened and early detection of malnutrition cases improved. ▪ Development of a rapid food and nutrition insecurity assessment. 	CERF funds enabled a rapid response.	<ul style="list-style-type: none"> ▪ Field assessments conducted. 	
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Annex 1: NGOS and CERF Funds Forwarded to Each Implementing NGO Partner

NGO Partner	Sector	Project Number	Amount Forwarded (USD)	Date Funds Forwarded
SHARE	Food	10-WFP-039	213,045.00	Not specified
CRS	Food	10-WFP-039	173,180.00	Not specified
CARE	Food	10-WFP-039	71,400.00	Not specified
PASTORAL	Food	10-WFP-039	27,365.00	Not specified
CRS	Shelter and Protection	10-IOM-019	103,716.37	Not specified
ESFRA	Shelter and Protection	10-IOM-019	78,004.75	Not specified
COOPI	Shelter and Protection	10-IOM-019	54,402.50	Not specified
SHARE	Shelter and Protection	10-IOM-019	68,225.75	Not specified
CARE	Shelter and Protection	10-IOM-019	43,750.00	Not specified

Annex 2: Acronyms and Abbreviations

CERF	Central Emergency Response Fund
CONRED	National Coordinator for Emergency Disaster Reduction
COOPI	Cooperazione Internazionale
CRS	Catholic Relief Service
DRPSA	Regulation Department of Environmental and Health Program
ECAP	Team of Communitarian Studies and Psychosocial Action
ECLAC	Economic Commission for Latin America and the Caribbean
ESFRA	Esperanza y Fraternidad
FAO	United Nations Food and Agricultural Organization
MAGA	Ministry of Agriculture, Livestock and Food
MoH	Ministry of Health
MSPAS	Ministry of Health and Welfare
NGO	Non-governmental organization
OCHA	Office for the Coordination of Humanitarian Affairs
PAHO	Pan American Health Organization
PNS	National Programme of AIDS
SESAN	Secretariat for Food Security and Nutrition
UNAIDS	United Nations Joint Programme on HIV/AIDS
UNFPA	United Nations Population Found
UNICEF	United Nations Children's Fund
WFP	World Food Programme
WHO	World Health Organization