

**RESIDENT / HUMANITARIAN COORDINATOR
REPORT ON THE USE OF CERF FUNDS
SWAZILAND
RAPID RESPONSE
DROUGHT MARCH 2016**

RESIDENT/HUMANITARIAN COORDINATOR

Israel Dessalegne

REPORTING PROCESS AND CONSULTATION SUMMARY

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

Working collaboratively with the National Disaster Management Agency a consultancy to carry out the Midterm Review of the National Emergency Response Mitigation and Adaptation Plan (NERMAP) and Lessons Learnt Exercise is underway. The process will be completed by the end of the first quarter of the year. In the meantime, interagency sector coordination is being strengthened as well as preparedness plans.

- 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

Progress and achievements of the implementation of the projects funded by CERF, which are reflected in this Report, have been discussed among the UN Country Team. With support from OCHA, the UNCT also prepared a Humanitarian Response Plan and information is routinely updated through the Situation Reports which are prepared in close consultation with the sectoral working groups and other key humanitarian stakeholders.

- 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

The Report has been prepared in consultation and shared with CERF recipient agencies.

I. HUMANITARIAN CONTEXT

TABLE 1: EMERGENCY ALLOCATION OVERVIEW (US\$)		
Total amount required for the humanitarian response:US\$32 million		
Breakdown of total response funding received by source	Source	Amount
	CERF	3,141,908
	COUNTRY-BASED POOL FUND <i>(if applicable)</i>	
	OTHER (bilateral/multilateral)	11,985,500
	TOTAL	15,127,408

TABLE 2: CERF EMERGENCY FUNDING BY ALLOCATION AND PROJECT (US\$)			
Allocation 1 – date of official submission: 15-Mar-16			
Agency	Project code	Cluster/Sector	Amount
UNICEF	16-RR-CEF-045	Water, Sanitation and Hygiene	340,040
WFP	16-RR-WFP-024	Food Aid	2,801,868
TOTAL			3,141,908

TABLE 3: BREAKDOWN OF CERF FUNDS BY TYPE OF IMPLEMENTATION MODALITY (US\$)	
Type of implementation modality	Amount
Direct UN agencies/IOM implementation	2,691,469
Funds forwarded to NGOs and Red Cross / Red Crescent for implementation	450,439
Funds forwarded to government partners	
TOTAL	3,141,908

HUMANITARIAN NEEDS

Southern Africa experienced the driest agricultural season of the past 35 years during 2015/16. Swaziland is one of the countries in the region hardest hit by two years of successive drought, most recently as a result of the El Niño phenomenon. Between October 2015 and February 2016, Swaziland received 42 per cent lower rainfall than the same period in the previous season, and 51 per cent lower compared to 2013/2014. The exceptional lack of precipitation, compounded by the impact of poor rainfall in previous years, has resulted in significant losses of rain-fed yields, underperforming irrigated crops, and poor pasture conditions in the affected areas.

The drought has had an adverse effect on the food security situation, which has declined alarmingly for the second year in a row. The poor 2014/15 agricultural season in Swaziland disrupted a five-year average of steady progress as it was 6 per cent lower than the five-year production average and 31 per cent lower than the harvest experienced in 2013/14. For the 2015/2016 agricultural season maize production fell by 64 per cent. In normal years, the majority of households in the drought-affected areas produce more than six months of their food requirements and purchase approximately six months of food to fill the gap. However, this year, 75 per cent of these households produced less than two months of their food requirements. The impact of the drought is, therefore, compounding an already fragile situation of depleted water and soil moisture reserves, poor grazing conditions, and poor harvests. Faced with a number of challenges that have had significant bearing on the vulnerability of the Swazi population, the El Niño induced drought significantly compromised the ability of a number of households to provide for their livelihoods.

Results from the latest Swaziland Vulnerability Analysis Committee and IPC analysis in July 2016 indicated that 350,000 people were in need of emergency food assistance, with 640,000 potentially affected by some degree of food insecurity at the peak of the lean season (November 2016 - March 2017).

Fully recognizing the urgency of the situation, the Government of Swaziland had declared a national drought emergency on 18 February 2016 and together with partners launched a response plan – the National Emergency Response, Mitigation and Adaptation Plan (NERMAP), which prioritizes food and water security. These activities – food assistance, the provision of clean water, and water and sanitation assistance – formed the basis of the CERF application.

II. FOCUS AREAS AND PRIORITIZATION

The triggers for the CERF request include the findings of the February 2016 rapid assessment, reports of water scarcity, meteorological data and the forecasted decline in the national harvest.

As the El Niño phenomenon peaked, its impact worsened as revealed by the February rapid assessment. The assessment showed that households were resorting to adopting negative coping strategies. For instance, 68 per cent of households interviewed decreased the number of meals consumed per day, while 63 per cent decreased the types of foods consumed. A reduction in the types and frequency of food consumed increases the likelihood of poor dietary diversity as well as the risk of malnutrition especially among children and people living with pre-existing conditions such as HIV and other chronic non-communicable diseases.

Lubombo has been the most severely affected region, with 46 percent of people food insecure. In other regions, food insecurity has been between 23 and 27 per cent, and all regions have pockets with high levels of food insecurity and severely affected populations. Lubombo and Shiselweni regions have the highest rates of poverty with 69 per cent of the population living under the national poverty line, compared to the 63 per cent nationally, limiting already vulnerable people's ability to cope with additional shocks brought on by the drought. To make the situation worse, more than 80,000 cattle reportedly died due to lack of water and fodder, leaving coping mechanisms seriously constrained. Results from the latest Swaziland Vulnerability Analysis Committee and IPC analysis in July 2016 indicated that 350,000 people (about 30 per cent of the population) were in need of emergency food assistance, with 640,000 potentially affected by some degree of food insecurity at the peak of the lean season (November 2016 - March 2017).

The NERMAP identified the need for US\$23 million to respond to immediate needs and \$57 million required for longer term actions. The needs for food assistance were estimated at \$29,314,700. The Government of Swaziland pledged \$16.5 million for both immediate and longer term interventions.

The United Nations Country Team (UNCT) prioritized two sectors - Food and Water, Sanitation and Hygiene (WASH) - for CERF support, to be provided in the most affected areas - Lubombo and Shiselweni. The strategic objectives of the CERF support were to prevent the loss of lives due to lack of food; and to improve water, sanitation and hygiene facilities for people affected by drought. Based on the strategic objectives and life-saving activities needed, the amount requested of CERF by the UNCT was \$3,144,400 for initiating emergency activities in the sectors of Food and WASH for approximately four months. Under this request, WFP received \$2.8 million in support of the Food Sector. Thanks to timely support from the CERF, WFP was able to provide emergency food assistance to some 72,000 drought affected people in the Lubombo region for about over four months.

Under the Food Sector, household eligibility for assistance in drought-affected areas was based on the food distribution targeting criteria developed by the National Disaster Management Agency (NDMA) and the food security consortium. The criteria take into account demographic and socioeconomic factors. Among the demographic indicators, consideration is given for female-headed households, child-headed households, and households headed by the elderly. While for socio-economic indicators, health status and disabilities among household members, livelihoods sources, assets wealth, are considered.

III. CERF PROCESS

The overall strategic approach for the CERF request and prioritization of sectors and activities was largely based on the NERMAP, which outlines priority needs and intervention sectors. The NERMAP was developed by Government with support of stakeholders, including the UN. The UNCT agreed that among the sectors, priority for the CERF request should be given to life-saving interventions and that should follow a rigorous analysis of available information on needs and gaps. In order to enable informed decision-making, the UN technical working group took into consideration information from a number of assessments as basis for prioritization:

- The Swaziland Annual Vulnerability Assessment and Analysis Report, (Swazi VAC), July 2015,
- The Crop and Food Security Assessment Mission report (CFSAM), conducted by FAO and WFP in May 2015,
- The multi-sectoral Drought Rapid Assessment Report, conducted in February 2016 by the Government of Swaziland and partners, including the UN agencies.

The country has a sector system, whereby relevant government ministries are sector leads and UN agencies are sector co-leads. Therefore, consultations on priorities were also undertaken at sectoral level. On the basis of the agreement on strategic direction, needs and sectorial consultations, interventions targeting food assistance and WASH for the most vulnerable households and communities were selected for inclusion in the CERF application. Gender issues were considered in the selection of the priority sectors and mainstreamed in implementation modalities of the interventions. This was ensured by participation in the development of the concept of gender experts in the UN technical working group. In the selection of implementation agencies and modalities, the UNCT considered the comparative advantages, capacity and past experience of UN agencies in the prioritized interventions.

IV. CERF RESULTS AND ADDED VALUE

BENEFICIARY ESTIMATION

TABLE 4: AFFECTED INDIVIDUALS AND REACHED DIRECT BENEFICIARIES BY SECTOR ¹									
Total number of individuals affected by the crisis: 350,000 (Swaziland Vulnerability Analysis Committee and IPC analysis in July 2016)									
Cluster/Sector	Female			Male			Total		
	Girls (< 18)	Women (≥ 18)	Total	Boys (< 18)	Men (≥ 18)	Total	Children (< 18)	Adults (≥ 18)	Total
Food Aid	17,175	20,754	37,929	15,029	18,607	33,636	32,204	39,361	71,565
Water, Sanitation and Hygiene	37,039	7,197	44,236	36,285	5,669	41,954	73,324	12,866	86,190

¹ Best estimate of the number of individuals (girls, women, boys, and men) directly supported through CERF funding by cluster/sector.

WFP has been supporting about 100,000 people with food assistance in-kind in the region of Lubombo. Food distributions started in June 2016, with an initial 78,000 and expanded to 100,000 in August 2016. The financial support from CERF enabled WFP to provide emergency food assistance to the planned 71,565 drought affected people for about four and a half months.

WFP and Cooperating Partners conduct on-site distribution monitoring to ensure timeliness, adequacy and effectiveness of the distribution process. Cooperating partners report output level information, such as number of people reached and food distributed after each distribution cycle. As per this process, WFP is able to obtain specific information on how many people it assists and in what locations.

TABLE 5: TOTAL DIRECT BENEFICIARIES REACHED THROUGH CERF FUNDING ²			
	Children (< 18)	Adults (≥ 18)	Total
Female	54,214	27,951	82,165
Male	51,314	24,276	75,590
Total individuals (Female and male)	105,528	52,227	157,755

² Best estimate of the total number of individuals (girls, women, boys, and men) directly supported through CERF funding. This should, as best possible, exclude significant overlaps and double counting between the sectors.

In the WASH sector, the total number of direct beneficiaries has been calculated based on the number of people reached through water trucking, rainwater harvesting and hygiene promotion activities, according to World Vision Swaziland project records as described above. The results framework shows the beneficiary results against these stated activities in line with the indicators which were suggested as tracking indicators to measure the successful achievement of the results. Each output in the results table has multiple indicators with varying figures of beneficiaries per indicator which are not cumulative. For instance, of the 69 schools that benefited from water trucking

15 of those schools accounting for 3,187 pupils benefited from all the activities within the project they were counted once and this was ensured by cross referencing all schools under each activity and indicator to ensure that beneficiaries are not double counted.

In order to avoid double counting, activities were tracked at both school and community level. School figures were collected from the enrolment data for the schools. For community-based interventions, the implementing partner developed and used community registers to monitor water point usage as well as the beneficiaries of other interventions. School beneficiaries were each counted once only. For the hygiene promotion activities conducted more than once in a community, only one attendance register with the highest number of attendants was recorded. Cross referencing of schools was done as schools had multiple actions which were beyond the scope of CERF funding. Only CERF-funded actions have been reported here.

CERF RESULTS

CERF funding came at a critical time when agencies were gearing up to launch a response to provide life-saving emergency assistance to those affected by the drought. The rapid decision process and availability of CERF funds enabled WFP to immediately procure food commodities and deliver 4,219 metric tonnes (mt) to more than 71,565 people for about four and half months. The provision of food assistance prevented people from resorting to negative coping strategies and provided them with a food basket covering 84 per cent of the daily food requirement.

Overall, WFP have been providing in-kind food assistance to 100,000 people every month since June 2016 as part of its emergency response from June 2016, and from October onwards, it is also distributing cash based transfers to some 30,000 people. Moving forward, based on a request by the Government, WFP intend to scale up assistance to reach 250,000 people (of which 128,000 with cash based transfers) until the end of the lean season in March 2017.

On WASH, the CERF-funded interventions targeted 95,000 people with the aim of preventing the loss of life through the provision of potable water, hygiene and sanitation facilities and supplies for the affected population, in order to prevent the outbreak of waterborne diseases. The CERF application for WASH had four main outputs of which the first three were carried out as planned. In addition, reports of critical nutrition-related needs among the target population emerged following project submission. This necessitated a redirection of project funds amounting to less than 10 per cent of direct project costs towards addressing those needs. This additional set of activities is described below and in Box 12 on page 14.

Output 1 had targeted 12,000 pupils in school with safe water supply. As a result of the increased focus on schools, the project was able to reach 20,903 (174 per cent of initial target) students and 976 teachers with water trucking in 12 High schools and 56 Primary schools.

Twenty-five schools (initial target was 12) were supported to increase their capacity for rainwater harvesting. The increase in rainwater harvesting capacity benefited 7,174 pupils. Hygiene promotion in schools was complemented by rainwater harvesting training to enable children to promote the latter at their households with the activity benefiting 16,063 (7,871 girls, 8,165 boys) children from 36 schools.

The most severely drought affected areas were the rural areas in Shiselweni and Lubombo regions. One of the planned activities was the provision of access to appropriate sanitation facilities in schools. As the schools were located in rural areas, they were already equipped with appropriate sanitation facilities in the form of latrines. As a result, this activity was amended to focus on hygiene and sanitation promotion as described above.

Output 2 had targeted 2,000 people to access safe water through household water treatment to prevent waterborne diseases from unsafe water sources. The project reached 1,760 households (estimated 8,800 people based on five per household) which benefited from distribution of household water treatment kits.

Output 3 had targeted 6,000 people accessing potable water at community based strategic water reservoirs. Following the refocussing of activities from the health facilities to the communities, the project reached 25,030 (417 per cent of target) beneficiaries (4,872 men,

5283 women and 14,875 children). The project also aimed to train communities on Community Water Use Efficiency and Hygiene Sensitisation. Through this activity, 10,903 (6794 females, 4109 males) community people were reached.

A total of 1,754 people from 24 communities, which included households and neighbourhood community child care points (where children are cared for and fed a daily meal), received rainwater harvesting materials and training on water use efficiency to enhance rainwater harvesting and water storage at community level.

Output 4 targeted 25 Health Facilities to ensure access to Safe Water Supply. This was not carried out as originally planned. During the preparation for implementation, discussions with government counterparts identified that this output area no longer needed support since it was supported by another funding source. Following the initial needs assessment, the Government of Swaziland provided funding to support water provision to the targeted health centres through the drilling of new boreholes and through water trucking.

The targeted number of beneficiaries for the proposal had been set based on the inclusion of the clinic catchment population. Following the discontinuation of activities under Output 4, the project expanded the scope and targets of the three remaining output areas in order to compensate for the lack of people reached through output 4. This change targeted people in need and remained within the scope of the CERF response. Using the overall project target, the project was able to reach 86,190 beneficiaries or 90 per cent of the targeted beneficiaries.

Additional Activities. Following the February 2016 Rapid Assessment, increase in malnutrition and health issues in Shiselweni and Lubombo were reported. Given the inter-linkage of WASH and nutrition outcomes, and the need to provide a rapid response to mitigate any such issues, it was determined that a more detailed Health and Nutrition Assessment needed to be carried out to verify the reports and determine any critical response needs. A total of \$27,681, sourced from CERF was contributed to cost-sharing of a health and nutrition assessment and purchase of emergency supplies of Ready to Use Therapeutic Food (RUTF), following the assessment findings. The assessment found that while the global acute malnutrition rate of 3.1 per cent was within the WHO threshold of 5 per cent acceptable levels, it had increased by 1 per cent since 2014 and that there were pockets of acute malnutrition in Lubombo and Shiselweni regions, the target areas for the CERF-funded WASH interventions. CERF funds procured emergency supplies of RUTF amounting to 550 cartons, as a short-term measure while the Government of Swaziland through the Ministry of Health and Swaziland National Nutrition Council (SNNC) scaled up their national nutrition programme.

CERF's ADDED VALUE

CERF funding for targeted, comprehensive WASH responses ensured that communities and schools were able to avoid disease outbreaks and maintain safe water consumption practices:

- People who previously had no access to safe water, were able to obtain safe water through strategic water reservoirs placed in communities.
- Provision of safe-drinking water to schools ensured that children were able to continue accessing education, despite the drought.
- Hygiene and sanitation promotion mitigated against earlier threats of disruption of learning in schools.

Through this initiative, CERF-funding allowed government and other WASH sector partners, room to plan for more sustainable water provision beyond water trucking. The CERF funding enabled UNICEF to demonstrate and implement critical emergency interventions to address life-saving needs, such as water trucking to affected communities to meet immediate needs while working on putting in place a more sustainable water supply.

Through the CERF-funded project, UNICEF was able to demonstrate the importance of having globally-accredited household water treatment methods/reagents available in Swaziland. Household water treatment standards in Swaziland had not previously conformed to global standards. UNICEF used evidence from the affected communities to support the NDMA to secure approval for the importation of household treatment reagents which resulted in 8,800 people accessing water through point of source treatment.

The CERF funds offered the flexibility to identify and respond to critical needs related to reported increases in malnutrition and associated health needs amongst the target population. The flexibility ensured that short-term measures could be put in place while allowing the government to develop a more comprehensive response and source additional funding.

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

YES

The rapid availability of funding supported the food sector to provide effective, timely and coherent delivery of assistance to drought affected people during a time when other means of support wasn't available. It was among the handful of donors that came forth to fill critical gaps during a crisis situation affecting several hundred thousand people.

CERF Funds enabled the UN to be among the first government partners to deliver assistance to the targeted beneficiaries who had been listed in the NERMAP and Sector Specific action plans. Within 30 days of the CERF funds effective date, UNICEF was able to sign an agreement with World Vision Swaziland who were able to immediately start implementation using available funding which were reimbursed when CERF funds were transferred into their account. UNICEF has global guidance and procedures to ensure that partnerships for Humanitarian Action are fast tracked. This ensured that CERF funds delivered on activities committed within the project documents in a timely fashion. Regular field monitoring and follow up meetings between UNICEF and World Vision ensured that implementation of interventions and services were delivered in accordance with minimum humanitarian standards.

b) Did CERF funds help respond to time critical needs¹?

YES

The CERF funds enabled WFP to provide assistance at a time when assessments already showed that at least 300,000 people were in critical need of emergency food assistance. The 2015/16 agricultural season had been compromised by the drought and assessments showed that households were already resorting to adopting negative coping strategies, which reinforced the urgency of assistance. Through CERF funds the UN demonstrated lifesaving WASH interventions which were needed immediately by the most affected and vulnerable populations within affected drought areas at the onset of the drought response. CERF funding bridged water supply gaps in schools which rely heavily on accumulated and stored rainfall during the dry winter season.

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

YES

The CERF contribution, and the fact that the UN was among the first development partners to support the emergency response and helped mobilise support for the national response. However, there are still substantial gaps in resources mobilized against the needs. In addition, the CERF funding was reported in both the consolidated UN Swaziland Situation Report and the UNICEF monthly Situation Reports, both shared globally. The ability to demonstrate results provided a basis for leveraging additional funding for the WASH response to scale up emergency interventions. UNICEF was able to reprogram its resources to complement the CERF, to provide the more sustainable interventions such as the drilling two new bore holes and rehabilitating 17 hand pumps within benefiting communities. Office of U.S. Foreign Disaster Assistance (OFDA) funds were received by UNICEF in September, and Global Affairs Canada funds in October, after demonstrating results from CERF funded activities.

d) Did CERF improve coordination amongst the humanitarian community?

YES

¹ 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.).

CERF funding assisted to ensure that partners discussed priorities and strategic direction. Based on sectoral consultations, the UN Country Team agreed that based on needs analysis, interventions targeting food assistance and water, sanitation and health (WASH) for the most vulnerable households and communities were selected for inclusion in the CERF application.

The UN in Swaziland was able to mobilise overall OCHA coordination funding through which technical support was provided to government. At the sector level, the CERF funding enabled UN to effectively work with government and NGO partners through the WASH sector by providing technical expertise for specific WASH Coordination to define service standards, information sharing and critical emergency interventions to address life-saving needs - for example, water trucking to affected communities to meet immediate needs while working on establishing a medium to longer- term sustainable water supply. A process which was integrated into sector-wide WASH responses as a part of resilience building approaches. This continued investment in coordination will be critical for further harmonisation of the response.

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

- The requirements of the application process for CERF funding strengthened WASH sectoral assessment processes and ensured better identification of needs and targeting of the response.
- On the spot capacity development of key national partners and UN staff was greatly enhanced with CERF funding.
- CERF funding raised the visibility of the UN amongst humanitarian partners and the Government.
- The integrated response for WASH and nutrition benefitted the affected population. This approach will continue in future humanitarian responses.

V. LESSONS LEARNED

TABLE 6: OBSERVATIONS FOR THE <u>CERF SECRETARIAT</u>		
Lessons learned	Suggestion for follow-up/improvement	Responsible entity
Procurement of in-kind commodities may cause delay which is a constraint for providing rapid response.	When possible, opt for cash as transfer modality for CERF funding.	WFP
External engagement in the proposal development process adds value. The support from the CERF secretariat to the in-country proposal development team greatly enhanced the proposal development process and resulted in a stronger proposal.	Recommend that the support systems in place to support the Swaziland proposal development process be maintained.	OCHA

TABLE 7: OBSERVATIONS FOR COUNTRY TEAMS

Lessons learned	Suggestion for follow-up/improvement	Responsible entity
It is important to have contingency partnership agreements with partners that have a longer duration than just immediate humanitarian crises.	As humanitarian agencies, should map out all potential implementing partners with a possible humanitarian focus within their scope of Work and have none monetary agreements that are long term (at least 5 years). This will remove partnership red tape such as registration of IP in Agency data base and focus on the agreed results framework and budget.	Agency Heads and Focal Chiefs and Officers
Continued / ongoing with UN OCHA to support the Humanitarian Response	The UN in Swaziland should have a calendar based engagement with UN OCHA even outside of emergencies, to strengthen the UN's capacity in preparedness, response, recovery and resilience interventions.	UNRC Office and Agency Heads
Integration of interventions (e.g. WASH and Food) is not always possible due to different vulnerabilities within the same populations. However, where WASH and Food components were integrated, it added a lot of value on changing the lives of the people affected by the drought.	Need to maximise opportunities for integration in future programming for greater impact.	UNRC Office and Agency Heads
Weak information management systems affect timely availability of data especially within a humanitarian context to inform timely decisions.	Need to strengthen information management systems across all levels to enhance timely reporting to inform programme improvement. The use of Rapid Pro systems, such as U-Report should be considered for use in the future.	UNRC Office and Agency Heads

VI. PROJECT RESULTS

TABLE 8: PROJECT RESULTS						
CERF project information						
1. Agency:	UNICEF	5. CERF grant period:	01/04/2016 – 30/09/2016			
2. CERF project code:	16-RR-CEF-045	6. Status of CERF grant:	<input type="checkbox"/> Ongoing			
3. Cluster/Sector:	Water, Sanitation and Hygiene		<input checked="" type="checkbox"/> Concluded			
4. Project title:	Provide optimal access to life-saving WASH services for women and children in the drought affected regions					
7. Funding	a. Total funding requirements ² :	US\$ 1,944,000	d. CERF funds forwarded to implementing partners:			
	b. Total funding received ³ :	US\$ 899,826	▪ NGO partners and Red Cross/Crescent:		US\$ 248,750	
	c. Amount received from CERF:	US\$ 340,040	▪ Government Partners:		US\$ N/A	
Beneficiaries						
8a. Total number (planned and actually reached) of individuals (girls, boys, women and men) <u>directly</u> through CERF funding (provide a breakdown by sex and age).						
Direct Beneficiaries	Planned			Reached		
	Female	Male	Total	Female	Male	Total
Children (< 18)	26,647	25,603	52,250	37,039	36,285	73,324
Adults (≥ 18)	21,803	20,947	42,750	7,197	5,669	12,866
Total	48,450	46,550	95,000	44,236	41,954	86,190
8b. Beneficiary Profile						
Category	Number of people (Planned)		Number of people (Reached)			
Refugees						
IDPs						
Host population			95,000		86,190	
Other affected people						
Total (same as in 8a)			95,000		86,190	

² This refers to the funding requirements of the requesting agency (agencies in case of joint projects) in the prioritized sector for this specific emergency.

³ This should include both funding received from CERF and from other donors.

<i>In case of significant discrepancy between planned and reached beneficiaries, either the total numbers or the age, sex or category distribution, please describe reasons:</i>	At the time of receiving CERF funds the situation in clinics had changed with Government and other partners having focused on ensuring clinics remain functional by ensuring that the target clinics are provided with water and other basic needs. UNICEF and World Vision, the implementing partner, having confirmed that the target clinics were already supported by government, made the decision to focus efforts on schools and communities. This has resulted in the discrepancy in total numbers, age and category distribution of planned number of people to be reached from the actual reached.
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CERF Result Framework			
9. Project objective	Provide optimal access to lifesaving WASH services for women and children in the drought affected regions		
10. Outcome statement	To prevent the loss of life by ensuring the provision of potable water supply, hygiene and sanitation facilities and supplies for the affected population, in order to prevent the outbreak of water borne diseases among 95,000 people.		
11. Outputs			
Output 1	12,000 students have access to safe drinking water		
Output 1 Indicators	Description	Target	Reached
Indicator 1.1	Safe drinking water available every day, enough for personal cleaning and handwashing as percentage in affected community schools	12,000	20,903
Indicator 1.2	Number of children in schools provided with access to appropriate sanitation facilities as percentage in affected community schools	12,000	None
Indicator 1.3	Number of children in schools provided with access to handwashing facilities as percentage in affected community schools	12,000	16,837
Indicator 1.4	Number of students benefiting from hygiene and sanitation promotion messages as percentage in affected community schools	12,000	16,036
Output 1 Activities	Description	Implemented by (Planned)	Implemented by (Actual)
Activity 1.1	Verification Exercise with Implementing Partners	UNICEF and partners	UNICEF and World Vision Swaziland
Activity 1.2	Procurement of Water Tanks	UNICEF and partners	World Vision Swaziland
Activity 1.3	Installation of Strategic Reservoirs	UNICEF and partners	World Vision Swaziland
Activity 1.4	Tanked Water Supply to Schools	UNICEF and partners	World Vision Swaziland
Activity 1.5	Hygiene Promotion	UNICEF and partners	World Vision Swaziland
Output 2	2,000 people accessing safe water through Household water treatment to prevent water borne diseases from Unsafe water sources		

Output 2 Indicators	Description	Target	Reached
Indicator 2.1	No of households possessing suitable water container for safe storage in communities with access to unsafe water sources in target Communities	400 households representing 2,000 people	Not determined
Indicator 2.2	No of households possessing appropriate water-treatment supplies in target communities	400 households representing 2000 people	1,760 households representing 8,800 people
Indicator 2.3	Extent to which the Household Water Treatment and Safe storage intervention improves drinking-water at household level	100% (Treatment in 400 HH represented by 2,000 people)	1,760 households representing 8,800 people
Indicator 2.4	Number of people provided with access to safe water (7.5L to 15L per person per day)	2,000	8,800
Output 2 Activities	Description	Implemented by (Planned)	Implemented by (Actual)
Activity 2.1	Identification of Households using unprotected water sources in affected communities	UNICEF and partners	World Vision Swaziland
Activity 2.2	Procure Household Water treatment Kits and Safe storage Jerry Cans	UNICEF and partners	World Vision Swaziland
Activity 2.3	Demonstrate use of House Treatment and Safe Storage to Beneficiaries	UNICEF and partners	World Vision Swaziland
Activity 2.4	Distribute Household treatment Kits to Beneficiaries	UNICEF and partners	World Vision Swaziland
Activity 2.5	Monitoring Household water treatment and Safe Storage	UNICEF and partners	World Vision Swaziland
Output 3	6,000 people accessing water at Strategic Water Reservoirs		
Output 3 Indicators	Description	Target	Reached
Indicator 3.1	No of households with access to a source of safe drinking-water (7.5L to 15L per person per day) as a percentage in Lubombo and Shiselweni	100% (6,000 people from estimated 12,000 HH)	25,030
Indicator 3.2	Average time required (minutes) for one water collection journey	30 min	Did not consistently track
Output 3 Activities	Description	Implemented by (Planned)	Implemented by (Actual)
Activity 3.1	Procurement of Water Tanks as strategic reservoirs and Accessories	UNICEF and partners	World Vision Swaziland
Activity 3.2	Ensure Gender equity in community participation	UNICEF and partners	UNICEF and World Vision Swaziland
Activity 3.3	Installation of Strategic Reservoirs	UNICEF and partners	World Vision Swaziland
Activity 3.4	Distribution of water using tankers	UNICEF and partners	World Vision Swaziland
Activity 3.5	Community Water Use Efficiency and Hygiene Sensitisation	UNICEF and partners	World Vision Swaziland
Output 4	25 Health Facilities have access Safe Water Supply		

Output 4 Indicators	Description	Target	Reached
Indicator 4.1	No. of Health facilities with an improved water source within it perimeters	25	N/a
Indicator 4.2	No. of clinics with safe water every day, enough for drinking, handwashing and for service delivery in affected community clinic	25	N/a
Indicator 4.3	No. of Clinics with handwashing stations with soap or alcohol based hand rubs within the facility	25	N/a
Output 4 Activities	Description	Implemented by (Planned)	Implemented by (Actual)
Activity 4.1	Verification of Health Facility Water Needs	UNICEF and partners	N/a
Activity 4.2	Procurement of Water Tanks and Accessories	UNICEF and partners	N/a
Activity 4.3	Installation of Water Tanks	UNICEF and partners	N/a
Activity 4.4	Tanked Water Supply to Schools	UNICEF and partners	N/a
Activity 4.5	Support Establishment of Oral Rehydration Therapy Corners in Clinics and Schools	UNICEF and partners	N/a
Activity 4.6	Monitoring of Water Availability using Rapid Pro	UNICEF and partners	N/a

12. Please provide here additional information on project's outcomes and in case of any significant discrepancy between planned and actual outcomes, outputs and activities, please describe reasons:

Output 4 - 25 Health Facilities have access to Safe Water Supply was not carried out as originally planned. During the preparation for implementation, discussions with government counterparts identified that this output area did not require support from CERF since it was supported by another funding source. Following the needs assessment, the Government of Swaziland had provided funding to support water provision to the targeted health centres through the drilling of new boreholes and through water trucking.

The targeted number of beneficiaries had been set based on the inclusion of the clinic catchment population. Following the discontinuation of activities under output four, the project expanded the scope of the three remaining output areas to reach more people in need within the scope of the CERF response. With the variation in category target beneficiaries through clinics the project was able to still reach 90 per cent of the target number of beneficiaries which is 86,190 beneficiaries surpassing initial targets for schools and communities.

Additional Activities. Following reports of critical nutrition-related needs in the target areas, \$27,681 (less than 10 per cent of project funds) were redirected towards a detailed Health and Nutrition Assessment and the purchase of 550 Cartons of RUTF, as a short – term measure, while the Government of Swaziland through the Ministry of Health and Swaziland National Nutrition Council scaled up their national nutrition programme. The procured nutrition supplies contributed to the treatment of 537 Severe Acute Malnourished children and 274 Moderately Acute Malnourished children.

13. Please describe how accountability to affected populations (AAP) has been ensured during project design, implementation and monitoring:

Accountability to Affected Populations was particularly evident in the project implementation phase. Capacity was built of water committees for the development, management and monitoring of water points and boreholes. The project was implemented in areas where World Vision had ongoing development programmes. The community committees in place in these areas were used to

inform the identification of needs for the humanitarian response.	
14. Evaluation: Has this project been evaluated or is an evaluation pending?	EVALUATION CARRIED OUT <input type="checkbox"/>
World Vision, the implementing partner, is planning to conduct an evaluation six months after completion, through its accountability team. UNICEF will share the evaluation with the CERF secretariat.	EVALUATION PENDING <input checked="" type="checkbox"/>
	NO EVALUATION PLANNED <input type="checkbox"/>

TABLE 8: PROJECT RESULTS

CERF project information						
1. Agency:	WFP		5. CERF grant period:	04/04/2016 – 03/10/2016		
2. CERF project code:	16-RR-WFP-024		6. Status of CERF grant:	<input checked="" type="checkbox"/> Ongoing		
3. Cluster/Sector:	Food Aid			<input type="checkbox"/> Concluded		
4. Project title:	Emergency food assistance to vulnerable households severely affected by the drought					
7. Funding	a. Total funding requirements ⁴ :	US\$ 16,092,748	d. CERF funds forwarded to implementing partners:			
	b. Total funding received ⁵ :	US\$ 9,287,615	▪ NGO partners and Red Cross/Crescent:		US\$ 201,689	
	c. Amount received from CERF:	US\$ 2,801,868	▪ Government Partners:			
Beneficiaries						
8a. Total number (planned and actually reached) of individuals (girls, boys, women and men) directly through CERF funding (provide a breakdown by sex and age).						
Direct Beneficiaries	Planned			Reached		
	Female	Male	Total	Female	Male	Total
Children (< 18)	17,175	15,029	32,204	17,175	15,029	32,204
Adults (≥ 18)	20,754	18,607	39,361	20,754	18,607	39,361
Total	37,929	33,636	71,565	37,929	33,636	71,565
8b. Beneficiary Profile						
Category	Number of people (Planned)		Number of people (Reached)			
Refugees						
IDPs						
Host population			71,565		71,565	
Other affected people						
Total (same as in 8a)			71,565		71,565	
In case of significant discrepancy between planned and reached beneficiaries, either	N/A					

⁴ This refers to the funding requirements of the requesting agency (agencies in case of joint projects) in the prioritized sector for this specific emergency.

⁵ This should include both funding received from CERF and from other donors.

<i>the total numbers or the age, sex or category distribution, please describe reasons:</i>	
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CERF Result Framework			
9. Project objective	Save lives and protect livelihoods of drought affected people in Swaziland		
10. Outcome statement	Stabilized or improved food consumption over assistance period for targeted households, measured by an 80% reduction in households with a poor food consumption score		
11. Outputs			
Output 1	71,565 beneficiaries have access to food for over 4 months through food transfers		
Output 1 Indicators	Description	Target	Reached
Indicator 1.1	Quantity of food procured and received in country for distribution, disaggregated by type, as % of planned	100%	110%
Indicator 1.2	Quantity of food assistance distributed, disaggregated by type, as % of planned	100%	110%
Indicator 1.3	Number of women, men, boys and girls receiving food assistance, disaggregated by activity; beneficiary category, sex, as % of planned	100%	100%
Output 1 Activities	Description	Implemented by (Planned)	Implemented by (Actual)
Activity 1.1	Undertake targeting and baseline	WFP and cooperating partner	WFP and cooperating partners (ACAT, Caritas, Save the Children and World Vision)
Activity 1.2	Provision of food assistance – carry out food distributions	WFP and cooperating partner	WFP and cooperating partners (ACAT, Caritas, Save the Children and World Vision)
Activity 1.3	Monitoring	WFP and cooperating partner	WFP and cooperating partners (ACAT, Caritas, Save the Children and World Vision)
Output 2	Cross-cutting: Gender equality and empowerment improved among 71,565 assisted people		
Output 2 Indicators	Description	Target	Reached
Indicator 2.1	% of women beneficiaries in leadership positions in community project management committees	>50%	82%
Indicator 2.2	% women who make decisions about use of food in the household	50%	79.5%

Indicator 2.3	% men who make decisions about use of food in the household	25%	5.7%
Indicator 2.4	% of women and men who make decisions jointly about use of food in the household	25%	14.8 %
Output 2 Activities	Description	Implemented by (Planned)	Implemented by (Actual)
Activity 2.1	Establish gender-balanced project management committees and promote women in leadership positions	WFP and cooperating partner	cooperating partners (ACAT, Caritas, Save the Children and World Vision)
Activity 2.2	Monitor decision-making related to use of food in households	WFP and cooperating partner	WFP and cooperating partners (ACAT, Caritas, Save the Children and World Vision)
Output 3	Cross-cutting: Food assistance delivered and utilized in safe, accountable and dignified conditions for 71,565 beneficiaries		
Output 3 Indicators	Description	Target	Reached
Indicator 3.1	Proportion of assisted people who do not experience safety issues travelling to/ from or at WFP programme sites (disaggregated by gender)	80%	100%
Indicator 3.2	Proportion of assisted people who are well informed about the programme (who is included, what people will receive, where people can complain)	70%	100%
Output 3 Activities	Description	Implemented by (Planned)	Implemented by (Actual)
Activity 3.1	Monitor safety reports of assisted people and knowledge of the programme	WFP and cooperating partner	WFP and cooperating partners (ACAT, Caritas, Save the Children and World Vision)
Activity 3.2	Distribution points selected with community	WFP and cooperating partner	cooperating partner (ACAT, Caritas, Save the Children and World Vision)
Activity 3.3	Educate targeted households about food assistance and programme operations	WFP and cooperating partner	WFP and cooperating partners (ACAT, Caritas, Save the Children and World Vision)

12. Please provide here additional information on project's outcomes and in case of any significant discrepancy between planned and actual outcomes, outputs and activities, please describe reasons:

N/A	
13. Please describe how accountability to affected populations (AAP) has been ensured during project design, implementation and monitoring:	
Accountability to assisted people is maintained by involving the communities in the targeting and verification for the programme. Eligibility criteria and beneficiaries' entitlement is widely communicated through sensitization sessions and the training of the food management committees, who involve women and represent the most disadvantaged groups. Staff of WFP and cooperating partners are trained in basic principles for prevention of sexual exploitation and abuse in humanitarian assistance. A complaint and feedback mechanism has been established and involves women and representatives of the most disadvantaged groups.	
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"/>

ANNEX 1: CERF FUNDS DISBURSED TO IMPLEMENTING PARTNERS

CERF Project Code	Cluster/Sector	Agency	Partner Type	Total CERF Funds Transferred to Partner US\$
16-RR-WFP-024	Food Assistance	WFP	NNGO	\$42,938
16-RR-WFP-024	Food Assistance	WFP	INGO	\$46,328
16-RR-WFP-024	Food Assistance	WFP	INGO	\$56,180
16-RR-WFP-024	Food Assistance	WFP	INGO	\$56,243
16-RR-CEF-045	Water, Sanitation and Hygiene	UNICEF	INGO	\$248,750

ANNEX 2: ACRONYMS AND ABBREVIATIONS (Alphabetical)

AAR	Action After Review
ACAT	Africa Cooperative Action Trust
CARITAS	Churches Around Richmond Involved To Assure Shelter
CERF	Central Emergency Response Fund
CFSAM	Crop and Food Security Assessment Mission report
FAO	Food and Agricultural Organisation
IPC	Integrated Food Security Phase Classification
IOM	International Organisation for Migration
IP	Implementing Partner
NDMA	National Disaster Management Agency
NGO	Non-Governmental Organisation
NERMAP	National Emergency Response, Mitigation and Adaptation Plan
NGO	Non-Governmental Organisation
OFDA	Office of U.S. Foreign Disaster Assistance
OCHA	Office for the Coordination of Humanitarian Affairs
RC/HC	Resident Coordinator/ Humanitarian Coordinator
RUTF	Ready to Use Therapeutic Food
SADC	Southern African Development Community
SNNC	Swaziland National Nutrition Council
SVAC	Swaziland Vulnerability Analysis Committee
UNCT	United Nations Country Team
UNICEF	United Nations Children's Fund
UNRC	United Nations Resident Coordinator
WASH	Water, Sanitation and Health
WFP	World Food Programme
WHO	World Health Organisation