



CENTRAL EMERGENCY RESPONSE FUND

LIFE-SAVING CRITERIA

A. INTRODUCTION

The Central Emergency Response Fund (CERF) is a stand-by fund established by the United Nations to enable more timely and reliable humanitarian assistance to victims of disasters and complex emergencies. The CERF was adopted by consensus by the United Nations General Assembly on 15 December 2005 to achieve the following objectives:

- Promote early action and response to reduce loss of life;
- Enhance response to time-critical requirements;
- Strengthen core elements of humanitarian response in underfunded crises

Support from the CERF is based on the idea of prioritized “life-saving” assistance to people in need. While the notion of life-saving and time-critical assistance seems relatively clear, an objective technical definition is difficult to find. To ensure adherence to its mandated role the CERF defines “life-saving” by using the basic humanitarian principle of placing the people and communities affected in the focus and applying a rights-based approach traced back to the Universal Declaration of Human Rights, in particular the right to life with dignity.

These guidelines aim at clarifying definitions and determining criteria for the CERF grant elements. They cover general as well as cluster and/or sectoral criteria for both the rapid response and underfunded windows of the CERF. In situations where the Cluster Approach is not in place, these guidelines should nonetheless be used by the sectors to guide interventions, as well as to guide agency-mandated activities that do not fall under clusters/sectors (such as UNHCR’s refugee mandate). The intent of these guidelines is to be inclusive of different types of activities, while simplifying interpretation at field level. It is anticipated that the criteria will assist in improving the quality of submissions as well as simplify and speed up the approval process.

The life-saving criteria have been developed with a range of crises in mind but must be interpreted in relation to the specific situation. The context on the ground will guide the process and an appropriate degree of flexibility will be exercised with regard to funding decisions. Nevertheless, the use of CERF funds will not be used to address issues that require long-term interventions, or are not situated in a humanitarian emergency context.

The following guidelines are an outcome of discussions with the UN agencies and IOM, the Global Cluster Leads, other partners and field practitioners. In addition they respond to the recommendation by the Independent Two-Year Evaluation of the CERF; *“In order to ensure that CERF only funds activities arising out of humanitarian emergencies (both rapid and chronic), place the existing “life-saving criteria” for CERF grants in the context of core emergency needs to emphasize the principles articulated in the SG’s bulletin, and target the CERF more precisely so that the prioritization of needs becomes clearer.”*

While a formal review of these criteria will not take place until after the results of the Five-Year Evaluation have been received, the CERF may adjust the “life-saving criteria” on specific issues following consultation with stakeholders.

B. SCOPE - For CERF Grant Windows

The guidelines are intended for use by RC/HCs and country teams at the field level, as well as OCHA and UN agencies/IOM at the headquarters level to guide the prioritization, formulation and selection of CERF grant requests. In countries where clusters have been established they should engage in a prioritization process with clear criteria developed and applied by their membership; however, application through clusters does not limit the inclusion of non-cluster activities.

The guidelines provide detailed information about the humanitarian activities that fall within the life-saving mandate of the CERF, listed per cluster/sector.

As per the CERF mandate, the following issues are NOT included in the criteria as they are not eligible for CERF support:

Preparedness: Activities and measures taken in advance to ensure effective response to the impact of hazards, including the issuance of timely and effective early warnings and the temporary evacuation of people and property from threatened locations. The CERF does not support regular agency stockpiling, or pre-positioning of relief goods as a contingency measure. However, in the case of a sudden onset emergency, if an agency starts to respond using emergency stocks or diverts stocks intended for other operations, the replacement of these stocks can be included in their rapid response submission.

Prevention: Activities to provide outright avoidance of the adverse impact of hazards and means to minimize related environmental, technological and biological disasters. This does not exclude activities for an ongoing emergency.

Disaster risk reduction: The conceptual framework of elements considered with the possibilities to minimize vulnerabilities and disaster risks throughout a society, to avoid (prevention) or to limit (mitigation and preparedness) the adverse impacts of hazards, within the broad context of sustainable development.

Early warning: The provision of timely and effective information, through identified institutions, that allows individuals exposed to a hazard to take action to avoid or reduce their risk and prepare for effective response.

C. TERMS AND DEFINITIONS¹

Disaster²: A disaster is a serious disruption of the functioning of a community or a society causing widespread human suffering, material, economic or environmental losses which exceed the ability of the affected community or society to cope using its own resources. Disasters can be caused by a variety of factors including natural hazards (geological, hydro meteorological and biological) or be induced by human processes (e.g. environmental degradation, technological hazards).

¹ Definitions adapted from different sources including CERF Resolution, IASC, Financial Tracking System and Sphere Standards.

² [UNISDR Terminology on Disaster Risk Reduction \(2009\)](#)

Complex Emergencies: Complex emergencies are characterized by: extensive violence and loss of life, massive displacements of people, widespread damage to social and economic assets, widespread violation of rights, and multi-faceted humanitarian responses. A humanitarian crisis that requires an international response that goes beyond the mandate or capacity of any single agency. (IASC, December 1994).

Life-saving and/or core emergency humanitarian programmes are those **actions** that within a short time span remedy, mitigate or avert direct loss of life, physical and psychological harm or threats to a population or major portion thereof and/or protect their dignity. Also permissible are common humanitarian services that are necessary to enable life-saving activities and multi-agency assessments in the instance of sudden onset disasters.

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. It relates to the opportunities for rapid injection of resources to save lives either in complex emergencies or after natural disasters.

D. HUMANITARIAN CONSIDERATIONS

CERF supported interventions are to be consistent with basic humanitarian principles of humanity, neutrality and impartiality. In addition, agencies implementing CERF-funded projects, as part of the United Nations and of the larger humanitarian community should take into consideration:

- Vulnerability of particular groups: Children and women represent the largest group of individuals affected by emergencies. Particular attention should be paid to the situation of boys and girls (including adolescents), women and the elderly in all emergency situations. The situation of marginalized and other groups particularly vulnerable in humanitarian crises, such as persons living with HIV, persons with disabilities, the elderly, persons belonging to minorities, indigenous groups and trafficked persons, are also of special concern in humanitarian crises. The CERF emphasizes the importance of ensuring that principles provided in the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW)³, adopted in 1979 by the UN General Assembly and the principles enshrined in the Convention on the Rights of the Child (CRC)⁴, adopted by the UN General Assembly in 1989, together with the CRC's Optional Protocol on the Sale of Children, Child Prostitution and Child Pornography (adopted in 2000)⁵, and other related Resolutions such as Resolution 1325 on Women, Peace and Security, adopted in October 2000, be pillars to the implementation of CERF funded programmes and projects. In all sectors of response, agencies should ensure the application of gender equity principles that will promote the empowerment and protection of women and girls.
- Environment: Given the acknowledged fragility of the natural environment and possibly irreversible deterioration of soil and water quality, agencies are requested to give maximum attention in the use of funds to averting negative effects on the environment.
- Cross-cutting issues: Particular attention should be given to integrating and giving due consideration to other cross-cutting issues including human rights and HIV.
- Partnerships: UN agencies and humanitarian actors at large are at the heart of planning, prioritization and decision making in regards to the CERF. They are encouraged to maximize the interaction and collaboration with governments and national and international

³ CEDAW Text

⁴ CRC Text

⁵ OP Text

non-government organizations in order to effectively respond to emergencies and to ensure that the basic principles and priorities of the CERF are followed and effectively applied. UN agencies who are recipients of CERF funds should continue to engage with clusters/sectors and strive to ensure that funds are transferred to implementing partners in a timely manner and base their interactions on the “Principles of Partnership”.

- Empowerment of affected populations: Focusing on the immediate aftermath of emergencies, the CERF expects agencies implementing programmes and projects to take into consideration the project activities integration into future programming, with special consideration to gender and marginalized groups, who may be particularly vulnerable in humanitarian crises, such as persons living with HIV, persons with disabilities, the elderly, persons belonging to minorities, indigenous groups and trafficked persons.
- Supports the Principles of “Good Humanitarian Donorship” and “Do No Harm”: Agencies will make all efforts to ensure that assistance funded by the CERF empowers local communities and promotes self-sufficiency; under the auspices of their own mandates conduct regular monitoring and evaluation of impact; avoid contributing to conflict and inequity; contribute to recovery and sustainable interventions; and take steps to actively create opportunities for effective participation of civil society and local governments.
- Sphere Project: Humanitarian Charter and Minimum Standards in Disaster Response: The cornerstone of the Sphere Project is the Humanitarian Charter, which is based on the principles and provisions of international humanitarian, human rights and refugee law, and on the principles of the Red Cross and NGO Code of conduct. The Minimum Standards are organized into initial chapter that details process standards for the planning and implementation of programmes, together with technical chapters covering water, sanitation and hygiene promotion; food security, nutrition and food aid; shelter, settlement and non-food items; and health services. The 2004 version is currently under review with a potential launch date of 2010. Reference should also be made to the companion documents to the Sphere such as the MSEE.

Sector and/or Cluster (as applicable) Activities Regularly Funded through CERF Grants

The table below is an integral part of these guidelines and elaborates on the elements described above. The table includes a general description of the overall criteria for interventions in IASC-recognized sectors, a list of activities that meet the criteria, and the conditions under which these activities will be funded.

It should be added that this is not an exhaustive list of activities that may qualify for CERF funding but should rather be understood as overall guidance. Humanitarian activities not reflected in this list may be considered for CERF funding based on the specific context.

Further, the cluster approach has been adopted in many humanitarian emergencies and the sectors listed below should be applicable to most situations. However, agency activities for a population group under a specific mandate can be considered outside this approach. In such situations, final allocation processes in the field should take place at the Humanitarian Country Team or UNCT level with the final decision being made by the RC/HC.

SECTOR	ACTIVITIES	CONDITIONS
Agriculture in Emergencies	Provision of inputs such as seeds, fertilizers and tools in emergency contexts to restore food security and production capacity.	Agricultural activities which have a direct and immediate impact on restoring and protecting food availability and the livelihoods of those affected by an emergency.
	Survival of productive animals in emergency situations. Examples include emergency vaccination, initial re-stocking, de-stocking, and water and supplementary feeding for animals.	Applicable when animal husbandry is a primary source of livelihood, particularly for pastoralist communities and women, i.e. when livestock are essential for nutrition, transport, ploughing and fuel.
	Initial inputs for trans-boundary or country contained crop pest plague control (for example against locusts) or to control the spread of livelihood and human life threatening epizootic diseases	Time-critical interventions to avert disaster and restore livelihoods after damage assessments.
	Flood and drought related response. Examples include emergency embankments, spot repair of agricultural infrastructure and other emergency inputs.	Time-critical interventions to protect or ensure food security.
Camp Co-ordination and Camp Management In the case of rapid onset emergencies or where displacement leads to camps/sites, (or any communal setting such as . planned camps, collective centers, spontaneous settlements, transit centers) immediate set up of Camp Coordination and Camp Management functions to support a response.	Establishment of camps/communal settlements to support the stabilization of affected populations.	All communal setting resulting from a disaster or complex emergency.
	Support the delivery of essential life saving services.	Until such time when services have been established
	Initial profiling/registration of populations in communal settings including camps, collective centers and other sites.	Context of specific emergency response.
	Establish participatory management systems that ensure the immediate protection and assistance needs of affected populations are addressed.	Context of specific emergency response.
	Establish common systems in all communal settings to ensure equitable and common standards of protection and assistance.	Set up functions at the onset of camp response within the context of a broader response to avoid pull factors to destabilize settlements and potentially threaten populations.
	Advocate for humanitarian access to allow life-saving activities to be conducted in communal settings.	Should be coordinated with the protection cluster/sector
	Create governance systems to protect and secure residents either planned or spontaneously established camps and/or settlements.	Context of specific emergency response.
Assist in preparing for and facilitating immediate relocation or return of affected populations	Context of specific emergency response.	

Education in Emergencies Interventions aiming at restoring and providing safe educational and recreational activities for children and adolescents during an emergency.	Provision of school tents, education and recreation materials to establish safe spaces/ learning environments for children from different age groups.	No recurrent costs funded.
	Emergency repair of education facilities including the provision of adequate sanitation facilities and quantities of safe drinking water and water for personal hygiene at the learning site.	No recurrent costs funded.
	Teacher's training in emergencies	Support establishment of initial teaching capacity only. No recurrent costs for training.
	Essential life-saving skills and support such as SGBV information, Mine/UXO risk education, HIV/AIDS, psychosocial, nutrition, health and hygiene	Context of specific emergency response.
Emergency Shelter including NFRI Immediate provision of temporary/ semi-temporary shelter and basic utensils for victims of disaster including complex emergencies	Provision and distribution of shelter materials	Only for temporary emergency shelter and based on the context
	Construction/ repair of temporary emergency shelter	Tents or only basic building materials for immediate repair of buildings serving as temporary shelter
	Basic provision of Non-Food items for affected populations and hosting families.	According to cultural and climatic context.
	Basic infrastructure / shelter repair (including rubble removal, environmental clean-up, emergency rehabilitation of community infrastructure).	Context of specific emergency response.
	Construction / reconstruction and repair of temporary or transitional structures that provide immediate shelter and repair of permanent structures when appropriate.	Part of an established immediate – longer term (sustainable) shelter strategy by distributing reconstruction materials to non-displaced population if they contribute most durably to immediate shelter needs.
Food Provision of minimum food requirements to people affected by emergencies.	General food distribution and targeted distribution for most vulnerable groups (complement gaps).	Context of specific emergency response.
Health in Emergencies Activities that have an immediate impact on the health of population affected by an emergency.	Collection, processing analysis and dissemination of critical health information including access to and availability of life saving health services.	Context of specific emergency response
	Ensuring equitable and timely access to Emergency Primary Health Care	Context of specific emergency response.
	Provision, distribution and replenishment of quick turnover emergency stockpiles which have been used in an emergency context.	Context of specific emergency response.

	Mass casualty management -Activities may include first aid centers; in-service, procurement and delivery of essential medicines and medical equipment; medical evacuation services.	Context of specific emergency response.
	Repair of existing health facilities: Activities may include basic, rapid repairs to ensure medical facility functionality and provision of essential emergency medical equipment and medicines to emergency wards	Context of specific emergency response.
	Addressing life-threatening conditions related to communicable diseases (immunizations, outbreak control). Activities may include: establishment of emergency early warning and response systems for the early detection of and response to selected outbreaks of communicable diseases; training of health staff ; supply of drugs and material; social mobilization and targeted health education; Reactive mass vaccination campaign ; Preparation of specific ad-hoc treatment units (e.g. cholera treatment center)	Context of specific emergency response.
	Priority reproductive health emergency interventions: Activities may include supply of drugs and material (including through interagency RH kits such as clean delivery kits, midwifery kits). (As per revised inter-agency field manual on reproductive health in humanitarian settings-MISP chapter)	Context of specific emergency response.
	Medical (including psychological) support to survivors of sexual violence. Activities may include updating health staff on clinical management of sexual violence protocols; supply of drugs and material (including through interagency RH kits)	Context of specific emergency response.
	Addressing life-threatening conditions related to chronic diseases which have been interrupted in an emergency context.	Context of specific emergency response.
	Priority responses to HIV/AIDS. Activities include HIV/AIDS awareness information dissemination, provision of condoms, PMTCT, PEP, and standard precautions in emergency health care settings; emergency awareness and response interventions for high risk groups; care and treatment for people with HIV whose treatment has been interrupted.	Context of specific emergency response.

	Support the provision of Psychological First Aid - protect and care for people with severe mental disorders (suicidal behavior, psychoses, severe depression and substance abuse) in communities and institutions.	Context of specific emergency response.
Logistics Activities that provide immediate logistical support for the delivery of priority sectoral interventions in emergency response.	Transport, storage and handling in support of common humanitarian operations (Air, personnel, movements, evacuations, NFIs)	Context of specific emergency response.
	Joint Logistics Coordination cells in support of common humanitarian operations.	Context of specific emergency response.
	Logistics activities devised to overcome logistics bottlenecks affecting the supply chain of multiple humanitarian organizations in a common humanitarian operation. Eg; emergency bridge or road repairs.	Context of specific emergency response.
Nutrition	Nutrition screenings and surveillance to provide time critical information for identification of areas of urgent need, or deterioration in the nutritional situation, and for identification of cases of acute malnutrition for referral for lifesaving treatment.	Context of specific emergency response.
	Provision of life saving emergency food rations (e.g. BP5) to the general population, or as blanket to particular vulnerable groups	Only when general food ration quality is inadequate for the needs of the population or where distribution is not yet sufficiently addressed during an emergency and as a temporary measure to prevent further deterioration of the nutrition situation and loss of life.
	Provision of support to infant and young child feeding in emergencies (IFE). Activities include protection, support and promotion of early, exclusive and continued breastfeeding, through support to mothers, provision of counselors and ensuring secluded areas are available for breastfeeding. Provision of appropriately targeted support for artificially fed infants, monitoring and policy action for prevention of uncontrolled breastmilk substitute donation and distribution, provision of appropriate complementary foods.	Context of specific emergency response.

	Management of severe and moderate acute malnutrition Activities include support for inpatient and outpatient treatment for severe acute malnutrition as well as community mobilisation/outreach to ensure communities can identify cases and access the services (i.e. community-based management of severe acute malnutrition); Targeted and blanket supplementary feeding for children, pregnant and lactating women and other vulnerable groups.	Support for treatment of severe acute malnutrition should be provided wherever cases exist. Supplementary feeding should be considered where levels of acute malnutrition reach emergency thresholds. Blanket supplementary feeding approaches may be most appropriate where capacity is poor, where levels of acute malnutrition are very high and where the general ration is inadequate at the initial stages of the emergency.
	Micronutrient supplementation - Vitamins and minerals	Special mass campaigns should be set after needs assessment and coordination with other sectors (health and food) on the requirements and frequency.
Protection and Human Rights	Deployment of Emergency Protection Teams in disasters and emergencies.	'Protection by presence' may require substantive staffing inputs. Since protection staff are directly linked to providing protection to people of concern it is understood that protection submissions may include substantial staffing component and be considered an operational input.
	Profiling, registration and documentation of affected populations.	Context of specific emergency response
	Identification and strengthening/set up of community-based protection mechanisms	Context of specific emergency response
	Provision of life saving psychosocial support to person with special needs in particular for older persons.	In close coordination with the health cluster/sector
	Provision of life saving information to the affected population	Context of specific emergency response
	Support measures to ensure access to justice with a special focus on IDPs, women and children. (e.g. assessments of justice and security needs; support to legal advice and paralegal services in conflict affected areas)	Context of specific emergency response.
Gender- Based Violence	Strengthen and/or deploy GBV personnel to guide implementation of an inter-agency multi-sectoral GBV programme response including ensuring provision of accessible confidential, survivor-centered services to address GBV and to ensuring it is appropriately addressed across all sectors.	In an emergency context and as a first priority, support health service providers with relevant supplies and ensure a range of appropriate psychosocial interventions are in place and accessible.
	Identify high-risk areas and factors driving GBV in the emergency and (working with others) strengthen/set up prevention strategies including safe access to fuel resources (per IASC Task Force SAFE guidelines).	Context of specific emergency response

	Improve access of survivors of gender based violence to secure and appropriate reporting, follow up and protection, including to police (particularly women police) or other security personnel when available.	Context of specific emergency response.
Child Protection	Identification, registration, family tracing and reunification or interim care arrangements for separated children, orphans and children leaving armed groups/forces.	Context of specific emergency response
	Ensure proper referrals to other services such as health, food, education and shelter.	Context of specific emergency response
	Identification, registration, referral and follow-up for other extremely vulnerable children, including survivors of GBV and other forms of violence, children with no access to basic service and those requiring special protection measures.	Context of specific emergency response
	Activities (including advocacy, awareness-raising, life-skills training, and livelihoods)	Context of specific emergency response
	Provision of psychosocial support to children affected by the emergency, e.g. through provision of child friendly spaces or other community-based interventions, return to school or emergency education, mental health referrals where expertise exists.	Context of specific emergency response
	Identification and strengthening, or establishment of community-based child protection mechanisms to assess, monitor and address child protection issues.	Context of specific emergency response
Mine Action	Emergency survey and clearance of temporary resettlement area of displaced population.	Context of specific emergency response.
	Emergency Clearance and/or Survey (mines/UXO/cluster bombs) of identified temporary settlement areas or return areas, urban and/or populated areas, access to water, schools etc	Context of specific emergency response.
	Mine Risk Education for displaced and/or returning population	Context of specific emergency response.
Support Services	Provision of common security measures for safe delivery of humanitarian efforts.	Support to UNDSS and other agencies at RC/HC request.
	Provision of common emergency telecommunications in support of the humanitarian community in an emergency.	Context of specific emergency response.

Water and Sanitation Provision of minimum requirements of water, sanitation and hygiene standards in emergency situations.	Provision of water for drinking, cooking and personal hygiene (bathing/washing), Activities include extraction, transport, treatment, storage, distribution and monitoring; repair, construction and maintenance; bulk and household levels	Context of specific emergency response.
	Sanitation systems in emergency situations. Excreta disposal - shared, segregated household facilities	Where there are public health risks or risks to other resources and facilities.
	Vector control	Where there are public health risks or risks to other resources and facilities.
	Solid waste	Where there are public health risks or risks to other resources and facilities.
	Drainage	Where there are public health risks or risks to other resources and facilities.
	Hygiene and sanitation supplies (including for women and girls) and awareness raising. Active participation of and accountability to affected populations in the prevention and mitigation of WASH related diseases: Information/Communication; optimize effective use of facilities; mobilization and participation; Essential WASH related non-food items.	
Multi-sector Activities that support the delivery of emergency/humanitarian response for UN agencies, NGOs	Provision of humanitarian assistance in refugee situations that do not fall under the sector/cluster approach. Activities are included under the sectors referred to previously in this document. While all activities presented in the above sectors are also applicable to refugee situations, allocation of funding for refugees activities should be at the level of the UNCT and not on the level of the sector/cluster leads.	In cases where a limited number of agencies have the capacity and/or are requested to respond to a specific situation.
Coordination	Provision of assistance to coordination efforts in new disasters.	Funding for cluster/sector coordination, (cluster coordinator only) will only be supported in new emergencies and only under the RR window where there is a demonstrated need for support. This coordination person must be part of a larger agency project which has been prioritized by the RC/HC and HCT. Coordination will not be supported in a stand alone project.
Multi-Agency Assessments	Multi-agency needs assessments in new emergencies.	Must be supported by the RC/HC and HCT only for new emergencies and only under the RR Window. CERF will not fund sector specific assessments.