

Haiti

HUMANITARIAN APPEAL



June
2010

Mid-Year Review



Consolidated Appeals Process (CAP) Aid agencies working together to:



<http://www.humanitarianappeal.net>

SAMPLE OF ORGANIZATIONS PARTICIPATING IN CONSOLIDATED APPEALS

ACF	GOAL	MACCA	TEARFUND
ACTED	GTZ	Malteser	Terre des Hommes
ADRA	Handicap International	Medair	UNAIDS
Afghanaid	HELP	Mercy Corps	UNDP
AVSI	HelpAge International	MERLIN	UNDSS
CARE	Humedica	NPA	UNESCO
CARITAS	IMC	NRC	UNFPA
CONCERN	INTERSOS	OCHA	UN-HABITAT
COOPI	IOM	OHCHR	UNHCR
CRS	IRC	OXFAM	UNICEF
CWS	IRIN	Première Urgence	WFP
DRC	Islamic Relief Worldwide	Save the Children	WHO
FAO	LWF	Solidarités	World Vision International

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Please note that appeals are revised regularly. The latest version of this document is available on www.humanitarianappeal.net.

Full project details can be viewed, downloaded and printed from www.reliefweb.int/fts.



1. EXECUTIVE SUMMARY

The 2010 Humanitarian Appeal for Haiti aims to provide for the immediate humanitarian needs of more than 2 million¹ earthquake-affected people and to contribute to the foundations for longer-term recovery.

The situation in Haiti continues to be one of large-scale displacement and acute humanitarian emergency. The January 12 earthquake displaced around 2.1 million people, of whom 1.3 million went to spontaneous settlements in the affected areas, and 600,000² to host families outside the affected areas. Additionally, many people who already lived in poverty and vulnerability before the earthquake have since fallen into humanitarian need. In the months since the earthquake, the humanitarian situation and response have largely stabilized into continuous provision of basic needs. The Government and partners are now faced with the challenge of defining and implementing durable solutions to the high levels of displacement alongside ongoing and urgent relief operations. To this end, the Government, with the humanitarian community's support, has developed a 'Safer Shelter Strategy' that lays out the axioms for long-term solutions to displacement, shelter, livelihoods, health, education, protection, the environment and other vital needs. The humanitarian community is already working on the detailed operationalization and implementation of the strategy. However, for the strategy to be successful, critical conditions still need to be met, such as resolving the issue of land tenure and availability, and effective coordination between the humanitarian and reconstruction efforts under the Government's National Plan.³

The initial Flash Appeal for US\$562 million⁴ for humanitarian response was issued three days after the January 12 earthquake. In a review a month later, the appeal was revised to \$1.4 billion and its planning and budgeting horizon extended through 2010. Now at mid-year, the Humanitarian Country Team (HCT) and cluster leads, in close collaboration with partners, have reviewed needs, revised the overall strategy and response plans in line with Government priorities, demonstrated gaps, and updated project requirements accordingly until the end of the year. After this Mid-Year Review (MYR), the appeal amounts to \$1.488 billion, of which 64% is funded. The MYR process consisted of a thorough update of response gaps and funding. Old and new projects were screened through a three-phase approach (clusters, Inter-Agency Committee, Humanitarian Coordinator)⁵ to ensure that only projects that are time-critical and that respond to the identified gaps remain in the MYR. UN agencies and non-governmental organizations (NGOs) were systematically approached to provide their latest funding updates. Some of the existing NGO funding gaps were found to be closed based on the information that yet-unallocated private funding would be sufficient to cover their projects in the appeal.

The humanitarian community's four strategic objectives stated in the February Humanitarian Appeal have been met to varying degrees. The short-term target of providing a range of humanitarian support to at least 1.5 million earthquake-affected people has been largely achieved, including the relocation of people living in 21 priority high-risk sites to safe sites before the rainy season. The funding with respect to requirements for nutrition (95%), water, sanitation and hygiene (WASH) (88%), education (94%), protection (66%) and health (66%) has led the way, although needs still remain to be covered in these areas. Coordination and information management structures have been established on national and sub-national levels capable of supporting the Government in immediate and effective relief. Further funding will be necessary to continue working closely with government partners to build national coordination capacity and close the information gap on needs and responses.

¹ Government of Haiti published in OCHA Humanitarian Bulletin (24 May 2010).

² Government of Haiti Earthquake Destruction: *Bilan des Dégats 15* (published on Haiti OneResponse on 31/05/2010): Number of displaced people in settlement sites: 1,301,491, number of displaced population registered in communes or departments: 604,215.

³ Action Plan for National Recovery and Development of Haiti (March 2010): http://www.haiticonference.org/Haiti_Action_Plan_ENG.pdf.

⁴ All dollar signs in this document denote United States dollars. Funding for this appeal should be reported to the Financial Tracking Service (FTS, fts@reliefweb.int), which will display its requirements and funding on the current appeals page.

⁵ According to project selection and prioritization criteria (see page 24).

Despite these overall positive developments, achievement of strategic and cluster-specific priorities in other important areas of humanitarian action has been badly affected by insufficient funding and/or by external conditions. A time-critical response gap lies in the provision of shelter in view of the hurricane season, which officially started on June 1. The greatest challenge here is a lack of available land on which to build,⁶ as well as a continued funding shortfall (66% of requirements covered) considering that this activity is considered high priority. Meanwhile, alternative measures are being put in place, including dedicated 24-hour humanitarian rapid-response teams in case of rain or hurricane-related incidents in spontaneous sites, and basic early warning system capacities within the Haiti *Centre National de Météorologie* (CNM). Camp coordination and camp management (CCCM) also suffers from inadequate funding (45%). Consequently, about 46% of camps⁷ have no managing organization. According to an MIT/USAID study, camps without a managing organization have less access to latrines and waterproof shelter items.⁸ Mid-year funding of early recovery has also lagged behind that for direct relief. The low funding of the Early Recovery (36%) and Agriculture (50%) Clusters has delayed physical rubble removal (approximately 20 million cubic metres of rubble is still where it was five months ago) and livelihood creation, including short-term agriculture re-launch and cash-for-work (CFW). In the case of the Food Cluster, funded at 52%, general food distribution (GFD) has reached the targeted caseload and the Government mandated the cessation of GFD at end of March. However, needs still exist in terms of targeted food distribution and cash/food-for-work (FFW) activities. Furthermore, for preparedness, the Food Cluster and the International Red Cross and Red Crescent Movement are pre-positioning emergency food rations in 31 locations across Haiti. Also in preparation for this year's hurricane season, the Logistics Cluster is taking concrete measures to better respond in case of road failure by mapping alternative access routes, prepositioning essential logistical assets and maintaining minimum air assets to reach the most remote areas of Haiti.

The one general area of February's plan in which little has so far been implemented is support to affected people in host communities outside the cities and towns.



UNICEF/2010

⁶ So far 2,071 transitional shelters, enough for 9,319 people, have been built. Building materials for over 7,000 transitional shelters are in country. (OCHA Humanitarian Bulletin, June 2010.)

⁷ Camps here refer to large camps (1,000+ families), see sector response plan.

⁸ *Assessment and Analysis of Haitian HADR data collected by Global Relief Technology – Analysis report # 1 1*, MIT Lincoln Laboratory, 21 April 2010. Available on <http://groups.google.com/group/assessmentshaiti>.

Basic humanitarian and development indicators for Haiti (pre-earthquake)

	Population	9,761,929 people (Source: Institut Haïtien de Statistique et d'Informatique (IHSI) 2008)
Economic status	Gross national income per capita	\$660 (Source: World Bank: Key Development Data & Statistics 2008)
	Percentage of population living on less than \$1.25 per day	54.9% for the years 2000–2007 ⁹ (Source: UNDP Human Development Report [HDR] 2009)
	Ratio of female to male earned income	0.37 (Source: UNDP HDR 2009)
Health	Adult mortality (2007)	323/1,000: male 233 /1,000: female (source: World Health Statistics 2009)
	Maternal mortality	670/100,000 live births (UNICEF: Childinfo statistical tables)
	Under-five mortality (2007)	79/1,000: male 73 /1,000: female (source: World Health Statistics 2009)
	Life expectancy at birth (2007)	53: male 55: female (source: World Health Statistics 2009)
	Number of health workforce (MD+nurse+midwife) per 10,000 population	4/10,000 in 2000 (source: World Health Statistics 2009)
	Measles immunization coverage among one-year-olds	58% in 2007 (source: World Health Statistics 2009)
Nutrition	Prevalence of under-nourishment in total population	58% (FAO Statistics: Prevalence of under nourishment 2004-2006)
	Prevalence of underweight in children under-five	18.9% (The International Food Policy Research Institute [IFPRI] Global Hunger Index 2001-2006)
Food Security	Food security indicator	5.4 million people undernourished (FAO State of Food Insecurity [SOFI] 2009) 1.8 million people food-insecure (FEWS NET October 2009)
WASH	Proportion of population with access to improved drinking water coverage	Urban – 70%, rural – 51%, overall – 58% (Joint Monitoring Project 2008, UNICEF/WHO based on 2008 figures)
	Proportion of population with access to improved sanitation coverage	Urban - 29%, rural – 12%, overall - 19% (Joint Monitoring Project 2008, UNICEF/WHO based on 2006 figures)
Other vulnerability indices	European Commission Humanitarian Aid Office (ECHO) Vulnerability and Crisis Index score (pre-earthquake)	V: 2, C: 1.81 (out of scale 0-3, 3 being most severe) (Source: ECHO Global Needs Analysis [GNA] 2008-2009)
	UNDP Human Development Index score	0.532: 149th of 182 countries (Medium Human Development)
	UNDP Gender Empowerment Measure (GEM)	149 th out of 182 countries

⁹ Data refer to the most recent year available during the period specified.

Table I: Summary of requirements and funding (grouped by cluster)
 Haiti Revised Humanitarian Appeal (January - December 2010)
 as of 25 June 2010
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and appealing organizations.

Cluster	Original requirements (\$) A	Revised requirements (\$) B	Carry-over (\$) C	Funding (\$) D	Total resources available (\$) E=C+D	Unmet requirements (\$) B-E	% Covered E/B	Uncommitted pledges (\$) F
AGRICULTURE	23,000,000	58,818,036	-	29,232,939	29,232,939	29,585,097	50%	-
CAMP COORDINATION AND CAMP MANAGEMENT (CCCM)	1,300,000	78,779,460	-	35,490,906	35,490,906	43,288,554	45%	-
COORDINATION AND SUPPORT SERVICES	10,487,579	21,861,148	165,430	20,050,207	20,215,637	1,645,511	92%	1,147,773
EARLY RECOVERY	49,218,850	140,705,800	-	50,024,308	50,024,308	90,681,492	36%	-
EDUCATION	11,100,000	87,536,872	-	82,076,148	82,076,148	5,460,724	94%	-
EMERGENCY TELECOMMUNICATIONS	782,460	4,433,765	-	782,460	782,460	3,651,305	18%	-
FOOD AID	246,039,060	486,742,542	-	254,542,640	254,542,640	232,199,902	52%	-
HEALTH	33,900,000	140,320,179	-	92,422,581	92,422,581	47,897,598	66%	450,000
LOGISTICS	33,527,705	84,143,876	-	55,161,618	55,161,618	28,982,258	66%	-
NUTRITION	48,400,000	48,108,992	-	45,714,921	45,714,921	2,394,071	95%	-
PROTECTION	16,230,000	71,867,732	-	47,365,596	47,365,596	24,502,136	66%	100,000
SHELTER AND NON-FOOD ITEMS	29,250,000	155,533,354	-	103,074,180	103,074,180	52,459,174	66%	120,000
WATER, SANITATION AND HYGIENE	58,825,000	109,243,454	-	96,676,194	96,676,194	12,567,260	88%	-
CLUSTER NOT SPECIFIED	-	-	1,497,307	32,112,249	33,609,556	n/a	n/a	16,675,613
Grand Total	562,060,654	1,488,095,210	1,662,737	944,726,947	946,389,684	541,705,526	64%	18,493,386

NOTE: "Funding" means Contributions + Commitments

Pledge: a non-binding announcement of an intended contribution or allocation by the donor. ("Uncommitted pledge" on these tables indicates the balance of original pledges not yet committed.)

Commitment: creation of a legal, contractual obligation between the donor and recipient entity, specifying the amount to be contributed.

Contribution: the actual payment of funds or transfer of in-kind goods from the donor to the recipient entity.

The list of projects and the figures for their funding requirements in this document are a snapshot as of 25 June 2010. For continuously updated information on projects, funding requirements, and contributions to date, visit the Financial Tracking Service (www.reliefweb.int/fts).

Table II: Summary of requirements and funding (grouped by appealing organization)
 Haiti Revised Humanitarian Appeal (January - December 2010)
 as of 25 June 2010
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and appealing organizations.

Appealing organization	Original requirement	Revised requirement	Carry-over	Funding	Total resources available	Unmet requirements	% Covered	Uncommitted pledges
	(\$)	(\$)	(\$)	(\$)	(\$)	(\$)	E/B	(\$)
	A	B	C	D	E=C+D	B-E		F
AAI	-	3,137,582	-	-	-	3,137,582	0%	-
ACAT	-	40,600	-	-	-	40,600	0%	-
ACDI/VOCA	-	3,280,000	-	3,878,712	3,878,712	- 598,712	100%	-
ACF	700,000	30,290,843	-	17,869,823	17,869,823	12,421,020	59%	-
ACTED	-	28,330,225	-	10,647,809	10,647,809	17,682,416	38%	-
ADRA-Haiti	-	478,100	-	478,000	478,000	100	100%	-
Aide et Action	-	1,109,385	-	-	-	1,109,385	0%	-
AMI	-	211,546	-	-	-	211,546	0%	-
AMURT (USA)	-	518,940	-	-	-	518,940	0%	-
ARC	-	1,447,500	-	1,297,180	1,297,180	150,320	90%	-
AVSF	-	1,720,464	-	1,365,546	1,365,546	354,918	79%	-
AVSI	-	4,205,100	-	628,248	628,248	3,576,852	15%	-
Bioforce	-	414,433	-	-	-	414,433	0%	-
CARE International	-	12,875,000	-	12,225,000	12,225,000	650,000	95%	-
CECOSIDA	-	255,000	-	-	-	255,000	0%	-
CEHPAPE	-	750,000	-	-	-	750,000	0%	-
CESVI	-	1,011,400	-	-	-	1,011,400	0%	-
CISP	-	183,130	-	-	-	183,130	0%	-
COOPI	-	1,380,000	-	1,794,000	1,794,000	- 414,000	100%	-
CW	-	2,409,600	-	2,409,600	2,409,600	-	100%	-
Deep Springs International	400,000	472,592	-	-	-	472,592	0%	-
Entrepreneurs du Monde	-	741,910	-	741,910	741,910	-	100%	-
ERF (OCHA)	-	-	1,497,307	22,255,908	23,753,215	- 23,753,215	0%	100,000
FAO	23,000,000	32,511,179	-	15,054,397	15,054,397	17,456,782	46%	-
FHED-INC	-	1,780,000	-	-	-	1,780,000	0%	-
Finnchurchaid	-	1,650,000	-	937,951	937,951	712,049	57%	-
Floresta	-	1,792,324	-	476,375	476,375	1,315,949	27%	-
FRATERNITE NOTRE DAME	-	408,500	-	-	-	408,500	0%	-

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Appealing organization	Original requirement	Revised requirement	Carry-over	Funding	Total resources available	Unmet requirements	% Covered	Uncommitted pledges
	(\$) A	(\$) B	(\$) C	(\$) D	(\$) E=C+D	(\$) B-E	E/B	(\$) F
Haiti Participative	-	258,563	-	-	-	258,563	0%	-
Heartland	-	1,459,449	-	-	-	1,459,449	0%	-
HFHI	-	35,021,289	-	12,671,289	12,671,289	22,350,000	36%	-
HHI	-	-	-	-	-	-	0%	-
HI	5,850,000	30,590,830	-	7,203,183	7,203,183	23,387,647	24%	-
Hopital Albert Schweitzer	-	3,390,000	-	759,518	759,518	2,630,482	22%	-
Hopital Sainte Croix	-	575,000	-	-	-	575,000	0%	-
HWA	-	2,534,389	-	-	-	2,534,389	0%	-
IAHV	-	-	-	-	-	-	0%	-
IFOCOH	-	168,000	-	-	-	168,000	0%	-
ILO	2,380,000	2,380,000	-	589,510	589,510	1,790,490	25%	-
IMC	2,200,000	7,738,720	-	6,713,386	6,713,386	1,025,334	87%	-
IMS	-	600,474	-	-	-	600,474	0%	-
International Action	-	523,000	-	-	-	523,000	0%	-
Internews	-	748,908	-	748,908	748,908	-	100%	-
INTERSOS	-	600,600	-	600,600	600,600	-	100%	-
IOM	29,175,000	121,493,931	-	91,283,109	91,283,109	30,210,822	75%	-
IRC	250,000	4,075,060	-	4,075,060	4,075,060	-	100%	-
IRD	-	4,096,927	-	4,851,534	4,851,534	- 754,607	100%	-
IRD/MEBSH	-	745,000	-	-	-	745,000	0%	-
IRW	-	123,061	-	-	-	123,061	0%	-
JRS	-	-	-	-	-	-	0%	-
MARCH	-	480,080	-	-	-	480,080	0%	-
MDM Canada	-	1,183,000	-	-	-	1,183,000	0%	-
MDM France	-	4,661,965	-	-	-	4,661,965	0%	-
MDM Greece	400,000	900,000	-	-	-	900,000	0%	-
MDM Suisse	-	652,750	-	652,750	652,750	-	100%	-
Mercy Corps	-	4,379,434	-	4,379,434	4,379,434	-	100%	100,000
MERLIN	500,000	8,287,200	-	8,287,200	8,287,200	-	100%	-
MI	-	671,468	-	-	-	671,468	0%	-
NCA	-	4,300,000	-	3,900,521	3,900,521	399,479	91%	-
OCHA	6,677,579	13,443,757	165,430	12,107,816	12,273,246	1,170,511	91%	1,147,773
OHCHR	530,000	1,668,000	-	1,832,612	1,832,612	- 164,612	100%	-
OI	-	370,388	-	-	-	370,388	0%	-
OXFAM GB	3,000,000	5,440,950	-	5,440,950	5,440,950	-	100%	-

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Appealing organization	Original requirement	Revised requirement	Carry-over	Funding	Total resources available	Unmet requirements	% Covered	Uncommitted pledges
	(\$) A	(\$) B	(\$) C	(\$) D	(\$) E=C+D	(\$) B-E	E/B	(\$) F
OXFAM Quebec	-	-	-	-	-	-	0%	-
PESADEV	-	398,158	-	324,210	324,210	73,948	81%	-
PIH	-	10,000,000	-	11,468,147	11,468,147	- 1,468,147	100%	-
Plan	1,000,000	7,610,000	-	7,995,901	7,995,901	- 385,901	100%	-
Project K.I.D.	-	3,059,825	-	-	-	3,059,825	0%	-
RedR UK	-	414,433	-	463,902	463,902	- 49,469	100%	-
RET	-	1,110,887	-	-	-	1,110,887	0%	-
RI	-	5,246,343	-	2,274,522	2,274,522	2,971,821	43%	-
Samaritan's Purse	-	775,000	-	775,000	775,000	-	100%	-
SC	9,825,000	36,603,393	-	36,634,479	36,634,479	- 31,086	100%	-
Solidarités	-	2,225,754	-	2,147,680	2,147,680	78,074	96%	-
Terre Des Hommes	800,000	1,600,000	-	1,039,608	1,039,608	560,392	65%	-
UCODEP	-	252,000	-	-	-	252,000	0%	-
UNAIDS	600,000	717,581	-	24,331	24,331	693,250	3%	-
UNDOCO	-	475,000	-	-	-	475,000	0%	-
UNDP	35,600,000	89,074,349	-	26,224,225	26,224,225	62,850,124	29%	-
UNDSS	3,810,000	240,848	-	240,848	240,848	-	100%	-
UNEP	1,000,000	1,500,000	-	414,953	414,953	1,085,047	28%	-
UNESCO	1,900,000	4,050,000	-	1,609,000	1,609,000	2,441,000	40%	-
UNFPA	4,550,000	13,425,927	-	7,139,535	7,139,535	6,286,392	53%	-
UN-HABITAT	13,430,000	8,450,000	-	7,658,227	7,658,227	791,773	91%	120,000
UNHCR	-	12,500,121	-	5,138,270	5,138,270	7,361,851	41%	-
UNICEF	119,975,000	222,757,000	-	222,757,004	222,757,004	- 4	100%	16,575,613
UNIFEM	800,000	1,700,000	-	199,020	199,020	1,500,980	12%	-
UNISDR	-	-	-	-	-	-	0%	-
UNOOSA	-	-	-	-	-	-	0%	-
UNOPS	-	33,532,828	-	5,744,453	5,744,453	27,788,375	17%	-
UNOSAT	58,850	191,530	-	-	-	191,530	0%	-
USCRI	-	280,093	-	239,960	239,960	40,133	86%	-
WCC	-	94,133	-	-	-	94,133	0%	-
WCC	-	1,288,370	-	-	-	1,288,370	0%	-
WCH	-	2,908,500	-	-	-	2,908,500	0%	-
WFP	279,849,225	563,536,339	-	304,902,094	304,902,094	258,634,245	54%	-
WHO	10,000,000	49,871,023	-	27,850,165	27,850,165	22,020,858	56%	450,000
WMO	-	890,000	-	-	-	890,000	0%	-

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Appealing organization	Original requirement	Revised requirement	Carry-over	Funding	Total resources available	Unmet requirements	% Covered	Uncommitted pledges
	(\$) A	(\$) B	(\$) C	(\$) D	(\$) E=C+D	(\$) B-E	E/B	(\$) F
World Concern	-	1,095,438	-	746,783	746,783	348,655	68%	-
World Hope International	-	796,000	-	-	-	796,000	0%	-
World YWCA	-	-	-	-	-	-	0%	-
WVI	3,800,000	12,456,791	-	12,556,791	12,556,791	- 100,000	100%	-
Grand Total	562,060,654	1,488,095,210	1,662,737	944,726,947	946,389,684	541,705,526	64%	18,493,386

NOTE: "Funding" means Contributions + Commitments

Pledge: a non-binding announcement of an intended contribution or allocation by the donor. ("Uncommitted pledge" on these tables indicates the balance of original pledges not yet committed.)

Commitment: creation of a legal, contractual obligation between the donor and recipient entity, specifying the amount to be contributed.

Contribution: the actual payment of funds or transfer of in-kind goods from the donor to the recipient entity.

The list of projects and the figures for their funding requirements in this document are a snapshot as of 25 June 2010. For continuously updated information on projects, funding requirements, and contributions to date, visit the Financial Tracking Service (www.reliefweb.int/fts).

Table III: Summary of requirements and funding (grouped by priority)
 Haiti Revised Humanitarian Appeal (January - December 2010)
 as of 25 June 2010
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and appealing organizations.

Priority	Original requirements	Revised requirements	Funding	Unmet requirements	% Covered	Uncommitted pledges
	(\$)	(\$)	(\$)	(\$)		(\$)
	A	B	C	B-C	C/B	D
HIGH	406,736,400	1,019,071,477	581,005,626	438,065,851	57%	1,597,773
LOW	54,750,000	84,863,759	56,349,856	28,513,903	66%	120,000
MEDIUM	32,979,254	155,486,237	94,086,886	61,399,351	61%	-
NOT SPECIFIED	67,595,000	228,673,737	214,947,316	13,726,421	94%	16,775,613
Grand Total	562,060,654	1,488,095,210	946,389,684	541,705,526	64%	18,493,386

NOTE: Clusters did not rate priority per project until the Mid-Year Review; therefore this table of funding to date per priority level is meant to show critical gaps, rather than imply a reflection on donor actions to date. Most projects in the "Not specified" category are fully or mostly funded; hence clusters saw no use in rating their priority.

"Funding" means Contributions + Commitments

Pledge: a non-binding announcement of an intended contribution or allocation by the donor. ("Uncommitted pledge" on these tables indicates the balance of original pledges not yet committed.)

Commitment: creation of a legal, contractual obligation between the donor and recipient entity, specifying the amount to be contributed.

Contribution: the actual payment of funds or transfer of in-kind goods from the donor to the recipient entity.

The list of projects and the figures for their funding requirements in this document are a snapshot as of 25 June 2010. For continuously updated information on projects, funding requirements, and contributions to date, visit the Financial Tracking Service (www.reliefweb.int/fts).

2. CONTEXT AND HUMANITARIAN NEEDS ANALYSIS

2.1 HAITI

2.1.1 Context

Five months into the earthquake response, the Government of Haiti and the humanitarian community have provided the range of humanitarian support to over 2 million earthquake-affected people in need of shelter and other time-critical life-saving actions. However, the collective and effectively coordinated effort to provide basic services continues unabated and will be faced with several challenges going forward. One of the main challenges will be to lay the foundations for finding durable solutions to the high levels of displacement simultaneously with the ongoing immediate relief operations. While preparing for the upcoming hurricane season is currently priority in the relief operations, the Government, with the humanitarian community's support, has in parallel developed a humanitarian strategy termed "Safer Shelter Strategy". It lays out the axioms for long-term solutions to displacement, shelter, livelihoods, health, education, protection, the environment and other vital needs. The humanitarian community is gradually directing its response towards meeting these objectives. However, it can only be effective in its endeavour if critical issues such as land tenure and availability are successfully resolved.

The coordination mechanisms that were put in place in support of the Government in the initial response were manifold, and allowed for increased efficiency and reduction of duplication of efforts. These mechanisms, while continuing to operate towards their full potential, are being increasingly designed to support already existing Government mechanisms and to strengthen Government capacity. Examples of this are preparations for joining the cluster system with the Government-sector working groups, working closely with Government partners to support national capacity for information management and analysis, and reinforcing coordination with ministries and local authorities. As part of strengthening Government capacity and allowing for a multi-faceted response, humanitarian and reconstruction efforts have to work hand in hand under the overall guidance of the Government based on the National Plan.

The following paragraphs will lay out the humanitarian needs at a macro level, present the new humanitarian strategy and outline the planning scenario for the rest of 2010.

2.1.2 Needs Analysis

The fact that the relief operation has stabilized after meeting the most immediate needs, or at least the obvious ones, should not be taken to mean that the humanitarian effort is over. It is more the end of the beginning than the beginning of the end. Reconstruction will take several years, and its benefits will not start to reach most affected people until at least some time in 2011. Some needs currently being met by humanitarian mechanisms can be phased over to reconstruction mechanisms as the latter start to come on line, or by revived Government service delivery. Others are most effectively addressed by humanitarian actors, even if the needs persist through 2010 and beyond.

After initial inter-cluster rapid needs assessments, inter-agency and cluster assessments have been carried out to meet the need for information for the respective cluster. Additionally, a large number of assessments have been conducted by individual agencies. Assessments generally have followed different standards, methods and focuses, which hampers the effort to give an overall picture of the needs within a cluster and inter-cluster.

The CCCM Cluster has established a system to regularly monitor the situation and needs in the camps through the Displacement Tracking Matrix (DTM), which also monitors progress of relief response. A comprehensive multi-sector assessment in a sample of 60 sites was carried out by the MIT, with the main objective of defining when humanitarian indicators would allow the United States (US) military to phase out its humanitarian presence. The monitoring continues to be carried out by Global Relief Technology with funds from USAID until the end of July. Yet even this study sample is

only a small fraction of the more than 1,000 internally displaced people's (IDPs) sites that need to be assessed.

Beside this, most of the clusters are tracking the response through Who What Where (3W) databases, which are helpful in demonstrating the response given, but fail to identify gaps or outstanding needs.

Shelter and NFIs

In terms of meeting immediate temporary shelter needs (tents and tarpaulins plus non-food items), the first phase is largely complete. In this second phase, the objective is the supply and effective distribution of appropriate transitional shelters for the displaced population, integrated with rubble clearance and settlement services.

Phase I: Shelter Cluster members have reached more than their targeted caseload (1.5 million people) with emergency shelter materials. However, statistics at commune level show excess coverage in some areas and gaps in others. According to local authorities, an estimated 48,000 families still need support for emergency shelter and NFIs in Léogâne and Gressier. Heavy rains have revealed that a significant number of tents cannot withstand severe weather, so replacement plastic sheeting and other shelter material will have to be provided continuously.

Phase II: As of the end of May, the total planned number of transitional shelters (T-shelters) amounts to 123,350, out of which 95,754 T-shelters are funded (78%). A total of 2,071 T-shelters have been completed to date.¹⁰ Organizations need clear guidelines supported by local authorities to allow legal construction of T-shelters on land where ownership remains unclear. A national policy on the matter is urgently required. Areas of most need centre on Port-au-Prince and communes to the west of Port-au-Prince. For the non-displaced, there is a need to assess whether buildings are safe to inhabit with respect to earthquake and aftershocks, heavy rains and hurricanes. To date, 70,000 buildings have been structurally assessed in Port-au-Prince by the Ministry of Public Works, supported by the United Nations Office for Project Services (UNOPS). Detailed enumeration of transitional shelter needs is being coordinated by the Shelter Cluster, adopting a zoned system, with shelter actors assessing and sharing information on the needs in the zones where they are working among other actors to avoid gaps and duplication.¹¹ Challenges in joint planning in urban settings must be addressed to avoid T-shelters being built without any provision of services such as water sanitation.

CCCM

Now that the rainy season has started, the need for mitigation measures and disaster preparedness for spontaneous settlements continues to be an urgent priority for the cluster. In addition, there is still a distinct need for camp management agencies or focal points in spontaneous settlements. As of 28 May, the DTM identifies 1,191 sites (including sub-sites for the largest settlements) in Haiti. Of the total identified sites, 54 are large sites (hosting over 1,000 households). These large sites host about 29% of the displaced population.

Education

An estimated 1.5 million children and youth under 18 are directly and indirectly affected by the earthquake. Within that number, approximately 720,000 are primary-school-age children between 6 and 12 years old. The number of schools damaged or destroyed by the earthquake is now assessed at 3,978 (80% of the 4,992 affected schools in the affected area), while many schools in the less-affected areas are now straining to accommodate an influx of displaced children from the directly affected areas. The need to continue clearance work at schools requiring debris removal is a pre-condition for any resumption of school activities in the longer term. There will continue to be a strong demand for temporary learning spaces as damaged schools cannot be re-occupied until properly assessed. Some schools are still being used for shelter and alternative school solutions had to be found.

¹⁰ see Map: T-shelter: www.oneresponse.info June 2010.

¹¹ See Map T shelter: www.oneresponse.info June 2010.

WASH

As of end of May 2010, water is currently provided via 450 private water kiosks and more than 500 sites through the different cluster member organizations. At least five litres of safe water per person per day are being delivered to approximately 1.1 million people. This involves daily tankering of 6,000 cubic metres of water. The challenge is to maintain and then increase such quantities over time, and to examine urgently how water trucking operations can be reduced and replaced by more sustainable medium-term options. In terms of sanitation, the WASH Cluster has almost reached the Phase I objective of constructing 11,000 toilets. In the future, 16,500 new toilets are planned and materials will be allocated to different agencies. Current average coverage is 200 people per toilet. While latrine coverage in sites is still low, there is evidence to suggest that open defecation is low (5-15%¹²). Many people in proximity to their homes return home to use their own or their neighbours' facilities (30%), or use other means such as plastic bags (10%), which are deposited in solid waste receptacles. Due to the large numbers of toilets, the needs are great for sludge removal. At present there is no treatment facility for sewage, and the Trutier dumpsite is being used.

Food

Approximately 52% of households and 69% of families living in large camps suffer from food insecurity. The migration of over 600,000 people from earthquake-affected areas, the majority of whom are residing in host families and communities, has increased the strain on rural households, augmenting their vulnerability to food insecurity. In terms of accessibility to food, it is also worth noting that rice prices, although relatively stable, remain 4 to 14% above pre-earthquake levels. Food Cluster members, in close collaboration with the Government of Haiti, started a full-length (three-month) market assessment in June. This will provide a more accurate picture of the effect of food assistance on markets, local production and food accessibility for vulnerable households. Meanwhile, receiving cash contributions to support Cash-for-Work (CFW) activities remains central in the above context. The upcoming hurricane season may entail increases in vulnerability and food insecurity, necessitating a rapid emergency response from Food Cluster members. The Food Cluster has adopted a zoned structure approach, whereby each zone is allocated to one Food Cluster member who is responsible for food delivery support and coordination in the allocated zone.

Nutrition

Levels of malnutrition remain stable at pre-existing levels (global acute malnutrition [GAM] prevalence before the earthquake was at 4.5% and severe acute malnutrition [SAM] 0.8%, in the affected population age 6-59 months). Admissions into inpatient therapeutic feeding centres remain stable and attendance at *Points de Conseil de Nutrition pour les Bébés* (PCNBs) has been variable due to population movement. The ongoing nutrition surveys will have preliminary results available in mid-July, but to date the levels of SAM are expected to remain below emergency thresholds. Chronic malnutrition (stunting, which has been stagnant from 2005-2008 at about 24%) remains a priority and significant challenge. This is why the cluster will emphasize livelihoods, household food security and nutrition education in the second half of 2010 to ensure that chronic malnutrition is systematically addressed. Infant and young child feeding continues to be a major concern with a high level of mixed feeding common in Haiti. Many children under-five remain susceptible to disease due to inadequate counselling of mothers to ensure that children are optimally breastfed. The PCNB strategy includes nutrition education, but there is significant work to be done on complementary feeding to promote best practices.

Agriculture

Before the earthquake, the sector was recovering from the severe damage of the 2008 hurricane season that devastated more than 70% of the agricultural sector. Rapid assessments were undertaken by FAO and other partners immediately after the earthquake, including the Emergency Food Security Assessment (EFSA). These assessments found pockets of severe malnutrition and an increased pressure of coping mechanisms on directly affected farming households and rural families hosting IDPs. The agriculture sector also suffered damage to storage and irrigation facilities and seed

¹² WASH Cluster Survey, Feb 2010.

stocks, as well as disruptions in agricultural markets. The cluster partners focused on immediate farming input distributions to assure the re-establishment of local food production after the earthquake. The cluster as a whole has reached 74,080 of the 100,000 farming household targets it established in January, but was hindered by late and under-funding. The cluster supported an additional 68,320 farming households outside of the earthquake-affected areas, bringing the total farming households assisted to 142,400. The cluster is now focusing its assistance on non-directly affected areas, targeting its support to host families who have committed the majority of their assets to supporting the displaced population. Risk reduction interventions, income-generating interventions and improved coordination are also priorities. During June and July, cluster partners are undertaking three major needs assessments (*Crop and Food Supply Assessment Mission [CFSAM]*, *Seed Social Security Assessment [SSSA]* and *EFSA*), which will assist the cluster in better targeting its assistance in the medium and long terms.

Early Recovery

Since the onset of the crisis, most interventions of all clusters have focused on emergency relief to respond to immediate needs rather than reconstruction and recovery interventions. So far, the response of Early Recovery Cluster stakeholders has included:

- organizing labour-intensive emergency public works in support of humanitarian operations through CFW and FFW activities that have provided temporary jobs and sources of income to around 200,000 people (of whom more than 30% are women), and contributed to opening up quake-affected areas to reconstruction workers and equipment, plus the daunting task of demolishing hanging building ruins, debris clearing, garbage and refuse removal, and cleaning and rehabilitating drainage systems that are a hazard to human health
- contributing to the Post-Disaster Needs Assessment (PDNA), which served as the basis for the Action Plan for Reconstruction and National Development
- Drafting the Early Recovery Strategic Framework (ERSF) document
- Setting up an early recovery (ER) network and coordination mechanisms
- Organizing information sharing
- Providing technical support to the national and local governments' ER strategic planning and coordination

Also, the World Meteorological Organization (WMO) coordinated the strengthening of the operational early warning capacities of CNM for the 2010 hurricane season for observing, monitoring, forecasting and issuing warnings about hurricanes.

Health

A main issue is the problem of access to health services. Before the earthquake, 44% of seriously ill or wounded individuals declared not having access to health services when needed because of the fees charged (this figure rises up to 50% for women). A main reason for the fees is the cost-recovery strategy of the health system (including the public sector), whereby 40% of the health system is funded by contributions from patients and families. The main priority is reducing financial barriers, particularly for the elderly and new vulnerable groups. An emphasis on high-impact, low-cost actions targeting maternal and infant health, including caring for chronic and acute malnutrition, must also be ensured. Furthermore, 22% of all infrastructures were either completely destroyed or suffered important damages. Hence, a minimum of 30 out of the 49 existing hospitals in three regions affected by the earthquake should be rebuilt. Eight reference hospitals also need to be developed in the department capitals, starting with Port-au-Prince, Cap Haïtien, Les Cayes, Jacmel and Gonaïves.

Protection

The following are some of the issues with key protection aspects that have emerged:

- Efforts to move camps out of private land before alternatives are available
- Security in camps and in surrounding neighbourhoods
- Prevention of gender-based violence (GBV)
- Identification papers

- Insecure or unclear land tenure
- The rights of people with disabilities
- Employment
- The reopening of schools and other education establishments
- The impact of rain on existing IDP camps
- Government efforts to end food and water distribution as a means of reducing camp populations and stimulating the economy

(i) Protection Sub-Cluster: Child Protection

The cluster addresses the specific protection needs and threats of children in the immediate phase, particularly concerning separated and unaccompanied children with particular attention to the youngest and children vulnerable to violence, abuse and exploitation, including GBV. Families currently face tremendous hardships, and there is a risk of secondary separation from parents and caregivers, especially for children living in poor and displaced households. Separation can heighten the risk of exposure to abuse and exploitation that can irrevocably impact children's physical, social and cognitive development. As humanitarian operations continue to unfold, reaching scale is the main challenge and the absolute priority for the months to come. Increasing coverage where children are most vulnerable is an imperative, with more child-friendly spaces (CFS) to ensure prevention and protection at the community level so that children are better protected against violence, abuse and exploitation, especially in displaced camps. Ensuring separated children are registered, linked with family tracing services and reunited with their families when possible is a shared objective for the Government of Haiti and all stakeholders in child protection. Linking families who have taken in children from close relatives to livelihood opportunities is another priority, as coping mechanisms are wearing thin. Sustained efforts are needed to expand registration and care for separated children and children already without parental care before the earthquake. The specific objectives for 2010 are to: (i) prevent separation and respond to 5,000 separated and unaccompanied children; (ii) strengthen the Government of Haiti's capacity to protect children from violence, trafficking, exploitation, abuse and neglect, through coordination, training and strategizing; (iii) strengthen and support community-based mechanisms for child protection, including creating and supporting community-based child protection focal points and networks, and creation and implementation of CFS with psycho-social support for children and their caregivers.

(ii) Protection Sub-Cluster: Prevention and Response to GBV

In the aftermath of the earthquake, immediate priorities were focused on responding to incidents of violence against women and girls by increasing access to medical, police, legal and psycho-social services. Very few services were available to survivors before the earthquake and most of those that did exist were destroyed. Case managers are still urgently needed to accompany women through the various stages of follow-up of GBV cases with the authorities. Case management includes the provision of support to survivors in the form of psycho-social support, advocacy and support in accessing services. Additionally, survivors need the option for temporary shelters, should they choose this route. One local NGO runs a shelter for child survivors of GBV who have nowhere else to go, but their capacity is limited. A small shelter (for up to 50 women) was once run by the Women's Ministry, but since the earthquake it no longer functions. As a result there are no shelter options available for adult women. Therefore, a new shelter needs to be created, offering safe accommodation for women and girls including access to economic empowerment initiatives, counselling and psycho-social support, childcare and other services.

Preparedness

Preparedness for the hurricane season is a concern. Almost no displaced people have moved to new habitation that can withstand hurricane winds and rain. Identification of safe structures to which homeless people can move temporarily if a hurricane approaches is not yet complete. Some preparedness measures have been taken by humanitarian agencies, such as positioning emergency rations in 31 locations around Haiti and pre-positioning emergency teams. A countrywide contingency plan, drafted by the Directorate for Civil Protection (DPC) in collaboration with partners, has not yet been released. While the plan has been updated following the earthquake, finalization by the Ministry

of the Interior is not yet complete. Preparedness will have to accelerate, as the hurricane season has already started. Nevertheless, CNM's early warning capacities have been reinforced for the 2010 hurricane and rainy season, with the support of forecasters from the United Kingdom, Canada and France based in Martinique and providing 24/7 assistance to forecasting staff at CNM.

2.1.3 Scope and Boundaries of Humanitarian Action, and Relation with National Plan

Many affected Haitians state that finding a job is their first or second priority. This suggests that they believe market and/or community mechanisms will deliver basic needs to them if they have the wherewithal to pay for it. This may have been the *status quo ante*, and may be true again now that much economic activity and services have resumed. The rapid appraisal in the immediate aftermath of the earthquake that well over one million people would need the full range of humanitarian relief for many months has proven to be largely true. At the same time, as assessments obtain more detail on the spectrum of actual coping strategies, more nuanced understandings have emerged. Clearly, the affected people collectively will need a full range of relief, basic services and maintenance, plus assistance to recover, reconstruct and in many cases resettle. (Not every individual needs all services, but collectively the affected population's needs cover the spectrum.) Stating the scale and scope of humanitarian needs is therefore less a question of enumerating the needs than of establishing a boundary between 'humanitarian' needs and others (which might be called recovery or reconstruction).

There is also the issue of humanitarian caseload and its boundaries. Poverty in Port-au-Prince and to a large extent in other cities and towns is such that many people not directly affected by the earthquake (not injured, bereaved, homeless or unemployed, etc.) are nonetheless worse off than some who were affected and are now receiving assistance. Since many sites are located in or near zones housing the very poor, there is risk of social tensions if assistance goes only to the displaced (plus risk of giving people incentives to prolong or pretend displacement). Therefore, as a matter of quality of programmatic design, basic services substituting for those disrupted by the earthquake should extend to communities around sites, and certainly to rural host communities who are accommodating and often supporting displaced people.

A boundary between humanitarian agencies and other agencies in Haiti would of course be largely artificial, especially considering that most of the service providers that will cover such needs (starting with the Government) normally work in both humanitarian and development action in Haiti.

The humanitarian aid programmes that this appeal presents are therefore to be seen as an integral part of the National Plan for reconstruction and recovery – a distinct subset, focusing on needs that cannot wait for reconstruction mechanisms and/or that can best be implemented by humanitarian actors, but entirely necessary to, supportive of and consistent with the National Plan. The humanitarian programmes should be internally coherent (which is a main purpose of the appeal process), but just as importantly they will have to be coherent with the broader and longer reconstruction programme.

It is worth remembering that one purpose of continuing to have a distinct humanitarian programme within the National Plan is to suit the reality of funding supply: most official donors offer humanitarian funding only under certain conditions and for actions of a certain nature. The appeal presents them with a package from which they can choose their programmes or projects to support with their humanitarian envelopes, in the confidence that each project in the appeal is peer-reviewed and vetted for relevance and feasibility, and that each is part of an orchestrated strategy with links to the whole humanitarian effort and therefore to the broader reconstruction programme.

2.1.4 “Safer Shelter Strategy”

The Government of Haiti in cooperation with the humanitarian community has adopted a “Safer Shelter Strategy”¹³ which outlines needs and options for people who have left their shelter or people who though not displaced have become more vulnerable as a result of the earthquake. The Safer Shelter Strategy is the cornerstone of the overall humanitarian strategy: although not all severely affected people are displaced, the displaced tend both to need the widest range of relief and to face the hardest route to recovery because of Haiti’s land and housing issues. Lack of suitable habitation in an established community harms livelihoods, health, protection, education, the environment and other vital community functions.

The strategy has a number of objectives. In addition to relocating population rapidly from identified high-risk areas to safe areas, it particularly aims at laying the basis for durable solutions in terms of perceived and genuine viability of livelihoods, access to basic services, shelter, and settlement options inside and outside earthquake-affected areas. In doing so, the strategy embodies a guiding principle that prioritizes return to or near the place of origin (provided that it has been assessed as safe and that the community is viable) and considers relocation to a new settlement as the least favourite option, though likely to be necessary for much of the caseload. Having said that, the strategy promotes the idea that displaced people should make a voluntary and informed choice as to which option they pursue. Furthermore, the strategy aims to de-congest Port-au-Prince because of its unsustainable population density before the earthquake.

The strategy foresees the following settlement options:

1. returning to a home assessed as structurally sound (“green house” or “yellow house”);
2. relocating to live with a host family who would welcome them in safe plots or safe homes, anywhere in the country;
3. moving to or remaining in “adequate proximity sites”¹⁴ within original neighbourhoods;
4. in very specific instances where there is no other option, relocation to a planned temporary relocation site (e.g. Corail-Cesselesse in the peri-urban area north of Port-au-Prince).

The “Safer Shelter Strategy’ is being operationalized. The four main areas of work ahead are: (i) collecting reliable information on the affected population and identification of priority areas for resettlement; (ii) delivering assistance and incentive packages to the displaced, vulnerable, or host populations according to set criteria and following a community-based approach; (iii) accelerating relocation; (iv) advancing the legal framework that regulates land tenure; and (v) (re-)building and (re-)occupation of houses.

The current situation, however, poses important challenges and requires the strategy to rapidly exert its results. Relatively few people are returning even to houses assessed as safe, people in host families are leaving to return to congested cities, and many sub-standard settlements continue to exist, posing the risk of a second displacement. The reasons for this include the fear of not receiving assistance if they leave camps and the struggle to pay rent, among others.

2.1.5 Most Likely (Planning) Scenario 2010

- The humanitarian strategy will be ratified by the government soon, but implementation will roll out over the medium term, meaning that relief needs will continue at least the end of the year and beyond
- Similarly, the amount of reconstruction that will be accomplished in 2010 will only slightly reduce humanitarian needs, as there is still a lack of income-generating activities
- The population displaced from Port-au-Prince will tend to try to return to Port-au-Prince if humanitarian aid in host communities (and other affected areas) and/or prospect of secure resettlement is not offered

¹³ GoH Settlement Strategy (May 2010).

¹⁴ Existing small sites in proximity to point of origin (spontaneous sites) may be considered proximity sites.

- Some Haitians who were vulnerable before the earthquake and who have suffered indirect effects of the earthquake have fallen or will fall into humanitarian need without assistance
- Haiti will be affected by tropical storms or hurricanes during the 2010 hurricane season. Some durable shelter is being provided to homeless Haitians before the hurricane season but will certainly not meet all needs, so other measures must be undertaken urgently

2.2 DOMINICAN REPUBLIC

The population living in the border area of Haiti is extremely vulnerable and access to basic services is very limited. After the earthquake, an increase of the population in this area of around 10% was noted, stretching the very limited local resources even further and resulting in overcrowded conditions in the houses of host families. To alleviate suffering in the border area, cross-border assistance was initiated by actors based in the Dominican Republic, reflecting an outpouring of solidarity in the country towards Haiti and often building on long-standing bi-national cooperation initiatives.

On the other side of the border in the Dominican Republic, the population living in the area bordering Haiti is the most vulnerable in the country and basic services are fragile. The border area has always been characterized by a very close interaction between Haitians and Dominicans including cross-border trade, frequent border crossings, and Haitians residing in the Dominican Republic.

As a consequence of the Haiti earthquake, the number of Haitians living in the Dominican Republic has increased in the border area, as well as in Santo Domingo and other urban and tourist areas. This situation raises protection concerns for the affected people. In the border area, an additional strain has been put on basic services such as health and education, as well as on environmental health conditions and agricultural production. The projects proposed in this appeal for the Dominican Republic and cross-border activities are aiming to mitigate these concerns, and to support communities in developing commercial activities inclusively through the implementation of quick-impact projects.

The 'shadow clusters' based in the Dominican Republic have provided an important lifeline to the clusters operating in Haiti especially in the early stages of the emergency when capacity on the ground was scarce and logistics capacities in Haiti extremely limited. More than 90% of the relief items have been channelled through the Dominican Republic since the beginning of the emergency. To resolve logistics bottlenecks and improve the supply chain for humanitarian cargo entering Haiti from the Dominican Republic, the Logistics Cluster established common transport services in Santo Domingo including facilitation of customs clearance, cargo movement, and provision of temporary storage facilities. To date, more than 9,300 metric tons (MTs) or 35,000 cubic metres of life-saving relief supplies have been dispatched from Santo Domingo to Haiti. The 'shadow clusters' also provided assistance to affected populations who had come to seek medical attention and other life-saving support in the border area in Haiti within 20 kms of the border, and in the border area on the Dominican Republic side.

Since April 2010 the shadow cluster system in the Dominican Republic has been deactivated as the HCT in Haiti now has sufficient capacities to cover humanitarian needs outside Port-au-Prince. The overall support to the Haiti relief operation by actors in the Dominican Republic continues, as well as cross-border activities in cooperation with partners in Haiti. Under the leadership of the Humanitarian Coordinator in the Dominican Republic, relief organizations are coordinating their protection and assistance activities for affected populations in the Dominican Republic through a humanitarian coordination forum. In the same forum, preparedness and contingency planning is conducted for the rainy and hurricane season.

2.3 ANALYSIS OF FUNDING TO DATE

The Haiti earthquake has attracted more funding (at least \$3.2 billion in private and official donations, with another \$1.2 billion in uncommitted pledges¹⁵) than any disaster since the Indian Ocean Tsunami of late 2004. It is therefore worth explaining why this appeal and the actions it plans are still considered less than fully funded.

In this MYR, the clusters re-examined each of the 343 projects proposed by 102 organizations in the appeal. This was done in part with a view to finding opportunities to reduce the unfunded requirements in the appeal, given the fact that Haiti has already attracted massive resources, and that further resources may come at a cost to people in need elsewhere. As a result, the appeal's gross requirements have declined slightly, by about 15 million dollars from their peak of just over \$1.5 billion. The review process rejected new projects or budget increases in existing projects worth tens of millions of dollars. Also, a better attribution of reported funds, often private, to projects in the appeal closed the funding gap by about a hundred million dollars. The clusters also did thorough mappings of who was covering which needs, including those organizations and projects not counted in the appeal.¹⁶ They found that significant needs for the rest of 2010 are not yet covered, nor are likely to be by existing resources.

Of the at least \$3.2 billion already committed or disbursed for Haiti earthquake response, most of it is already in use for appeal projects (and counted as appeal funding) or for other coordinated actions that the clusters' mapping of coverage and gaps took into account. Large amounts were consumed in direct implementation by other actors, for example by foreign militaries. (The table overleaf shows the amounts received by the top 48 recipient organizations, which accounts for \$3 billion of the estimated \$3.2 billion total.) A certain amount may be available to cover some of the funding and coverage gaps in this appeal, but probably not enough to close all funding gaps.

Therefore there seems to be no escaping the conclusion that further significant sums are needed to continue meeting humanitarian needs sufficiently through 2010.

Given over 2 million beneficiaries, the funding needs for 2010 come to about \$750 per capita, which is not out of line considering that most of them have lost homes, assets, livelihoods, and support systems. Also, a sample of the expenditure rate of some of the largest aid agencies working in Haiti suggests that about 67% of funding to date has been expended, halfway through the year.

The Humanitarian Country Team (HCT) therefore calls on donors with uncommitted pledges for the earthquake to commit those pledges to the coordinated projects in this appeal – to make good the collective promise to the people of Haiti that they shall not lack any assistance that the world can provide. The HCT also calls on organizations that may have more funds than they can expend in the near term (and which are not counted in this appeal) to consider funding their fellow humanitarian organizations in this appeal to implement these urgent actions.

¹⁵ According to reports or statements from donors or recipient organizations researched and recorded by the UN humanitarian Financial Tracking Service (www.reliefweb.int/fts). Moreover, this figure does not capture private remittances, which likely total at least another several hundred million dollars.

¹⁶ Normal appeal practice would seek to encompass all humanitarian actions relevant to the strategy, so as to make the appeal a comprehensive inventory of needs, capacity, coverage, resource requirements and relevant funding. However because of the scale of the Haiti response and the huge number of organizations and projects, many of which the appeal did not manage to encompass in its earlier editions, this MYR has not sought to do that. Instead, it has focused on gaps not currently covered by any organization or funding source: the new projects presented in this MYR specifically address those confirmed gaps.

Recipient organizations (top 48) of Haiti earthquake humanitarian funding

Recipient organization	Funding received (\$)	Recipient organization	Funding received (\$)
US Department of Defense	494 million	Partners in Health	14 million
International Red Cross & Red Crescent Movement	448 million	United Nations Human Settlements Programme (UN HABITAT) for Humanity International	13 million
United Nations World Food Programme (WFP)	307 million	Office for the Coordination of Humanitarian Affairs (OCHA)	12 million
Various NGOs, UN agencies and elements of the International Red Cross and Red Crescent Movement (breakdown not provided)	429 million	Christian Aid	12 million
United Nations Children's Fund (UNICEF)	223 million	Mercy Corps	12 million
<i>Médecins sans frontières</i> (MSF)	121 million	Agency for Technical Cooperation and Development (ACTED)	12 million
Bilateral (to affected government)	114 million	GOAL	12 million
International Organization for Migration (IOM)	104 million	<i>Deutsche Gesellschaft für Technische Zusammenarbeit</i> (GTZ)	11 million
World Vision International (WVI)	69 million	United Methodist Committee on Relief (UMCOR)	11 million
Catholic Relief Services (CRS)	61 million	TEARFUND	9 million
US Federal Emergency Management Agency	49 million	Catholic Agency for Overseas Development (CAFOD)	9 million
Save the Children	48 million	Medair	9 million
USAID	41 million	Medical Emergency Relief International (MERLIN)	8 million
Oxfam / Community Aid Abroad / Intermon / Novib	40 million	Concern Worldwide	8 million
US Department of Health and Human Services	36 million	Plan International	8 million
CHF International	31 million	Handicap International (HI)	8 million
World Health Organization (WHO)	28 million	International Relief and Development (IRD)	8 million
United Nations Development Programme (UNDP)	26 million	UN-HABITAT	8 million
Chemonics International Inc.	23 million	International Rescue Committee (IRC)	7 million
Brother's Brother Foundation	22 million	Action Aid	7 million
CARE International	19 million	United Nations Population Fund (UNFPA)	7 million
<i>Action Contre la Faim</i> (ACF)	18 million	Agricultural Cooperative Development International / Volunteers in Overseas Cooperative Assistance (ACDI/VOCA)	7 million
<i>Samenwerkende Hulporganisaties</i>	16 million	International Medical Corps (IMC)	7 million
FAO	15 million	Pan American Development Foundation	7 million

Source: donor and/or recipient organizations reports conveyed to FTS.

3. RESPONSE TO DATE AND PROGRESS TOWARDS ACHIEVING STRATEGIC AND SECTORAL TARGETS

3.1 STRATEGIC OBJECTIVES - ACHIEVEMENT TO DATE

The Haiti Humanitarian Appeal 2010 outlined four strategic objectives that were agreed by the humanitarian community (see table below). The mid-year achievements of these strategic objectives are listed and analysed below. Due to the constantly changing situation, some of the original indicators had to be revised to ensure a more targeted and relevant measurement of achievements to date.

The humanitarian situation and response have largely stabilized in the months since the earthquake into continuous provision of basic needs (with some aspects still scaling up) – essentially a maintenance effort, combined with new planning to operationalize the strategy. The four main strategic objectives stated in the February appeal revision are met to varying degrees.

The short-term target of providing a range of humanitarian support for at least 1.5 earthquake-affected people has been largely achieved (**Strategic Objective number one**). Provision of short-term shelter material (tarps and tents) has reached the target of 1.5 million people. Construction of transitional shelter awaits details of the Safer Shelter Strategy, most pertinently identification of settlement sites for people who cannot return to their homes. To date, over 123,000 transitional shelters are planned, with approximately 78% already funded (more than the overall funding percentage for the Shelter/NFI Cluster's projects). Food provision (distributions and other means) has reached its target. By the end of March, over 4.3 million earthquake-affected people had received short-term food assistance. General food distributions ceased in March by government decision. Targeted food distribution and supplemental feeding are proceeding according to targets. Coverage of water and sanitation needs in sites is not yet complete but is on course to attain full coverage. Mobile clinics around sites and other measures have allowed 90% of displaced people in and around Port-au-Prince to access health services within a 30-minute walk, though the percentage drops to 60%, 45%, 40%, and 35% in Port de Paix, Jeremie, Gonaïves, and Les Cayes, respectively.¹⁷ CCCM suffers from both inadequate funding (45% of requirements) and a shortage of implementing organizations; consequently 46% of camps¹⁸ have no managing organization, though the CCCM Cluster is obtaining information on them, and most seem to have spontaneous self-management structures. The Nutrition Cluster has identified and is treating its caseload. It has particularly advanced on the provision of supplementary feeding products to 550,000 children (6-59 months) and pregnant and lactating women. Emergency education in cooperation with other actors advanced well in clearing debris from 70% of heavily damaged/destroyed schools that they targeted for 2010.¹⁹ It is now faced with the challenge to continue with the provision of temporary learning spaces. Emergency education has the plans and most of the resources (94% funded) to achieve full needed coverage soon. Logistics will require further resources (66% funded) to continue through 2010, but for the moment the cluster is meeting needs, now that road and sea transport has mostly resumed to a normal scale, relieving the pressure and cost of air operations (though some of these will have to continue). Protection activities – by nature more diffuse and with a caseload not so clearly delineated by earthquake effects – are under way; however, activities to strengthen the response of communities and the government to protection challenges as well as advocacy efforts have still not reached their potential. Particularly regarding GBV given the serious nature of the situation and the long-term response that is needed, current efforts are not able to meet needs. The Protection Cluster aims to cover more areas of need in the coming months.

¹⁷ *Assessment and Analysis of Haitian HADR data collected by Global Relief Technology – Analysis report # 1 1*, MIT Lincoln Laboratory, 21 April 2010. Available on <http://groups.google.com/group/assessmentshaiti>.

¹⁸ Camps here refer to large camps (1000+ families), see sector response plan.

¹⁹ According to the government, 1,261 schools were destroyed and 2,530 schools were damaged by the earthquake. The education cluster set a target of clearing debris from 250 schools for 2010.

Mid-year funding and achievement of **strategic objective number two** (re-establish or re-build physical and social infrastructure and services) have lagged behind that for direct relief. Consequently, livelihoods support (including short-term agriculture re-launch and CFW) and physical measures like rubble removal are behind targets. Only one-fifth of the overall target population for Cash-for-Work /Food-for-Work (FFW) have received CFW/FFW (out of which at least 40% have been women). The 200,000 people who have benefited from FFW/CFW contributed to debris-clearing, garbage and refuse removal, and cleaning and rehabilitation of drainage systems that are a hazard to human health. The late funding for the spring planting season might have had adverse effects on the upcoming harvest. An evaluation exercise to measure these effects is planned.

Coordination and information management structures on national and sub-national levels capable of supporting the government in immediate and effective response have been established in time and with the necessary mechanisms in place to enforce strategic and informed decision-making (**strategic objective number three**). The challenge now is to continue efforts of dovetailing humanitarian response with the priorities of the national plan and to work closely with government partners to support national capacity for information management and analysis. To this end a more comprehensive WWW tracking the response must be established, plus a synthesis and analysis of completed needs assessments to conclude if further inter-agency needs assessments are needed or other monitoring exercises to be undertaken. As part of strengthening government capacity and decision-making, the clusters currently strive to meld with the government-led sector working groups.

One general area of February's plan in which little has so far been implemented is support to affected people in host communities outside the cities and towns (which will necessarily involve supporting the host communities as well). The exception is the border area near the Dominican Republic, where cross-border operations from the Dominican side have reached many affected Haitians and their hosts.

2010 Haiti Humanitarian Appeal (February revision) Strategic Objectives and Achievements	
Indicator	Achieved as of Mid-Year
Strategic Objective 1: Provide the full needed range of humanitarian support for at least 1,200,000 earthquake-affected people who need shelter and other time-critical life-saving actions, especially in water/sanitation/hygiene, health care, NFI, food aid, nutritional support, education and protection, emphasizing the key linkages among these sectors	
Overall Target: At least 1,200,000 earthquake-affected people in Haiti and in the Dominican Republic have access to safe drinking water and sanitation, shelter, primary healthcare, nutrition support and regular and adequate food.	
Number of household NFIs distributed.	Over 2.1 million household NFIs and toolkits have been distributed of a total target of approximately three million.
Number of households receiving waterproof cover within three months (estimated numbers of families affected: 302,977).	350,466 households received emergency shelter.
Transitional shelter provided before 01 June 2010 (target 123,350).	1,783 T-shelters built. 78% of the 123,350 needed transitional shelters have already been funded.
Percentage of priority spontaneous sites with camp management or camp committee in place.	From the 21 spontaneous 95% have camp management agencies in place. 54% of all large camps have camp management in place. ²⁰ Coverage of population (IDPs in camps) 67%.
Affected population (1.2 million) have access to 15 litres of safe drinking water per person and per day.	At least five litres of safe water per person per day have been delivered through water trucking to 1.1 million people.
Sanitation coverage is improved from 1:198 (across all sites) to 1:50 in large settlement sites and segregated by sex (11,000 toilets to be constructed in three months).	Sanitation coverage 1:200 in all sites.
Campsites of over 5,000 people covered by either mobile or fixed medical services.	40% of campsites covered by either mobile or fixed services.
At least 1.9 million (1.5 million in camps + 600,000 with host communities) people receive food rations.	4,309,987 people received food rations.

²⁰ From the late Displacement Tracking Matrix survey on 1191 camps were considered as large camps (more than 1,000 households).

H a i t i

550,000 children 6-59 and pregnant and lactating women receive blanket supplementary feeding product.	550,000 children 6-59 and pregnant and lactating women received blanket supplementary feeding product.
Number of earthquake-damaged/destroyed schools cleared of debris (target for 2010: 250).	176 schools cleared of debris.
Number of children benefitting from temporary learning space (target for 2010: 850,000).	194,893 benefitting from temporary learning spaces.
Number of child-friendly spaces (target for 2010: 350).	200 child-friendly spaces established.
Number of children who benefit from psycho-social activities (target for 2010: 350,000).	55,000 children benefit from psycho-social activities.
Number of women-friendly community centres established.	Number of centres cannot be evaluated to date.
Logistics	
Strategic Objective 2: Re-establish existing or establish new (temporary, though taking advantage of opportunities for sustainability) physical and social infrastructure and services for approximately three million earthquake-affected people in Haiti and the Dominican Republic, including health, food security, economic livelihoods support, education, community spaces and community groups	
Overall Target: More than 500,000 people (40% women) from affected communities are provided with short-term employment opportunities, safety nets, or grants opportunities over a 12-month period, indirectly benefiting up to 2.5 million people.	
Number of population benefiting from CFW/FFW, by gender (target for 2010: 500,000 out of which 40% are women).	Temporary jobs and source for income provided to 102,126 workers, of which some 40% women.
Number of most vulnerable affected directly and indirectly produces their food and some additional revenue over a period of 4-5 months (target for 2010: 102,000).	98,000 of the most affected produce their food and some additional revenue over a period of 4-5 months.
Tonnage of rubble removed, sorted out and recycled in a sound environmental manner.	200,000 people has been benefiting from Food/Cash for work and contributed to debris clearing, garbage and refuse removal, and cleaning and rehabilitation of drainage systems.
Strategic Objective 3: Continue the strengthening of Government capacity for coordination at all levels, and the rapid scale-up of common services, including logistics, telecommunications, security, and coordination in the face of current severe conditions, plus expected worse conditions in the near future	
Overall target: Effective coordination mechanisms to avoid overlaps, competition and harm between projects are in place at different levels and with all relevant stakeholders.	
Comprehensive humanitarian strategy, endorsed by HCT, guiding humanitarian action in support of national priorities.	Humanitarian Strategy in Flash Appeal updated. Settlement strategy articulated and under discussion with GoH.
Established cluster coordination structure with clear government representation in 100% of the clusters.	All clusters well established with GoH participation.
Effective coordination mechanisms set up overseeing and enforcing strategic decision making (HCT and other mechanisms coordinating government, humanitarian, military and donor response).	HCT set up within weeks, Coordination Support Committee (CSC) established to oversee and enforce strategic coordination co-chaired by the Deputy Special Representative of the Secretary-General (DSRSG) of United Nations Stabilization Mission in Haiti (MINUSTAH) and the Government of Haiti. Joint Operation and Tasking Centre (JOTC) established to serve humanitarian actors to seek assistance from the UN military and police capacities.
Agreed action plan and timeline for clusters to merge into national architecture for recovery and development.	All clusters currently engaging with GoH counterparts. Early Recovery, Agriculture, WASH and Education already have good GoH participation and now based outside log base.
Comprehensive WWW database – regularly updated and Inter-agency needs assessment conducted	WWW established but incomplete. Good gap analysis for shelter. An information system identifying and displaying with sophisticated graphic gaps for all clusters is adopted by the International Computing Centre (ICC) and currently under implementation. Initial inter-agency needs-assessment conducted. Further analysis recommended and the need to be determined.

Strategic Objective 4: Put in place preparedness, disaster risk reduction, and contingency planning (each mainstreamed throughout clusters) in anticipation of worsening conditions resulting from the imminent rainy and hurricane season and their associated risks of flooding, mudslides and storm surges	
Overall target 1: Emergency response materials pre-positioned, contingency planning exercises conducted and early warning capacities for disasters caused by hydro-meteorological hazards developed.	
Overall target 2: Concerted plans and mappings of interventions owned by public authorities are prepared and implemented leading to enhanced coordination and maximized use of resources.	
Overall target 3: Effective early recovery coordination mechanisms to avoid overlaps, competition and harm between projects are in place at different levels and with all kinds of stakeholders.	
Practical disaster preparedness and disaster response plans agreed in the key disaster-prone areas of Jacmel, Léogâne and Gonaïves.	National response plan has been articulated. Work is now ongoing to develop local plans.
Emergency Response Teams operational in Port-au-Prince, Jacmel, Léogâne and Gonaïves.	ERT established and already deployed in Port-au-Prince.
<ul style="list-style-type: none"> • Contingency planning for the upcoming rainy and hurricane season is completed • Number of IDPs on sites vulnerable to flooding relocated • Number of IDPs sites prepared for rainy season • Quantity of relief goods pre-positioned • An interim geo-hazard and building hazard management plan is completed and implemented 	(no reports)

3.2 REVISED STRATEGIC OBJECTIVES FOR 2010

The revised strategic objectives for humanitarian response for 2010 agreed upon by the humanitarian community have been adapted and reflect the necessity to continue with immediate relief operations alongside initiation of long-term response based on the government's 'Safer Shelter Strategy':

1. Relocate at-risk populations from imminently dangerous locations before hurricane season.
2. Fill information gaps regarding number and location of affected people, coping capacities, and remaining humanitarian needs.
3. Attain full provision of needed basic services and necessities around all displaced people's sites according to applicable humanitarian standards by July 1 and maintain through 2010 or as needed. (This provision of services will be re-oriented to more appropriate community-based services around the settlements, with an understanding of urban dynamics, and in a way that prepares for implementation of the full resettlement strategy.)
4. Provide all needed humanitarian support to the moves from spontaneous settlements to better transitional or permanent locations (Safer Shelter Strategy), and encourage those in host communities (including non-destroyed areas) to remain (by means of improving social services and livelihoods in those communities).
5. Protect vulnerable IDPs, women, children, separated families and others who are at heightened risk of various forms of exploitation, neglect or abuse. Foster effective and equal participation of men, women, boys and girls in all phases of planning and implementation of humanitarian strategy.
6. Complete all possible contingency planning and preparation before hurricane season so as to ensure the safety of earthquake-affected people whose current shelter and coping strategies will not withstand a hurricane. Identify places where displaced people are vulnerable to extreme weather and implement at least minimum mitigation and preparedness measures.
7. More emphasis on communal or community-based early recovery initiatives such as income-generating and livelihoods programmes, in addition to temporary direct service provision where needed, in order to enhance sustainability of resettlement efforts and reduce dependence on humanitarian aid, monitoring and supplementing government social safety net programmes where needed.

Strategic indicators

1. Relocation of all people in 'red' sites or parts of sites to green sites by July 1.
2. Full and continuously updated mapping of needs, coverage and gaps, by July 1.
3. Residents of each site have access to basic essential services up to humanitarian standards (including emergency shelter and NFIs, emergency education, food and nutrition, health services, physical security, potable water, and sanitation, plus livelihoods support where needed and feasible) as of July 1.
4. (a) Percentage of capacity of designated settlement sites filled with resettled displaced people enjoying full basic services by end 2010. (b) Number of displaced people returning from host communities to temporary sites or areas of origin made unsuitable by the earthquake.
5. Number of reported incidents among displaced or otherwise affected people of GBV, exploitation, neglect and abuse; proportion of such cases assisted by humanitarian actors (or by government or civil society actors with humanitarian support).
6. Identification and preparation of hurricane shelter and positioning of stocks, sufficient to protect and assist all people made homeless or otherwise extremely vulnerable by the earthquake that are at risk of hurricanes and other natural hazards.
7. Number of people requiring humanitarian relief (broken down by type of relief) at end 2010, compared to May 2010 baseline.

3.3 MYR PROJECT SELECTION AND PRIORITIZATION

The selection (including re-validation of previously proposed projects) and prioritization of the projects included in this MYR are based on criteria developed and agreed upon during an inter-cluster workshop. For the project prioritization, a scoring system was developed. Selection, re-validation and prioritization was through a three-stage process: initial vetting by the Clusters, then by an Inter-Agency Committee (IAC) consisting of selected UN agencies and NGOs, and finally endorsement by the Resident/Humanitarian Coordinator (RC/HC) in Haiti (and that of the Dominican Republic, for projects on the Dominican side).

(Normal appeal practice would seek to encompass all humanitarian actions relevant to the strategy, so as to make the appeal a comprehensive inventory of needs, capacity, coverage, resource requirements and relevant funding. Because of the scale of the Haiti response and the huge number of organizations and projects, many of which the appeal did not manage to encompass in its earlier editions, this MYR has not sought to do that. Instead, it has focused on gaps not currently covered by any organization or funding source: the new projects presented in this MYR specifically address those confirmed gaps.)

General selection criteria (in some cases complemented by additional cluster-specific criteria of the cluster's choosing)

- The project must be consistent with the cluster strategy, and must contribute towards the achievement of one or several of the strategic objectives agreed by the HCT for the humanitarian operation in 2010 as drafted for the appeal Mid-Year Review
- The project must present a target in specified operational areas and should not duplicate activities by other organizations
- The implementing agency must have a recognized capacity to implement the project
- The appealing organization must be a fully participating cluster member which shares full reports on implementation and funding with the cluster
- The project must be likelier to receive funding from humanitarian donors than from reconstruction donors
- The appealing agency must demonstrate that it cannot fund the project from existing resources (e.g. private donations)
- The implementation of the project or most of it must be feasible within the appeal timeframe (through 2010)
- The project must be cost-effective with respect to the number of beneficiaries and the needs to which the project intends to respond

- Activities by actors from the Dominican Republic must be closely coordinated with clusters in Port-au-Prince in order to avoid gaps and overlaps
- The project must demonstrate that it is based on sound assessment of needs and different vulnerabilities and capacities of the affected population, including the most vulnerable, and that it adopts as much as possible participatory elements, both in the design and implementation of the intervention
- The project should be the result of consultation with local communities, government officials and/or UN / NGO partners
- The project should ensure equal benefit and access of women, girls, boys and men to assistance and services
- The project should address gender-specific needs and include measures preventing or reducing the impact of GBV
- The project should, wherever possible, include people who though not displaced have become more vulnerable as a result of the earthquake

Prioritization criteria

- Is the project vital to sustain homeless people (1 point), and/or to protect them from the hurricane season (1 point)? (maximum 2 points)
- Does the project remedy, mitigate or avert direct and imminent harm or threats (1 point) or strengthen the operational capacity (NGOs, UN) of other projects to do so (1 point)? (maximum 2 points)
- Does the project operationalize the Safer Shelter Strategy (1 point)? (maximum 1 point)
- Does the project provide humanitarian/early recovery aid in host communities (1 point)? (maximum 1 points)
- Does the project support basic services and necessities around spontaneous settlements (1 point)? (maximum 1 point)
- Does the project enhance local capacity/provision of supplies (beneficiaries, communities, local authorities) (1 point)? (maximum 1 point)
- Is the project the result of consultation with local communities, government officials (1 point) and/or UN / NGO partners (1 point)? (maximum 2 points)
- Does the project enhance sustainability (1 point), local ownership (1 point) and partnership (1 point)? (maximum 3 points)
- Does the project target or benefit female-headed households (1 point)?

Categorizing the scores:	
High Priority	11-14 points
Medium Priority	6-10 points

RESULTS: Requirements per priority level and funding to date

Priority	Requirements (\$)	Funding (\$)	Funding Coverage (%)	Unmet Requirements (\$)
High	1,019,071,477	581,005,626	57	438,065,851
Medium	155,486,237	94,086,886	61	61,399,351
Low	84,863,759	56,349,856	66	28,513,903
Not Specified*	228,673,737	214,947,316	94	13,726,421
Total	1,488,095,210	946,389,684	64	541,705,526

*Because the clusters did the prioritization exercise only at the MYR, they did not bother to rate projects that were already mostly funded.

3.4 SECTOR RESPONSE PLANS

Agriculture



Cluster Lead Agency	Food and Agriculture Organization of the United Nations (FAO)
Cluster members	MARNDR, CNSA, CARE, IRD, FLORESTA, ACDI VOCA, CROSE, AVSF, Diakonie, <i>Welthungerhilfe</i> , AAI, ACDI, ACF, ACPIAPDAM, ACTED, Action Aid, ADF, ADRA, AECID, AEPCEGH, AG, PAM, AHFH, AJOOLI, AMECON 2000, AMURT, ANA, APAM, PERE, PFB, APROS/S, ASMARPENIPPES, ASPF HRC, SSODLO, VSF/CROSE, Ayitika Chambee Pibel, beyond borders, BRAC, BRDFP, CARE, Caritas, CORDAID, CDAC, CECI, CEHPAPE, Ceres, CEVAD, FTA/FDEH, CHF, Christian Aid, CMRS, CNSA, CODEP, Colorado Haiti Project, Concern worldwide, COSPECS, CRDFP, CRS, CURSAH, DIAKONIE, <i>Earth Institut</i> , EFS, Europ Uni, FADA, Family Outreach, FAO, FHED INC, FISEH, FLM, <i>FLO-International pour Haïti</i> , Floresta, <i>FROCSAH</i> , <i>Fondation Gerald Bataille Ministries</i> , FONHFARA, FONJJAD, Food for life global, Food for the hungry, Forum CS, FOSAC, <i>Fraternité Notre Dame</i> , Frinca International, GDECC, GHA, GJARE, GREPS, GRET, Gropadep, GUHG, GVC, Haiti <i>élevage</i> , Haiti Response Coalition, Haiti Vision, Haitidr2020, HAS, Health Empowering Humanity, HEIFER, Help Age, HFP, Hilfswerk Austria International, HKB, Hospital Albert Schweitzer Haiti, HPI-HAITI, IAT/HRC, ICCO&KIS, ID, IEDA Relief, IFAD, IFRC, IICA, Impact Strategy Group, IDIAT, IOCC, IRD, IRDMEBSH, JJD Foundation, JUGH, LWF, MEBSH, MFK, MOJEPS, Nature Healing Nature, OCRDN, OGITH, OHDD, MKL, OMPDV, ONJDR, OPADD, OPADI, ORE, OXFAM, PADI, PADIH, PCI, PDL, PLOPP, PNUD, PRODEV, MLAL, PROTOS, RANCOD, RDPC, RI, SP, SC, SGM/SG11, SMTN, <i>Solidarités International</i> , Tearfund, Tevel B'tzedek, The Salvation Army, Tulane, UCODEP, UHP, UJDHRD, UMCOR, University of Pittsburgh, VETERMON, Viva Rio, WFP, World Care Centre, World Concern, WVI
Number of Projects	26
Cluster Objectives	The overall objective of the Agricultural Cluster in Haiti is to ensure that following the 12 January earthquake, food security is safeguarded over the next 12 months on an increasingly sustainable basis and that the rural communities' capacity to support the displaced populations is increased. This will be achieved through a range of measures which include: <ul style="list-style-type: none"> • coordination • support to food security, and • reduction to risk related to natural disasters and job creation
Beneficiaries	Over 200,000 farming families, displaced population in rural areas, and urban affected people. Projects will target women-headed households (over 50,000), most vulnerable (food-insecure, elderly) and earthquake handicapped (about 40,000).
Funds Requested	\$58,818,036
Contact Information	James Terjanian: Agricluster.haiti@gmail.com

Table: Population affected and displaced (total and female component) and target beneficiaries

Department	Directly affected populations	Displaced populations	Estimated no. of women amongst the displaced population	Female-headed households, vulnerable individuals, food-insecure, elderly, handicapped
Artibonite		162,509	81,255	10,000
Centre		90,997	45,499	
Grande-Anse		98,871	49,436	
Nippes		33,350	16,675	15,000
Nord		13,531	6,766	
Nord-Est		8,500	4,250	
Nord-Ouest		45,862	22,931	15,000
Ouest	1,215,790	32,253	16,127	100,000 Port-au-Prince 35,000 Ouest & rural areas
Sud		25,532	12,766	15,000
Sud-Est	21,242	-	-	20,000
TOTAL	1,237,032	511,405	255,705	Households (210,000)

Note: *The total population affected in one way or another is equivalent to about 210,000 families of six people each.

Response to date

The Agriculture cluster concentrated its support on Haiti's spring planting season, especially in the earthquake-affected areas. Despite being underfunded, the partners managed to assist farming families in earthquake-affected zones with the distribution of 1,874 MTs of seeds, close to six million roots and tubers for starch crop planting, 100,000 banana plants, 14 MTs of vegetable seeds 87,563 hand tools, 9,345 MTs of fertilizer and 170 MTs of compost. These distributions allowed farmers to sow their fields for the current spring season. The harvest will be evaluated by the joint *Ministère de l'Agriculture, des Ressources Naturelles et du Développement Rural* (MARNDR)-FAO-WFP CFSAM in June.

Needs Analysis

The January 12 earthquake has severely exacerbated already high levels of vulnerability. According to the PDNA, the total value of damage and losses is \$8 billion, 120% more than the 2009 gross domestic product. The damages to the agricultural sector are mostly related to loss of housing, storage and irrigation facilities, and stock of seeds, plus disruptions in agricultural markets. Significant numbers of people of rural origin have gone back to their villages of origin from the towns hit by the quake, increasing the pressure on already scarce land resources and therefore accelerating environmental degradation. Further degradation of the watersheds can also be expected. In sum, the earthquake triggered a decrease in agricultural incomes and reduced availability of food.

Potential disaster

Haiti is a country particularly vulnerable to floods and hurricanes. Approximately 85% of watersheds in Haiti are severely degraded, causing frequent floods throughout the country, soil depletion and disappearance of the basic factors necessary for agricultural production, thus impairing downstream production. 95% of Haiti's original forests are destroyed. In the past, fertile soils and potential farmlands have been lost and frequent tropical rainstorms cause widespread flooding. Storms, floods and drought significantly harm agricultural production, leading to soil erosion and increasing levels of aridity and soil salinity. According to the PDNA, before the earthquake 60% of the active working population lived in rural zones and depended on agriculture. Overall, almost 2.4 million Haitians still lack adequate access to food, according to the World Bank.

Needs before the earthquake

Before the earthquake, the sector was recovering from the severe damage of the 2008 hurricane season that devastated more than 70% of the agricultural sector, creating pockets of severe malnutrition and killing hundreds of people. This ongoing recovery in agriculture, which provided an increased food production in 2009, has been set back by the earthquake's damage and destruction. Small farmers were especially vulnerable in the aftermath of the earthquake due to the rapid increase in household size from movements to rural areas from earthquake-affected areas, and their limited coping strategies, knowledge and capacity to adapt to current hazards.

Assessments by cluster members

Both the Agriculture Cluster and other clusters have identified the swelling of needs outside of the earthquake-affected zones as a priority. Information from the Haiti Emergency Food Security Assessment and from ACTED, CRS, Organization for the Rehabilitation of the Environment (ORE), Tearfund, Floresta and *Solidarités* found that there is an urgent need to support host families. The cluster is currently supporting two further important country-wide assessments, the CFSAM and the Seed Security Systems Assessment, due to evaluate the country's seed systems starting in early June.

Massive population movements

According to DPC, some 2.3 million people have left their homes – over 1.7 million are living in camps and spontaneous settlements in Port-au-Prince, while some 600,000 have taken refuge with families and friends in the interior, of whom 160,000 moved to regions within 20 kilometres of the Dominican Republic border. The Agriculture Cluster's goal is to support the well-being of those 600,000 displaced people along with the families that are hosting them. The cluster is currently developing guidelines and strategies on how to best assist these host families while creating incentives for the displaced population to remain out of

the directly affected areas for the short to medium term in order to reduce the burden on those areas during the rehabilitation/reconstruction period.

As the agriculture cluster's partners are primarily based in rural areas and have a great deal of experience working with rural communities throughout Haiti, the cluster is well placed to lead the relief effort to those communities and has been contacted by other partners in order to support work in rural areas.

Importance of assisting host families

Host family and community support is an excellent means of assisting displaced populations because it is socially/culturally defined part of a larger self-recovery process, and something that occurs naturally and is often established or emergent before the arrival of humanitarian actors.

Many of the agriculture cluster members' assessments and informal information coming from the rural areas report that over 90% of IDPs are being taken in and supported by host families and over 80% of those are being hosted by immediate family.

In addition to household-level relationships, hosting communities are often stressed by an influx of displaced households which consume water, populate schools and clinics, congest streets, etc. Past U.S. Office of Foreign Disaster Assistance (OFDA) hosting programmes have included community-level interventions of various kinds to "reduce the social and economic impacts of disasters" (OFDA's Third Phrase) associated with large influxes of displaced households.

Having a lot of people in one's home can be a burden on all concerned, of course, as housing space is constrained, privacy is encroached; more food, water, fuel, and other basic inputs are consumed at higher rates, etc. If not supported over time, the burdens become great, often resulting in hosted households being asked to leave. These households are thus displaced a second time, and often end up in camps or other difficult shelter situations, causing greater demands on humanitarian actors than might otherwise be the case.

The cluster's goal therefore is to provide assistance to host families and host communities to lessen the burden of the families and communities and increase the potential length of the hosting arrangement to lessen the burden on the earthquake-affected areas during the rehabilitation and reconstruction phase.

Response of the donor community and plans of the Government

The agriculture component of the Appeal (February revision) amounted to \$70 million, of which \$29 million was received by June (43% funded). As of the first appeal revision on February 17, only \$5 million had been received, even though the spring planting season was imminent. At this MYR, the revised requirement is \$59 million, which is 50% funded.

After the earthquake, with the support of FAO, the Ministry of Agriculture (MoA), Natural Resources and Rural Development (MARNDR) of the Government of Haiti prepared a six-year investment plan for the Growth of the Agricultural Sector, a comprehensive document on the short- and medium- to long-term recovery and development of the sector, made up of three components: (i) rural infrastructure development; (ii) production and value chain development; and, (iii) agricultural services and institutional support. Total requirements until September 2016 are \$791 million, of which \$224 million for the next 18 months (September 2011).

The recently announced Government of Haiti Programme of Action for food and agriculture post-earthquake aims at rebuilding the agricultural sector, supporting economic growth in rural areas, improving food security and creating employment and livelihood opportunities for the rural population and IDPs who moved to rural areas as a result of the earthquake.

Strategic approach

Support to the agricultural sector post-earthquake is urgent – in the short term, through emergency measures aimed at meeting the most immediate food needs, and in the medium and long term to revive, modernize and revitalize a sector essential to the economy and social stability of the country. However, a successful long-term agriculture rehabilitation process cannot be designed without building capacities to reduce future hazard exposure. A number of new actors and organization entered the country immediately after the quake, and many of them are dealing with agriculture. This fact increased the need for strong coordination to prevent overlap and increase efficiency of the sector.

Climate-related disasters, particularly in the absence of risk reduction initiatives, and the widespread use of unsustainable natural resources and land management practices in Haiti can seriously reverse development gains by undermining livelihoods and food security, damaging infrastructure, increasing exposure to disease and eroding ecosystems.

External aid is essential to the future economic development of Haiti. Social and economic indicators show Haiti falling behind other low-income developing countries (particularly in the Western Hemisphere) since the 1980s. Haiti's economic stagnation is the result of earlier inappropriate policies, political instability, shortages of good arable land, environmental deterioration and chronic deforestation, continued use of traditional technologies, under capitalization and lack of public investment in human resources, migration of large portions of skilled population, and a weak national savings rate.

Objectives

The programme aims to support the Government of Haiti in its efforts to provide an immediate response to the food needs while resuming, revitalizing and modernizing in the medium and short term an agricultural sector essential for the economy and for social stabilization. Specifically, it intends to contribute to reducing levels of food insecurity through a coordinated, effective, timely and targeted range of agricultural interventions aimed at increasing food production capacity, rural employment and revenue generation, and rehabilitating livelihoods and sustainable production.

The Programme is designed around three interlinked components: i) coordination; ii) support to food security; and, iii) reduction of risk related to natural disasters. In summary, the cluster aims:

- A. To strengthen the capacities of the Government, the donor community and FAO ensuring that:
 - i. in compliance with the priorities set by IASC and the Global Cluster System, a Food Security Cluster is created and operates integrating aspects of nutrition and gender. This is expected to enhance synergies and limit possible overlapping;
 - ii. the projects funded by the donor community are well efficiently implemented;
 - iii. national capacities for food security and nutrition studies and assessments, policy-making, planning and project design are strengthened;
 - iv. a common approach for food security, nutrition and livelihood interventions is adopted;
 - v. the CNSA capacity to collect and to analyze data at all administrative unit level is strengthened; and
 - vi. donors and other humanitarian partners are provided with timely, accurate and transparent information on food security, nutrition and livelihoods.
- B. To support about 200,000 vulnerable displaced and host families through a massive distribution of basic inputs, mainly for cereal and pulses crop production, during one to three agricultural seasons (allowing them to produce their food); and to support 30,000 families having temporarily displaced in urban and peri-urban areas, both living in camps and with host families, to produce and commercialize vegetables to purchase their food and cover priority needs (e.g. schooling).
- C. To reinforce the capacities of the actors at different levels, mainly producers, NGOs and public services – to create the conditions for sustainable seed production, to develop an urban and

semi-urban horticulture, to enhance a vibrant small-scale livestock production and pave the way for future resumption and development of productive activities.

- D. To build the foundations for longer-term sustainable interventions offering immediate job opportunities to affected displaced and vulnerable host families allowing them to obtain food and essential goods and promote, at the same time, the integrated natural disaster risk management in selected watersheds, through the implementation of high-intensity activities for erosion control and water management, reforestation, irrigation schemes and feeder road rehabilitation.

Table: Lead organizations per department

Department	Organization
Artibonite	ACTED
Centre	Watershed Initiative for National Natural Environmental Resources (WINNER)
Grande-Anse	IRD
Nippes	OXFAM Quebec
Nord	Inter-American institute for Cooperation on Agriculture (IICA)/Pro huerta
Nord-Est	FAO
Nord-Ouest	Diakonie
Ouest	FAO
Sud	CRS
Sud-Est	ACDI/VOCA

Camp Coordination and Camp Management

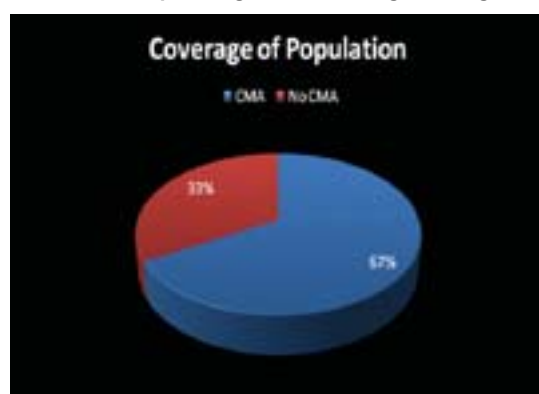


Cluster Lead Agency	International Organization for Migration (IOM)
Cluster Members	DPC, ACTED, INTERSOS, UNOPS, Concern Worldwide, World Vision, Adventist Development and Relief Agency (ADRA), American Refugee Committee (ARC), <i>Aide Médicale Internationale</i> (AMI), The Salvation Army
Number of Projects	9
Cluster Objectives	<ol style="list-style-type: none"> 1. Provide support to the earthquake-affected displaced population and host communities by ensuring dignified and safe living conditions. 2. Ensure IDPs in settlements receive effective and well-coordinated humanitarian services to meet their protection and assistance needs. 3. Support improved conditions in camps through projects focusing on mitigating measures (i.e. Management for priority camps, fire safety, disaster risk reduction, information campaigns, governance issues). 4. Support for a safe transition strategy to assist IDP returns to places of origin, relocations to host families, planned camps or other transitional shelter option with focus on registration, information campaigns, operational support for relocation.
Beneficiaries	Over 1,500,000 IDPs over 12 months
Funds Requested	\$78,779,460
Contact Information	Giovanni Cassani, CCCM Cluster Coordinator (gcassani@iom.int)

Response to date

The Camp Coordination and Camp Management Cluster works with almost 200 partner organizations to improve the situation in camps. To date, camp management agencies cover over 60% of the internally displaced population living in camps or spontaneous settlements. From the 21 spontaneous settlements initially identified as in critical need for camp management, 20 now have camp management agencies in place while IOM works in the remaining site as the manager of last resort. Through the Displacement Tracking Matrix (DTM), 95% of camps and settlements are monitored regularly to assess the level of services and raise awareness about difficulties in the camps. Over 100,000 families have been registered by DPC and IOM. Registration data shows that 37% of IDPs in camps own houses while 49% were tenants before the earthquake. Based on environmental risk surveys, almost 2,000 households were moved to planned relocation sites following Humanitarian Charter and Minimum Standards in Disaster Response (SPHERE) standards. The CCCM Cluster works closely with other clusters, such as Protection, Health and WASH, to respond to the needs of IDPs living in camps. Over 120 cluster members have received training in basic camp management.

Chart 1/2: Camp Management Coverage of Large Camps (1,000+ families)



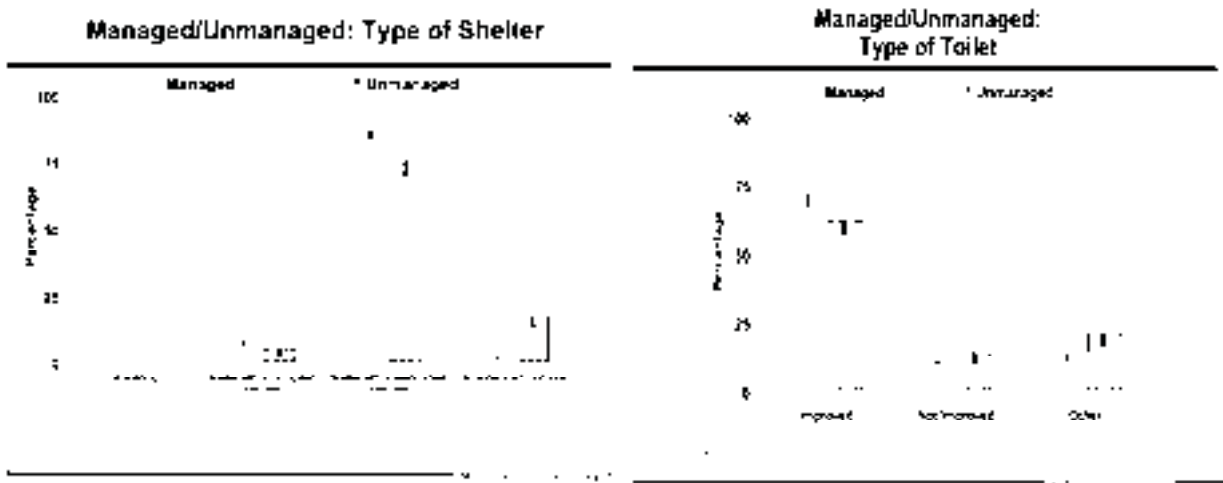
Population coverage (by Household)		
With camp management agency	77,197	67%
No camp management agency	38,315	33%
Total	115,512	100%

Number of Large Camp		
With camp management agency	29	54%
No camp management agency	25	46%
Total	54	100%

From the latest DTM survey on the 1,191 camps, 54 were considered as large camps (more than 1,000 households).

Needs Analysis

After the January 12 earthquake, the displacement situation remains extremely fluid and complex. The level of congestion in some urban spontaneous settlements presents a public health risk and requires actors able to intervene and assess the situation and take corrective action particularly for WASH- and health-related issues. Establishing and encouraging solid governance systems within the camps and having protection and social mobilizers always in touch with the communities reduce the incidence of protection and security issues. Information has to reach the displaced so that they are fully aware of risks around them, entitlements and policies affecting their lives. Displaced people have to be empowered to take decisions about their future. The cluster is committed to work towards the accomplishment of the Safer Shelter Strategy (from data collection in the camps to supporting returns) and it is planning, with its cluster members, to help the IDP families find durable solutions. Further, the cluster will continue to advocate for provision of services to the displaced well into next year (considering, for example, that the provision of transitional shelters will not be completed until May 2011) to guarantee dignified and safe living conditions. The rainy season poses an acute challenge, particularly if accompanied by heavy rains and winds which could damage shelters and lead to secondary displacement. Now that rainy season has started, the need for mitigating measures and disaster preparedness for spontaneous settlements continues to be an urgent priority for the Cluster. While camps previously identified as high risk have received mitigation assistance or IDPs have been relocated, the risk of small-scale flooding and other hazards remains. The cluster is supporting Agencies assessing risks in the camps and providing mitigating measures. Further, CCCM is part of an inter-cluster effort, led by OCHA, to establish response teams comprising doctors and engineers ready to be deployed to camps in case of emergencies like flooding or mudslides. According to the latest statistics from the DTM, there is still a distinct need for camp management agencies or focal points in spontaneous settlements. Concurrently, the latest report from Massachusetts Institute of Technology (MIT)/USAID shows that camps and spontaneous settlements with camp management agencies has significantly improved living conditions and service provision. More implementing organizations are needed in this cluster.



Objectives

The objectives of the CCCM Cluster and its partners are to: provide support to the earthquake-affected displaced population and host communities by ensuring dignified and safe living conditions; ensure IDPs in settlements receive effective and well-coordinated humanitarian services to meet their protection and assistance needs; support improved conditions in camps through projects focusing on mitigation measures; and support a safe transition strategy to assist IDP returns to places of origin, relocations to host families, planned camps or other transitional shelter option with focus on registration, information campaigns, operational support for relocation. Based on the needs

elaborated above, Cluster members still require the input of donor funding to provide camp management support, to identify and to mitigate problems affecting IDPs. Capacity-building training for camp management agencies and camp committees is one method used by the Cluster to raise awareness about standards for dignified and safe living conditions. The outcome of projects supporting these objectives will be camps that provide necessary basic services in line with respective cluster mandates. It is expected that in affected areas, some sites will remain open for a longer time (at least until May 2011), though such decisions are also dependent on the Government's rationale in terms of long-term urban planning priorities.

As per its Terms of Reference, the CCCM Cluster is committed to advocating for durable solutions to be found as quickly as possible in line with the safer shelter strategy. One of the purposes is to help reduce secondary displacement as a result of the rainy season. The ongoing registration process is providing the ground to implement durable solutions for the displaced by identifying their areas of origin and assessing their preferred option. Registration is a government-led process developed by the CCCM Cluster. In three months, more than 100,000 families have been registered in all affected areas. The Cluster works in line with the Safer Shelter Strategy as outlined below

Safer shelter options in order of suitability in line with international standards (Guiding Principles and Framework for Durable Solutions)

Option 1: Return

- The preferred option is return to pre-earthquake home after a positive structural assessment.
- The CCCM Cluster is urging its partners to emphasise this option as it represents the largest part of the displacement caseload, based on available house assessments indicating up to half of houses are safe to return to.
- Despite structural assessment declaring a large number of houses "green," the population is still reluctant to leave camps. The reasons need to be addressed within a comprehensive incentive package and better communications (including by the authorities). Those reasons include:
 - fear to go back to houses
 - most of the displaced are tenants and can no longer afford the rent nor the deposit
 - service provision (at least water and electricity) not always available
- To increase the number of returns, consideration should also be given to an ambitious incentive package to support return to yellow houses (which require works to stabilize the structure). Options to be considered include providing cash support to cover lease or rental costs, and linkages to transitional shelter options.

Option 2: Safe Plot or Proximity Site

- Move to a safe plot or proximity site in the area of origin for those whose house is destroyed or uninhabitable. This option has an important potential but it often implies heavy rubble removal to erect transitional shelter. One of the major issues to exploit fully this option is the complex land property situation in Haiti.
- Residents should be primarily responsible for identifying a safe plot and substantiating ownership claims. Involvement of the authorities should also be sought to allow the construction of transitional shelters in proximity sites.
- This option together with option 1 will encourage the rebuilding of neighbourhoods by bringing back the population to their previous residences.

Option 3: Host family / host communities

- Host families have absorbed a significant portion of the displaced population in the aftermath of the earthquake. Although it does not fall within the scope of CCCM, the cluster strongly encourages other actors to develop and implement support packages for host families in affected areas as well as in the provinces.
- Additional focus should also be put on host communities outside the affected areas. A large number of families in Port-au-Prince are recent migrants and have maintained a link with their community of origin, as highlighted by the massive exodus from Port-au-Prince after the quake.

Option 4: Stay in a safe camp

- Currently, camp management agencies are covering approx. 67% of the displaced population located at priority sites (5,000 individuals and above).
- Through the systematic monitoring of camps (reaching 95% of all sites in affected areas) the cluster is able to analyze the situation in camps, to identify gaps and to advise partners accordingly.
- Mobilizing partners: There are currently 167 partners (international NGOs, local NGOs, national agencies, UN partners, as well as other partners including the army, representative of donor countries) that coordinate their activities with the Cluster.
- The CCCM Cluster is not a provider of all services in a camp, but rather serves as a coordinating body within and among camps/settlements.
- It provides financial, material and technical support to cluster partners to undertake camp management responsibility, in order to perform the following functions:
 - Ensuring the effective coordination of humanitarian assistance and services to the displaced population;
 - Ensuring that sites/settlements are safe for all residents; and
 - Identifying gaps and needs in terms of protection and assistance in and among camps/settlements.



Camp/UNICEF/2010

Option 5: Relocation (currently only a fraction of a percent)

Currently, the option to relocate to another spontaneous settlement or planned camp is only available on a humanitarian basis to IDPs living in conditions assessed as life-threatening.

The cluster is committed to work with the national and local authorities to build capacity to manage displacement and to cater for displaced populations. It is of utmost importance in a context where it is anticipated that displacement sites will remain open beyond the duration of the humanitarian phase and the current level of external support will gradually diminish. Drawing on local community organizations in a context of stretched resources is an integral part of the overall disaster risk management strategy and will be in line with the Government's long-term reconstruction and development plan.

H a i t i

Table 3: List of large camps with Camp Management Agency (June 2010)

SSID	Camp Name	Commune	Camp Management Agency	Number of Households
111_01_001	Parc Acra/Imp De la sol	PORT-AU-PRINCE	World Vision	1,154
111_01_030	Terrain de Golf Delmas 48	PORT-AU-PRINCE	J.P Slash	7,000
111_01_061	Terrain Pere Solino	PORT-AU-PRINCE	IEDA	1,586
111_01_075	Place de La Paix	PORT-AU-PRINCE	CONCERN	6,986
111_01_402	Parc Acra (E2)	PORT-AU-PRINCE	CRS	1,132
111_01_417	Teleco Sans Fil	PORT-AU-PRINCE	Viva Rio	2,357
111_01_459	Kano	PORT-AU-PRINCE	ACF	1,885
111_02_013	Tapis Rouge (Sapi Roy)	PORT-AU-PRINCE	GOAL	2,062
111_02_405	Ti Savann	PORT-AU-PRINCE	ACTED	1,410
111_03_015	Venus	PORT-AU-PRINCE	CONCERN	2,222
112_01_063	Henfrasa/Delmas 33	DELMAS	AMI	1,141
112_01_093	Automeca	DELMAS	IEDA	3,852
112_01_102	Camp Maurice Bonnefil	DELMAS	Medecins du Monde	1,703
112_01_320	Camp CINEAS	DELMAS	IEDA	3,008
112_01_348	Aviation Militaire	DELMAS	American Refugee Committee	7,135
112_01_483	Village Des Refugies	DELMAS	HAVEN	1,207
112_01_491	Camp Boulos	DELMAS	IEDA	1,027
113_09_302	Cite Charite 1	CARREFOUR	Premiere Urgence	1,089
113_10_001	Universite Adventiste	CARREFOUR	ADRA	3,863
113_11_314	Village Gaston Margron	CARREFOUR	Save the Children	2,500
114_03_302	Centre Acra 1	PETION-VILLE	Save the Children	1,258
114_05_003	Place St Pierre	PETION-VILLE	Haitian Red Cross / CARE	2,566
114_05_004	Place Boyer	PETION-VILLE	CONCERN	1,246
117_01_008	Centre d'Hebergement Tapis Vert	CITÉ SOLEIL	LADH (L'Athletique d'Haiti)	2,061
118_03_018	Cake Mocra	TABARRE	World Vision	1,198
131_02_424	Corail	CROIX-DES-BOUQUETS	ARC	1,300
112_01_059	Boliman Brant	DELMAS	CONCERN	4,536
112_01_478	Camp Canaan (O.G.D.V. Tol)	DELMAS	Protection civile (DPC)	2,700

List of large camps without Camp Management Agency (June 2010)

SSID	Camp Name	Commune	Number of Households
111_01_034	Champ de Mars	PORT-AU-PRINCE	4,711
112_01_115	Batimat	DELMAS	1,584
113_10_008	Salezzen Carrefour	CARREFOUR	2,892
113_10_009	Centre sportif de Carrefour	CARREFOUR	1,012
113_10_405	Sant Ebejeman UNAH	CARREFOUR	1,774
113_11_327	Kan de la gras (3)	CARREFOUR	2,624
113_11_402	AVTS	CARREFOUR	1,266
117_01_005	Place Fierte	CITÉ SOLEIL	1,319
117_01_412	C.A.P.V.V.A.	CITÉ SOLEIL	1,442
117_02_003	Parc La Couronne	CITÉ SOLEIL	1,315
117_02_005	Terrain Meuse	CITÉ SOLEIL	1,525
117_02_304	Radio Commerce	CITÉ SOLEIL	1,402
118_03_003	Mais Gate 1	TABARRE	1,351
118_03_027	Centre Refugies Hatiens	TABARRE	1,014
118_04_004	Te Roche	TABARRE	1,257
121_02_434	Juventus	LÉOGÂNE	1,251
131_03_001	Centre d'hebergement Marasa 14	CROIX-DES-BOUQUETS	1,410
131_03_005	Lycee Jean Jacques 1er	CROIX-DES-BOUQUETS	2,150
131_03_302	Sant Ebejeman de Novilles	CROIX-DES-BOUQUETS	1,520
131_09_002	Village 12 Janvier	CROIX-DES-BOUQUETS	3,000
112_01_376	Haut Pis	DELMAS	1,424

Coordination and Support Services



Lead Agency	Office for the Coordination of Humanitarian Affairs (OCHA)
Implementing Agencies	UNDP, United Nations Department of Safety and Security (UNDSS), International Strategy for Disaster Risk Reduction (ISDR), UNICEF, United Nations Office of Outer Space Affairs (UNOOSA), World Council of Churches (WCC)
Number of Projects	5
Objectives	<ul style="list-style-type: none"> • Effective coordination of humanitarian response. • Coordinated disaster preparedness and response • Comprehensive strategy to ensure smooth transition to longer-term recovery in support of national priorities • Strategic information management and analysis to enhance decision-making and inform strategic planning • Enhanced safety and security for UN and humanitarian personnel
Beneficiaries	Humanitarian community and government partners in Haiti
Funds Requested	\$21,861,148
Contact Information	Jolanda Van Dijk. Email: vandijk1@un.org

Response to date

The relief operation following the Haiti earthquake has been of an extraordinary scale, not only in terms of the affected population and its unique urban setting, but also in view of the number and range of actors involved. To date, over 1,000 relief organizations, donors, non-traditional actors such as the US military and public Haitian offices have been involved in support of the GoH to meet the manifold needs of over two million Haitians affected by the earthquake. Initial response, driven by the desire to save lives, was swift and effective. Within just a matter of days the humanitarian **cluster** system was established, with response organized through 12 clusters and two sub-clusters. For the most part, the GoH appointed specific Ministry counterparts to co-lead each cluster and in April and May intensified its involvement in the response planning and implementation at all levels. Coordination was also strengthened with NGO partners through the establishment of an NGO coordination cell (supported by InterAction and International Council of Voluntary Agencies [ICVA]).

Cluster Lead Agencies			
Cluster	Lead Agency	Cluster	Lead Agency
Agriculture	FAO	Health	WHO
Camp Coordination and Management	IOM	Logistics	WFP
Early Recovery	UNDP	Nutrition	UNICEF
Education	UNICEF/SC	Protection (GBV & Child Protection Sub-clusters)	Office of the High Commissioner for Human Rights (OHCHR) (UNFPA / UNICEF)
Emergency Telecommunications	WFP	Shelter / NFI	The International Federation of Red Cross and Red Crescent Societies (IFRC)
Food Aid	WFP	WASH	UNICEF/ National Directorate for Potable Water and Sanitation (DINEPA)

The **HCT**, led by the HC and comprising seven UN agencies, seven NGOs, the IFRC and observers from the NGO coordination cell, was formulated in the first week of February and met twice a week throughout the initial emergency phase to address key strategic issues. Humanitarian strategic coordination was also strengthened with the establishment of a Deputy Humanitarian Coordinator and a Senior Humanitarian Advisor to the HC. Within the first weeks of the crisis OCHA strengthened its office to provide dedicated support on inter-cluster coordination, information management and analysis, mapping, civil-military liaison to provide consistent support to Government partners, donor coordination, civil military coordination, advocacy and media outreach.

Effective coordination with MINUSTAH and the US military (Joint Task Force or JTF) was critical in the early emergency phase to fully capitalize on the substantial military and mission assets in the country. The CSC was established to oversee strategic coordination. This unique structure co-chaired by the DSRGs of MINUSTAH and the Government of Haiti brought together representatives of the Government of Haiti with donors, UN agencies and representatives of the humanitarian community, MINUSTAH and the US military to address key strategic issues. Through its planning task force, comprising the Management Oversight Board (MOB) and the Project Management Coordination Cell (PMCC), the CSC tasked complex operations involving multiple stakeholders addressing critical mitigation measures, debris management, site preparation for emergency relocation sites and the emergency relocation of displaced people. A JOTC was established at the end of January to serve as a 'one stop' centre for humanitarian actors to seek assistance from the UN military and police capacities. Initially the JOTC focused on providing security to expedite aid delivery as safely and securely as possible to those in most need. The JOTC, directed by MINUSTAH and OCHA, has complemented the work of the PMCC by providing logistics, engineering and security support to the Government of Haiti and the humanitarian community.

To ensure that response addressed the needs in the affected areas outside of Port-au-Prince and also that it addressed the needs of host communities (who received over 500,000 IDPs from Port-au-Prince), a sub-national coordination capacity has been established in Léogâne, Petite Goâve, Jacmel and Gonaïves. Lead agencies have also been identified in the other departments to coordinate contingency planning, disaster preparedness and response. Eight clusters are now operational in Léogâne and seven in Jacmel, and multi-cluster coordination is operational in Gonaïves and Petite Goâve. At the sub-national level, particular focus has been placed on reinforcing coordination with ministries and with local authorities (mayors' offices). Coordination and administrative hubs were also established in the Dominican Republic in support of the clusters in Haiti: at the height of the emergency response 10 clusters were operational in the Dominican Republic.

In line with the recommendations of the IASC Contingency Planning Mission in March, OCHA has coordinated humanitarian partners to support the Government-led process of updating the national contingency plan. In collaboration with MINUSTAH, OCHA has brought together partners to convene an Emergency Task Force to support preparedness and mitigation work at the departmental level. A critical incident response team has also been established to respond to urgent events in Port-au-Prince. The plan is to replicate this team in the priority areas of Jacmel, Léogâne and Gonaïves.

Efforts have been made to ensure the gathering, analysis and dissemination of detailed information to support and inform planning and effective decision-making. Each of the main clusters has an established information management capacity that produces data and graphic products. OCHA's information management team provides support to the clusters and serves as a central repository for this information maintaining the One Response website and translating this information into the "Who, What Where" database. Efforts are now being placed on working closely with government partners to support national capacity for information management.

The initial Humanitarian Flash Appeal for \$562 million for humanitarian response was issued within three days of the January 12 earthquake. In less than a month, the appeal was subsequently revised, to \$1.4 billion, following a review process and issued on 18 February. Four months on, the HCT and cluster leads worked in close collaboration with partners to review needs, revise the overall strategy and response plans in line with Government priorities and project requirements until the end of the year.

Needs Analysis

Following the initial emergency response phase, the challenge is to lay the foundations for longer-term recovery and to focus on finding durable solutions to the high levels of displacement. Even in the best-case scenario, it will take a full year to provide sufficient transitional shelters for all identified beneficiaries. Therefore, there is a need to support a multi-faceted strategy that provides support to those who remain displaced, while moving towards longer-term community-based approaches that support national priorities. Partners have reviewed inter-agency and cluster response plans, and efforts are underway to adapt coordination mechanisms to support national leadership. Clusters are focusing on dovetailing humanitarian response with the priorities of the national plan. Each cluster is exploring how best to adapt its work to eventually fold into Government-led sector working groups. Humanitarian actors are now focusing on disaster risk and preparedness at the national and

departmental level. Effective communication to the affected population on humanitarian assistance and preparedness measures remains a priority. It is important that the strategy and structures put in place match the need and reflect innovative and cooperative approaches that reach beyond traditional actors within the humanitarian community, so that an effective link is established to longer-term sustainable development.

Objectives

- Inclusive humanitarian coordination mechanism is maintained and further strengthened.
- Clear humanitarian leadership in support of national priorities.
- Cluster system (including inter-cluster coordination) is strengthened and response capacity enhanced for ongoing and future disaster response. Preparedness for the hurricane season.
- Strategic response and preparedness plans in the MYR of the Revised Humanitarian Appeal are implemented and monitored.
- Information products developed, maintained and disseminated.
- Needs and concerns of affected populations highlighted and advocated.
- Government of Haiti’s capacity is strengthened in preparing for the hurricane season and potential major disasters.
- Strengthened partnership between all partners, including local authorities and private sector.
- Humanitarian support is based on accurate up-to-date data and responds better to real needs.
- Key advocacy messages to humanitarian actors, government counterparts and the civil society and the global media coverage ensures support to the common humanitarian project cycle, a good outreach to humanitarian donors and the mobilization of the necessary resources.
- Strengthened relationships with MINUSTAH, the foreign military forces enabling effective cooperation between military and humanitarian actors.
- Balanced coverage of the assessed humanitarian needs through accurate and transparent resource management, and the targeted and needs-based allocation of funds to priority and under-funded activities
- Cross-cutting issues (age, gender, HIV/AIDS, environment, human rights, diversity and disaster risk reduction) are effectively mainstreamed into all aspects of humanitarian response.
- Ensure a smooth transition from humanitarian assistance to recovery and national capacities to oversee the transition strengthened.

Overview of Humanitarian Coordination Mechanisms

Forum	Chair	Objective(s)	Inputs/Preparation	Outputs
HCT	HC	<ul style="list-style-type: none"> • Set overall humanitarian strategy 	<ul style="list-style-type: none"> • Sit rep • Maps • Dashboard • Cluster analysis • Inter-cluster analysis 	<ul style="list-style-type: none"> • Clear and agreed-upon strategic decisions to be communicated to inter-cluster coordinators
UNCT	RC	<ul style="list-style-type: none"> • Set UN strategies • Safety and security decisions 	<ul style="list-style-type: none"> • Recommendations on internal UN structures and functions to support humanitarian effort (safety and security issues, base camps) 	<ul style="list-style-type: none"> • Communicate safety and security concerns to HCT through HC
INTER-CLUSTER	OCHA	<ul style="list-style-type: none"> • Recommend strategy • Highlight decisions needed by HCT • Set overall operational vision • Raise humanitarian concerns 	<ul style="list-style-type: none"> • Cluster reports • Cluster strategic and operational plans • Minutes of cluster meetings 	<ul style="list-style-type: none"> • Inter-cluster analysis paper • Recommendations for HCT
CLUSTER	Agencies, cluster coordinators	<ul style="list-style-type: none"> • Cluster strategies • Operational coordination among cluster members • Information management • Gap analysis 	<ul style="list-style-type: none"> • Matrix for information gathering • Risk assessments and supply maps • Reports from cluster members • Decisions from HCT and inter-cluster 	<ul style="list-style-type: none"> • Reports for inter-cluster level (overview of cluster situation) • Gap analysis • Needs assessment • Strategic and operational plans

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Forum	Chair	Objective(s)	Inputs/Preparation	Outputs
Presidential Commission	GoH	<ul style="list-style-type: none"> Ensure coordinated strategy between GoH and humanitarian partners 	<ul style="list-style-type: none"> Sit rep Maps Cluster analysis Inter-cluster analysis Recommendations 	<ul style="list-style-type: none"> Key action points from meeting communicated to HCT, cluster coordinators
CSC & PMCC	DSRSG	<ul style="list-style-type: none"> Oversight and coordination of relief, recovery and reconstruction activities Advise the HLCC as requested 	<ul style="list-style-type: none"> Briefing papers on strategic priorities (for first meeting: food, shelter and communications) 	<ul style="list-style-type: none"> High-level steerage for Government and relief actors
Humanitarian Donors – (ECHO, DFID, USAID, Spanish Agency for International Cooperation (AECID))	HC (weekly) ECHO (daily)	<ul style="list-style-type: none"> Funding priorities for humanitarian programmes Support for cluster coordination 	<ul style="list-style-type: none"> Analysis of humanitarian situation Analysis of cluster leadership Analysis of funding needs 	<ul style="list-style-type: none"> Shared vision of funding priorities Vision on donor priorities
Humanitarian Forum	OCHA	<ul style="list-style-type: none"> Information sharing 	<ul style="list-style-type: none"> Maps Cluster briefings Security briefings Inter-cluster analysis Information from partners 	<ul style="list-style-type: none"> More complete vision of partners' actions and plans Informed partners
JOTC	Emergency Operation Management Centre (EOMC), DSRSG office	<ul style="list-style-type: none"> Coordinated requests for use of military assets to support the humanitarian effort 	<ul style="list-style-type: none"> Requests funnelled through clusters 	<ul style="list-style-type: none"> Coordinated tasking of military assets
Public Information Coordination	MINUSTAH, OCHA	<ul style="list-style-type: none"> Coherence of UN (and NGO and donor under new strategy to be considered by CSC) messaging, including with Govt messaging, disseminating risk resilience, build-back-better messages 	<ul style="list-style-type: none"> Agencies' key messages Media monitoring and early warning of emerging (negative) issues 	<ul style="list-style-type: none"> Coordinated key messages, with seismic and hurricane-resilient practices promoted Coordinated guest appearances at local and NY-based press briefings
CDAC (Communications with Disaster-Affected Populations)	Internews, OCHA	<ul style="list-style-type: none"> Effective communication to the affected population on humanitarian assistance 	<ul style="list-style-type: none"> Public messaging for affected population 	<ul style="list-style-type: none"> Daily radio programmes Daily SMS campaign Other joint outreach campaigns via print, TV, film, mobile messaging (i.e. vans with loudspeakers) and live entertainment

Early Recovery



Cluster Lead Agency	United Nations Development Programme (UNDP)
Cluster Members	UNDP, United Nations Environmental Programme (UNEP), United Nations Development Fund for Women (UNIFEM), United Nations Organization Satellite (UNOSAT), UNOOSA, International Labour Organization (ILO), UN-HABITAT, United Nations Educational Scientific and Cultural Organization (UNESCO), IOM, WMO, UNOPS, Plan International (PI), HI, WVI, SC, <i>Hopital Albert Schweitzer (HAS)</i> , <i>Entrepreneurs Du Monde (EDM)</i> , Samaritan's Purse (SP), Airline Ambassadors International (AAI), World Islamic Relief (WIR), IRW, IRC, ACTED, ACF
Number of Projects	27
Cluster Objectives	<ol style="list-style-type: none"> Thematic area: Governance and Aid Coordination Objective: Strengthen the capacity of governments (national and local) in leading reconstruction and recovery efforts, promote community engagement, and enhance aid effectiveness Thematic area: Livelihoods Objective: Creating temporary jobs and the foundations for sustainable livelihoods Thematic area: Shelter/Housing, Basic Settlement Infrastructure and Services, and Territorial Management Objective: Facilitate the return of IDPs to their original settlements and their integration with the host communities or establishment in new settlements in the affected and non-affected areas, while promoting deconcentration of social, cultural and economic activities Thematic area: Cross-cutting issues Objective: Mainstream the systemic inclusion of gender, environment and disaster risk management across reconstruction and recovery projects
Beneficiaries	<ol style="list-style-type: none"> Until end of 2010, 250,000 to 500,000 people in affected populations and host communities, of whom 40-50% females, the elderly, youth, children and people with disabilities will benefit directly and indirectly from enhanced collaborative actions and support to GoH and civil society organizations. Until end of 2010, 250,000 to 500,000 in affected populations and host communities, of whom 35-50% female, the elderly, youth, children and people with disabilities will benefit directly and indirectly from the creation of temporary jobs and livelihood opportunities. Until end of 2010, 250,000 to 500,000 in affected populations and host communities, of whom 35-50% female, the elderly, youth, children and people with disabilities will benefit directly and indirectly from support for shelter construction and housing rehabilitation, and restoration of social, productive and basic settlement infrastructure and services in the affected and non-affected areas. Until end of 2010, 250,000 to 500,000 in affected populations and host communities, of whom 35-50% female, the elderly, youth, children and people with disabilities will benefit directly and indirectly from systemic inclusion of gender and environmental management aspects, including disaster management and life-saving disaster risk preparedness and mitigation in recovery and reconstruction efforts. <p>Locations Port-au-Prince, Gressier, Léogâne, Grand Goâve, Petit Goâve, Jacmel</p>
Funds Requested	\$140,705,800
Contact Information	gie.siauw@undp.org

Response to date

- Since the onset of the crisis, most cluster interventions have focused on emergency relief, life saving and mitigation to respond to immediate needs, rather than reconstruction and recovery interventions. The interventions included providing emergency shelters, food rations, potable water, hygiene facilities and other basic life necessities to displaced people; helping injured people; providing protection for displaced Haitians in the border area with the Dominican Republic; preparing for the hurricane season; and reducing the risk of flooding.
- UNDP has been leading the in-country Early Recovery Cluster since 12 January and supports a coordinated strategy for early recovery. This is intended to ensure that there are effective operational programmes that stimulate and support early recovery; that these programmes

address all possibilities for earlier recovery; and that they are supported by the Government and the international community.

- So far, the response from Early Recovery Cluster stakeholders has included contributing to the PDNA, which was served for the elaboration of the Action Plan for Reconstruction and National Development; drafting the ERSF document; setting-up the ER network and coordination mechanisms; organizing information-sharing activities; providing technical support to the national and local governments' early recovery strategic planning and coordination. The response has also included organizing labour-intensive emergency public works in support of humanitarian operations through CFW and FFW activities that have provided temporary jobs and a source of income to around 200,000 people (of whom more than 30% are women). They have also contributed to opening quake-affected areas to reconstruction workers and equipment, and the daunting task of demolishing hanging building ruins as well as debris clearance, garbage and refuse removal, and cleaning and rehabilitating drainage systems that are hazardous to human health.

Recent initiatives of the Early Recovery Cluster stakeholders include:

- **Empowering leadership, promoting early ownership:** To support the national coordination system and strengthen Government leadership in recovery and reconstruction planning and coordination, starting from June 2010 the Early Recovery Cluster coordination meetings and strategic planning activities will be co-coordinated by the Ministry of Planning and External Cooperation and Early Recovery Cluster lead, and inter-linked to the Haiti Reconstruction Platform. (This will also aim to strengthen community engagement and improve people's access to information and communication facilities, for better community-based decision-making on the basis of informed choices.)
- **Settlement strategy:** Contributing to the identification adequate responses for the return of the displaced people to their original settlements or their reintegration to the host communities and relocation to new settlements via sub-cluster working '*Logement & Quartier*' and involvement in the formulation of recommendations.
- **Developing collaborative joint actions:** Building collaboration with a wide range of partners (international and national NGOs, the Government, donors, media and people from the cultural sector); developing collaborative initiatives to create demand for products made in Haiti; improve quality supply through leveraging Haitians' cultural endowment and creativity for revitalizing local micro and small and medium enterprise (SME); better linking reconstruction process with social-cultural revitalization; creating sustainable livelihood opportunities, and economic, territorial and institutional rebuilding. Challenges and gaps:
 - A key challenge remains the Government's capacity. It is weak and needs strengthening. Too many capable people in the Government died or were incapacitated. Offices were destroyed and data lost. Strengthening support to national and local governments as well as community leaders is key. Empowering leadership is a priority.
 - Working collaboratively is challenging. Many organizations and individuals are used to working alone or with one or two partners. Concerted area-based interventions could improve. All organizations working together across sectors allow us to identify the gaps faster and deliver results more efficiently.
 - Strengthening community participation remains important. The community needs to see itself as more than just recipients of donations. They have to become active partners and be involved in the decision-making and reconstruction process based on informed choices.
 - Land for re-housing IDPs is vital. To effectively support the GoH efforts to accelerate the process of re-housing the IDPs, land must be made available. Issues on tenure and renters' access to decent shelters and land need to be settled. Without land situated in adequate locations, there will be severe constraints in constructing shelter to address the needs of those who cannot return to the non- and slightly damaged houses ('green' and 'yellow' houses), and in the efforts to re-house many of the IDPs who were renters before the quake.
 - Lack of human and financial resources. Without timely mobilization of resources, the recovery and reconstruction process is greatly constrained.

Needs Analysis

The 12 January 2010 earthquake was the most powerful earthquake to strike Haiti in 200 years. The epicentre was near the town of Léogâne, about 17 km south-west of Port-au-Prince, the capital. The effects were felt in the departments of the west, south-east and Nippes. There was extensive damage to the metropolitan area of Port-au-Prince (including the municipalities of Port-au-Prince, Carrefour, Petionville, Delmas, Tabarre, Cité Soleil and Kenscoff), and to the towns of Leogtine, Jacmel and Petit Goâve. Eighty per cent of the city of Léogâne was destroyed.

The earthquake has created an unprecedented situation, compounded by the fact that it has affected the country's most populated area, as well as its economic and administrative centre. The human impact is immense. Approximately 1.5 million people, representing 15% of the national population, were affected indirectly. It is estimated that more than 300,000 people were killed and as many wounded. Approximately 1.5 million live in temporary shelters in the metropolitan area of Port-au-Prince. Over 600,000 people have left the affected areas to seek shelter elsewhere in the country. The result is an exacerbation of existing problems regarding access to food and basic services. By striking at the heart of the economy and the Haitian Government, the earthquake also sharply affected the human and institutional capacities of the public and private sectors. It caused the destruction of a large number of private establishments, micro, small-scale, medium and large enterprises. It also disrupted livelihoods for hundreds of thousands of people throughout the country.

The destruction of infrastructure is massive. About 105,000 homes were totally destroyed and over 208,000 damaged. More than 1,300 educational institutions, and more than 50 hospitals and health centres have collapsed or are unusable. The country's main port has been rendered inoperative. In some cases, entire neighbourhoods have been wiped out. The Presidential palace, the parliament building, the court house, and the majority of buildings of the ministries and public administration have been destroyed.

Strengthening support to GoH (national and local governments) and coordination of reconstruction and recovery efforts: Public authorities are gradually recovering from the aftermath of the earthquake and positioning themselves to respond to the immense challenges ahead. However, in the immediate and medium term, they clearly need support for meeting the daunting task of post-earthquake reconstruction and recovery, including strengthening their working capacity in planning and coordinating the transition from humanitarian relief to reconstruction and full recovery. The State machinery has been severely affected by the earthquake. The Presidential palace and most key ministries and State institution premises have been destroyed, key data and equipment lost, and a substantial number of civil servants killed or incapacitated. The casualties have significantly reduced the capacity of national and local authorities to effectively lead and coordinate the response.

Job creation: Supporting job creation is key, because many of those hit by the quake were already poor and lost their primary breadwinners in the quake. Without jobs, there is a high risk of unrest.

Skill building, education and cultural development: Job creation also involves skill building, education or improved access to information and knowledge capital, and smart use of social-cultural capital. The level of illiteracy in Haiti is high, but Haitians do have potential. Culture can be a driving force that contributes as significantly to economic growth as other key sectors.

Infrastructure, Shelter/Housing and Settlements: Many people still live in camps. The Government's goal of moving people to their original settlements needs greater support. This is because on top of the IDP community already settled in camps, others have been returning to Port-au-Prince from the provinces and establishing spontaneous camps, as most livelihood opportunities remain concentrated in Port-au-Prince.

Mainstreaming gender and environmental management, including disaster risk preparedness and mitigation: Specific needs must be considered of the elderly, youth, children, women (especially single-women-headed households) and thousands of people who will have to live with severe

permanent disabilities after the quake. It is estimated that one out of five households in Haiti is a single-woman-headed household. It is also estimated that about 800,000 people have been injured, out of whom thousands will have to live permanent disabilities.

In April 2010, a WMO assessment mission was conducted to evaluate institutional and operational capacities, gaps and needs of the CNM and the *Service National des Ressources en Eau* (SNRE) of Haiti, with respect to the provision of meteorological and hydrological services to support disaster risk reduction and early warning systems. A short-term needs capacity development plan, which is currently under implementation and a medium-/long-term plan have been developed.

Objectives

The Early Recovery Cluster response is grouped into the following four programmatic areas:

1. Governance and Aid Coordination

Strengthen the capacity of governments (national and local) in leading reconstruction and recovery efforts, promote community engagement and enhance aid effectiveness.

Outcome: Enhanced coordination for aid effectiveness and strengthened government institutions (national and local) leaderships, and community engagement in reconstruction and recovery efforts.

Key Activities

- 1.1 Reinforce existing structures, improve coordination mechanisms and outputs, and mobilize resources to support the Government of Haiti (national and local governments) in policy making, strategic planning and leading the coordination of reconstruction and recovery efforts.

Outputs: A number of area-based concerted actions undertaken in support to the implementation of the action plan for national recovery and development of Haiti.

Facilitate community access to information, and enhance community involvement in the reconstruction and recovery processes.

Information flow that allows informed choices improved through the establishment of reconstruction support centres, journalist house, and community outreach activities.

2. Livelihoods

Create temporary jobs and build the foundations for sustainable improvement of people's livelihoods, while instigating 'deconcentration' of social, cultural and economic activities within the country's territory.

Outcome: Enhanced self-reliance, coping, resiliency and recovery capacity of critically-affected households (the displaced and host families) in affected and non-affected areas.

Key Activities

- 2.1. Promote and upscale projects that create an immediate source of income and create job opportunities.

Output: Immediate source of income-generated and livelihood opportunities created through consolidated CFW and FFW schemes

- 2.2. Promote and develop collaborative projects to build people's skills and support the creation of job opportunities and sustainable livelihoods in the construction, agriculture, commerce and trade, cultural and creative sectors, as well as other service sectors, to reduce relief dependency and promote self-reliance initiatives.

Output: Improved quality of people's skills and increased business start-up initiatives.

3. Shelter/Housing, Basic Settlement Infrastructure and Services, and Territorial Management

Facilitate the return of IDPs to their original settlements and their integration with the host communities or establishment in new settlements in the affected and non-affected areas, while promoting deconcentration of social, cultural and economic activities.

Outcome: The return of IDPs to their original settlements facilitated and interventions in affected and non-affected areas outside Port-au-Prince contributed to pave the way towards geographical 'deconcentration' of social, cultural and economic activities.

Key Activities

3.1 Clear debris and demolish hanging ruins of damaged buildings, prepare sites to facilitate the restoring of social, productive and basic infrastructure and services, the rehabilitation of houses and new shelter projects.

Output: In affected areas of Port-au-Prince and in Jacmel, Miragoane, Léogâne, Petit Goâve, Grand Goâve and Cabaret, hanging damaged building ruins are demolished; rubble and accumulated debris are cleared and recycled in an environmentally sound manner to pave the way for earlier reconstruction and recovery to take off.

3.2 Provide support to the GoH in the development of territorial management and urban reconstruction plans, as well as the planning and coordination of recovery and reconstruction efforts, and promoting interventions in non-affected areas to instigate deconcentration of social, cultural and economic activities.

Output: Recommendation for strategic initiatives and implementation of a number of joint area-based concerted actions.

4. Mainstream cross-cutting themes: gender and environmental management, including disaster risk preparedness and mitigation.

Systemically mainstream gender equality and environmental and disaster management in Early Recovery Cluster projects and reconstruction and recovery efforts across sectors.

Outcome: Gender equality and environmental aspects, including disaster risk management, are systemically incorporated in projects of Early Recovery Cluster stakeholders and other partners.

Key Activities

4.1. Develop gender mainstreaming activities.

Output: Specific needs of the elderly, youth, children, and particularly single-headed women households and people with disabilities are incorporated in projects of Early Recovery Cluster stakeholders and promoted across sectors.

4.2. Develop environmental management and disaster risk reduction activities, including strengthen support the GoH in the preparation of disaster risk management.

Output: Increased disaster risk management capacity of the local and national governments, and preparedness of the communities.

Education



Cluster Lead Agencies	UNICEF and SC
Cluster Members	ACDI, ACT Alliance /FinnChurch Aid (FCA), ActionAid, ADEPFOMA, <i>Agencia Española de Cooperación Internacional para el Desarrollo</i> (AECID), <i>Aide et Action</i> , AIR, <i>Association des leaders Evangéliques d'Haïti</i> (ALEHA), Allied Recovery International (ARI), <i>Ambassade de France</i> , America Continental 2000.org, AME-SADA (African Methodist Episcopal Church-Service And Development Agency), Ananda Marga Universal Relief Team (AMURT) International, Architecture for Humanity, <i>Action Viable et Solidaire pour la Renforcement de l'education en Haiti</i> (AVISER-Haiti), <i>Associazione Volontari per il Servizio Internazionale</i> (AVSI), AWO, International Builders International, CARE, CARITAS Austria, CARITAS Suisse, <i>Commission épiscopale pour l'éducation catholique</i> (CEEC), CESVI, <i>Conférence Haïtienne des Religieux</i> (CHR), <i>Comitato Internazionale per lo Sviluppo dei Popoli</i> (CISP), <i>Confederation Nationale des Educatrices et Educateurs d'Haïti</i> (CNEH), COCEQ <i>La cour des Enfants de Quettstar</i> , <i>Collège Frère Hebreu</i> , Concern Worldwide, <i>Corps National des Enseignants d'Haïti</i> (CONEH), <i>Congrégation des Soeurs Salésiennes</i> , CRAD/CEAAL, <i>Croix Rouge Allemande</i> , CRS, Centre for Sustainable Development Initiatives (CSDI), <i>Direction du développement et de la coopération</i> (DDC), <i>Confédération Suisse</i> , Department for International Development - UK (DFID), Digicel Foundation, <i>Education Development Centre</i> (EDC), <i>Editions Deschamps</i> , <i>Electriciens Sans Frontières</i> , <i>Enfants du Monde Droits de l'Homme</i> (EMDH), <i>Entraide Protestante Suisse</i> (EPER), <i>Federation Luterienne Mondiale</i> (FLM), <i>Fondation Haïtienne de l'Enseignement Privé</i> (FONHEP), Food for the Hungry, <i>Foyer Chrétien</i> , <i>Fondation Paul Gérin-Lajoie pour la Coopération Internationale</i> (FPGL), <i>Fonds de Parrainage National</i> (FPN), <i>Fundación CUME</i> , Group Intervened for Children (GIC), <i>Groupe d'Initiative des enseignants des lycees</i> (GIEL), Grace International, GVC, Haiti Participative (HP), Haiti Relief and Development, Inc., Haiti Vision Inc., Housing, Education, and Rehabilitation of Orphans (HERO), <i>Initiative Développement</i> , INTERSOS, IRC, IR Worldwide, <i>Kindernothilfe</i> (KNH), <i>Les Brébis de Lumière</i> , MEHPHAE, Mercy Corps, MIPROS, (IAAS), <i>Mission d'Espoir pour les demunis (MED) / Institut de gestion et de la protection de l'environnement d'Haïti</i> (IGPEH), MIT, Norwegian Church Aid (NCA), Nippon International Cooperation for Community Development (NICCO), Open Learning Exchange (OLE), Outreach International, Peace Winds Japan, People in Need, Plan Haiti & Plan International, <i>Progrès et Développement</i> (PRODEV), <i>Regroupement Education pour toutes/tous</i> (REPT) (), <i>Reseau Haïtien des Ecoles Associees</i> , RET (Refugee Education Trust), RTI International, SC, <i>Scouts d'Haïti</i> , <i>Service Allemand de Développement</i> , Jesuit Service for Refugees and Migrants (SJM), Sol Haiti, St. Joseph de Cluny, metfund, TdH Italy, TIPA, UMCOR, UNEP, <i>Unite des ecoles privees dans l'aire metropolitaine</i> (UNEPAM), <i>Fondation College Mixte Ampere</i> (FONCOMA), UNESCO, UNICEF, <i>Union Nationale des Normaliens d'Haïti</i> (UNNOH), OCHA, UNOPS, USAID, USAID PHARE / AIR, Viva Rio, War Child Canada, WFP/PAM, World Bank, World Hope International (WHI), World Service of Mercy (WSM), WVI
Number of Projects	16
Cluster Objectives	<ol style="list-style-type: none"> 1. To clear schools of debris to make room for temporary learning spaces, ensuring access to quality education and the resumption of education for children affected by the earthquake. 2. To continue to strengthen the quality of education provided through ongoing teacher training, the delivery of teaching and learning materials, and the provision of psycho-social support through public and non-public schools in Haiti. 3. To provide expanded educational services for children who have been displaced to the indirectly affected areas.
Beneficiaries	1,339,961 children and teachers
Funds Requested	\$87,536,872
Contact Information	Lisa Doherty: ldoherty@unicef.org ; Charlotte Balfour-Poole: C.Balfour-Poole@savethechildren.org.uk

Response to Date

The Education Cluster has worked with the Ministry of Education and Professional Training (MENFP) to ensure that earthquake-affected children were able to resume educational activities as soon as possible. The cluster supported MENFP to conduct an initial Rapid Joint Needs Assessment (RJNA) and a damage assessment, which enumerated 4,992 schools in the directly affected areas and found

80% of schools to be “damaged” or “destroyed”. This exercise was further supported by a team of UNICEF enumerators who collected the GPS coordinates and measured available space on which temporary classrooms and water and sanitation facilities could be placed. The World Bank also trained 100 engineers to use these GPS coordinates to conduct damage assessments of the schools. This has been further utilized to determine requirements for demolition and clearance of debris from school sites.

To support the resumption of learning in all phases and areas, the cluster has already distributed 870 school-in-a-box kits, 1,005 early childhood development (ECD) kits and 2,226 recreation kits. It has procured 3,500 school tents for temporary classrooms. Agreement was also reached with the Ministry of



Education/UNICEF/2010

Education (MoE) for the supply of 25,000 school benches to be procured and distributed before September. As a result of Education Cluster programmes, 194,893 children benefited from temporary learning spaces, 88,059 children under-six were enrolled in ECD classes, and 500,997 children received basic learning materials.

The Education Cluster has worked with the relevant humanitarian and civil-military coordination bodies to ensure the clearance of debris from destroyed and heavily damaged schools. It has also provided MINUSTAH and CHF with a priority list of schools for the first round of clearance work. The cluster, MENFP and Ministry of Interior (with support from the CCCM Cluster) continue to work together to identify school sites occupied by displaced families, and to support negotiations within these schools between displaced families and school communities to facilitate resumption of school activities. Sub-national clusters have been established in Léogâne, Jacmel and Petit Goâve, with weekly meetings. Thematic working groups have been created to provide detailed recommendations and plans of action on the development of teacher training, psycho-social support, ECD, disaster risk reduction and school reconstruction.

Needs Analysis

An estimated 1.5 million children and youth under 18 have been directly and indirectly affected by the earthquake. Within that number, approximately 720,000 are primary school-age children between 6 and 12 years old. The number of schools damaged or destroyed by the earthquake is now assessed at 3,978 (80% of the 4,992 affected schools in the area). Many schools in the less-affected areas are now straining to accommodate an influx of displaced children from the directly affected areas. It is estimated that 302,000 children are displaced to other areas of the country as a result of the earthquake, with another 309,000 living in spontaneous temporary settlement sites in or around their home communities.



UNICEF/2010

Since schools across the country closed after the earthquake, up to 2.9 million children either experienced an interruption in their studies or continued to lack access to basic education (this figure includes the 50-55% of children who were not enrolled in school before the earthquake). The Rapid Joint Needs Assessment was conducted by the Education Cluster and MENFP between 22 and 25 February. The assessment team surveyed 240 sites in Port-au-Prince, Léogâne and Jacmel, and revealed that there is still a high demand for education, but school fees and indirect costs associated with attending school (uniforms, books) need to be reduced or eliminated to ensure that households can afford to send their children to school. Overall, there is much work to be done to restore confidence in the education system – from the safety and security of school buildings and learning spaces, to the creation of a fully inclusive, regulated, free and effective education system.

According to the official Ministry assessment, the earthquake destroyed 1,261 schools and damaged 2,717 schools. The Education Cluster will continue to work with government, humanitarian, military and private sector actors to secure clearance work at schools requiring debris removal. This is an enormous task, which the cluster must prepare itself to engage in for the longer term. Without this critical foundational work completed, the cluster will continue to be hampered in its efforts to establish temporary, transitional and permanent learning structures to replace these damaged schools. There will continue to be a strong demand for tents and other materials for temporary learning spaces, as damaged schools cannot be reoccupied until properly assessed, and many children and their parents are unwilling to sit within even “undamaged” permanent structures due to ongoing fears of further building collapses.

There are an estimated 40,000 non-public school teachers in the directly affected areas, many of whom have not been paid since the January earthquake. The Education Cluster is working with the Ministry to develop criteria and mechanisms for a pooled fund to support earthquake-affected non-public schools through financial grants. This is another crucial step in ensuring the reopening and sustained functioning of schools. Cluster members will also support the Ministry in rolling out an adapted curriculum, designed to allow children in the directly affected areas to complete the rest of the

school year in 90 days or less. Continued support will be provided to the Ministry-led initiative on a cascading model of psycho-social training. The Ministry expects this initiative to reach every school-going child in the affected areas, to provide them with ongoing psycho-social support delivered through schools.

The Education Cluster is participating in an inter-sectoral needs assessment in the indirectly affected areas. The results will strengthen the overview already provided by cluster member assessments conducted in recent months. In the second half of the year, cluster activities will increasingly focus on these non-directly affected areas, both in terms of contingency planning (including the strengthening of a sub-national cluster in Gonaïves) and in broadening support for IDPs within the wider framework of the settlement strategy.

Short-term priority needs within the education sector are as follows:

In the areas directly affected by the earthquake:

- Interventions to demolish and remove debris from heavily damaged schools in order to install temporary learning spaces to facilitate access by learners enrolled before the earthquake, and children who have not had the opportunity to date
- Provision of quality education in affected schools and learning spaces through training of educational personnel, strengthened school governance, and supervision and school feeding programmes
- Targeted support to provide incentives for non-public schools and teachers through funding modalities agreed with the MoE

In the areas indirectly affected by the earthquake:

- Identification and registration of new students who have been displaced from earthquake-affected areas
- Integration of newly arrived children into appropriate class levels in existing and temporary structures, and organization of a 'double shift' system at schools that are still functioning in order to accommodate additional learners
- Enhanced quality of education provision through teacher training on the adapted curriculum and classroom management, and support to school governance

In all areas:

- Psycho-social support for learners, parents and education personnel across the country who have been traumatized by the disaster
- Continued psycho-social training through intensive seminars across the 10 departments aimed at inspectors, pedagogical counsellors, teachers and school directors on methodologies to reduce risk of trauma for children
- Support to capacity development on disaster risk reduction and contingency planning across all departments

Objectives

- Provide emergency education services to 850,000 earthquake-affected children who would otherwise be out of school
- Ensure the demolition and clearance of debris from at least 250 schools assessed to be destroyed in order to make room for temporary learning spaces on former school grounds
- Improve the learning environment for at least 500,000 children through the provision of urgent teaching/learning supplies, school equipment, recreational items, furniture and materials to schools damaged/destroyed by the earthquake, as well as to schools in the indirectly affected areas that have received a large influx of displaced children
- Provide emergency training support (including psycho-social support, disaster risk reduction and other emergency themes) to 500 education personnel, caregivers and communities
- Support the MoE in the planning and implementation of financial support (including teachers incentives) for non-public schools to ensure the continued functioning of schools in directly affected areas

- Establish immediate and short-term safe and accessible ECD spaces for 50,000 young children (0-6 years) near temporary educational primary school facilities, ensuring that young children have access to pre-school or home-based care where they can interact with peers and caregivers, and receive urgent psycho-social support
- Provide strong coordination support through the global co-lead agencies of the Education Cluster (SC and UNICEF) to avoid gaps or duplication between agencies working in support of Government priorities

Table of proposed coverage by appealing agencies per site

SITE / AREA	ORGANIZATIONS
Port-au-Prince	UNICEF, Outreach International, RET, SC, UNESCO, Plan
Léogâne/Gressier	UNICEF, Outreach International, RET, SC, ACT Alliance
Petit Goâve/Grand Goâve	UNICEF, RET, CESVI, SC, ACT Alliance
Jacmel	UNICEF, WCC, OI, RET, SC, Plan
Departments hosting IDPs: (Gonaïves/Artibonite, Cap Haitien, Centre, Les Cayes, Grand Anse)	UNICEF, WVI, OI, RET, SC

Sectoral monitoring plan

To ensure the overall quality of project implementation, project staff within responsible agencies will monitor activities using already established mechanisms. The cluster will monitor overall progress against objectives and indicators through its network of cluster members and through working closely with the MENFP. Monitoring will take place periodically, with a shifting focus from inputs in the initial six months to outcomes and impact by the end of this appeal period. For this purpose, a common framework for monitoring will be developed within the Education Cluster, closely linked to the monitoring efforts of Government partners and other clusters. Baselines will be established through existing documentation and needs assessments currently underway.

Emergency Telecommunications



Cluster Lead Agency	United Nations World Food Programme (WFP)
Cluster members	Ericsson Response, IOM, NetHope, OCHA, TSF, UN Department of Field Services (MINUSTAH), UNDP, UNICEF, WFP, WVI
Number of Projects	1
Cluster Objectives	<ul style="list-style-type: none"> • Provide basic IT and communications services in the new common operational areas and restore those in damaged offices where possible • Provide a reliable VHF/HF radio network independent from public infrastructure with coverage in Port-au-Prince and other common operational areas of the country, as well as the key areas in Dominican Republic supporting the Haiti operations • Enhance and expand the existing UN radio network to provide security communications services for the safety of humanitarian workers in all areas of operation and complement the public infrastructure as it is being restored <p>To achieve these objectives the project will:</p> <ul style="list-style-type: none"> • provide common security and data communication networks and services to the humanitarian community • provide comprehensive IT and telecommunications services for WFP and Logistics operations • train staff in efficient and appropriate use of telecommunications equipment and services
Beneficiaries	Clusters and humanitarian agencies
Funds Requested	\$4,433,765
Contact Information	Karen Barsamian Haiti Emergency Telecommunications Cluster Coordinator; Karen.Barsamian@wfp.org

Response to date

The Emergency Telecommunications Cluster (ETC) mobilized within hours of the emergency. The achievements to date include:

- During the first week following the earthquake, a local Haiti ETC Working Group was established, managed and coordinated by qualified staff, and consisting of ICT personnel from major UN agencies and NGOs. It has held regular meetings since 13 January. It is supported by ICT specialists deployed by standby partners. A local ETC Working Group was also established in Santo Domingo.
- Fully operational security communications network with 24x7 coverage has been established to provide security and operational voice communication to all humanitarian actors in the area. The network consists of Minimum Operating Security Standards (MOSS)-compliant common communication centres (COMCEN) in key locations in Port-au-Prince, Cap Haitien, Gonaïves, Léogâne and Jimani.
- Telecommunication services and support are being provided to all UN agencies and NGOs, including very high frequency (VHF) and high frequency (HF) network coverage, users' training, radio station programming, assistance in radio equipment purchasing, etc.
- Nine VSAT outstations are providing inter-agency services in Port-au-Prince, Cap Haitien, Gonaïves, Jacmel, Léogâne and Santo Domingo to ensure fast and reliable voice connectivity, data transfer services and Internet access.
- An expanded high-speed wireless network has been deployed in Port-au-Prince to provide connectivity to the humanitarian community located at the Logistics Base, as well as to connect remote sites including warehouses and accommodation base Camp Charlie. Similar wireless networks have been implemented in Jacmel and Léogâne.
- An agreement has been established with a local Internet services provider to provide data connectivity for all humanitarian agencies and organizations connected to the common wireless network.
- An information-sharing platform was immediately activated for Haiti on the information and communication technologies (ICT) Humanitarian Emergency Platform. ETC-related information has been made available to the humanitarian community throughout the emergency.
- Due to unavailability on the local market, IT and telecommunications equipment was rapidly deployed by air shipment from Dubai in collaboration with the Logistics Cluster, drawing on the

existing stockpiles that included VSAT (satellite earth stations), wireless networks, generators, computers, printers, VHF base stations, repeaters, etc. Items not in stock were rapidly procured and shipped.

- The ETC team in Haiti was augmented with the deployment of ICT staff from Global ETC in Rome, Dubai, WFP country offices and standby partners, which included a dedicated ETC coordinator based in Port-au-Prince and in Santo Domingo.
- The ETC coordinated with the Government and military actors on obtaining licenses for frequencies needed to support the emergency telecommunications operations.
- Special agreements to reinforce support and services for the NGO community were established, which included a dedicated NGO ETC Coordinator to ensure NGO requirements are articulated and addressed.
- The ETC conducted some 50 security training courses for approximately 450 humanitarian workers.
- As of May, the ETC has provided direct support and services to approximately 500 users on a daily basis from some 50 different humanitarian organizations.

Needs Analysis

Assessment missions have been undertaken in all the main locations where humanitarian offices are required, in order to determine the telecommunications requirements to support the humanitarian operations. As the response progresses it has been necessary to relocate services from some locations to other locations within the operational area. The ETC is a service cluster and the information collected during the needs assessment is highly technical and not directly related to the affected populations. It is therefore not relevant to the other clusters.

Objectives

The limited financial resources received so far for emergency telecommunications to support humanitarian operations in Haiti resulted in the cluster prioritizing its activities and revising their overall strategy to ensure that the minimum and most urgent support requirements be met. Consequently, the scope and scale of telecommunications services required was also reduced and the ETC operational activities have been revised to align with the requirements of the other clusters.

The objectives are to:

1. provide common security and data communication networks and services to the humanitarian community;
2. provide comprehensive IT and telecommunications services for WFP and logistics operations;
3. train staff in efficient and appropriate use of telecommunications equipment and services.

Expected Outcomes

- Availability and support of IT and telecommunications services that support the humanitarian community to provide uninterrupted delivery of life-saving relief items to the affected population for all humanitarian actors
- Coordinated, predictable, timely and efficient emergency telecommunications response under the cluster approach
- An exit strategy to ensure the smooth handover of IT and telecommunications services for post-emergency activities

In specific practical terms, this will include:

- coordination of the emergency telecommunications through the presence of an ETC team on the ground, with regular meetings of the local ETC Working Group and participation in inter-cluster coordination meetings and activities.
- provision of information management facilities for sharing up-to-date ETC information in Haiti.
- operational and cost-effective MOSS-compliant facilities and common emergency telecommunications network providing security voice and data communications to the humanitarian community. This will include establishment of services in new locations and relocation from existing locations in response to operational requirements.

- common security communications network providing 24x7 services covering all affected areas in Haiti, and data communications within all common operational areas in and around Port-au-Prince.
- ongoing training courses on telecommunications equipment and services to new humanitarian workers arriving in Haiti.
- optimal use of existing MINUSTAH IT and network facilities by humanitarian organizations, particularly in smaller offices outside Port-au-Prince.

Sectoral monitoring plan

As a service cluster, the ETC provides overarching support to facilitate the implementation of programmatic activities. Based on feedback from ETC members, the plans and services will be updated to meet the evolving requirements. Monitoring tools include:

1. internal and external regular situation reports;
2. assessment and evaluation reports;
3. Haiti emergency response lessons learnt;
4. ETC user surveys;
5. project evaluations;
6. project that will be implemented using the WFP management structures and support systems in place in Haiti.

Food



Cluster Lead Agency	World Food Programme (WFP)
Cluster Members	ACDI/VOCA, ACF, ADRA, ACTED, Caritas Haiti, CESVI, Concern, Convoy of Hope, CRS, CARE, GOAL, GoH, Haitian Red Cross, IR, IFRC, MSF, <i>Première Urgence</i> (PU), Oxfam, SP, SC, The Salvation Army, TdH, UNICEF, FAO, World Relief Haiti, WVI, <i>Welthungerhilfe</i> (GAA), Mercy Corps, Viva Rio, HI, Helpage International, Haiti Participative, CORDAID
Number of Projects	8
Cluster Objectives	Immediately following the earthquake, the cluster sought to meet immediate food needs through the provision of ready-to-eat meals, rice and full food rations to earthquake-affected families. Additionally, Food Cluster members provided targeted food assistance to vulnerable communities in hospitals and orphanages, and through mobile distributions and community kitchens. The transition from relief to recovery activities is now underway, namely through the expansion of food and CFW activities, nutrition programmes, rations provided to families in relocated camps and school feeding.
Beneficiaries	4,309,987
Funds Requested	\$486,742,542
Contact Information	George Aelion: George.Aelion@wfp.org , foodcluster@wfp.org

Category	Planned Beneficiaries		
	Female	Male	Total
Emergency Food Distributions*	1,009,600	990,300	2,000,000**
Cash/FFW	353,360	346,605	700,000
Targeted Supplementary Feeding***	50,625	50,625	101,250
Blanket Supplementary Feeding***	275,000	275,000	550,000
Food to Relocated IDPs	3,686	3,616	7,302
Hospitals & Orphanages*	60,576	59,418	120,000
School Meals	403,840	396,120	800,000

* Activity has been completed.

**Total number of people reached with General Food Distribution = 4,309,987.

*** Supplementary feeding is provided only to children under five and pregnant and lactating mothers.

Response to Date

There was a rapid roll-out of general food distributions across earthquake-affected areas in the first two months after the earthquake. The Food Cluster is now focusing on the implementation of recovery activities such as food and CFW, and support to schools through school feeding and nutritional recovery. All of this will be channelled through longer-term programmes designed to promote long-term food security and stability among affected households.

The early recovery activities have been scaled up and Food Cluster members are presently working to deliver assistance to:

- School-age children through school feeding
 - Programmes have scaled up rapidly, now reaching over 500,000 children out of a target of 800,000 for the school year ending in April
- Children under-five, and pregnant and lactating mothers
 - Nutrition activities are on-track to reach 550,000 at-risk and malnourished children under-five, and pregnant and lactating mothers
- Low income, single-headed and displaced households
 - CFW and FFW activities will target 700,000 beneficiaries in coming months. Initial proposals are in the final stages of being approved
 - It is critical that cash contributions, instead of food, be received to continue these projects and reach anticipated targets

Needs Analysis

An EFSA was conducted in February, highlighting extremely high levels of vulnerability among populations living in zones directly affected by the earthquake. Food insecurity is affecting approximately 52% of households generally and 69% of families living in large camps due to the loss of homes in the earthquakes. An estimated 1.5 million people live in camps in directly affected areas.

The migration of over 600,000 people from earthquake-affected areas, the majority of whom are residing with host families and communities, has increased the strain on rural households, augmenting their vulnerability to food insecurity. The number of people hosted by institutions such as hospitals and orphanages has ballooned, increasing pressure on local resources and infrastructure.

Ongoing market monitoring by the cluster to determine the state of food accessibility to earthquake-affected households has revealed that rice prices, although relatively stable, remain 4 to 14% above pre-earthquake levels. However, these prices are extremely high considering that pre-earthquake prices were significantly higher than average. In June, a full-length (three months) market assessment will be conducted. It will be implemented by Food Cluster members in close collaboration with the GoH. The assessment will provide a more accurate picture of the impact of food assistance on markets, local production and food accessibility for vulnerable households. Preliminary discussions to plan and prepare a follow-up EFSA for early June have begun with the *Coordination Nationale de la Sécurité Alimentaire* (CNSA) and key partners. This information will feed into a CFSAM, which will be conducted through June and July with WFP, FAO and the Ministry of Agriculture (MoA) to gain a clearer picture of the food supply situation and estimates for crop production. An in-depth regional food security assessment in Artibonite a major rice producing area and a highly vulnerable hurricane zone, is planned for upcoming months.

Additional data continues to be gathered by cluster members to assess current needs. However, it remains clear that the emphasis of cluster activities should be on the need for recovery and social support provided through longer-term programmes. Receiving cash contributions to support CFW activities is central to addressing these needs. The upcoming hurricane season poses an imminent challenge for the implementation of such activities. It may entail increases in vulnerability and food insecurity during that time, necessitating a rapid emergency response from Food Cluster members.

Objectives

Emergency Food Distributions

The initial strategy for the two months immediately following the earthquake was to provide ready-to-eat food for the most vulnerable. Emergency mobile food distributions to the wounded and displaced began immediately following the quake in Port-au-Prince and earthquake-affected areas, and to zones such as Artibonite with a high number of incoming displaced people. Within two weeks, 700,000 people had been provided with emergency rations. Within six weeks of the crisis, Food Cluster members had provided assistance to 3.5 million people, including displaced people who fled to remote rural communities after having lost their homes and livelihoods. Additional food assistance was provided on a regular basis to victims of the earthquake in orphanages and hospitals during this time. By the end of March, over 4.3 million earthquake-affected people had received short-term food assistance.

Cash for Work and Food for Work

In support of the Government's national rehabilitation plan, Food Cluster members are identifying populations eligible for CFW and FFW programmes to support the post-earthquake recovery process.

Projects being developed multilaterally with WFP, UNDP, ILO, UNEP and IOM include:

- watershed management to secure agricultural zone and prevent erosion and landslides
- debris and drainage clearing to mitigate flooding during the rainy season
- rubble removal in earthquake-affected urban zones
- community projects to clear camp relocations sites
- support to agriculture such as irrigation canal repair and clearance of rural feeder roads

Projects are being reviewed and approved. Projects are ongoing in rural departments and new projects are set to come online in May. FFW and CFW activities as a whole will aim to develop human capital, increase household assets, and provide short-term employment for vulnerable and earthquake-affected households.

All CFW and FFW projects implemented by Food Cluster members will be enacted in close coordination with the Government and Early Recovery Cluster. Targeting will follow the Government's and the Early Recovery Cluster's response plans by including host communities in areas unaffected by the earthquake, youth, children, the elderly, disabled, and at least 40% women. This will be done in order to create temporary jobs and prevent depletion in household assets, build livelihoods within the context of spurring early recovery and support capacity-building for the Government. Activities will also be geared towards populations needing and currently benefiting from activities to improve shelter, housing and infrastructure, as well as activities that mainstream gender equality, environment, disaster management and disaster mitigation. Especially in urban areas, priority activities are focusing on debris disposal and removal, garbage removal and improving drainage systems and canals. In tandem with the Early Recovery Cluster, an action plan will also be developed to make use of the existing potential for urban agriculture.

FFW/CFW activities are intended to jump-start the reconstruction process and assist coordination efforts oriented towards early recovery, laying the groundwork for longer-term employment and livelihoods building. Most importantly, strong support will be provided to establish a joint secretariat to buttress the leadership of the Government-led task force for early recovery and reconstruction.

Meals for School-Age Children

While earthquake damage to schools in the affected areas was massive, the Government and the Food Cluster have made a concerted effort to get as many children back to school as possible. School feeding has been included as a major component of the education sector in the Government's national development plan.



Distribution/UNICEF/2010

The Food Cluster is now working to provide school-age children who are in school and out of school with a daily hot meal. This is as an incentive to return to school, increase enrolment and relieve pressure on impoverished families. Meals are now being provided to 561,000 children, with an aim to reach 800,000. Food Cluster members are also working closely to identify school-age children for this programme who are currently out of school, in order to ensure they continue having access to one balanced meal per day.

Supplementary Feeding

Blanket supplementary feeding targeting 550,000 children between 6 and 59 months, and pregnant and nursing mothers has been scaled up in camps and communities hosting large numbers of IDPs, to prevent the onset of malnutrition among women and children. The programme has been rolled out in close collaboration with the Nutrition Cluster and Food Cluster members and the Ministry of Health and Population (MoHP). At the same time, targeted supplementary feeding targeting approximately 101,250 moderately acute malnourished children and malnourished pregnant and nursing mothers has been expanded and is being implemented. To date, this initiative has reached 318,670 mothers

and children through blanket supplementary feeding, and 73,354 malnourished mothers and children with targeted supplementary feeding.

Food Support to Relocated IDPs

Displaced people in tented camps at risk of flooding during the rainy season are being relocated to new camp sites. The Food Cluster is supporting the relocation process in Corail and Tabarre Issa camps by providing immediate seven-day family rations, as well as FFW programmes to prepare and maintain the camps. These items are then distributed by implementing partners participating in the Food Cluster. To date, the cluster has provided support to 7,302 people who have moved to the new camps. The cluster will continue assistance until the process is complete.

Health



Cluster Lead Agency	Pan-American Health Organization/World Health Organization (PAHO/WHO)
Cluster Members	ACF, AMI, ARC, AVSI, CARE International, FHED-INC, <i>Fraternité Notre Dame</i> , Haiti Participative, Harvard Humanitarian Initiative (HHI), HI, <i>Hôpital Albert Schweitzer</i> , <i>Hôpital Sainte Croix</i> , HWA, IMC, IOM, IRC, MARCH, MDM-Canada, MDM-France, MDM-Greece, MDM-Suisse, MERLIN, MI, PIH, SC, UNAIDS, UNFPA, UNICEF, WCC, WHO, World Hope International, WVI PAHO/WHO
Number of Projects	50
Cluster Objectives	<ol style="list-style-type: none"> 1. Effective coordination of the health sector response, needs and disaster risk assessment, monitoring & evaluation under the authority of the National Health Authority (NHA). 2. Ensure outbreak control and effective disease surveillance. 3. Ensure adequate water supply and environmental health. 4. Reactivation of basic health-care services for a more integrated health system based on primary health care. 5. Ensure treatment and rehabilitation of injured patients. 6. Ensure availability of essential drugs and medical supplies.
Beneficiaries	Earthquake-affected population in the whole country
Funds Requested	\$140,320,179
Contact Information	Dr. Henriette Chamouillet, PWR Haiti E-mail: chamouihen@hai.ops-oms.org

Response to Date

1. To ensure effectiveness within the Health Cluster, several sub-groups have been created to best meet the population's needs. The sub-groups focus on mobile clinics; hospitals; disability and rehabilitation; disease surveillance; reproductive health; mental health and psychological support. There are two sub-clusters in Jacmel and Léogâne covering the South-East Department and the affected area outside Port-au-Prince (Petit Goâve, Grand Goâve and Gressier), respectively.
2. The cluster continues to collect information on 3W. This information will be used to detail the gaps in health services coverage (see under gap analysis). Current priorities of Health Cluster members are:
 - o Delivering primary health care through fixed and mobile clinics
 - o Providing treatment services for mental and other chronic diseases
 - o Supporting the MSPP in the 18-month interim plan
 - o Disease surveillance and health information systems
 - o Identifying gaps in health-care provision
3. The Health Cluster, in coordination with other clusters, has been coordinating preparedness planning for the upcoming rainy and hurricane seasons (participation in the inter-cluster contingency planning, more specifically through prepositioning and drug stock inventory, and medical brigade standby). Both seasons are expected to increase health risks, especially for people living in temporary shelters. Preparedness planning is also being coordinated by the sub-clusters in Léogâne and Jacmel. Overall objectives include creating communication networks and health transportation links, and restoring main health centres.
4. The cluster helped to restart public health programmes, mainly by gradually aligning all humanitarian health interventions with the interim plan of the Ministry of Health (MSPP), more specifically outbreak control and environmental health, sexual and reproductive health including maternal and neonatal health and response to SGBV, nutrition, HIV/AIDS, TB, malaria, dengue, mental health, vaccination, health-services delivery and rehabilitation services for disabled people. The cluster also took part in preparing health priorities for the PDNA launched in March 2010.
5. Outbreak prevention and control was organized as a joint effort with national authorities and Health Cluster partners. One of the first priorities of the MSPP was to set up early warning systems in selected sites (see below, under gap analysis) with rapid response capacity including field laboratories. National Directors of Epidemiology of Haiti and the Dominican Republic conducted a joint visit to reactivate the surveillance network on the border. Fifty-two Government-defined sentinel sites were identified to monitor diseases. Twelve of the sites are

located in the metropolitan area. This early warning system was put in place thanks to support from the following partners: US Centers for Disease Prevention and Control (CDC), the Cuban Brigades, Canadian International Development Agency (CIDA) and MSF. Active surveillance in temporary camps was also initiated. Three mobile teams are conducting investigations (from MSPPP, CDC and PAHO/WHO). The epidemiology team, coordinated by MoH, provides a weekly report on the epidemiological situation.

Needs Analysis

1. In a 2005-6 demographic and health survey, 44% of seriously ill or wounded individuals declared not having accessing to health services when needed because of the service fees (this figure rises to 50% for women).²¹ A main reason for this lack of access is the recovery cost strategy prevailing in the Haitian health system (including in the public sector). Forty per cent of the health system is funded by contributions from patients and families. The situation worsened after the earthquake. New vulnerable groups appeared (people with disabilities, psychologically affected populations, people living in camps) adding to traditional vulnerable groups such as women and children. The example of patients who have undergone major surgical operations in very difficult circumstances shows the pressing needs that emerged from the earthquake. These patients need not only community rehabilitation services but also orthopaedic surgery due to the bad conditions in which the amputations were conducted following the earthquake. Hence, there are few services available for these individuals.
2. Reducing financial barriers, particularly for the elderly and these new vulnerable groups, is the main strategy to ensure a sustainable extension of health-care services. Access to quality health services, with primary health care as the entry point to the other levels of the systems, remains the main need after the earthquake. An emphasis on high-impact, low-cost actions targeting maternal and infant health, including caring for chronic and acute malnutrition, must be ensured.

	No or minor damage	Weak damage	Significant damage	Totally destroyed	Total
3rd and 2 nd level hospitals	14	5	22	8	49
Health centres	215	38	12	9	274
MoH	4	8	1	10	23
Universities and training institutions	23	2	3	19	47
Total	256	53	38	46	393
Total in %	65%	14%	10%	12%	100%

3. It is crucial to also address the disruption to supply of health services. The table above shows the magnitude of damage to health facilities, where 22% of all infrastructure was either completely destroyed or suffered significant damage.
4. A minimum of 30 out of the 49 existing hospitals in three regions affected by the earthquake should be rebuilt. Eight reference hospitals in the department capitals also need to be developed, starting with Port-au-Prince, Cap Haïtien, Les Cayes and Jacmel and Gonaïves.
5. The post-earthquake reconstruction phase also offers an opportunity to address pre-existing limitations of the Haitian health-care system that have only become more acute since January 12. Second-level health centres — health facilities able to deliver intermediate medical services (first referral level) — have historically been the weakest point of the Haitian health system. It is therefore crucial to develop this second level of health centres, particularly to ensure that they can provide quality basic emergency obstetric and neonatal care to displaced populations and surrounding communities, and therefore contribute to reducing maternal and neonatal mortality and morbidity, while offering quality integrated reproductive health services and other services to affected populations.
6. International stakeholders should align under the leadership and coordination of the MSPPP in order to improve the provision and monitoring of health care and the coordination of health

²¹ *Enquête Mortalité, Morbidité, et Utilisation des Services (EMMUS) IV, 2005-2006.*

interventions. To ensure optimal health coverage, the MSPP plans to create innovative partnerships with the private sector based on performance-based contracting strategies.

Objectives

1. Moving from relief to consolidation is premature. This revision of the Flash Appeal should be seen as a reiteration of most of the content defined in February. However, Health Cluster members, together with the Cluster Lead Agency (PAHO/WHO) and the *Ministere de la Sante Publique et de la Population*, have consented to a *Plan Preliminaire du Secteur Sante* for the next 18 months (posted on the OneResponse website: <http://onerresponse.info/Disasters/Haiti/Health/Pages/default.asp>). This plan reaffirms the sector's focus on the accessibility (affordability, availability, quality) of health services to the Haitian people, taking into account the burden of disease and health demand generated by the earthquake-affected population.
2. In this respect, the plan defines nine specific strategic objectives to enhance the health of nine targeted or specific groups. The details should not be listed here and they offer the strategic umbrella (in the form of institutional strengthening of the MSSP) to this appeal's objectives and to the various projects presented in the appeal, which have been screened accordingly.
3. Given the above needs analysis, the overall Health Cluster objective in this revised Flash Appeal is to protect the recovering health status of affected population groups, and to prevent further deterioration of public health in general in a changing seasonal pattern.
4. The overall objective of the intervention is to save lives and prevent further deterioration of public health conditions in the earthquake-affected areas. The Health Cluster will work with the NHAs to ensure a coordinated response to mitigate the avoidable morbidity, mortality and disability of the Haitian population related to the earthquake and subsequent population displacement. In line with the other priority clusters, the Health Cluster has identified the priority short-term objectives and related activities as follows.
 - 1) Effective coordination of the Health Cluster response, needs and disaster risk assessment, monitoring and evaluation, under the NHA's authority

Activities

- Coordinate international health assistance within the Health Cluster
 - Support the Disaster Response Commission set up by the national Government
 - Promote the establishment of an Emergency Operation Centre within the MoH
 - Carry out rapid health assessments
 - Conduct health assessments on needs, damage, impact and gaps in the assistance, including monitoring and evaluation
 - Monitor mortality and morbidity trends, set up early warning systems
 - Map available local resources and external support, including the foreseen length of that support
 - Assess risks and initiate disaster risk reduction activities
 - Assess displaced populations' access to reproductive health services, and conduct qualitative research and analysis of a noticeable increase in early pregnancies among adolescent girls
- 2) Ensure outbreak control and disease surveillance

Activities

- Re-establish the capacity of prevention and control of communicable diseases through the establishment of an emergency communicable disease surveillance system (Early Warning Alert and Response Network), and strengthen the routine disease reporting system
- Strengthen the health services information system (HSIS)
- Ensure immunization including mass vaccination campaign against measles, diphtheria and tetanus, and prepare response to outbreaks of communicable diseases
- Ensure vectorborne and zoonotic disease control activities

3) Ensure adequate water supply and environmental health for health facilities

Activities

- Follow up on the provision of sufficient quantities of safe water in health-care facilities
- Ensure that good health-care waste management techniques are adhered to
- Follow up on the provision of adequate sanitation health-care facilities
- Technical cooperation for incorporating integrated vector control management techniques into health-care facilities
- Technical cooperation for hygiene promotion and health education in health-care facilities

4) Re-activation of basic health-care services for a more integrated health system base in primary health care

Activities

- Proper and timely management of communicable diseases, particularly waterborne and airborne
- Emergency basic repairs to health facilities/temporary health facilities
- Strengthening non-affected health facilities to serve the affected population
- Ensure continuity of primary health-care services, including reproductive health (including emergency obstetric and neonatal care; maternal and child health, and prevention and management of sexual violence), and including treatment against tuberculosis and HIV/AIDS
- Ensure follow-up of pregnant women and post-partum women in displaced camps
- Ensure availability of condoms in all displaced camps
- Support the management of chronic diseases
- Support the provision of mental health and psycho-social support according to internationally agreed guidelines (IASC)
- Establish and strengthen mobile clinics for primary health care
- Support human resources to ensure health delivery and re-equipping affected health facilities
- Support diagnosis and treatment services (blood bank, laboratory, X-ray, imagery)
- Prevention, screening and treatment of acute malnutrition



5) Strengthening second-level health centres to offer quality reproductive health services to affected populations

Activities

- Establish 10 prefabricated maternities in affected zones to provide basic emergency obstetric and neonatal care
- Ensure provision of high quality comprehensive reproductive health services (post-partum care, family planning, GBV prevention and response, prevention and treatment of sexually transmitted infections, etc.)

- Strengthen human resources, particularly by training/retraining midwives and supporting re-establishment of the National School of Nurses and Midwives after its destruction in the earthquake
- 6) Effective treatment and rehabilitation of injured patients

Activities

- Support the treatment of injuries and emergency services including referrals of patients
 - Ensure access to a free orthopaedic unit (follow-up of patients)
 - Ensure the proper functioning of at least one specialized institute on medical rehabilitation (IBR)
 - Set up community-based rehabilitation services (CBR)
 - Ensure the availability of assistive devices and technologies such as wheelchairs and prostheses
 - Support mid- and long-term training for human resources rehabilitation specialists (physiatrists, physiotherapists, occupational therapists, prostheticists and orthotists), and for orthopaedic surgeons and nurses
- 7) Ensure availability of essential drugs and medical supplies

Activities

- Provide essential medicines, surgical and trauma kits and health supplies based on assessments
- Ensure the proper functioning and development of Haiti's PAHO-managed central procurement agency for drugs and pharmaceutical supplies *Programme de Médicaments Essentiels* (Essential Drugs Programme) (PROMESS)

Logistics



Cluster Lead Agency	United Nations World Food Programme (WFP)
Cluster Members	WFP, Handicap International, Atlas <i>Logistique</i> , Bioforce, RedR
Number of Projects	3
Cluster Objectives	<ul style="list-style-type: none"> • Facilitate the provision of life-saving and immediately needed key relief items to the affected population • Enhance the coordination, predictability, timeliness and efficiency of the emergency logistics response under the cluster approach • Support the humanitarian community to carry out their role by providing direct logistics services, support equipment, facilities, infrastructure repair and capacity-building
Beneficiaries	Humanitarian community in Haiti and the Dominican Republic
Funds Requested	\$84,143,876
Contact Information	Martin Bettelley, Haiti Logistics Cluster Coordinator; martin.bettelley@wfp.org

Response to Date

The Logistics Cluster has been active in Haiti since the 2008 hurricane season. It mobilized its assets and staff within hours of the earthquake:

- Prefabricated offices, accommodation units, mobile warehouses, toolkits, blankets, jerry cans, generators and ablution units were immediately dispatched from the United Nations Humanitarian Response Depot in Panama, followed by air shipments of logistics support equipment from other depots of the worldwide UNHRD network in Ghana, Italy and Dubai.
- The staffing of the Logistics Cluster in Haiti was augmented with the immediate deployment of Logistics Response Team-trained logisticians from within the region and from the Global Logistics Cluster Support Cell in Rome. This included a dedicated Logistics Cluster Coordinator and a dedicated Logistics Information Management Officer. A Logistics Cluster was established in Santo Domingo simultaneously.
- The first Logistics Cluster coordination meeting took place in Haiti within 24 hours of the earthquake. This was in order to begin the coordination of the logistics response and lay down the concept of operations and strategy of the Logistics Cluster activities to support the humanitarian community's response to the earthquake.
- An information-sharing platform was immediately activated through a dedicated operational webpage for the Haiti earthquake on the Logistics Cluster website. Logistics information was made available to the humanitarian community beginning the day after the earthquake. The information management services were initially provided by the Global Logistics Cluster Support cell in Rome until communications and connectivity in Port-au-Prince were sufficiently restored.
- On behalf of the Logistics Cluster, WFP began organizing a handling, storage and dispatch operation for the incoming air cargo for all humanitarian actors. The United Nations Humanitarian Air Service (UNHAS) further mobilized the necessary helicopters and fix-wings aircraft required to support the humanitarian community's response. UNHAS services include a passenger and cargo service from Santo Domingo to Port-au-Prince, as well as helicopter services within Haiti to reach affected areas not accessible by road.
- Within the first week, the Logistics Cluster team in the Dominican Republic negotiated with the local authorities on behalf of the humanitarian community for the fast-tracking and customs exemptions of relief cargo in transit to Haiti. Simultaneously, transit hubs with handling and storage facilities were set up and made available at Las Americas international airport, Rio Haina seaport, Caucedo seaport in Santo Domingo, and at the Barahona and Jimani border crossing.
- As service provider to the Logistics Cluster, WFP established an overland supply route from the Dominican Republic to Haiti. It also deployed staff to the Jimani border crossing to coordinate the passage of humanitarian relief cargo.
- In parallel, the fleet of all-terrain trucks, managed by Handicap International/Atlas Logistique on behalf of the Logistics Cluster, provided transport services to humanitarian organizations in Port-au-Prince, Jacmel, Petit Goâve, Gonaïves and Cap Haitien. This was in addition to a commercially contracted fleet, managed by WFP.

- To resolve logistics bottlenecks and improve supply chain for humanitarian cargo, the Logistics Cluster substantially augmented the available storage capacity by establishing three warehouse compounds for common use inside Port-au-Prince and providing storage facilities in the provinces. In addition, heavy-lifting equipment was mobilized for cargo handling at warehouses and ports.
- The Logistics Cluster provided liaison and coordination with the different military actors within and outside Haiti to ensure the humanitarian community's efficient use of available military logistics assets..
- As of mid-May, over 1,300 truckloads have been transported on behalf of 70 different organizations from Santo Domingo to various destinations in Haiti, representing more than 9,300 MTs of food and 35,000 cubic metres of relief items (tents, seeds, tools, kitchen sets, hygiene kits, etc.).
- Furthermore, some 5,400 MTs or 22,000 cubic metres have been dispatched from Port-au-Prince to the provinces for more than 90 organizations (85% by land and 15% by air).
- The helicopters have flown assessment missions to more than 90 isolated villages and delivered over 800 MTs of urgently required relief items such as medicines, food and tents.

Needs Analysis

Substantial quantities of food, medicine, shelter and life-saving relief items are still reaching the country by air, road and sea. However, Haiti continues to require logistics augmentation and coordination to overcome potential bottlenecks and congestion at entry points to ensure sufficient capacity to handle large volumes of relief cargo, and to achieve effective implementation of supply chain within the country, getting relief supplies out to those who are in desperate need.

At this point in the response, the volume of relief cargo entering Haiti continues to overwhelm the level of logistics infrastructure that was available in the country before the earthquake. If the Logistics Cluster services were to cease, the main gaps and bottlenecks identified are as follows:

- Congestion at entry points (ports, airports and border crossing points)
- Lack of sufficient storage capacity and the need for cargo consolidation points
- Insufficient quantities of specialized all-terrain vehicles, not available on the commercial market, that are required to access remote areas where road infrastructure is damaged/poor
- Lack of sufficient trucking capacity, especially from Port-au-Prince to multiple locations within the country, to transport humanitarian aid
- Continued need for specialized equipment for logistics and operations support, such as forklifts and container trailers
- Insufficient safe and secure accommodation for humanitarian personnel
- Limited logistics information (including logistics maps) to support operational decision-making/project implementation

The complexity and scale of the humanitarian response in Haiti still requires close coordination between logistics actors. Therefore, optimizing and complementing the logistics capabilities of the humanitarian community is essential to ensure the uninterrupted supply of life-saving items in support of the most vulnerable affected people in Haiti.

Objectives

The limited financial resources received to date to support the implementation of the Logistics Cluster activities have resulted in the need for a prioritization of activities and a revision of the overall strategy. This is to ensure that the minimum and most urgent requirements are met in support of the humanitarian response.

The complexity and scale of the humanitarian response in Haiti still requires close coordination among logistics actors. The large volumes of relief items entering Haiti necessitate the augmentation of the logistics infrastructure and the coordinated use of the available logistics assets. To ensure the uninterrupted delivery of relief items to the affected population, the Logistics Cluster will continue the following activities:

1. *The coordination of the logistics sector will continue with a dedicated Logistics Cluster team headed by a dedicated Logistics Cluster Coordinator. The team's activities will include:*
 - regular Logistics Cluster coordination meetings
 - logistics information management with a devoted Logistics Information Management Officer and a dedicated operations page on the Logistics Cluster website
 - geographic information systems and mapping services to the humanitarian community on logistics-related matters
 - coordination with the military actors inside and outside the country for the humanitarian community's efficient use of military logistics assets

2. *The Logistics Cluster, through WFP as the main service provider, will continue providing the following range of common logistics services at no cost for all humanitarian actors present, in order to ensure an unimpeded flow of relief items to the affected population through the coordinated and efficient use of the available logistics assets.*
 - Management of the three Port-au-Prince storage facilities and the three satellite transit and forwarding hubs within Haiti
 - Provision of road transport within Port-au-Prince and across Haiti with the Logistics Cluster fleet of 70 trucks managed by *Atlas Logistique*
 - Setting up and management of additional logistics hubs within Haiti if needs are identified
 - Provision of temporary storage capacity in Haiti if needs are identified
 - Chartering one barge and/or landing craft for deliveries to coastal-affected areas
 - Increasing the surface transport capacity available to the humanitarian community in Haiti, through commercially contracted or purchased assets, as well as renewing and refurbishing the Logistics Cluster fleet
 - Setting up a workshop and rehabilitating existing workshops to support the deployment of the truck fleet operating in Haiti

All cargo stored and transported will be handled, as per the priorities set by the Humanitarian Coordinator.

Due to increased capacity of direct entry points, such as the airport and seaport of Port-au-Prince, the Logistics Cluster will cease to operate the transport corridor from Santo Domingo into Haiti. Hence the receipt, handling, customs facilitation and onwards transportation of relief cargo from the Dominican Republic will cease at the end of May 2010.

3. At the HCT's request, WFP as manager of UNHAS, will continue to provide aircraft of sufficient capacity and flexibility to enable the humanitarian community to implement emergency relief activities into areas inaccessible by surface transport means. These services include the movement of aid workers and relief items. From May onwards, a reduced fleet will operate, composed of the following aircraft:
 - One helicopter based in Port-au-Prince to transport relief items and humanitarian personnel to remote locations still inaccessible by road. This activity is planned until the end of 2010. Two similar helicopters were demobilized in May.
 - One nine-seat passenger-capacity helicopter based in Port-au-Prince to transport relief workers to remote areas and perform assessment missions.
 - One fixed-wing passenger aircraft (12 seats) will continue to operate between Santo Domingo and Port-au-Prince on a regular basis. The aircraft will also perform flights to other Haitian airports based on need. This activity is planned until the end of 2010.

The use of two heavy-lift helicopters, one passenger aircraft and two cargo aircraft has been systematically phased out over the past months and weeks as road access has increased and commercial operations have resumed.

4. At the request of the Resident Coordinator in Haiti, the Logistics Cluster lead will continue to support the humanitarian community in its life-saving operations by providing operational support equipment, accommodation solutions and office facilities including:
 - the management of a humanitarian base camp inclusive of catering facilities and connectivity, accommodating up to 450 humanitarian workers
 - the mobilization and set-up of prefabricated office facilities

5. The Logistics Cluster will continue to implement activities to support the humanitarian community and national authorities in its preparation for the 2010 cyclone season. Activities include logistics contingency planning projects, coordination of emergency response measures with UN organizations, NGOs, MINUSTAH and other military actors involved, as well as logistics-related local capacity development projects in cooperation with the Directorate for Civil Protection of Haiti.

6. To support the increased logistics needs within Haiti, Bioforce and RedR will continue capacity-building the local logistics staff of humanitarian organizations through coaching, workshops and technical support in warehousing and stock management, fleet management and maintenance, driver and mechanics training, and any other aspects of supply chain management as required.

Expected Outcomes

- Uninterrupted delivery of life-saving relief items to the affected population for all humanitarian actors
- Coordinated, predictable, timely and efficient emergency logistics response under the cluster approach
- Emergency and medical evacuations ensured as required
- Improved capability of the humanitarian community to respond and operate in the affected area
- Surge capacity, emergency equipment, and safe and secure office space and accommodation quarters immediately accessible
- Improved logistics performance by the respective organizations through training national staff

Sectoral monitoring plan

The Logistics Cluster is an overarching support sector focused on facilitating the implementation of programmatic activities. As a result, while the monitoring plan to evaluate the project uses multiple measurable indicators, the methodology relies on the results of the organizations and clusters supported. Feedback from Logistics Cluster members will be continuously taken into consideration and the overall strategy adapted to the requirements as required. Monitoring tools include internal and external regular situation reports; training databases; evaluation reports; Haiti emergency response lessons learnt; Logistics Cluster and humanitarian actors' partners' surveys; Logistics Cluster Web portal traffic; and project evaluations.

For humanitarian cargo movement and storage tracking, the recently developed Relief Items Tracking Application will be used to ensure comprehensive data collection, analysis and reporting through the Logistics Cluster.

For passenger and cargo bookings made through WFP/UNHAS, a dedicated communication system is in place to monitor the location and flight progress of the WFP/UNHAS-operated aircraft through the air tracking system. The Flight Management Application system is in place, enabling the monitoring of usage of the service by the various agencies, load factors and flight routing, and providing operational data for management overview. The WFP Air Safety Unit will monitor the operators' safety level in line with UN Aviation Standards. Overall, the project will be implemented using the WFP management structures and support systems in place in Haiti.

Nutrition



Cluster Lead Agency	United Nations Children's Fund (UNICEF)
Cluster Members	ACTED, ACDI-VOCA, ACF, ADRA Int'l, AVSI, CARE, Caritas-Haïti, Center for Women's Promotion and Action (CEPAM), CFM, Catholic Medical Mission Board (CMMB), Children's Nutrition Programme /Hôpital Sacré Coeur (CNP/HSC), CNSA, CNSA/ Direction Départementale Agricole du Sud-Est (DDASE), CONCERN, CPNANu, CROSE, DDASE, <i>Diakonie Katastrophenhilfe</i> , FHED, FHI, FONDEFH, Federation of Small Businesses (FSB), Feed the Children (FTC), Haitian Group for the Study of Kaposi's Sarcoma and Opportunistic Infections (GHESKIO), Humanitarian Air Service (HAS), HelpAge International, HP, IADBID, IMC, <i>Inter Aide</i> , Irish Aid, ITECH, Infant and Young Child Nutrition (IYCN)/CARE, IYCN/PEPFAR, LaC, MDM-F, MDM-Swiss, MDM-C, MEDAIR, MFK, MSF B, MSF-F, MSF-H, MSF-S, MSPP (MoH), OPS/OMS, WFP, <i>Perspectives pour la Sante et le Développement</i> (PESADEV), PiH, PSF, PSI, RI, SC, <i>Santé pour le Développement et la Stabilité d'Haïti</i> / Management Sciences for Health (SDSH/MSH), St. Boniface, <i>TdH</i> , USAID, USAID/ US President's Emergency Plan for AIDS Relief (PEPFAR), WC, WFP/ <i>Programme Alimentaire Mondial</i> (PAM), WHI, World Bank, WVI
Number of Projects	10
Cluster Objectives	<ol style="list-style-type: none"> 1. To prevent mortality and morbidity associated with malnutrition. 2. To improve infant and young child feeding practices and outcomes. 3. To prevent micronutrient deficiencies. 4. To ensure that timely and accurate information is available to monitor nutritional trends. 5. To improve and protect household food security through livelihood initiatives through cash transfers to nutritionally vulnerable households.
Beneficiaries	1,326,920 children and women 494,600 children under-five and 197,840 pregnant and lactating women at risk of becoming malnourished; 15,750 moderately malnourished and 5,625 severely malnourished expected
Funds Requested	\$48,108,992
Contact Information	Erin Boyd, eboyd@unicef.org

Response to Date*Prevention and treatment of severe malnutrition*

Following the finalization and adoption of a Minimum Nutrition Package, Nutrition Cluster members have worked to expand detection and treatment of severe acute malnutrition (SAM) through accelerated community outreach, including screening and nutrition education. Additional inpatient treatment facilities were opened in Port-au-Prince, Grande Goâve, Petit Goâve and Les Cayes. The cluster also worked on re-establishing pre-existing treatment centres in some affected areas. Twenty-two NGOs and five departmental focal points and agencies were trained on national protocols on CMAM with joint facilitation between UNICEF, departmental-level MSPP staff, WFP and WHO. Twenty-eight stabilization centres for inpatient and outpatient management of SAM with medical complications continue to function throughout the country. A total of 126 outpatient therapeutic feeding centres for the outpatient management of SAM without medical complications continue to function throughout the country.

Ten cluster members worked on the prevention of malnutrition and provision of adequate micro-nutrients through blanket supplementary feeding for all children under-five, and pregnant and lactating women. The second round (out of three) of the blanket supplementary feeding is ongoing. Partners have shifted from using ready-to-use products (supplementary plumpy and high-energy biscuits to a dry ration (CSB, oil and sugar).

Infant and Young Child Feeding

The cluster successfully disseminated the statement against the importation of infant formula and has continued to work closely with the Logistics Cluster, DPC and cluster members to ensure that the International Code of Marketing of Breastmilk Substitutes is adhered to. The cluster has prevented many inappropriate donations and has also managed to take donations from partners and use the powdered milk and other products for other programmes to ensure that optimal infant feeding is promoted.

The cluster has also conducted five trainings and two workshops on PCNBs. Over 30 international and national organizations have participated and the number of PCNBs continues to expand. The PCNB strategy was also drafted and the cluster was advocated, ensuring that baby tents are placed where women can receive breastfeeding counselling and support.

The cluster continues to work on the appropriate provision of ready-to-use infant formula (RUIF) for orphans and babies whose mothers cannot breastfeed according to strict entry criteria. Approximately 2,000 babies less than 12 months old receive RUIF. The cluster will stop registering children on RUIF in June, as it was for emergency response only. The exit strategy for RUIF is in process.

Nutrition Information

The cluster has also worked extensively on mapping community management of acute malnutrition and infant and young child feeding services. It has developed clear referral sheets for areas of operation. The cluster continues to share minutes from weekly meetings and guidelines, protocols and strategy documents on OneResponse. The cluster has worked with partners MSPP, UNICEF, MDM-Suisse, ACF and TDH to conduct five nutrition surveys in three zones. The residential surveys will be finalized in the last week of May and the camp clusters will be finalized by mid-June. The cluster also began negotiations with MSPP, WHO, WFP and the Health and Nutrition Tracking Service (HNTS) to establish sentinel sites to ensure trend monitoring.

Needs Analysis

The food-insecure population pre-crisis was 1.8 million.²²

Acute malnutrition (SAM + moderate acute malnutrition / MAM): increased from 5% in 1995, to 7% in 2000, to 9% between 2005 and 2008.²³ In 2008-2009, it was 4.5%.²⁴ According to the EFSA of 2010, 6% of children 6-59 months have a mid-upper arm circumference (MUAC) <125 mm (moderate and severe wasting) (95% CI 3.5%-10%). A total of 1.5% of children 6-59 months have a MUAC <115mm (severe wasting) (95% CI 0.3%-5.5%). This is comparable to, or possibly slightly higher than, the situation before the earthquake.

Chronic malnutrition (stunting) was stagnant from 2005 to 2008, at about 24%.²⁵ In the same period, low birth weight was 25%, exclusive breastfeeding of infants < 6 months was 41% and any breastfeeding was >95%. It is crucial to protect the latter high rate of breastfeeding, as there is a significant risk of slippage post-earthquake as a result of community perceptions and donations of breastmilk substitutes. At the same time, it is imperative to improve the rate of exclusive breastfeeding. The proportion of children age 6-9 months receiving complementary feeding was 80%, but it is likely that the diet was poor quality, although there is no data on this. Regarding micronutrients, >60% of children 6-59 months suffer some form of anaemia. Among anaemic children, 72% are less than 24 months old (DHS 2005). A total of 46% of women (15-49 years) suffer some form of anaemia (DHS 2005).

Vitamin supplementation coverage was less than the target coverage rate (80%) in all but two departments.²⁶

Admissions into inpatient therapeutic feeding centres remain stable and attendance at PCNBs has been variable due to population movement. The ongoing nutrition surveys will have preliminary results available in mid-June, but to date the levels of SAM are expected to remain below emergency thresholds. Chronic malnutrition remains a priority and significant challenge. Therefore, the cluster will emphasize livelihoods, household food security and nutrition education in the second half of 2010 to ensure that chronic malnutrition is systematically addressed. Infant and young child feeding continues to be a major concern, with a high level of mixed feeding common in Haiti. Many children

²² FEWSNET Oct 2009.

²³ DHS.

²⁴ MoH Haiti national nutrition survey.

²⁵ DHS.

²⁶ DHS 2005, UNICEF 2008.

under-five remain susceptible to disease and to developing long-term diseases, due to inadequate counselling of mothers to ensure that children are optimally breastfed. The PCNB strategy includes nutrition education, but there is significant work to be done on complementary feeding to promote best practices.

Objectives

Five objectives have been identified by the Nutrition Cluster:

- Prevent mortality and morbidity associated with malnutrition. This is expected to be achieved by prevention activities through continued blanket feeding and by scaling up treatment of malnutrition according to the national and international protocols.
- Improve infant and young child feeding practices and outcomes by supporting the scale-up of PCNBs to ensure that mother/baby pairs have access to a safe place to breastfeed, and to receive re-lactation counselling and support as necessary.
- Prevent micronutrient deficiencies. This will largely be achieved during the third round of blanket feeding, when Lipid-based nutrient spreads, multiple micronutrient powders and micronutrient capsules will be provided to all children between 6-59 months, and pregnant and lactating women in disaster-affected areas.
- Ensure that timely and accurate information is available to monitor nutritional trends, which will be largely achieved by the completion of the nutrition surveys in disaster-affected areas in June, as well as the routine compilation and analysis of the feeding centre database and establishment of sentinel sites.
- Improve and protect household food security through livelihood initiatives through cash transfers to nutritionally vulnerable households and the scale-up of the fresh-food voucher programme in collaboration with the Early Recovery Cluster. (See monitoring matrix.)



Nutrition/UNICEF/2010

Protection



Cluster Lead Agencies Sub-cluster Leads	United Nations Stabilization Mission in Haiti (MINUSTAH) Human Rights Section of the Office of the High Commissioner for Human Rights (OHCHR) UNICEF (Child Protection AOR)/UNFPA (Prevention and Response to GBV AOR)
Cluster Members	<i>Revised Flash Appeal/CAP implementing partners:</i> OHCHR/MINUSTAH, UNICEF, UNFPA, AVSI, UNHCR, Heartland, IMC, IOM, Project K.I.D, CESVI, International Association for Human Values (IAHV), International Media Support (IMS), HI, UNIFEM, Plan, SC, IRC, ADRA-Haiti, Mercy Corps, ARC, UNDP, Internews, PESADEV, U.S. Committee for Refugees and Immigrants (USCRI), <i>Centre de Communications Sur le SIDA (CECOSIDA)</i> , WCC, EMDH, TdH, UNAIDS, <i>Comitato Internazionale per lo Sviluppo dei Popoli (CISP)</i> , Mercy Corps, World YWCA, ILO. <i>Additional Protection Cluster Members:</i> CARE International, <i>Groupe d'Appui aux Rapatriés et Réfugiés (GARR)</i> , <i>Réseau National de Défense des Droits Humains (RNDDH)</i> , HelpAge International, CBM, Internews, WV, CRS, ActionAid, WFP, <i>Ministère de la Protection Civile</i>
Number of Projects	43
Cluster Objectives	<ol style="list-style-type: none"> 1. Identify gaps in the protection of people affected by the earthquake to enhance protection responses. Focus on gaps in responses related to durable solutions for IDPs, in particular in the context of the Safe Shelter Strategy. 2. Strengthen the capacity of communities and relevant actors including the Government of Haiti, and national and international organizations to respond to protection challenges, in particular the protection of vulnerable groups 3. Advocate rights-based interventions for the protection of affected communities by setting policies and strategies. 4. Child Protection: See separate Sub-Cluster Response Plan 5. Gender-Based Violence: See separate Sub-Cluster Response Plan.
Beneficiaries	3 million people. Primary beneficiaries are IDPs in settlements and host families, separated children, survivors of GBV and people with special needs (e.g. people living with disabilities and older people). Secondary beneficiaries: the wider Haitian population who will benefit from a rights-based implementation of the reconstruction process, strengthening of the rule of law and equitable durable solutions. Immediate beneficiaries: three million people, in particular IDPs in settlements and host families, separated children, survivors of GBV and people with special needs (e.g. people living with disabilities and older people). Secondary beneficiaries: the wider Haitian population who will benefit from a rights-based implementation of the reconstruction process, strengthening of the rule of law and equitable durable solutions.
Funds Requested	\$53,320,922
Contact Information	Ben MAJEKODUNMI majekodunmi-minustah@un.org + 509 37477448 Lizbeth CULLITY cullity@un.org

Table: Beneficiaries

Category	Affected population			Planned beneficiaries		
	Female	Male	Total	Female	Male	Total
IDPs			1.5 million			1.5 million
Host communities			7 million			7 million
Totals			8.5 million			8.5 million

Response to Date

Although achievements inevitably overlap, a breakdown has been provided here to quickly highlight those areas where progress has been made.

Examples of the cluster's direct action

- Implementation of a recommendation (made under the joint security assessment) to design and launch an IDP camp strategic policing plan, with combined Haitian National Police and MINUSTAH conducting much increased night patrols in camps and on foot, pursuant to requests from IDPs, especially women.
- Individual responses to protection concerns identified during monitoring of IDP camps, including individual responses to as many cases of forced closure of IDP camps as possible, including on-site visits, meetings with camp committee members, meeting with local authorities and mediation toward an appropriate solution; deployment of Haitian police and United Nations Police (UNPOL) on site to reduce security risks; individual response to reports of GBV cases, including meeting with survivors,

referral to entities that can provide assistance, liaison with police authorities for investigative follow up, support regarding future protection; reports of killings or beatings, including on-site visits, visits to morgue and hospitals, investigation of circumstances of the violence and request for appropriate police and judicial action.

- Ongoing monitoring of forced returns of Haitians to Haiti and interventions to uphold the rights of all involved.
- Regular and ongoing interventions with national authorities and humanitarian actors on the overall response to protection issues (for example, forced camp closures, relocations of IDPs, security issues, GBV cases).
- quick-impact projects implemented in consultation with IDPs and communities in the 20km strip (2,955 beneficiaries)
- Emergency relief items distributed (189,900 beneficiaries)
- Over 1,200 separated children have been registered. A total of 118 have been reunited with their families, 278 families are being actively traced.
- Over 45,000 children are being reached daily through structured social activities that include child-friendly spaces and recreational and sport activities. These activities take place in camps and neighbourhoods in 18 different communes of Port-au-Prince, Léogâne, Petit Goâve, Jacmel and Les Cayes.
- In cooperation with partners in other sectors, over 300 reported GBV survivors assisted with medical, psycho-social and alternative shelter support

Monitoring to identify general protection gaps, individual cases requiring action and as a preventive measure

- Joint security assessment on the protection of IDPs in camps (completed March 2010) conducted by joint teams led by the Protection Cluster and bringing together a combination of humanitarian actors (including UNICEF and UNFPA), MINUSTAH (including analytical team members UNPOL, UN military), Haitian police, with a particular emphasis on female team members
- Protection assessment of IDPs in host families (completed May 2010)
- Ongoing monitoring of IDP camps, including through cluster members' visits to specific camps, Cluster Lead reviews of reports from humanitarian organizations, MINUSTAH civilian sections (such as Civil Affairs and Community Violence Reduction, JOTC), UNPOL and individual responses to protection concerns (see below)
- Ongoing monitoring of forced returns of Haitians back to Haiti and interventions made to uphold the rights of all involved
- Identification of some partners working on providing legal services to the affected population

Proposals and guidance to the State, UN and wider international community on policies to meet international standards

- Protection principles are taken in consideration in the UN's IDP strategy, and in relocation and evacuation procedures
- Protection guidance and standard operational procedures (SOPs) on humanitarian evacuations drafted for inclusion in possible humanitarian evacuations of IDPs from camps at risk of flooding
- Proposal submitted to the Government (March 2007) on a State policy on the governance of IDP camps and on the relocation of IDPs that would meet international human rights and protection standards
- Proposal submitted to the Government for a State policy that would meet international human rights and protection standards in the context of increasing efforts to close IDP camps
- SOPs on GBV referral and reporting systems are in place; training and sensitization on GBV conducted; working groups on communications and referrals continue to meet; approximately 30,000 referral cards are being distributed in French and Kreyol; and action sheets on GBV integration for clusters are available in French, English and Kreyol
- The "April-December 2010 GBV Strategy and Action Plan", prepared in line with the "National Plan to End Violence Against Women", is nearing completion

- Training on IDP protection to over 200 human rights monitors, camp managers and national authorities — National Police of Haiti, DPC, etc
- Proposals to national authorities (for example, the Operation Protect Children) and to national NGOs on strengthening public policy at local and national levels in the context of the national plan of action on the reconstruction process, toward ensuring the inclusion of human rights and protection perspectives in all public policy, and ensuring transparency and efficiency in implementation

Key challenges and constraints

The Protection Cluster has faced major challenges and constraints. Progress over the past three months has allowed some of these challenges to be partially overcome, while others remain significant.

The definition or articulation of “protection” and its consequences:

In most humanitarian situations, “protection” is articulated in a holistic manner that extends from access to services to protection from physical harm on behalf of affected populations. This definition essentially covers an entire affected population and covers, to some degree, all aspects of the assistance to an affected population, including inevitably all the assistance (shelter, WASH, etc) provided by other clusters. Projects and activities within the Protection Cluster include submission focus on assistance as diverse as community information centres, psycho-social assistance, legal advice, provision of comprehensive paediatric amputee support, the investigation of killings involving earthquake-affected populations and conditions of detention. With such a broad definition of protection, it becomes very challenging for the cluster to develop a coherent and targeted focus on specific issues of concern. The cluster membership reflects the diversity of the projects. While this diversity brings together a rich panorama of experience, the expertise is so diverse that there is insufficient density on any given subject to allow the cluster to deploy as a cluster of organizations to target a particular concern. There is likely to be a high degree of overlap with other clusters. While efforts to coordinate through the inter-cluster system and bilaterally do help reduce overlap, coordination on such a large scale of overlap is a challenge in and of itself, due to the intensity of a fast moving emergency situation, with a very high staff turnover.

“Affected” population

“Affected” populations are traditionally those affected by the humanitarian situation. In Haiti, however, the term is complex. At its most basic, an affected population is a population that has been left homeless by the earthquake and is now living in an IDP camp. However, many of those left homeless were living in concrete houses with more than one floor and were therefore middle class. At least some proportion of the affected population, now in camps, is likely to be in a better financial situation than non-affected populations living close by in slums, where earthquake destruction was less, because structures were made from wood and corrugated iron. In the Port-au-Prince urban environment, it quickly becomes nonsensical to conduct protection work only with classic affected populations and not with other populations. For example, GBV incidents do not recognize IDP camp boundaries, but occur throughout certain areas of the capital city. Weaknesses in the State response to GBV crimes are not limited to GBV crimes committed against IDPs, but instead affect all survivors of GBV. This contrasts with “shelter” for example, which can fairly and appropriately be focused on people who lack shelter because of the earthquake. Thus, while the definition of protection (above) is exceptionally broad, the definition of populations requiring protection frequently extends to large swathes of the entire population of Haiti, and post-earthquake protection problems are intricately linked to long-standing problems such as the weakness of the judiciary and the penal system, under-development and poverty.

A major challenge has been to rearticulate protection in a manner that minimizes duplication with other clusters, that is coherent given the situation of earthquake and non-earthquake-affected populations, and that responds to specific protection priorities. During late February, March and April, the Protection Cluster Lead worked with cluster members to agree on a more refined version of the cluster’s terms of reference (TORs) and strategy, which were adopted by consensus in April. The new

TORs and strategy have helped significantly in focusing the discussions and the cluster's work. However, the new, more human-rights-focused approach has revealed that few organizations within the cluster bring this particular type of expertise. The result is that discussions and implementation are led by a very small number of cluster members.

Political context

The political context influences the protection situation in Haiti. The fact that earthquake-affected populations are within the capital city itself, the massive degrees of financial resources that must be disbursed in response to the situation, and the likelihood of elections within 12 months, all contribute to politicize and complicate protection efforts.

Participation in the cluster

The Cluster Lead maintains very regular bilateral contacts with relevant authorities, including at ministerial levels. However, State authorities participate only very occasionally in Protection Cluster meetings and have informally indicated their lack of enthusiasm for the cluster process, preferring to engage with organizations bilaterally or through an alternative State structure. The cluster functioned for three months in English and French. However, to increase meeting efficiency and encourage greater national participation, the lead chose to use French only as of early May, and to encourage side-simultaneous French-English interpretation for those who required it. Numbers of participants in the cluster fell in February, but rose significantly through March and April to an average of about 50 people, representing 42 organizations per meeting.

Needs Analysis

Before January 12, Haiti was marked by deep poverty and under development; up to 80% unemployment; inadequate to acceptable and affordable food, housing, education and health care; weak rule of law institutions; impunity; rights violations in the context of the judicial process, including in the context of arbitrary arrest and detention, ill treatment during detention, long periods of pre-trial detention, prison overcrowding and abuse of authority; and GBV, trafficking for sexual and other economic exploitation and domestic service. Most basic services were run by private actors.

The earthquake has compounded these pre-existing problems. State protection institutions such as the *Departement de la Protection Civile*, the justice system and the *Office de la Protection du Citoyen* (OPC) suffered serious damage. For example, prisons, courts and police stations have collapsed, leading to even greater overcrowding in detention facilities and police and OPC personnel were killed.

In the immediate aftermath of the earthquake, there was an urgent need to assess protection gaps in light of the humanitarian situation, new priorities and vulnerable groups, and the capacity of the State's protection infrastructure, while also taking into consideration pre-existing human rights and protection problems. Four months on, a series of points can be identified that trace a pattern of the needs within which protection objectives and strategies must now be defined:

- An estimated 1.5 million IDPs (according to Government figures in April 2010), most of whom are in camps, require protection in the context of their temporary presence in camps and with host families, and long-term move to permanent housing (either a return home or a new option). The short-term protection of IDPs and the provision of durable solutions are a core protection responsibility.
- Many people from the urban poor have moved into IDP camps, and many people are maintaining a presence both in IDP camps and in a home. This emphasizes the impossibility, and perhaps the futility, of trying to distinguish completely between IDP populations and other populations, given that in some situations IDPs are in a better humanitarian and economic situation than non-IDPs. The protection of IDPs must go hand in hand with the socio-economic and, at times, physical protection of other vulnerable people.
- The National Plan of Action and the \$9 billion of pledges offer an opportunity for protection to be inserted throughout State and donor action in Haiti, and included toward achieving durable solutions. Creating opportunities to include protection within the process, in an effective and lasting manner, is complex but essential.

- Several issues have emerged that have key protection aspects, as follows: efforts to move camps out of private land before alternatives are available; security in camps and in surrounding neighbourhoods and the prevention of GBV; identification papers; land tenure issues; the rights of people with disabilities; employment; the reopening of schools and other education establishments; the impact of rain on existing IDP camps; and Government efforts to end food and water distribution as a means of reducing camp populations and stimulating the economy.

Objectives

The objectives listed below take the Protection Cluster one stage beyond the objectives listed in the initial CAP process (as reflected in the Monitoring Matrix). In particular, considerable progress has been made in achieving the cluster's first objective: identifying protection gaps. With a much improved understanding of gaps, the cluster has been able to redefine its working strategy and TORs. The objectives below should be seen as the main axes of the Protection Cluster strategy.

1. *Identify gaps in the protection of people affected by the earthquake to enhance protection responses. Focus on gaps in responses related to durable solutions for IDPs, in particular in the context of the Safe Shelter Strategy*
 - Participatory assessments and monitoring on protection of IDPs in camps and in host families, including issues related to security in the camps and protection from GBV, governance of the camps, vulnerability of the camps to rain and hurricanes, and possible closure of the camps.
 - Identify protection gaps in the provision of durable solutions, including regarding adequate housing, access to services, employment and identity papers.
2. *Prevention and response to violence, abuse and exploitation directed towards children*
 - In addition to child protection actions pursued under other headings above and below, please refer to the separate submission of a response plan by the Child Protection Sub-Cluster.
3. *Prevention and Response to GBV*
 - In addition to GBV actions pursued under other headings above and below, please refer to the separate submission of a response plan by the GBV Sub-Cluster.
4. *Strengthen the capacity of communities and relevant actors including the Government of Haiti, and national and international organizations to respond to protection challenges, in particular the protection of vulnerable groups*
 - Enhance the response to protection of people with disabilities, women, children and the elderly, including preventive action, referral and response for protection incidents that occur.
 - Provide training on protection of IDPs for camp managers, human rights monitors and national authorities.
 - Implement quick-impact projects and provide relief protection items to IDPs in host communities and camps, in particular the most vulnerable people.
 - Reinforce the Rule of Law through improved access to justice at a community level and improved knowledge on the procedures to recover civil documentation.
 - Ensure that public policy, including the design and implementation of programmes in the context of the reconstruction, return and local integration process, adequately provides for the protection of the rights of vulnerable people, for example through the revision of domestic legislation, the construction of new institutions and training. The Protection Cluster and the Cluster Lead will require the capacity to support the State to accomplish this responsibility.

5. *Advocate rights-based interventions for the protection of affected communities by setting policies and strategies*
- Given the scale of the situation, combine case-by-case action with advocacy for the State and the UN's adoption of policies that will ensure protection for all affected people, including on child protection and GBV, and mainstream human rights in the humanitarian response. Provide guidance on strategies and responses for rights-based standards for protection interventions. Focus on cross-cutting issues including age, gender, diversity and HIV/AIDS, to receive appropriate attention and response within and across the clusters.
 - Information on key protection issues will be provided to affected populations, particularly targeting people with special needs.

Table of proposed coverage per site

Regions	Organizations
Port-au-Prince/Ouest Department	OHCHR/MINUSTAH, UNICEF, UNFPA, AVSI, UNHCR, Heartland, IMC, IOM, Project K.I.D, CESVI, IAHV, IMS, HI, UNIFEM, Plan, SC, IRC, ADRA-Haiti, Mercy Corps, ARC, UNDP, Internews, PESADEV, USCRI, CECOSIDA, WCC, EMDH, TdH, UNAIDS, CISP, Mercy Corps, World Young Men's Christian Association (YWCA), ILO
Léogâne area	OHCHR/MINUSTAH, TdH, UNICEF, SC, CARE International, IMC, HI
Petit Goâve/Grand Goâve	SC, TdH, IMC
Jacmel/South Dept	OHCHR/MINUSTAH, UNICEF, SC, UNIFEM, CECOSIDA, AVSI, UNHCR
Gonaïves/Artibonite	OHCHR/MINUSTAH, UNHCR
Cap Haitien	OHCHR/MINUSTAH, CECOSIDA, IOM, UNHCR
Centre	OHCHR/MINUSTAH
Les Cayes/South Dept.	OHCHR/MINUSTAH, TdH, AVSI, CRS
Jeremie/Grand-Anse	OHCHR/MINUSTAH, UNHCR
Border areas	OHCHR/MINUSTAH (Quanaminthe), Heartland Alliance (Malpasse, Belladere, and Ounamanthe), UNHCR (Jimani), ARC (<i>Fond Parisien</i> , Ganthier), UNICEF, IOM, USCRI/GARR
Dominican Republic	UNHCR, UNFPA, UNICEF

Protection Sub-Cluster: Child Protection



Sub-cluster Leads	United Nations Children's Funds (UNICEF)
Cluster Members	Revised Flash Appeal/CAP implementing partners: OHCHR/MINUSTAH, UNHCR, UNFPA, UNAIDS, UNICEF, ILO, UNIFEM, IOM, CECOSIDA, Heartland Alliance, IMC, HI, SC, CISP, ADRA, TdH, AVSI, IRC, KID, Mercy Corps, Children's forum, ARC
Number of Projects	52
Cluster Objectives	To coordinate activities to strengthen the protection of 1.4 million children affected by the earthquake, both in areas directly affected and those affected by displacement or other secondary effects
Beneficiaries	1.4 million children affected by the earthquake (direct and indirect) and in particular 500,000 vulnerable children through the provision of a range of child protection services
Funds Requested	\$71,867,732
Contact Information	Caroline Bakker: cbakker@unicef.org

Response to Date***Preventing separation and response to separated and unaccompanied children***

Residential childcare centres: The quality of 359 residential childcare centres hosting around 25,339 children has been evaluated throughout the country. The *Institute de Bien Être Social et Recherche* (IBESR) and UNICEF have been working in collaboration with the Haitian National Police's new Brigade for the Protection of Minors (BPM) to evaluate the needs, conditions and quality of care of orphanages, and to register children who arrived in orphanages after the earthquake to promote family reunification. Emergency needs such as food, nutrition, medical needs and shelter have been identified and provided in half of the centres.

Call centre: The call centre (HUB), staffed by IBESR, UNICEF and SC personnel, and 11 sub-HUBs throughout the country have been established. Operational since 13 March 2010, the call centres are taking calls from frontline workers reporting children unaccompanied and/or separated from their parents.

Identification of separated and unaccompanied children: To date, the Inter-agency Collaboration Working Group on Separated and Unaccompanied Children has identified 1,740 separated children and made follow-up visits. A total of 194 children have been reunified with their families. A total of 355 families are being actively traced and 91 families are undergoing mediation.

Interim care: IBESR has accepted an inter-agency programme for temporary placement of separated and unaccompanied children in host families while waiting for family tracing and reunification. Discussions are ongoing on the operationalization of this programme.

Strengthen and support Government structures and systems for improved child protection

Child protection actors along the border with the Dominican Republic are carrying out preventive and response measures against trafficking. Heartland Alliance is working in collaboration with BPM and IBESR to monitor the border and prevent separated or unaccompanied children from crossing the border.

The Inter-Agency Working Group (SC, IRC, UNICEF and Heartland Alliance) has provided trainings to the IBESR team on family reunification and reintegration, and awareness-building activities on family reunification and reintegration for children and their families. With UNICEF's support, 40 social workers have been recruited to conduct an investigation of childcare institutions, as well as identify, register, accompany and reintegrate children as needed who were made vulnerable by the earthquake, or who are victims of abuse, exploitation and violence due to the earthquake.

UNICEF and MINUSTAH have provided technical support to BPM. This support specifically included strengthening BPM's communication system in affected areas, establishing a free phone line and establishing a coordination mechanism with other partners on cross-border trafficking. UNICEF

conducted a rapid assessment of the situation of cross-border trafficking to determine BPM's logistical and human resource needs, and recruited and trained additional BPM staff to support preventing and combating trafficking and other forms of violence against children.

Comments and technical input have been provided on the adoption law submitted to Parliament and were mostly included. The House of Deputies (parliament) adopted the amended law on adoption; the Senate will consider it next.

Strengthen and provide support for community-based child protection mechanism

Community-based psycho-social support: Over 55,000 children have been reached per week through the establishment of 200 child-friendly spaces (CFS). In each CFS, around 50-100 children per day benefit from the diverse activities provided.

Gender-based violence (GBV): To address the rise in reports of GBV, the Child Protection and GBV Sub-Clusters, together with MINUSTAH, UNPOL and the Haitian National Police, have joined forces to patrol, monitor and evaluate security issues related to child protection and GBV in six camps (five in Port-au-Prince, one in Léogâne). BPM has recently deployed two staff to these camps to assure presence and response effectively to the protection of children from abuse, exploitation, violence and neglect.

Awareness-raising for prevention of violence, abuse and exploitation: Around three million people have been reached with child protection messages broadcast in Creole through 36 national radio broadcasts, printed on posters and leaflets. One million mobile phone users have already been reached through SMS.

Trafficking: Child protection actors (IBERS, BPN, MINUSTAH, UNICEF, Heartland Alliance) along the border with the Dominican Republic are carrying out preventive and response efforts to trafficking. Heartland Alliance is working with BPM to monitor the border and prevent separated or unaccompanied children from crossing the border. It is also working with IBESR to ensure interim care, family tracing and reunification of the child victims of trafficking.

Mental Health and Psycho-social Support (MHPSS): The MHPSS Working Group contains 180 members from 96 organizations actively participating in weekly meetings. Activities are provided in some 25 communes, ranging from dissemination of education messages to counselling and provision of psychiatric training to general practitioners. Five task forces have been created: needs assessment; religion and MHPSS; education and MHPSS; health and MHPSS; and training. More than 200 professionals have been introduced to the IASC Guidelines on mental health and psycho-social support. A smaller percentage of these people are receiving further in-depth training. Although these task forces are listed under protection, the health component is the Health Cluster's responsibility.

Cluster challenges and priorities

The ongoing priorities are to scale up the presence of child protection partners in locations where children are most vulnerable, and to strengthen the Government system for response. It is critical to close the gap between registering a separated child and tracing the family. Children in institutions require special attention. The child protection partners, the *Organisation des états américains* (OAS) and UNICEF will work with IBESR to register every child as a preventive measure for trafficking and exploitation, and to highlight priority cases for reunification and children exposed to abuse and exploitation. The insecurity of women and children in communities and displaced locations has led to increased reports of rape and other GBV. Through the GBV Sub-Cluster and in collaboration with the Protection Cluster, partners are actively contributing to the strategy to strengthen security. Through agreements signed with IBESR and BPM, a plan of deployment has been drawn up to five departments in the country to strengthen presence along the border and other vulnerable areas. The scale of the response to children's psycho-social needs and vulnerability to sexual violence will increase by strengthening the proximity of partners to the most vulnerable communities, and by linking a monitoring and reporting system to referrals for access to services. Strengthening the prevention

and the protection of children through advocacy and communication efforts will be done through the revival of the working group dealing with this aspect.

Needs Analysis

The January 12 earthquake has exacerbated the vulnerability and multi-dimensional protection risks for hundreds of thousands of children in Haiti. Children who have been separated or who are at risk of separation from their family are especially at risk.

A primary risk facing children immediately after the earthquake remains separation from family care. The already weak systems in place to protect children have been further depleted by the loss of social work personnel, logistics and office space of the *Ministère des Affaires Sociales et du Travail* (MAST) and IBESR. While some children have found temporary care with families and institutions that are protective, many others are at risk of trafficking, abuse and exploitation. In addition, children currently with families living in extreme poverty are vulnerable to abandonment, raising the risk of a second phase of separation and increased vulnerability to sexual abuse and violence.

Sexual violence reports are increasing from the spontaneous settlement areas in Port-au-Prince and across the country. Reports of trafficking and illegal international adoption of minors have dominated the international press in recent months. The practice of children being separated from their families, either to be placed in institutional residential care within 'orphanages' and *crèches*, or to serve as *restavecs*,²⁷ is believed to have increased since the earthquake, especially in rural areas.

There are reports of higher threats of adolescents and youth involvement in gang activity, urban armed violence and other risky behaviour such as substance abuse. There is also an overwhelming need for psycho-social assistance for children affected by the earthquake.

Children in Haiti were vulnerable before the earthquake

- Up to 173,000 children were reportedly exploited as domestic workers
- 50,000 children were separated from their families in institutions
- Up to 4,000 children were living on the streets
- At least 2,000 children were trafficked annually through and to the Dominican Republic

Objectives

The cluster addresses the specific protection needs of and threats to children in the immediate phase, particularly those concerning:

- Separated and unaccompanied children, with particular attention to the youngest
- Children vulnerable to violence, abuse and exploitation, including GBV
- Children at risk of being trafficked or recruited by gangs

The objective of the Child Protection Sub-Cluster is to coordinate activities that prevent and respond to psycho-social distress and violence, abuse, exploitation, discrimination and neglect of 500,000 affected children — both in areas directly affected and those affected by displacement or other secondary effects — by strengthening and improving the national child protection system and through child protection humanitarian response.

Close collaboration is taking place with the GBV Sub-Cluster, the Inter-Cluster Group on Mental Health and Psycho-Social Support, the Separated and Unaccompanied Working Group, the Child-Friendly Spaces Working Group and the Advocacy and Communication Working Group, and with the Protection Cluster.

²⁷ *Restavec* (from the French *reste avec*, "one who stays with") is a child who is sent by his/her parents to work for a host [household](#) as a domestic servant because the parents lack the resources required to support the child.

The specific objectives for 2010 are to:

- prevent separation and respond to 5,000 separated and unaccompanied children
- strengthen the Government of Haiti's capacity to protect children from violence, trafficking, exploitation, abuse and neglect through coordination, training and strategizing
- strengthen and provide support for community-based mechanisms for child protection, including creation of and support for community-based child protection focal points and networks, and implementation of CFS with psycho-social support for children and their caregivers

Table of proposed coverage per site

SITE / AREA	ORGANIZATIONS
Cap Haitien	Plan International, World Vision
Carrefour	OJFA, Ami, ADRA, ODEMAH, Heartland Alliance (HA), Parole-Action, ARC, Pan-American Development Foundation (PADF), Consortium for Reinforcement of Christian Education (CRECH), Joint Council on International Children's Services (JCICS)
Cayes-Jacmel	Plan International (PI), BB
Choscal Cité soleil	HCR, PADF, Food for the Hungry, MDM Canada
Cornillon/Grd bois	OCCED'H
Croix des Bouquets	HA, PI, ADF
Delmas	CRS, EMDH, AMI, HA, Parole-Action, OCCED'H, AMURT, BB, Consortium for re-enforcements of C Education
Ganthier	HA, Parole-Action, OCCED'H
Gonaïves	SC, WV
Grand Goâve	TDH
Hinche	CRS
Jacmel	PI, BB, Consortium, SC
Kenscoff	CRS, OCCED'H, HCR, AMURT
Vallee de Jacmel	PI
Léogâne	Parole-Action, Tear Fund, <i>Tout n'est pas perdu</i> , PADF, BB, TDH
Les Cayes	TDH
Marigot	PI
Martissant	<i>Aide Médicale Internationale</i>
Petit Goâve	TDH, PADF
Port-au-Prince	CRS, HA, HCR, CEMEAH, PADF, Food for the Hungry, JCICS, IRC, NCA, SC, MSF Belgium, IFRC, MDM-Canada, MDM-Spain
Petion Ville	CRS, HA, Parole-Action, OCCED'H, ADF, JCICS, IRC, Mercy Corps, SC, IFRC
Tabarre	OCCED'H, PADF, Mercy Corps
Thomaszeau	Ami, HA, OCCED'H



Child Protection/UNICEF/2010

Protection Sub-Cluster: Prevention of and Response to Gender-Based Violence (GBV)



Sub-cluster Leads	UNFPA
Cluster members	ACF, ACTIONAID/HPC, ADRA, AECID, Amnesty International, Amurt <i>Suisse</i> , ANAPFEH, Antenne sante/FONHSAD, ARC, Armee Du Salut, BAI, Beyond Borders, CARE, CDAC, CECI, COFEDES. COHI, Concern Worldwide, Concertation Nationale/VF, CPFO, Croix Rouge, CRS, Digital Democracy, Earthspark International, EMDH, FANM DESDIDE, FONOX, Food For Hungry, FRADES, Global Consortium on Security Transformation, Global Grassroots, Global Rights, GOAL, Handicap International, HHI-LAC-DRC, Hilfswerk Austria International, Hope For Children ICVA, IEC, IFRC, IJDH, IJM, IMC, Institut Haitien De La Paix, Institute Of Current World Affairs, Internews, IOM, IPPFWHR, IRC, LERN, MADRE, MCFDF, MDM France, MERLIN, MFA/Norway, MINUSTAH, MSF – Espagne, MSF-Holland, MSF-Suisse, MUH, NCA, OHCHR, ONUSIDA, OPS, OXFAM, PADESS/ACDI, PADF/PHR, PAHO, Peace Operations, PESADEV, Plan International, PNUD, Progressio, SC, SOFA, <i>Sport Sans Frontières</i> , UNICEF, UNIFEM, UNFPA, Observer: ICRC
Number of Projects	9
Cluster Objectives	<ol style="list-style-type: none"> 1. Preventing GBV through work with security and other sectors 2. Ensuring women and girl survivors of GBV have access to essential services 3. Re-establishing monitoring, reporting and coordination mechanisms
Beneficiaries	N/A
Funds Requested	\$18,546,810
Contact Information	Lina Abirafeh (Coordinator) safarLina@gmail.com Vanessa Montas (Deputy) GBVschHaiti@gmail.com

Response to date

The GBV Sub-Cluster aims to address both immediate humanitarian service delivery and action to prevent and respond to GBV, as well as to coordinate with longer-term development of services, systems and structures to protect women and girls from GBV. The sub-cluster hopes to institutionalize existing protection GBV mechanisms in response to the humanitarian crisis, enhance them with global good practice and help take them to scale. The March, April and May 2010 updates provide details on all activities to date.²⁸

In terms of prevention and protection, the sub-cluster liaises regularly with the security sector to ensure that patrols are adequate and responsive to women and girls' concerns. Problematic areas have been identified and trainings are being conducted. Members liaise with other clusters to ensure that women and girls are not at risk because of the construction or layout of camps and settlements, or as a result of the methods and modalities for distribution of humanitarian assistance. The Communications Working Group of the GBV Sub-Cluster has developed messages for radio spots that advocate GBV prevention. These messages are being broadcast regularly across Haiti.

The sub-cluster works to increase response activities to ensure survivors' access to services. This is done through the distribution of over 50,000 referral cards and leaflets, and strengthening of the referral pathway. It also is done through training the security sector and other sectors to receive and respond to cases safely, effectively and appropriately. The GBV Sub-Cluster Referrals Working Group leads this effort.

Monitoring, reporting and coordination mechanisms are re-established through coordination with existing national partners, namely *Concertation Nationale Contre les Violences Faites aux Femmes* (National Taskforce to End Violence Against Women) and civil society partners. The sub-cluster strengthens the national response by aligning its work directly with the five-year plan prepared by *Concertation Nationale* and launched by the Government in November 2005. This also entails advocacy in relation to promoting the use of the national form for data collection and the national protocol for clinical care of sexual assault survivors.

²⁸ Latest updates at: <http://onerresponse.info/Disasters/Haiti/Protection/Gender-Based%20Violence/Pages/default.aspx>.

Needs Analysis

In the aftermath of the earthquake, immediate priorities are focused on responding to incidents of violence against women and girls by increasing access to medical, police, legal and psycho-social services. Very few services were available to survivors before the earthquake. Of those that did exist, most were destroyed. Mapping what remains — and helping survivors to access services — has been an enormous challenge. This has involved working with existing institutions, including police, medical facilities, humanitarian organizations and many others, on how to refer cases appropriately and how to respond in a way that prioritizes the needs of the survivor above all else.

To this end, sub-cluster members have identified a significant gap in case management services²⁹ for GBV survivors. Case managers are urgently needed in order to accompany women through the various stages of the process, and to ensure adequate follow up of the cases with the authorities. It is a technical field that requires training and certification, and also mentoring and practice. Case managers refer the identified cases from the field to the NGOs, and at the same time build capacity of the NGO staff to eventually assume leadership of this component.

Additionally, survivors need the option for temporary shelters, should they choose this route. One local NGO runs a shelter for child survivors of GBV who have nowhere else to go. However, the NGO's capacity is limited. A small shelter (for up to 50 women) was once run by the Women's Ministry. Since the earthquake it no longer functions and as a result there are no shelter options for adult women. Therefore, a new shelter needs to be created, offering safe accommodation for women and girls, including access to economic-empowerment initiatives, counselling and psycho-social support, childcare and other services.

Objectives

1. *Preventing GBV through work with security and other sectors*
 - Preventing incidents by ensuring that women and girls are not at risk because of the organization or layout of camps and settlements, or as a result of the methods and modalities for distribution of humanitarian assistance
 - Improving quality and adequate security and protection services in camps, shelters, host communities and rural areas, advocating Haitian National Police (HNP) presence where it is non-existent. This includes engaging the security sector, including the HNP, to increase patrols — on foot, at night — in problematic areas
 - Strengthening the resilience of families and communities can be the best form of prevention and protection, through support for livelihoods and opportunities to decrease vulnerability (thereby avoiding situations that put women and girls at further risk).
 - Conducting an information, education and communication (IEC) campaign that includes SMS, print, radio, TV and theatre to prevent GBV, with appropriate messages that promote dignity and positive scenarios

2. *Ensuring women and girl survivors of GBV have access to essential services*
 - Working with health and other actors to support a system of referral and care to ensure survivors have knowledge and access to health care, psycho-social care and legal aid
 - Advocating the decentralization of basic services, and ensuring functioning services for GBV survivors are in place
 - Disseminating information on available services for GBV survivors through radio messages
 - Continuing to build capacities of the HNP to receive and respond to cases safely, effectively and appropriately

²⁹ Case management includes the provision of support to survivors, in the form of psycho-social support as well as advocacy and support in accessing services. Aspects of case management include: relationship and trust-building with the survivor, understanding principles of confidentiality and informed consent, knowing all options but letting the survivor decide, problem solving, referral skills for existing services, documentation skills for relevant information, advocacy skills for survivor needs, security, health, justice, etc.

3. *Re-establishing monitoring, reporting and coordination mechanisms*
- Building capacity of public institutions and NGOs to determine how to prevent and respond to violence against women and girls, and fill gaps in services.
 - Strengthening the national response by aligning the GBV Sub-Cluster work within the five-year plan prepared by *Concertation Nationale Contre les Violences Faites aux Femmes*.
 - Strengthening the national capacity of *Concertation Nationale* and the *Ministère à la Condition Feminine et aux Droits des Femmes* for their role in coordination, and guiding national process for the prevention and response of violence against women and girls.
 - Ensuring revision and use of the national form for data collection, to align it with international good practice.
 - Ensuring that there are coordination bodies outside Port-au-Prince to facilitate information sharing and inter-sectoral referral mechanisms.
 - Sustaining GBV Sub-Cluster services to serve as a hub for GBV activities in the country, a clearing house of information, and a support for local organizations and government entities that have lost key individuals, infrastructure and information.
 - Preventing incidents by ensuring that women are not at risk because of the organization or layout of camps and settlements, or as a result of the methods and modalities for distribution of humanitarian assistance.
 - Engaging the security sector, including the HNP, to increase patrols – on foot, at night – in problematic areas. Improve quality and adequate security and protection services in host communities and rural areas, advocating its presence where it is non-existent.
 - Strengthening the resilience of families and communities can be the best form of prevention and protection – through support for livelihoods and opportunities to decrease vulnerability (thereby avoiding situations that put women at further risk).
 - Conducting an IEC campaign that includes SMS, print, radio, TV and theatre to prevent GBV, with appropriate messages that promote dignity and positive scenarios.

Table of proposed coverage per site

SITE / AREA	ORGANIZATIONS
Artibonite	PADF/PHR, UNFPA, UNICEF, UNIFEM
Centre	UNFPA, UNIFEM
Grande-Anse	UNFPA
Nippes	UNFPA
Nord	UNFPA, UNICEF, UNIFEM
Nord-Est	Catholic Relief Services, Plan International, UNFPA, UNICEF
Nord-Ouest	UNFPA, UNICEF
Ouest	GOAL, International Medical Corps, IRC, MSF <i>Belgique</i> , SOFA, Kay Fanm, PADF/PHR, URAMEL, Action Aid, MUH, Global Grassroots, PADESS/ACDI, Norwegian Church Aid, International Medical Corps, <i>Terre des Hommes</i> , <i>Fonds de Réseaux d'Aide pour le Développement</i> , Plan International, ARC, Circle of Health International, WCC, IOM, UNFPA, UNICEF
Sud	TdH, UNFPA
Sud-Est	PADF/PHR, WCC, Plan International, UNFPA, UNICEF, UNIFEM

Shelter and Non-Food Items



Cluster Lead Agency	International Federation of Red Cross and Red Crescent Societies (IFRC)
Cluster Members	ACF, ACT Alliance, ACTED, ADRA, America Continental, AMI, ARC, AVSI, CARE, CECI, CESAL, Concern Worldwide, CRS/Caritas, CVM, EPER/HEKS, European Civil Protection Team, Food for the Hungry, GOAL, Haven, IOM, Islamic Relief, Jesuit Refugee Service (JRS), LWF, Mercy Corps, MSF, MSF-Belgium, MSF-France, MSF-Holland, Nippon International Cooperation, OXFAM, Oxfam Quebec, PI, Project Concern., Salvation Army, Samaritan's Purse, SC, <i>Secours Islamique</i> France, Shelter Box, UNHCR, World Concern, World Relief, WV, United Sikhs, <i>Solidarités</i> International, ERA Police, Loving Hands for the Needy, Loving Family Care Association, Action Aid, IFRC, Seven, Caritas, Diakoine, <i>Coordination Régionale des Organisations du Sud-Est</i> (CROSE), IFRC, ACDI VOCA, Medair, WFP, MSF Spain, HI, <i>TdH</i> , Caritas Swiss, Christianville, Intersos, Tearfund, French RC, IRD, Mission E4, MSF CH, The Deleaney Bay Fund, <i>Welthungerhilfe</i> , Civil Society, <i>Cooperation Suisse</i> , JEN, Sustainable Aid Supporting Haiti, <i>CARITAS Suisse</i> , America Development Foundation (ADF)
Number of Projects	24
Cluster Objectives	The cluster's overall objective is to achieve safe and dignified shelter for those families affected, both directly and indirectly, by the earthquake Phase 1: provide waterproof cover for those with unsafe/destroyed houses or hosting other families within three months Phase 2: support transitional shelter with a lifetime of up to three years for those with unsafe homes
Beneficiaries	1,514,885 affected people (302,977 families)
Funds Requested	\$155,533,354 - Note that additional to these funds, IFRC is appealing for funds for the coordination of the Shelter & NFI Cluster and its operations through the IFRC Emergency Appeal.
Contact Information	Shelterhaiti2010@gmail.com , Telephone: 34850312

Response to Date

The cluster's overall objective is to achieve safe and dignified shelter for those families affected, both directly and indirectly, by the earthquake. The first phase was to provide displaced and non-displaced affected families with waterproof cover before 1 May 2010 and the hurricane season. As of 10 May, distribution was in excess of 100% of the baseline affected population figure. However, lack of durable solutions, gap filling and wear and tear means some shelter and NFI distribution remains ongoing. As of 21 May 2010, 63,709 tents and 573,513 tarpaulins have been distributed, and another 5,235 tents and 117,652 tarpaulins are being distributed. Over 2.1 million household NFIs and tool kits have also been distributed. As with emergency shelter, targeted pocket distributions continue to ensure gaps are being filled. Examples include Carrefour and Gressier, where baseline data suggest 57% and 88% coverage for shelter materials, respectively.

While transitional shelter programmes associated with the second phase of the response have started, programme momentum has yet to be achieved. A best-case scenario would see all eligible families receiving transitional shelters by 1 May 2011. Currently, the key obstacle to shelter construction is the availability of land, with many of those displaced before the earthquake living in densely populated areas on land they did not own. Other impediments include limited local capacity, which includes rubble clearance to allow building to commence, and the onset of the rainy and hurricane season.

Needs Analysis

The shelter needs are enormous. The Government's baseline figures indicate over 1.5 million affected people. Currently, coping strategies centre on two categories: displaced people and non-displaced people. The substantive categories of displacement focus on urban self-settlement, host families, planned sites and self-settled sites. Non-displaced people are living in damaged houses and apartments, while others live in houses and apartments undamaged but vulnerable to damage in the event of subsequent earthquakes.

In terms of meeting needs, the first phase is largely complete. For the second phase, the objective is the supply and effective distribution of appropriate transitional shelters for the displaced population, integrated with rubble clearance and settlement services, such as WASH, health, protection,

livelihoods and more broadly, recovery. Based upon data currently available, over 123,000 transitional shelters are planned, with approximately 78% funded to date.³⁰ Areas of most need centre on Port-au-Prince and communes to the west of Port-au-Prince. For the non-displaced, there is the need to assess whether buildings are safe to inhabit with respect to earthquake and aftershocks, heavy rains and hurricanes. If buildings are deemed unsafe, alternative shelter should be supported while those deemed safe need appropriate retrofitting assistance. In both categories, assistance will focus on the most vulnerable: those without land and housing assets (pre- and post-earthquake), those in congested camps and those squatting or seeking rental accommodations.³¹

The Shelter Cluster is coordinating the detailed gathering of transitional shelter needs. The cluster is adopting a zoned structure, with shelter actors assessing and sharing the needs in the zones where they are working among other actors to avoid gaps and duplication. Meanwhile, structural assessments of damaged buildings and whether they are safe to return are being done by the Ministry of Public Works, supported by UNOPS. To date, 70,000 buildings have been structurally assessed.

Objectives

The cluster's overall objective is to achieve safe and dignified shelter for those families affected, both directly and indirectly, by the earthquake. Two main phases have been identified:

- *Phase 1: Emergency shelter within three months, before the hurricane season:* The first phase was to provide displaced and non-displaced affected families with waterproof cover before 1 May 2010 and the hurricane season. Cluster members aim to provide support to the rest of the affected population by responding to ongoing needs.
- *Phase 2: Full transitional shelter within the next 12 months:* A best-case scenario would see all eligible families receiving transitional shelters with an expected lifetime of up to three years by 1 May 2011. A further 100,000 hosting families in rural areas receive material shelter support within the same time frame. This activity should start with immediate effect.
- Detailed gathering of transitional shelter needs coordinated by the Shelter Cluster, adopting a zoned structure with shelter actors assessing and sharing the needs in the zones where they are working among other actors to avoid gaps and duplication.
- Shelter programming will become increasingly targeted and consider health, protection, WASH, livelihoods and recovery. It will be aimed at supporting transition to durable solutions.
- Plans for durable shelter for the entire affected population developed within the next 12 months.
- System to deliver accurate public information on shelter-related issues.
- Risk mapping and vulnerability and capacity analysis completed for all sites. All construction methods used should reduce vulnerability.
- Key groups, including the most vulnerable, are consulted in the analysis and design of shelter and NFI response, and the findings are used to ensure the design of equitably accessible, targeted and culturally appropriate services. Women, and adolescent girls and boys are included in reconstruction teams, committees. Those participating in related training opportunities include a diverse range of groups.
- The coordination objective is to ensure that governmental and humanitarian stakeholders in the response participate in a unified coordination structure. The capacities of the armed forces and the private sector are recognized by this coordination structure.
- Working with other clusters to advocate that plans for rubble clearance are developed, prioritizing drainage and demolition of unsafe structures, and recycling materials as appropriate.

³⁰ As of 10 May 2010.

³¹ IASC Haiti Shelter Cluster Advocacy Document, 26 April 2010.

WASH



Cluster Lead Agency	United Nations Children's Fund (UNICEF) in support of <i>Direction Nationale de l'Eau potable et de l'Assainissement (DINEPA)</i>
Cluster members	Participating in Flash Appeal: UNICEF, IOM, Mercy Corps, WHO, NCA, ACF, UN Habitat, Oxfam GB, SC, Deep Springs International, IRD, CARE International, IMC, Acted, COOPI, NCA, IRC, <i>Solidarités</i> , Aide et Action, Oxfam Quebec, WVI, RI, ALL CLUSTER MEMBERS: ACF, ACTED, Allied Recovery Int., <i>Ambassade de France</i> , Amurtel, AMI-Portugaz, Arche Nova, BUSF, Calistas Haiti, CARE, CARE Haiti, CEFED, CESVI, CHF International, CONCERN, COOPI, Cordaid Haiti, Deep Spring International, DFID, Eau Pure PWW, Edge Outreach, FOCIDES, GOAL, HAVEN, IFRC, IMC, INHPACTS, INTERSOS, IRC, IRD, Mercy Corps, Merlin, MHD/OIM, MOFECS/NCA, MSF-B, MSF-CH, MSF-E, MSF-H, MSPP/DPSPE, OCHA, OXFAM GB, OXFAM Intermon, Oxfam Quebec, <i>Pompiers sans Frontieres</i> , Project Concern International, SP, SASHaiti, SC, SDC, SIF, TDH, THW Léogâne, The Mentor Initiative, The Salvation Army, United Methodist Committee on Relief (UMCOR), UNEP, UNICEF, UNICEF Watsan, USAID, Village-Planet, Viva Rio/NCA, WHO, WV and others ...
Number of Projects	26
Cluster Objectives	<ol style="list-style-type: none"> 1. To ensure safe and equitable access to WASH services/facilities for men, women, boys and girls of Haiti who have been directly or indirectly affected by the earthquake (regardless of their geographic locations), during the emergency and medium-term phases. 2. To strengthen national capacities/authorities with regards to WASH response and coordination in the framework of the earthquake and upcoming cyclone season. 3. To ensure sector-wide emergency preparedness in the perspective of the upcoming cyclone season.
Beneficiaries	1,100, 000 people
Funds Requested	\$109,243,454
Contact Information	For Haiti: jshepherdbarron@unicef.org

Response to date

As of 18 May 2010, water is currently provided via 450 private water kiosks and more than 500 sites across the different cluster member organizations. At least five litres of safe water per person per day is being delivered to approximately 1.1 million people. This involves daily tankering 6,000 m³ of water. The challenge is to maintain and then increase such quantities over time. DINEPA, with the cluster, is looking to examine urgently how water trucking operations can be reduced and be replaced by more sustainable medium-term options, such as connections and repairs to the network and borehole drilling. However, this will likely take several months and therefore expensive and logistically challenging trucking is the most feasible option likely to occur in the near future. Consultations will take place to try to examine the quantities and current sources of water used for drinking and other uses, as well as mapping the network and sites to see where immediate reductions can be made.

The water quality control group, under the leadership of the World Health Organization (WHO) is setting out quality standards, including notably minimum residual chlorine levels at household level, rather than just at distribution points.

In terms of sanitation, the WASH Cluster has almost reached the Phase I objective of constructing 11,000 toilets within three months, despite extremely challenging circumstances. Current average coverage is 200 people per toilet. Standards have been set by the Sanitation Sub-Group, and a manual of sanitation options has been produced and circulated to cluster members. While latrine coverage in sites is still low, there is evidence to suggest that open defecation is low (5-15%, WASH Cluster Survey, Feb 2010). Many people in proximity to their homes return home to use their own or their neighbours' facilities (30%), as well as use other means such as plastic bags (10%), which are deposited in solid waste receptacles. Therefore, solid waste is a critical part of the excreta disposal strategy.

Regions	1-20	(% of camps)	21-50	(% of camps)	51-100	(% of camps)	101-200	(% of camps)	201-500	(% of camps)	>500	(% of camps)	No of camps
Port-au-Prince	12	(2%)	34	(6%)	51	(9%)	50	(9%)	41	(7%)	368	(63%)	580
Other Directly Affected Areas	9	(3%)	27	(8%)	74	(21%)	58	(16%)	23	(6%)	135	(38%)	359
Indirectly Affected Areas			1	(6%)	1	(6%)	2	(12%)			13	(76%)	17
(Blank)	2	(1%)	15	(8%)	20	(11%)	13	(7%)	11	(6%)	112	(62%)	182
Grand Total													1,138

Hygiene promotion activities have been focusing on providing key information on safe hygiene practices, such as hand washing with soap, as well as providing items to facilitate the practices. These include hygiene kits consisting of soap, menstrual management articles, toilet paper and toothpaste among other things, and washing basins and water collection and storage containers. A total of 87,300 kits have been distributed by the WASH Cluster, while the NFI Cluster distributed another 240,000 kits. Each kit is constituted for a family of five for either one or three months.

Community participation has been a key strategy of all hygiene promotion activities. Hygiene promotion staff work through existing community committees and structures to ensure that communities are properly consulted and that the population's needs are adequately addressed. There are 2,200 hygiene promoters and community mobilizers, against a set target of 2,600 promoters. The Hygiene Sub-Cluster held two training of trainers in Port-au-Prince and one in Léogâne, with support from UNICEF. Training hygiene promoters is a planned activity for all phases of the emergency response.

The overall WASH Cluster lead is DINEPA (National Direction for Water and Sanitation), supported by UNICEF as WASH Cluster Lead Agency. As one of the few Government bodies less affected by the earthquake, DINEPA was among the first to respond, particularly in water supply, supported with the capacity to respond by UNICEF. Regular meetings are held and many initiatives started under the sub-cluster groups (explained under Needs Analysis).

The WASH Cluster Coordination Team has also been providing important technical and financial support to reinforce the municipalities' capacity to take on the coordination of response in their area. This is key in ensuring that local authorities are implicated in ensuring the provision of services to their respective population. It also facilitates more in-depth discussions between response agencies with local authorities and each other to understand priority needs and respond appropriately and quickly.

Challenges and gaps in response

It is difficult to accurately qualify the nature, extent or location of gaps due to dynamic population movement, a near doubling in the number of formal and informal settlement sites (of over 20 families), so-called "ghost camps" where individuals come to collect aid distributions, variable field-based capacities and under-reporting.

Although the WASH Cluster is close to meeting the three-month target of 11,000 toilets constructed, there have been many challenges. These challenges included lack of space due to dense urban environment, inability to construct pits due to concreted sites, land tenure issues where landowners do not allow construction, and the issue of "ghost camps" where it is not clear how many permanent residents are residing in certain camps. In the future, 16,500 new toilets are planned and materials will be allocated to different agencies. Currently, many of these toilets are in construction.

Due to the large numbers of toilets, sludge removal needs are great. As many locations are on private lands and latrine construction is not permitted by landowners, toilets are largely constructed using sealed above-ground pits. There are currently few de-sludging trucks and municipal capacity is low. However, 40 de-sludging trucks will be provided through various donors to DINEPA. Five trucks have already been cleared through customs. At present, there is no treatment facility for sewage and the Trutier dumpsite is being used.

As the rainy season is approaching, a contingency planning process is needed to ensure that agencies are prepared to respond in the case of secondary displacements, and assist those already vulnerable and living permanently in camps. A rainy season hygiene promotion action plan was developed in April as part of preparedness against diarrhoeal diseases and malaria that are anticipated due to limited water supply in overcrowded camps, drainage problems and presence of excreta in solid waste in the camps. The action plan was also developed to map out WASH-related NFI. Diarrhoeal diseases (except cholera) are endemic to Haiti. However, there are great needs for further contingency stocks to be in place.

At the beginning of the emergency, the objective was to provide minimal quantities of safe drinking water to more than 1.1 million people in need. This objective was met essentially through water trucking. This solution is very costly and not sustainable on a mid- and long-term basis. The challenge now is to be able to increase the quantities delivered per person per day, from 5 to 15 litres and in a more sustainable way. Different options exist, but they have to be implemented in a coordinated way and under DINEPA supervision with all stakeholders involved in the process. This will only be possible if there is an ongoing process of reinforcement of Government-concerned services (DINEPA) that can be accelerated and consolidated. Another challenge will be linked to the quality of the distributed water. Due to lack of time and available infrastructure to date, there has been a lack of reliable water quality analysis. Appropriate guidelines on water quality will have to be established rapidly and put in place by the different stakeholders. They will have to train their staff, notably on appropriate chlorination procedures at distribution and household levels to meet the requirements presented in the guidelines. In parallel, a reliable water quality control laboratory will have to be set up rapidly in the Ministry of Health to reinforce quality control capacity at the national level.

Needs Analysis

The WASH Cluster has reached approximately 1.72 million earthquake-affected people through provision of one or more of the following WASH interventions: safe drinking water, latrines, bathing facilities, WASH-related NFIs (including hygiene kits), removal of solid waste, and drainage. While a large number of beneficiaries have been reached via all of these interventions, there are still many people in need of WASH assistance.

The WASH Cluster is currently re-orienting its strategy to reflect the current status on the ground with up-to-date information on the types of settlement patterns and population data available. Dynamic population movement, a near doubling in the number of formal and informal settlement sites (of over 20 families), so-called “ghost camps” where individuals come to collect aid distributions, variable field-based capacities and under-reporting make it difficult to accurately qualify the nature, extent or location of gaps.

DINEPA is actively leading the WASH Cluster with support of the WASH Cluster team through UNICEF. A general WASH Cluster group convenes regularly to further identify issues, and a number of sub-groups are providing further specialized support to resolving setting standards, monitoring progress and collectively identifying ways forward for scaling up coverage in the constant face of changing plans. These groups, all under the leadership of DINEPA/WASH Cluster or UNICEF, include:

- excreta Disposal Standards and Design Group, Sludge Disposal Group and Solid Waste Management Group
- hygiene Promotion, WASH Monitoring and Household Water Treatment

- beyond Water Trucking Group and Water Quality Group
- contingency Planning Group
- WASH in Schools Group

To date, the WASH Cluster has set standards, developed technical guidance and dynamic strategies to meet up-to-date information, and collectively monitored progress through the cluster information management team. A WASH Cluster activity report is being provided at meetings and collective data analysed through the weekly report provided by NGOs to the WASH Cluster information management team. The team has also developed sub-zoning and a lead agency system at the commune/sub-commune level, and is now leading at inter-cluster level to develop better coordination mechanisms at the municipality level.

Table: Active WASH Cluster implementing partners by commune

REGION	SITE / AREA	ORGANIZATIONS
Port-au-Prince	Carrefour	Care, Concern, IMC, Intermon Oxfam, Oxfam GB, Save, SP, THW Léogâne
	Cité Soleil	COOPI, IFRC, MOFECS/NCA, MSF-B, Oxfam GB, Oxfam Q, Save, Viva Rio/NCA, WV
	Croix-des-Bouquets	ACTED, HAVEN, IFRC, Oxfam GB, WV
	Delmas	ACF, BUSF, Concern, COOPI, CRF, CRS, HAVEN, IFRC, IOM, IRC, MSF-B, MSF-H, Oxfam GB, Oxfam Q, Save, SDC, SIF, <i>Solidarités</i> , Viva Rio/NCA, WV
	Petion-Ville	Care, Goal, IRC, MSF-E, Oxfam Q, Save, SDC, <i>Solidarités</i> International, WV
	Port-au-Prince	ACF, ACTED, BUSF, Care, Concern, CRF, CRS, Goal, Intermon Oxfam, IRC, MSF-CH, MSF-E, Oxfam GB, Oxfam Q, Prj Concern, Save, SDC, <i>Solidarités</i> , SP, THW, Viva Rio/NCA, WV
	Tabarre	ACTED, Concern, COOPI, HAVEN, IOM, IRC, Save
Other directly affected areas	Grand-Goâve	BUSF, CESVI, DSI, Intermon Oxfam, <i>Solidarités</i> , SP, TdH
	Gressier	ACF, ACTED, DSI, IMC, Intermon Oxfam, INTERSOS
	Jacmel	Save, SDC
	Léogâne	ACF, ACTED, Care, CRE, DSI, Edge, IMC, INTERSOS, IRD, PSF, Save, SDC, SP, TdH, UMC
	Petit-Goâve	Arche Nova, CESVI, DSI, Edge, IMC, Intermon, SDC, <i>Solidarités</i> , SP
Indirectly affected areas	Arcahaie	IFRC, Oxfam GB, Save
	Cabaret	IFRC, Oxfam GB, Save
	Cayes-Jacmel	SASHaiti, Save
	Clercine	CRF
	Ganthier	CRF
	Kenscoff	SP
	Mais Gaté	CRF
	Marigot	Oxfam Q, Save
	Saint-Marc	Oxfam GB
	Satre	Oxfam Q

Objectives

1. Ensure equitable access to safe drinking water for men, women, boys and girls who have been directly or indirectly affected by the earthquake, in respect with Sphere standards.
2. Ensure adequate excreta disposal facilities for all earthquake-affected populations according to and appropriate for the type of settlement site so that no excreta is visible in site surroundings and there are no queues.
3. Contribute to reducing the risk of WASH-related diseases among earthquake-affected populations by mobilizing them to effectively use provided water, sanitation and hygiene facilities for better hygiene and dignity.

Strategy and proposed activities

The future strategic direction for the WASH Cluster is to continue providing basic needs in sites in the areas of safe drinking water, sanitation facilities including bathing spaces, adequate waste management in camps and hygiene promotion with the provision of hygiene-related NFIs.

As the first phase of the emergency phase approaches, the medium-term strategy for the WASH Cluster will focus on consolidating data available from different sources (which would include strong inter-cluster coordination with CCCM, shelter and other sectors), identifying critical gaps still available, developing further needs and implementing plans based on the settlement type (i.e. ghost camp, large site or resettlement camp), while inputting and advocating long-term solutions.

Exit strategy and return phase

The Beyond Water Trucking Working Group and the Beyond Excreta Trucking Working Group were set up during recent months. Their objective is to raise awareness that specific exit strategies had to be elaborated for emergency solutions implemented during the first phase in camps so that long-term options can be facilitated in the return phase. Most of the identified solutions involve activities that will take place in the original settlements of displaced people, with the objective of bringing people back home. A progressive increase of the services delivered in people's original settlements will be offered to compensate the progressive reduction of the services delivered in the camps.

This shift in the strategy to emphasize long-term solutions implies additional costs that were not taken into account in the original Flash Appeal. Most of the projects initially posted in that appeal were elaborated just after the earthquake and focused on emergency activities to meet the basic WASH requirements of the displaced population. The current revision process is allowing organizations to review and update their projects to include new activities oriented toward an exit strategy and/or more sustainable mid-/long-term approaches in coordination with DINEPA's plans (as cluster lead).

Emphasis on contingency

Contingency plans to respond to the coming rainy and hurricane seasons were not fully taken into account in the projects drafted just after the earthquake. Several projects are now re-directed to incorporate this important priority.

Medium-Term Strategy (current until end of year)

- **Sanitation:** Sanitation activities need to be consolidated. Structures for ensuring that existing infrastructure is adequately maintained and used properly, which will include a push for improved committee management and sanitation promotional activities, in addition to agency monitoring of latrine/shower/hand washing station use and condition. There will be a move to more durable infrastructure and upgrading existing facilities with lockable doors, roofs, adequate drainage, ventilation and lined pits to facilitate de-sludging. Sanitation activities will be re-orientated focusing on gaps (61% of sites have no latrines).
- In line with existing sanitation strategy, aim towards one latrine and one shower for every 50 people, especially for large camps with more than 2,000 people. In resettlement sites, one latrine/shower for every 20 people.
- Before the earthquake, urban sanitation coverage was extremely poor (24% of urban dwellers had access to improved sanitation). Establish latrine "return package" for 250,000 households based on DINEPA-approved standard. Target assistance away from camps to "neighbourhood upgrading".
- A de-sludging exit strategy needs to be fully defined, which would include simplified sewerage/decentralized wastewater treatment/sanitation, formative research and social marketing/private sector support.
- **Water:** There is a desire from the WASH Cluster to have a coherent and coordinated strategy to look at more medium- and potentially longer-term options for water supply for many of the displaced people. As a consequence, a strategy document exploring the "beyond water trucking" options has been elaborated and a new working group has been set up on this issue. The group has outlined the options that have been put forward by various members of the WASH Cluster as ideas for their own strategies to reduce their current water trucking footprint and costing, and some suggestions of how to take this forward. The main options were buy tankers to run own water trucking operation, connection from camps to networks, quick-win repairs to networks, repair/rehabilitation of network, use of existing boreholes/springs around camps/construction of micro networks, drilling of new boreholes around camps/construction of micro networks, rainwater harvesting for transitional

shelter/institutions, rehabilitation of water storage tanks and household water treatment. On this basis, the newly formed Water Supply Beyond Water Trucking Working Group has identified the main needs to allow the different NGOs to make their own analysis related to the sites where they work, and to choose the most adapted option(s). The group is actively seeking best ways forward in approaching this. Solutions or options contributing to the return at home (when possible) of people living in the camps will be strongly encouraged. As a consequence, providing safe drinking water in the camp should be progressively extended and/or transferred, when possible, to the neighbourhoods surrounding the camps.

- **Hygiene:** The hygiene group is working on prioritizing areas for hygiene promotion activities including areas with large concentrations of people who are not able to dispose excreta safely. Places where there is inadequate coverage of hygiene promotion activities, such as Cité Soleil and camps with no WASH agencies, should be identified in this phase.
- In the medium term, mobilization to ensure the proper use and maintenance of all facilities or hardware provided (toilets, hand-washing stations, water points, hygiene kits, mosquito nets) must be one of the key priorities, through identifying barriers to the use of facilities or changes in practice, as well as a better understanding of the factors that will motivate change. In addition to refresher courses for trained hygiene promoters, additional capacity-building is needed to address gaps identified during the review of hygiene promotion activities. Greater focus on monitoring and ensuring household-level water quality is necessary, especially as the period coincides with the rainy/hurricane season and the end of subsidized drinking water. Closer collaboration with the Water Quality Group is required, in order to link water quality at point of distribution to household level, taking into account transport from distribution source. Capacity-building of community outreach systems in household-level disinfection, chlorine residual testing, safe water storage and monitoring of water quality will also be undertaken.
- The group will also look at improving access to information about safe hygiene practices to all people, beyond camp populations through nationwide hygiene campaigns to host communities, populations outside earthquake-affected zones and marginalized camp communities (e.g. Cité Soleil, camps with no WASH agencies).



Water/UNICEF/2010

ANNEX I: LIST OF PROJECTS AND FUNDING TABLES

Table IV: List of Appeal projects (grouped by cluster), with funding status of each
 Haiti Revised Humanitarian Appeal (January - December 2010)
 as of 25 June 2010
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and appealing organizations.

Project code (click on hyperlinked project code to open full project details)	Title	Appealing agency	Original requirements (\$)	Revised requirements (\$)	Funding (\$)	Unmet requirements (\$)	% Covered	Uncommitted pledges (\$)	Priority
AGRICULTURE									
HTI-10/A/31371/R/123	Coordination / Support to Agriculture Cluster Coordination and <i>Table Sectorielle</i>	FAO	500,000	789,000	-	789,000	0%	-	MEDIUM
HTI-10/A/31372/R/123	Rapid restoration of food production capacity of the worst-affected households (merged with HTI-10/A/32011) Rapid restoration of food production capacity of the worst-affected households (merged with HTI-10/A/32011) – Withdrawn	FAO	10,000,000	-	-	-	0%	-	NOT SPECIFIED
HTI-10/A/31375/R/123	Emergency assistance to restore food production and ensure dietary diversification for urban and rural families through backyard gardens (merged with HTI-10/A/31897(R) - Withdrawn	FAO	4,500,000	-	-	-	0%	-	NOT SPECIFIED
HTI-10/A/31376/R/123	Emergency assistance for the immediate restoration of critical production and post-harvest agriculture infrastructures – Withdrawn	FAO	8,000,000	269,179	269,179	-	100%	-	NOT SPECIFIED
HTI-10/A/31711/R/5861	Rebuilding Agricultural Production Systems and Livelihoods for Haitian Farmers Victimized by Earthquake in Rural Léogâne	IRD	-	3,064,160	3,818,767	- 754,607	125%	-	NOT SPECIFIED
HTI-10/A/31728/R/5645	Monetary support to displaced families in rural communities of three departments (West, Northwest and Artibonite) and farming households that host them - Withdrawn	CARE International	-	4,200,000	4,200,000	-	100%	-	NOT SPECIFIED
HTI-10/A/31772/R/13753	Irrigation project in Jacquot	FRATERNITE NOTRE DAME	-	227,500	-	227,500	0%	-	HIGH
HTI-10/A/31865/R/6458	Emergency support to agricultural livelihoods of the worst-affected households in the urban, peri-urban and rural IDP host areas.	ACTED	-	746,080	746,080	-	100%	-	NOT SPECIFIED

Project code (click on hyperlinked project code to open full project details)	Title	Appealing agency	Original requirements (\$)	Revised requirements (\$)	Funding (\$)	Unmet requirements (\$)	% Covered	Uncommitted pledges (\$)	Priority
HTI-10/A/31897/R/5850	Support to agricultural production in the North West province of Haiti to increase the availability of food and promote income generation for producers in response to the migration of IDPs from the areas directly affected by the 12th January earthquake.	HWA	-	1,406,389	-	1,406,389	0%	-	NOT SPECIFIED
HTI-10/A/31894/R/13756	Emergency Relief Project for increasing food security and reinsuring the rescues from the earthquakes in South and South East of Haiti.	WCH	-	1,714,500	-	1,714,500	0%	-	NOT SPECIFIED
HTI-10/A/31895/R/13756	Emergency Program to support agricultural production in the North West of Haiti in response to the earthquake of January 12, 2010 and in response to urban migration to the countryside	WCH	-	1,194,000	-	1,194,000	0%	-	NOT SPECIFIED
HTI-10/A/31897/R/123	Food Security / Urban and peri-urban agriculture	FAO	-	5,086,000	1,884,624	3,201,376	37%	-	HIGH
HTI-10/A/31899/R/123	Coordination / Re-establishment of the agriculture and food security information system and network in Haiti	FAO	-	1,270,000	700,000	570,000	55%	-	MEDIUM
HTI-10/A/31900/R/123	Emergency response support to farming-communities hosting displaced persons due to the Haitian earthquake crisis - Withdrawn	FAO	-	-	-	-	0%	-	NOT SPECIFIED
HTI-10/A/31905/R/13731	Post-emergency action and support to agricultural production in the South East: fast recovery of productive capacities, creation of activities and economic exchanges, income generation and employment for families	AVSF	-	1,203,464	910,364	293,100	76%	-	NOT SPECIFIED
HTI-10/A/31907/R/13731	Support to network of dairies, Letagogo	AVSF	-	517,000	455,182	61,818	88%	-	NOT SPECIFIED
HTI-10/A/31909/R/6450	Increase agricultural production through improved seeds, farming practices for individuals returning to rural areas in the Southeast Dept.	ACDI/VOCA	-	3,280,000	3,878,712	- 598,712	118%	-	NOT SPECIFIED
HTI-10/A/31913/R/5186	Rehabilitation of rural infrastructures	ACF	-	1,282,000	-	1,282,000	0%	-	NOT SPECIFIED
HTI-10/A/31916/R/13763	Emergency Farm Input Distribution, Soil and Water Conservation and Reforestation-Léogâne/Grand Goâve/Fonds Verrettes/Cornillon	Floresta	-	896,162	-	896,162	0%	-	NOT SPECIFIED
HTI-10/A/31918/R/13767	Agricultural Revitalization Project in response to the earthquake and for the integration of displaced populations in the municipalities of Gressier, Léogâne, Petit and Grand Goâve	CEHPAPE	-	750,000	-	750,000	0%	-	NOT SPECIFIED
HTI-10/A/31919/R/8498	Strengthening Food Security Following the Influx of Displaced People to La Gonave and Saut d'Eau - WITHDRAWN	CW	-	-	-	-	0%	-	NOT SPECIFIED
HTI-10/A/31920/R/13768	Emergency program to support agricultural production in the South and in Grand'Anse in response to the earthquake of January 12, 2010 and for the population that has migrated to the cities in the countryside	IRD/MEBSH	-	745,000	-	745,000	0%	-	NOT SPECIFIED

Project code (click on hyperlinked project code to open full project details)	Title	Appealing agency	Original requirements (\$)	Revised requirements (\$)	Funding (\$)	Unmet requirements (\$)	% Covered	Uncommitted pledges (\$)	Priority
HTI-10/A/32006/R/13790	Support's projects and Assistance to 3000 families following the earthquake aftermath	FHED-INC	-	1,000,000	-	1,000,000	0%	-	HIGH
HTI-10/A/32011/R/123	Food Security / Support to rural food production	FAO	-	23,100,000	10,693,656	12,406,344	46%	-	HIGH
HTI-10/A/32028/R/123	Effective coordination and leadership of the Dominican Republic Agriculture Cluster support in response to the Haitian earthquake crisis - Withdrawn	FAO	-	-	-	-	0%	-	NOT SPECIFIED
HTI-10/A/32038/R/123	Food Security / Support to veterinary services in post-earthquake Haiti and provision of small livestock	FAO	-	1,997,000	-	1,997,000	0%	-	HIGH
HTI-10/A/32455/R/13763	Emergency Food Production and Job Creation through Soil Conservation and Reforestation-Léogâne/Grand Goave/Fonds Verrettes/Cornillon	Floresta	-	896,162	476,375	419,787	53%	-	NOT SPECIFIED
HTI-10/A/32539/R/6079	Agro-Enterprise Value Chains Development (SVCD) Initiative	SC	-	1,200,000	1,200,000	-	100%	-	NOT SPECIFIED
HTI-10/A/32543/R/6458	Support to agricultural livelihoods of IDPs and their host communities in rural areas of displacement.	ACTED	-	815,500	-	815,500	0%	-	NOT SPECIFIED
HTI-10/A/32635/R/5645	Livelihoods Support for Disaster-Affected Households in rural Léogâne, Gros Morne and Bassin Bleu	CARE International	-	650,000	-	650,000	0%	-	NOT SPECIFIED
HTI-10/A/32799/R/7455	Integrated Watershed Protection, Soil Conservation Project, Communes Gonaves, Anse Rouge, and Terre Neuve	AMURT (USA)	-	518,940	-	518,940	0%	-	NOT SPECIFIED
Sub total for AGRICULTURE			23,000,000	58,818,036	29,232,939	29,585,097	50%	-	
CAMP COORDINATION AND CAMP MANAGEMENT(CCCM)									
HTI-10/CSS/31454/R/298	Camp coordination support	IOM	250,000	6,142,500	7,114,517	- 972,017	116%	-	NOT SPECIFIED
HTI-10/CSS/31455/R/298	Camp management in temporary settlements and self settled camps (merged into project HTI-10/CSS/31812)	IOM	600,000	-	-	-	0%	-	NOT SPECIFIED
HTI-10/CSS/31458/R/298	Registration Process (merged into project HTI-10/CSS/31812)	IOM	200,000	-	-	-	0%	-	NOT SPECIFIED
HTI-10/CSS/31459/R/298	Displacement Tracking and Mapping (merged into project HTI-10/CSS/31812)	IOM	250,000	-	-	-	0%	-	NOT SPECIFIED
HTI-10/CSS/31699/R/298	Environmental Public Health in IDP Settlements in Priority Locations in Haiti	IOM	-	1,949,519	-	1,949,519	0%	-	NOT SPECIFIED
HTI-10/CSS/31810/R/6458	Camp Management in formal and spontaneous settlements	ACTED	-	1,600,000	302,726	1,297,274	19%	-	NOT SPECIFIED
HTI-10/CSS/31812/R/298	Camp management	IOM	-	47,500,000	24,820,753	22,679,247	52%	-	NOT SPECIFIED
HTI-10/CSS/31825/R/5767	Community Watch Camp Monitors - WITHDRAWN	UNOPS	-	-	-	-	0%	-	NOT SPECIFIED

Project code (click on hyperlinked project code to open full project details)	Title	Appealing agency	Original requirements (\$)	Revised requirements (\$)	Funding (\$)	Unmet requirements (\$)	% Covered	Uncommitted pledges (\$)	Priority
HTI-10/CSS/31854/R/5767	IDP Camp Technical Assessment, Survey and Planning Services - WITHDRAWN	UNOPS	-	11,532,710	1,532,710	10,000,000	13%	-	NOT SPECIFIED
HTI-10/CSS/31958/R/298	Emergency Preparedness and Disaster Risk Management for Post-Disaster Displacement in Haiti	IOM	-	7,000,000	-	7,000,000	0%	-	NOT SPECIFIED
HTI-10/CSS/31993/R/5660	Camp Management for IDPs in identified settlement	INTERSOS	-	600,600	600,600	-	100%	-	NOT SPECIFIED
HTI-10/CSS/31994/R/8498	Concern Consolidated Camp Management and Planning Project (ConCaMP)	CW	-	1,119,600	1,119,600	-	100%	-	NOT SPECIFIED
HTI-10/CSS/32725/R/5767	Hazard assessments and mitigations works for at risk camps	UNOPS	-	1,334,531	-	1,334,531	0%	-	NOT SPECIFIED
HTI-10/CSS/32750/R/8498	Concern Consolidated Camp Management and Planning Project	CW	-	-	-	-	0%	-	NOT SPECIFIED
Sub total for CAMP COORDINATION AND CAMP MANAGEMENT(CCCM)			1,300,000	78,779,460	35,490,906	43,288,554	45%	-	
COORDINATION AND SUPPORT SERVICES									
HTI-10/CSS/31378/R/119	Humanitarian Coordination and Advocacy for Haiti Response	OCHA	6,677,579	13,443,757	12,273,246	1,170,511	91%	1,147,773	HIGH
HTI-10/CSS/31574/R/776	Establishment and maintenance of the humanitarian corridor from Dominican Republic to Haiti	UNDP	-	101,543	101,543	-	100%	-	HIGH
HTI-10/CSS/31700/R/6791	Addressing urgent preparedness needs for based on regional early warnings, disaster risk reduction in relation to recurrent after-shocks and forthcoming Hurricane Season -- WITHDRAWN	UNISDR	-	-	-	-	0%	-	HIGH
HTI-10/CSS/31818/R/124	Coordination and support services for the Haiti earthquake affected areas and communities, including the Santo Domingo Humanitarian Hub in the Dominican Republic, and for UNICEF Global and Regional response.	UNICEF	-	7,600,000	7,600,000	-	100%	-	HIGH
HTI-10/CSS/31937/R/13094	Satellite derived geo-information to support relief efforts and early recovery - WITHDRAWN	UNOOSA	-	-	-	-	0%	-	MEDIUM
HTI-10/CSS/32041/R/776	Strengthen humanitarian advocacy regarding the support offered by the Dominican Republic to affected persons in Haiti - Withdrawn	UNDP	-	-	-	-	0%	-	NOT SPECIFIED
HTI-10/CSS/32042/R/13822	Support to UNRC/HC	UNDOCO	-	475,000	-	475,000	0%	-	HIGH
HTI-10/S/31464/R/5139	Reinforcement of MINUSTAH/DSS security structure to support EQ and recovery operations -- CLOSED	UNDSS	1,920,000	240,848	-	240,848	0%	-	HIGH
HTI-10/S/31465/R/5139	Provide psycho-social support, stress counselling - WITHDRAWN	UNDSS	1,120,000	-	-	-	0%	-	NOT SPECIFIED
HTI-10/S/31466/R/5139	Staff training - WITHDRAWN	UNDSS	500,000	-	-	-	0%	-	MEDIUM

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HTI-10/S/31467/R/5139	Reinforce the DO in the safe haven DR - Withdrawn	UNDSS	270,000	-	-	-	0%	-	NOT SPECIFIED
HTI-10/S/31531/R/5139	Awaiting allocation to specific projects	UNDSS	-	-	240,848	- 240,848	0%	-	NOT SPECIFIED
Sub total for COORDINATION AND SUPPORT SERVICES			10,487,579	21,861,148	20,215,637	1,645,511	92%	1,147,773	
EARLY RECOVERY									
HTI-10/CSS/31384/R/7475	Strengthening of Haitian geospatial information capacity	UNOSAT	58,850	191,530	-	191,530	0%	-	MEDIUM
HTI-10/ER/31382/R/776	Support to early recovery strategic planning and coordination	UNDP	1,000,000	334,000	-	334,000	0%	-	HIGH
HTI-10/ER/31387/R/776	Cash for Work for Early Recovery and Stabilization	UNDP	34,600,000	80,250,000	25,528,209	54,721,791	32%	-	HIGH
HTI-10/ER/31389/R/5104	Organization of labour-intensive emergency public works in support to humanitarian operations	ILO	2,380,000	2,380,000	589,510	1,790,490	25%	-	HIGH
HTI-10/ER/31391/7039	(WITHDRAWN) Emergency solid waste collection systems in affected urban areas	UN-HABITAT	2,000,000	-	-	-	0%	-	NOT SPECIFIED
HTI-10/ER/31393/R/7039	Technical Support to Government and Municipal Recovery Coordinators	UN-HABITAT	180,000	780,000	300,000	480,000	38%	-	HIGH
HTI-10/ER/31415/R/298	Cash for Work: Facilitating return and restoring livelihoods through rehabilitation, reconstruction and rubble Removal	IOM	8,000,000	5,000,000	1,832,431	3,167,569	37%	-	HIGH
HTI-10/ER/31460/R/5126	Co-ordinating Disaster Debris Management (WITHDRAWN)	UNEP	400,000	-	-	-	0%	-	NOT SPECIFIED
HTI-10/ER/31461/R/5126	Rapid multi-hazard and vulnerability assessment of Haiti (WITHDRAWN)	UNEP	300,000	-	-	-	0%	-	NOT SPECIFIED
HTI-10/ER/31462/R/5126	Post-Disaster Needs Assessment (Environment sector) (WITHDRAWN)	UNEP	200,000	-	-	-	0%	-	NOT SPECIFIED
HTI-10/ER/31463/R/5126	Sustainability of Recovery Programmes (withdrawn)	UNEP	100,000	-	-	-	0%	-	NOT SPECIFIED
HTI-10/ER/31636/R/5126	Technical Assistance for Integrating Environment into Relief and Early Recovery	UNEP	-	1,500,000	414,953	1,085,047	28%	-	HIGH
HTI-10/ER/31701/R/6079	Livelihoods Opportunities for Families in Haiti	SC	-	2,114,362	2,114,362	-	100%	-	MEDIUM
HTI-10/ER/31793/R/5103	Emergency Support to Haiti Media and IDP through Communication and Information projects	UNESCO	-	400,000	100,000	300,000	25%	-	HIGH
HTI-10/ER/31800/R/5103	Early Recovery of Haiti's Warning Services for Coastal Hazards	UNESCO	-	750,000	-	750,000	0%	-	MEDIUM
HTI-10/ER/31813/R/6458	Revival of livelihoods of earthquake-affected populations	ACTED	-	1,911,305	1,911,305	-	100%	-	MEDIUM

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HTI-10/ER/31855/R/576Z	Livelihood revitalization for earthquake-affected communities of Marissant and Carrefour Feuilles District - WITHDRAWN	UNOPS	-	-	-	-	0%	-	NOT SPECIFIED
HTI-10/ER/31864/R/576Z	Livelihood revitalization for earthquake-affected communities of Jacmel	UNOPS	-	3,131,082	-	3,131,082	0%	-	MEDIUM
HTI-10/ER/31866/R/576Z	Emergency Engineering Sub Cluster Coordination, Liaison and Emergency Works - WITHDRAWN	UNOPS	-	-	-	-	0%	-	NOT SPECIFIED
HTI-10/ER/31874/R/5126	Haiti Seismic Programme -- WITHDRAWN	UNEP	-	-	-	-	0%	-	MEDIUM
HTI-10/ER/31883/R/5186	Cash for Work and Cash Grant emergency operations - Haiti	ACF	-	9,680,000	5,867,138	3,812,862	61%	-	HIGH
HTI-10/ER/31884/R/5524	Rubble Clearance in Jacmel and surrounding areas	Plan	-	3,910,000	3,910,000	-	100%	-	MEDIUM
HTI-10/ER/31885/R/8502	Early Recovery project	WVI	-	3,646,439	3,646,439	-	100%	-	HIGH
HTI-10/ER/31886/R/13755	Services Communautaires Integres : Early Economic Recovery for IDPs and Host Families	Hopital Albert Schweitzer	-	3,000,000	749,518	2,250,482	25%	-	HIGH
HTI-10/ER/31924/R/776	Protection of lives through proper preparation for the hurricane season	UNDP	-	4,500,000	-	4,500,000	0%	-	HIGH
HTI-10/ER/31926/R/776	Protecting livelihoods of vulnerable and marginalized people by providing micro-grants - WITHDRAWN	UNDP	-	594,473	594,473	-	100%	-	NOT SPECIFIED
HTI-10/ER/31927/R/776	Disaster and Debris Waste Management	UNDP	-	1,070,000	-	1,070,000	0%	-	HIGH
HTI-10/ER/31928/R/8313	Meteorological and Hydrological Early Warning Services to Support Emergency Contingency Planning for Safety of Population and Early Recovery Activities During the 2010 Rainy and Hurricane seasons in Haiti (March December 2010)	WMO	-	890,000	-	890,000	0%	-	MEDIUM
HTI-10/ER/31947/R/776	Emergency area-based response to the livelihoods, environmental and local governance impact of the Haitian earthquake in border areas	UNDP	-	1,933,333	-	1,933,333	0%	-	HIGH
HTI-10/ER/32453/R/13916	Amélioration de la situation socioéconomique post séisme pour 5888 familles habitant la commune de Cité Soleil.	Entrepreneurs du Monde	-	741,910	741,910	-	100%	-	HIGH
HTI-10/ER/32513/R/5179	Better Fuel: An emergency market approach to rapid relief and a long-term clean cooking solution in Haiti	IRC	-	1,724,060	1,724,060	-	100%	-	MEDIUM
HTI-10/ER/32542/R/6458	Support for a rapid and sustainable recreation of livelihoods for affected families, both displaced and host populations, with an emphasis on youth and women headed households, through the revival of agricultural, construction and handicraft activities.	ACTED	-	1,030,000	-	1,030,000	0%	-	HIGH
HTI-10/ER/32628/R/13944	Displaced People Resettlement and Reintegration in Central Region	AAI	-	3,137,582	-	3,137,582	0%	-	MEDIUM

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HTI-10/ER/32667/R/5349	To improve the living conditions of earthquake affected population in Haiti (Grand Goave municipality and rural sections)	HI	-	5,982,663	-	5,982,663	0%	-	HIGH
HTI-10/ER/32741/R/8058	Rubble Clearance	IRW	-	123,061	-	123,061	0%	-	HIGH
Sub total for EARLY RECOVERY			49,218,850	140,705,800	50,024,308	90,681,492	36%	-	
EDUCATION									
HTI-10/E/31399/R/124	Education Sector Coordination and needs assessment --- merged with HTI-10/E/31405/R	UNICEF	125,000	-	-	-	0%	-	HIGH
HTI-10/E/31399/R/6079	Education Sector Coordination and needs assessment --- merged with HTI-10/E/31405/R	SC	125,000	-	-	-	0%	-	HIGH
HTI-10/E/31400/R/5103	Emergency education support to secondary and higher education and education authorities	UNESCO	900,000	2,900,000	1,509,000	1,391,000	52%	-	LOW
HTI-10/E/31401/R/5103	Emergency Support to National Education Authorities - merged with HTI-10/E/31400/R	UNESCO	600,000	-	-	-	0%	-	NOT SPECIFIED
HTI-10/E/31402/R/5103	Psycho-social Support through Teacher Training - merged with HTI-10/E/31400/R	UNESCO	400,000	-	-	-	0%	-	NOT SPECIFIED
HTI-10/E/31403/R/6079	Psycho-social Support to Primary School Children through Teacher Training with Primary School Teachers ---- merged with project HTI-10/E/31405/R	SC	500,000	-	-	-	0%	-	NOT SPECIFIED
HTI-10/E/31404/R/6079	Temporary schooling in safe, protective environment, for 80,000 earthquake-affected children -- merged with project HTI-10/E/31405/R	SC	350,000	-	-	-	0%	-	NOT SPECIFIED
HTI-10/E/31405/R/6079	Education for Children in Haiti	SC	600,000	6,320,000	6,320,000	-	100%	-	MEDIUM
HTI-10/E/31406/R/124	Restoring quality education and ECD services in Haiti	UNICEF	7,000,000	69,278,000	69,278,004	- 4	100%	-	HIGH
HTI-10/E/31407/R/5524	Emergency Education support to Pre-school and Primary School Children	Plan	500,000	2,000,000	2,033,976	- 33,976	102%	-	HIGH
HTI-10/E/31712/R/8356	Supporting Haiti Earthquake affected in Educational field in the border area of Dominican Republic	UCODEP	-	252,000	-	252,000	0%	-	MEDIUM
HTI-10/E/31734/R/5390	Targeted Emergency Education Support and Safe Learning Spaces for Affected schools in Gressier, Grand Goave and Petit Goave	Finnhurchaid	-	1,650,000	937,951	712,049	57%	-	HIGH
HTI-10/E/31742/R/13754	Non-Public School Demolition, Rubble Removal and Rapid Repair in Haiti	OI	-	299,513	-	299,513	0%	-	MEDIUM
HTI-10/E/31751/R/6971	Restoring and Improving Education for Earthquake-Affected Communities - WITHDRAWN	RI	-	-	25,000	- 25,000	0%	-	NOT SPECIFIED

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HTI-10/E/31769/R/124	Quality education and ECD services for earthquake affected children	UNICEF	-	642,000	642,000	-	100%	-	HIGH
HTI-10/E/31773/R/8502	Psycho-educational post-disaster recovery for children and adolescents through the promotion of returning to school and school-community capacity building for child protection education in risk management.	WVI	-	72,225	72,225	-	100%	-	HIGH
HTI-10/E/31774/R/13753	Repair and reconstruction of kindergarten, primary, and secondary schools in Jacquot - WITHDRAWN	FRATERNITE NOTRE DAME	-	-	-	-	0%	-	NOT SPECIFIED
HTI-10/E/31784/R/8498	Support to basic education post-earthquake - WITHDRAWN	CW	-	-	-	-	0%	-	NOT SPECIFIED
HTI-10/E/31799/R/621Z	WITHDRAWN: Provide access to pre- and primary school children in planned settlements in PaP	JRS	-	-	-	-	0%	-	NOT SPECIFIED
HTI-10/E/31929/R/7224	Attention to inequalities by ethnic and racial issues, immigration and gender among other related forms of intolerance and exclusion	Aide et Action	-	459,385	-	459,385	0%	-	NOT SPECIFIED
HTI-10/E/31935/R/8502	Early Childhood Care and Education (ECCE) in Emergencies - WITHDRAWN	WVI	-	700,000	700,000	-	100%	-	NOT SPECIFIED
HTI-10/E/31957/R/6079	Emergency Educational Response in the Dominican Border	SC	-	557,992	557,992	-	100%	-	NOT SPECIFIED
HTI-10/E/32490/R/8436	Facilitating Return to School Through Provision of Transitional Learning Spaces in Jacmel and Surrounding Areas	WCC	-	423,995	-	423,995	0%	-	HIGH
HTI-10/E/32504/R/13754	Community-Based Psycho-Social Support in Non-Public Schools in Haiti	OI	-	70,875	-	70,875	0%	-	MEDIUM
HTI-10/E/32519/R/6749	Supporting the social and professional integration of youth at risk	RET	-	1,110,887	-	1,110,887	0%	-	HIGH
HTI-10/E/32527/R/5128	Support to creating a dignified and safe environment in schools affected by the earthquake in Petit Goâve and Grand Goâve (Departement de l'Ouest)	CESVI	-	800,000	-	800,000	0%	-	HIGH
Sub total for EDUCATION			11,100,000	87,536,872	82,076,148	5,460,724	94%	-	
EMERGENCY TELECOMMUNICATIONS									
HTI-10/CSS/31421/R/561	Common Information and Communications Technology (ICT) infrastructure and support and Emergency Telecommunications Cluster support to the humanitarian community's response to the Haiti earthquakes.	WFP	782,460	4,433,765	782,460	3,651,305	18%	-	HIGH
Sub total for EMERGENCY TELECOMMUNICATIONS			782,460	4,433,765	782,460	3,651,305	18%	-	

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FOOD AID									
HTI-10/F/31422/R/561	Food Assistance to Earthquake-Affected Populations in Haiti	WFP	246,039,060	475,288,804	248,879,146	226,409,658	52%	-	HIGH
HTI-10/F/31698/R/6079	Food Assistance for Children and Families in Haiti	SC	-	210,851	210,000	851	100%	-	NOT SPECIFIED
HTI-10/F/31752/R/8502	Provision of emergency life saving food rations to 350,000 disaster survivors and vulnerable household in Haiti	WVI	-	1,420,160	1,520,160	- 100,000	107%	-	NOT SPECIFIED
HTI-10/F/31785/R/5186	Blanket and targeted food and fresh food voucher distribution - Haiti	ACF	-	5,411,000	2,857,080	2,553,920	53%	-	NOT SPECIFIED
HTI-10/F/31823/R/6458	Food assistance for most vulnerable population affected by the earthquake	ACTED	-	3,552,400	222,384	3,330,016	6%	-	HIGH
HTI-10/F/31873/R/6116	Provide life-saving food for vulnerable Haitians and support essential rehabilitation and stabilization measures	Samaritan's Purse	-	500,000	500,000	-	100%	-	NOT SPECIFIED
HTI-10/F/32321/R/561	Food Cluster Strengthening in Response to Haiti Earthquake	WFP	-	84,327	78,870	5,457	94%	-	NOT SPECIFIED
HTI-10/F/32629/R/6116	Regional Food Training Centre	Samaritan's Purse	-	275,000	275,000	-	100%	-	MEDIUM
Sub total for FOOD AID			246,039,060	486,742,542	254,542,640	232,199,902	52%	-	
HEALTH									
HTI-10/H/31365/122	Awaiting allocation to specific project/sector	WHO	-	-	8,771,911	-8,771,911	0%	-	NOT SPECIFIED
HTI-10/H/31423/R/122	Availability of adequate drugs and medical supplies - Withdrawn	WHO	3,200,000	-	6,178,272	-6,178,272	0%	-	NOT SPECIFIED
HTI-10/H/31424/R/122	Surveillance, preparedness and response to outbreaks of communicable diseases in temporary and permanent health facilities of affected areas	WHO	1,300,000	2,000,000	875,863	1,124,137	44%	450,000	HIGH
HTI-10/H/31425/R/122	Re-activation of basic health services	WHO	3,500,000	20,784,000	7,050,574	13,733,426	34%	-	HIGH
HTI-10/H/31426/R/122	Coordination, assessment, disaster risk reduction, and monitoring and evaluation	WHO	1,000,000	3,100,000	2,113,189	986,811	68%	-	MEDIUM
HTI-10/H/31428/R/124	Essential health services for women and children	UNICEF	8,500,000	19,000,000	19,000,000	-	100%	-	HIGH
HTI-10/H/31435/R/6079	Health for Children and Families in Haiti	SC	1,000,000	6,212,520	6,212,520	-	100%	-	MEDIUM
HTI-10/H/31436/R/6079	Reproductive Health Services to communities affected by earthquake --- merged with project HTI-10/H/31435/R	SC	500,000	-	-	-	0%	-	NOT SPECIFIED
HTI-10/H/31438/R/298	Emergency psycho-social assistance	IOM	950,000	1,600,001	1,050,879	549,122	66%	-	MEDIUM

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HTI-10/H/31439/R/298	Emergency Health Referrals, Assisted Returns and Accompanied Transitions for Patients and Vulnerable Populations in Priority Locations in Haiti	IOM	1,500,000	1,500,000	700,000	800,000	47%	-	HIGH
HTI-10/H/31440/R/8502	Primary Health Care and Outbreak Prevention	WVI	2,000,000	3,542,967	3,542,967	-	100%	-	MEDIUM
HTI-10/H/31441/R/8502	Outbreak prevention (project merged with HTI-10/H/31440/R)	WVI	800,000	-	-	-	0%	-	NOT SPECIFIED
HTI-10/H/31442/R/8502	Minimum Initial Service Package (project merged with HTI-10/H/31440/R)	WVI	1,000,000	-	-	-	0%	-	NOT SPECIFIED
HTI-10/H/31443/R/5160	Health Care for Earthquake-Affected Populations in Haiti	IMC	2,200,000	3,700,000	1,673,866	2,026,134	45%	-	MEDIUM
HTI-10/H/31444/5179	Provision of emergency supplies	IRC	250,000	250,000	250,000	-	100%	-	NOT SPECIFIED
HTI-10/H/31445/R/5109	Rebuilding the HIV response in Haiti through evidence based gathering and strengthening networks of PLHIV / Ensure support and access to HIV treatment, care and prevention including PMTCT to displaced populations and PLHIV affected by the earthquake in the border region of Haiti & the Dominican Republic.	UNAIDS	500,000	593,250	-	593,250	0%	-	HIGH
HTI-10/H/31469/R/122	Environmental health post-earthquake	WHO	1,000,000	3,140,000	521,685	2,618,315	17%	-	HIGH
HTI-10/H/31470/R/5195	Support to public health and health care services	MERLIN	500,000	8,287,200	8,287,200	-	100%	-	HIGH
HTI-10/H/31471/R/13719	Emergency health response in CHOSCAL hospital and communities in Cité Soleil	MDM Greece	400,000	400,000	-	400,000	0%	-	MEDIUM
HTI-10/H/31472/R/1171	Centre Sourire / Providing girls- and women- friendly health services (obstetric, STI, care of GBV /sexual violence, family planning) to earthquake affected populations	UNFPA	500,000	5,236,262	1,296,400	3,939,862	25%	-	HIGH
HTI-10/H/31473/R/1171	Providing Emergency Reproductive Health Kits to Earthquake Affected Populations	UNFPA	1,000,000	1,000,000	693,651	306,349	69%	-	MEDIUM
HTI-10/H/31474/R/1171	Assessing Reproductive Health Needs of vulnerable persons/groups	UNFPA	300,000	300,000	-	300,000	0%	-	MEDIUM
HTI-10/H/31484/R/5349	Emergency intervention for life saving health support to injured people in Haiti affected by the earthquake	HI	2,000,000	3,822,000	4,213,974	- 391,974	110%	-	MEDIUM
HTI-10/H/31571/R/5109	Prevention of occupational HIV, mother to child transmission, blood safety and continue treatment for people living with HIV	UNAIDS	-	24,331	24,331	-	100%	-	HIGH
HTI-10/H/31573/R/1171	Reproductive and mental health services for Haitian population displaced on the Dominican Republic's border area	UNFPA	-	418,370	303,666	114,704	73%	-	MEDIUM
HTI-10/H/31575/R/122	Dominican Republic public health response to the population affected by the Haiti earthquake	WHO	-	4,080,001	716,900	3,363,101	18%	-	MEDIUM

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HTI-10/H/31623/R/13719	Provision of Primary Health Care services to earthquake-affected population in Haiti	MDM Greece	-	500,000	-	500,000	0%	-	MEDIUM
HTI-10/H/31628/R/13723	Strengthening reproductive health services and HIV prevention services in earthquake affected areas	MARCH	-	480,080	-	480,080	0%	-	MEDIUM
HTI-10/H/31629/R/5645	Mainstream GBV prevention and response into WASH, Health, Shelter and NFI interventions - Withdrawn	CARE International	-	-	-	-	0%	-	NOT SPECIFIED
HTI-10/H/31750/R/5160	Improving Institutional Capacity to Address Psycho-social and Mental Health Needs in Haiti	IMC	-	997,992	1,775,698	- 777,706	178%	-	MEDIUM
HTI-10/H/31762/R/5349	Coordinated Information Management for identification, Service Provision and Referral of persons with injuries and other vulnerable persons	HI	-	160,000	-	160,000	0%	-	HIGH
HTI-10/H/31770/R/13753	Primary health care in Jacquot	FRATERNITE NOTRE DAME	-	181,000	-	181,000	0%	-	LOW
HTI-10/H/31868/R/122	Supporting the delivery of key interventions and building capacity at health facility and community level to address the essential health and nutrition needs for women and children DR communities affected by the earthquake in Haiti	UNICEF	-	2,251,500	2,251,500	-	100%	-	MEDIUM
HTI-10/H/31870/R/122	The unify & integrate supply system for essential medicines	WHO	-	2,600,000	-	2,600,000	0%	-	HIGH
HTI-10/H/31871/R/122	Ensure Availability of Post-Earthquake Rehabilitation	WHO	-	5,150,000	625,921	4,524,079	12%	-	MEDIUM
HTI-10/H/31872/R/122	Control Vaccine-Preventable Diseases in earthquake-affected areas	WHO	-	2,557,850	100,000	2,457,850	4%	-	HIGH
HTI-10/H/31872/R/122	Support to the Ministry of Health (MoH) in emergency and transition phase	WHO	-	3,600,000	437,537	3,162,463	12%	-	HIGH
HTI-10/H/31901/R/5850	Supporting health care provision through the establishment of mobile clinics and medical centres in some of the IDP catchment zones in the Port-au-Prince area	HWA	-	1,128,000	-	1,128,000	0%	-	MEDIUM
HTI-10/H/31906/R/13755	Protect the health of residents and internally displaced persons in the Lower Artibonite Valley	Hopital Albert Schweitzer	-	390,000	10,000	380,000	3%	-	HIGH
HTI-10/H/31910/R/13758	Protect the health of residents directly impacted by the earthquake	Hopital Sainte Croix	-	575,000	-	575,000	0%	-	MEDIUM
HTI-10/H/31911/R/13318	Re-activate Basic Health Care Services in Primary Health Care	PIH	-	10,000,000	11,468,147	- 1,468,147	115%	-	MEDIUM
HTI-10/H/31942/R/5179	Restoring basic health services in Port au Prince and surrounding areas	IRC	-	451,000	451,000	-	100%	-	MEDIUM
HTI-10/H/32027/R/122	Re-activation of Specialized Health Care in the Metropolitan Area	WHO	-	2,300,000	-	2,300,000	0%	-	HIGH

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HTI-10/H/32030/R/13813	The Harvard Humanitarian Initiative-Love A Child Disaster Recovery Center Comprehensive Rehabilitation and Reintegration Program in Fond Parisien, Haiti a multi-national and inter-agency collaboration and partnership for health, child protection, reproductive health and shelter. (WITHDRAWN)	HHI	-	-	-	-	0%	-	NOT SPECIFIED
HTI-10/H/32100/R/13789	Enhancing Local Health Resources in Haiti	WCC	-	94,133	-	94,133	0%	-	MEDIUM
HTI-10/H/32133/R/5586	Health and assistance for Haitians affected by the earthquake	ARC	-	743,141	1,172,180	-429,039	158%	-	MEDIUM
HTI-10/H/32147/R/8768	Re-establishing access to curative and preventative health services in Petit and Grand Goâve	MDM Suisse	-	652,750	652,750	-	100%	-	HIGH
HTI-10/H/32426/R/122	CERF rapid response grant to WHO to be allocated to specific NGO health projects	WHO	-	-	-	-	0%	-	NOT SPECIFIED
HTI-10/H/32478/R/876Z	Mobile Clinics for Cité Soleil_MDM Canada_Phase II	MDM Canada	-	1,183,000	-	1,183,000	0%	-	HIGH
HTI-10/H/32500/R/13790	Continue to provide free Primary Health Care to families in Carrefour, Solino and in the North East Heights area.	FHED-INC	-	780,000	-	780,000	0%	-	MEDIUM
HTI-10/H/32560/R/8662	Vector control and hygiene & health promotion for the affected populations in Port-au-Prince, Léogâne, Jacmel, Grand and Petit Goâve, Gressier and Jeremie	MI	-	671,468	-	671,468	0%	-	MEDIUM
HTI-10/H/32631/R/13934	Emergency Medical Assistance to the Underserved Camps (EMA-UC)	Haiti Participative	-	258,563	-	258,563	0%	-	MEDIUM
HTI-10/H/32669/R/5349	Coordination and access to services for injured and disable people affected by the earthquake of the 12th of January in Haiti	HI	-	454,289	-	454,289	0%	-	MEDIUM
HTI-10/H/32671/R/5349	Emergency intervention for life saving health support to injured people in Haiti affected by the earthquake (Port-au-Prince, Petit Goâve, Gonaïves)	HI	-	4,500,000	-	4,500,000	0%	-	HIGH
HTI-10/H/32680/R/7352	Provide Primary Health Care to the Earthquake Affected Populations with Emphasis on Women and Children	World Hope International	-	796,000	-	796,000	0%	-	MEDIUM
HTI-10/H/32686/R/5349	Proposal for provision of appropriate and quality services for the people in need of rehabilitation care in Haiti, both on an immediate and on a sustainable term	HI	-	3,000,000	-	3,000,000	0%	-	MEDIUM
HTI-10/H/32687/R/8772	Provision of free and quality primary health care, psychosocial support services for the earthquake affected population of Port au Prince and a medical, legal and psychological follow-up for the victims of violence.	MDM France	-	4,661,965	-	4,661,965	0%	-	HIGH
HTI-10/H/32716/R/5131	Primary Health Services and Health Promotion in Displaced Camps	AMI	-	211,546	-	211,546	0%	-	MEDIUM
Sub total for HEALTH			33,900,000	140,320,179	92,422,581	47,897,598	66%	450,000	

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LOGISTICS									
HTI-10/CSS/31447/R/561	Logistics Augmentation and Coordination for Relief Operations in Response to the Earthquake in Haiti	WFP	21,457,301	60,681,355	37,892,184	22,789,171	62%	-	HIGH
HTI-10/CSS/31448/R/561	Provision of Humanitarian Air Services in response to the Earthquake in Haiti	WFP	11,570,404	23,048,088	17,269,434	5,778,654	75%	-	MEDIUM
HTI-10/CSS/31449/R/5349	Support to organizations intervening in the vicinity of Jacmel (storage, transport), in Haiti after the earthquake of January 12th 2010 (Withdrawn)	HI	500,000	-	-	-	0%	-	NOT SPECIFIED
HTI-10/CSS/32776/R/13139	Capacity-Building of Humanitarian Personnel – Logistics	RedR UK	-	-	-	-	0%	-	MEDIUM
HTI-10/CSS/32776/R/13143	Capacity-Building of Humanitarian Personnel – Logistics	Bioforce	-	414,433	-	414,433	0%	-	MEDIUM
Sub total for LOGISTICS			33,527,705	84,143,876	55,161,618	28,982,258	66%	-	
NUTRITION									
HTI-10/H/31437/R/6079	Emergency nutrition surveillance and therapeutic care to children under 5yr of age --- merged with project HTI-10/H/31708/R	SC	400,000	-	-	-	0%	-	NOT SPECIFIED
HTI-10/H/31450/R/124	Nutrition programme support to the Earthquake Response in Haiti	UNICEF	48,000,000	40,400,000	40,400,000	-	100%	-	LOW
HTI-10/H/31673/R/5768	Nutritional support for children under five and pregnant and lactating women at-risk in temporary settlements in Port-au-Prince	AVSI	-	1,605,000	628,248	976,752	39%	-	LOW
HTI-10/H/31708/R/6079	Emergency Nutrition for Children in Haiti	SC	-	1,861,822	1,861,822	-	100%	-	MEDIUM
HTI-10/H/31754/R/5160	Implementing Early Childhood Development Programs to Improve the Effectiveness of Nutrition Interventions in Haiti - Withdrawn	IMC	-	58,826	58,826	-	100%	-	NOT SPECIFIED
HTI-10/H/31756/R/5160	Reduction and Prevention of Malnutrition among Earthquake-Affected Children in Haiti - Withdrawn	IMC	-	1,016,241	1,016,241	-	100%	-	MEDIUM
HTI-10/H/31803/R/5768	Nutritional support for children under five in the South Department	AVSI	-	404,460	-	404,460	0%	-	NOT SPECIFIED
HTI-10/H/31960/R/5186	Emergency earthquake response – Nutrition and Protection	ACF	-	1,615,000	703,000	912,000	44%	-	LOW
HTI-10/H/31972/R/6502	Rescue and recovery of children under five affected by malnutrition and prevention of malnutrition through education and support to mothers, and pregnant and lactating women.	WVI	-	750,000	750,000	-	100%	-	NOT SPECIFIED

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HTI-10/H/31973/R/124	Nutrition Programme Response and Coordination in Dominican Republic in support to the Earthquake Response in Haiti - "Withdrawn"	UNICEF	-	-	-	-	0%	-	NOT SPECIFIED
HTI-10/H/31975/R/122	Strengthen food and nutrition services for the 10 hospitals located along the Haitian/Dominican border and inside the Dominican border that have been caring for Haitian patients	WHO	-	371,000	270,141	100,859	73%	-	HIGH
HTI-10/H/32013/R/124	Nutrition Cluster Coordination support to the Earthquake Response in Haiti - "Withdrawn"	UNICEF	-	-	-	-	0%	-	NOT SPECIFIED
HTI-10/H/32320/R/5186	Technical support to the Nutrition Cluster	ACF	-	26,643	26,643	-	100%	-	MEDIUM
Sub total for NUTRITION			48,400,000	48,108,992	45,714,921	2,394,071	95%	-	
PROTECTION									
HTI-10/P-HR-RL/31377/R/120	OHCHR/UNHCR Earthquake Intervention Haiti	UNHCR	-	470,406	193,364	277,042	41%	-	HIGH
HTI-10/P-HR-RL/31377/R/5025	OHCHR/UNHCR Earthquake Intervention Haiti	OHCHR	300,000	670,000	670,000	-	100%	-	HIGH
HTI-10/P-HR-RL/31379/R/5025	Support to national protection actors and local NGOs	OHCHR	200,000	498,000	960,000	- 462,000	193%	-	HIGH
HTI-10/P-HR-RL/31380/R/124	Child Protection, GBV and MHPS coordination	UNICEF	750,000	1,500,000	1,500,000	-	100%	-	HIGH
HTI-10/P-HR-RL/31383/R/124	Prevention and response to family separation, trafficking, smuggling, illegal movement	UNICEF	2,000,000	9,500,000	9,500,000	-	100%	-	HIGH
HTI-10/P-HR-RL/31385/R/124	Community-based child protection, psycho-social support and prevention and response to GBV	UNICEF	4,500,000	11,000,000	11,000,000	-	100%	-	HIGH
HTI-10/P-HR-RL/31386/R/124	Building Back Better for Children: Support to government structures and systems for improved child protection	UNICEF	1,000,000	4,900,000	4,900,000	-	100%	-	HIGH
HTI-10/P-HR-RL/31388/R/124	Psycho-social support and GBV - Withdrawn	UNICEF	1,500,000	-	-	-	0%	-	NOT SPECIFIED
HTI-10/P-HR-RL/31390/R/5349	(WITHDRAWN) - Protecting the Vulnerable Persons – Monitoring, Referral and Response to Key Protection Concerns	HI	350,000	-	-	-	0%	-	NOT SPECIFIED
HTI-10/P-HR-RL/31392/R/1171	Provision of psycho-social support to affected populations at community level, with a special focus on women, youth and the elderly	UNFPA	500,000	500,000	-	500,000	0%	-	HIGH
HTI-10/P-HR-RL/31394/R/1171	Protection of the rights of affected people from marginalized and especially vulnerable groups, such as people living with HIV, people with disabilities, young people and elderly people	UNFPA	400,000	1,231,710	115,350	1,116,360	9%	-	HIGH
HTI-10/P-HR-RL/31395/R/1171	Prevention and response to GBV	UNFPA	550,000	710,500	628,213	82,287	88%	-	HIGH

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HTI-10/P-HR-RL/31398/R/1171	Protection of Women's Dignity to Prevent Gender-Based Violence	UNFPA	1,000,000	3,210,000	300,619	2,909,381	9%	-	MEDIUM
HTI-10/P-HR-RL/31451/R/5762	Emergency Protection, Psycho-social and Nutrition Assistance, Léogâne-Petit Goâve-Grand Goâve-Les Cayes and surroundings	Terre Hommes	800,000	1,600,000	1,039,608	560,392	65%	-	LOW
HTI-10/P-HR-RL/31452/R/1171	Ensuring GBV coordination in the aftermath of the earthquake	UNFPA	300,000	321,000	342,662	- 21,662	107%	-	HIGH
HTI-10/P-HR-RL/31477/R/5025	Community Information Centres - WITHDRAWN	OHCHR	30,000	-	-	-	0%	-	NOT SPECIFIED
HTI-10/P-HR-RL/31485/R/5109	Protection of People Living with HIV (PLHIV)	UNAIDS	100,000	100,000	-	100,000	0%	-	LOW
HTI-10/P-HR-RL/31486/R/5105	Security for Women and their Families: Ensuring a Gender-Responsive Humanitarian and Early Recovery Response	UNIFEM	100,000	1,700,000	199,020	1,500,980	12%	-	MEDIUM
HTI-10/P-HR-RL/31487/R/5524	Emergency response in Child Protection in Croix des Bouquets and Jacmel following the January 2010 devastating earthquake	Plan	500,000	1,000,000	1,351,925	- 351,925	135%	-	HIGH
HTI-10/P-HR-RL/31488/R/6079	Child protection, GBV and MHPSS coordination --- merged into HTI-10/P-HR-RL/31490/R	SC	100,000	-	-	-	0%	-	NOT SPECIFIED
HTI-10/P-HR-RL/31489/R/6079	Prevention and response to family separation --- merged into HTI-10/P-HR-RL/31490/R	SC	300,000	-	-	-	0%	-	NOT SPECIFIED
HTI-10/P-HR-RL/31490/R/6079	Protection for Children in Haiti	SC	350,000	2,702,395	2,734,332	- 31,937	101%	-	HIGH
HTI-10/P-HR-RL/31491/R/6079	Support to government structures and institutions responsible for key aspects of child protection --- merged into HTI-10/P-HR-RL/31490/R	SC	300,000	-	-	-	0%	-	NOT SPECIFIED
HTI-10/P-HR-RL/31492/R/6079	Psycho-social support --- merged into HTI-10/P-HR-RL/31490/R	SC	300,000	-	-	-	0%	-	NOT SPECIFIED
HTI-10/P-HR-RL/31572/R/1171	Prevention of Gender-based Violence and Response to Women Needs	UNFPA	-	358,985	358,985	-	100%	-	HIGH
HTI-10/P-HR-RL/31617/R/13721	Building Capacity of Haitian Media to Raise Awareness of Child Protection Issues.	CECOSIDA	-	255,000	-	255,000	0%	-	MEDIUM
HTI-10/P-HR-RL/31640/R/5768	Emergency protection interventions for vulnerable minors in Port-au-Prince	AVSI	-	1,540,800	-	1,540,800	0%	-	HIGH
HTI-10/P-HR-RL/31702/R/120	Protection and assistance to vulnerable groups within the Haitian displaced population in the Dominican Republic and support to host communities along the 20 km border area	UNHCR	-	2,024,550	832,207	1,192,343	41%	-	NOT SPECIFIED
HTI-10/P-HR-RL/31715/R/13757	Psycho-Social Service Delivery to Communities and Orphanages - Withdrawn	Heartland	-	-	-	-	0%	-	NOT SPECIFIED

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HTI-10/P-HR-RL/31724/R/5768	Emergency Child Protection interventions in the South Department	AVSI	-	654,840	-	654,840	0%	-	HIGH
HTI-10/P-HR-RL/31748/R/5160	Improved Caregiving Interventions for Orphans, Separated, and Unaccompanied Children in Residential Centers	IMC	-	857,295	1,460,634	- 603,339	170%	-	HIGH
HTI-10/P-HR-RL/31763/R/5349	Protecting the Vulnerable – Monitoring, Referral and Response to Key Protection Concerns	HI	-	350,000	-	350,000	0%	-	HIGH
HTI-10/P-HR-RL/31767/R/5524	Prevention of Gender Based Violence at community level in the North East and South East with a focus on Jacmel and Croix des Bouquets	Plan	-	700,000	700,000	-	100%	-	MEDIUM
HTI-10/P-HR-RL/31771/R/5179	Monitoring, Reporting and Responding to Human Rights Violations and Protection Concerns in earthquake-affected areas in Haiti	IRC	-	300,000	300,000	-	100%	-	NOT SPECIFIED
HTI-10/P-HR-RL/31778/R/1171	Dominican Republic, Protecting women, youth and people with special needs impacted by the Haiti earthquake - WITHDRAWN	UNFPA	-	-	-	-	0%	-	NOT SPECIFIED
HTI-10/P-HR-RL/31779/R/124	Protection of Children affected by the Haiti's earthquake in DR: Prevention and response to family separation, child trafficking, smuggling, exploitation, illegal movement and Child Protection coordination	UNICEF	-	1,070,000	1,070,000	-	100%	-	HIGH
HTI-10/P-HR-RL/31780/R/5179	Protection and Legal Advice Centre in the "Commune de Port au Prince", Haiti	IRC	-	350,000	350,000	-	100%	-	HIGH
HTI-10/P-HR-RL/31781/R/13757	Child Protection and Trafficking Prevention at Malpasse, Belladere, and Ounamanthe Border Crossings - Withdrawn	Heartland	-	-	-	-	0%	-	NOT SPECIFIED
HTI-10/P-HR-RL/31783/R/298	Support for survivors of GBV including victims of trafficking and sexual exploitation	IOM	-	350,000	-	350,000	0%	-	HIGH
HTI-10/P-HR-RL/31786/R/5816	Psycho-social support to children affected by the earthquake in Delmas and Croix-des-Bouquets districts of Port-au-Prince	CISP	-	183,130	-	183,130	0%	-	MEDIUM
HTI-10/P-HR-RL/31788/R/6993	Psycho-Social Resiliency Project	ADRA-Haiti	-	478,100	478,000	100	100%	-	HIGH
HTI-10/P-HR-RL/31790/R/5162	Psycho-Social Support for Children Affected by the Haiti Earthquake	Mercy Corps	-	692,688	692,688	-	100%	-	MEDIUM
HTI-10/P-HR-RL/31802/R/13751	PlayCare Sites Deployment for Child Protection and Psycho-Social Support	Project K.I.D.	-	1,298,325	-	1,298,325	0%	-	MEDIUM
HTI-10/P-HR-RL/31804/R/13751	Comprehensive Maternal Child Health and Respite Centers - WITHDRAWN	Project K.I.D.	-	-	-	-	0%	-	NOT SPECIFIED
HTI-10/P-HR-RL/31805/R/13751	Assembly, Shipment, and Distribution of Child Friendly Spaces, Psycho-social Support Kit for Haiti	Project K.I.D.	-	868,875	-	868,875	0%	-	MEDIUM

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HTI-10/P-HR-RL/31809/R/13751	Comprehensive (Medical, Psycho-social, Educational) Pediatric Amputee Support Clinic	Project K.I.D.	-	892,625	-	892,625	0%	-	LOW
HTI-10/P-HR-RL/31809/R/13751	Respite For Disaster Care Workers - WITHDRAWN	Project K.I.D.	-	-	-	-	0%	-	NOT SPECIFIED
HTI-10/P-HR-RL/31814/R/5586	Improving livelihood opportunities for vulnerable women	ARC	-	300,000	125,000	175,000	42%	-	MEDIUM
HTI-10/P-HR-RL/31921/R/776	Protection Support for Haitian displaced population in Dominican Republic	UNDP	-	291,000	-	291,000	0%	-	MEDIUM
HTI-10/P-HR-RL/31936/R/13751	Improve Protection and health and Psycho-social Outcomes for Pediatric Amputees and Mothers with Newborns -WITHDRAWN	Project K.I.D.	-	-	-	-	0%	-	NOT SPECIFIED
HTI-10/P-HR-RL/31938/R/298	Protection for persons at risk and assistance to victims of trafficking	IOM	-	1,000,000	-	1,000,000	0%	-	HIGH
HTI-10/P-HR-RL/31950/R/5162	Psycho-Social Support at the Community Level for Children Affected by the Haiti Earthquake - WITHDRAWN	Mercy Corps	-	500,000	500,000	-	100%	100,000	NOT SPECIFIED
HTI-10/P-HR-RL/31951/R/13750	Mobilising Haitian Women's Leadership - WITHDRAWN	World YWCA	-	-	-	-	0%	-	NOT SPECIFIED
HTI-10/P-HR-RL/31956/R/5104	Protecting children from child labour during the Early Recovery phase - Haiti (WITHDRAWN)	ILO	-	-	-	-	0%	-	NOT SPECIFIED
HTI-10/P-HR-RL/31965/R/1171	Mainstreaming gender throughout the Haiti earthquake humanitarian response, in particular among clusters	UNFPA	-	139,100	-	139,100	0%	-	HIGH
HTI-10/P-HR-RL/32135/R/6100	Haiti Humanitarian Information Project	Internews	-	748,908	748,908	-	100%	-	MEDIUM
HTI-10/P-HR-RL/32141/R/5586	Protection of women through the establishment of support networks and safe spaces in Fond Parisien and Delmas	ARC	-	404,359	-	404,359	0%	-	MEDIUM
HTI-10/P-HR-RL/32319/R/13876	Projet de Prévention des violences faites aux femmes, du VIH/SIDA et d'information pour la prise en charge des victimes de violences sexuelles dans les camps de Port-au-Prince.	PESADEV	-	398,158	324,210	73,948	81%	-	MEDIUM
HTI-10/P-HR-RL/32448/R/7356	Protecting vulnerable persons of concern by helping them make informed decisions about their future and access their basic human rights	USCRI	-	280,093	239,960	40,133	86%	-	HIGH
HTI-10/P-HR-RL/32477/R/420	Protection and assistance to particularly vulnerable groups within the displaced population and support to host communities to enhance protection capacities	UNHCR	-	9,122,592	3,749,911	5,372,681	41%	-	NOT SPECIFIED
HTI-10/P-HR-RL/32505/R/8436	Comprehensive Community-based Child Protection in Port-au-Prince and Jacmel	WCC	-	468,050	-	468,050	0%	-	MEDIUM
HTI-10/P-HR-RL/32526/R/5128	Support to children's hygienic and psycho-social conditions in Wharf Jeremie slum area	CESVI	-	211,400	-	211,400	0%	-	HIGH
HTI-10/P-HR-RL/32585/R/8436	Comprehensive Gender-Based Violence Prevention, Response and Legal Aid in Port-au-Prince and the Greater Jacmel Region	WCC	-	396,325	-	396,325	0%	-	MEDIUM

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HTI-10/P-HR-RL/322630/R/13757	Reducing Risk and Increasing Potential: Drop-in Centers and Support Services for Street Children in Port-au-Prince	Heartland	-	1,459,449	-	1,459,449	0%	-	HIGH
HTI-10/P-HR-RL/32709/R/13939	Nouvelle Vie Trauma Relief and Empowerment	IAHV	-	-	-	-	0%	-	NOT SPECIFIED
HTI-10/P-HR-RL/32727/R/8531	Interfacing Haitian Media with Humanitarian Information	IMS	-	600,474	-	600,474	0%	-	NOT SPECIFIED
HTI-10/P-HR-RL/32773/R/13992	Community-based paralegals	IFOCOH	-	168,000	-	168,000	0%	-	HIGH
HTI-10/P-HR-RL/32785/R/13994	Provide identification paper for earthquake victims in Léogâne and Petit Goâve	ACAT	-	40,600	-	40,600	0%	-	MEDIUM
HTI-10/P-HR-RL/33572/R/5025	UNHCR/OHCHR Quick Impact Projects	OHCHR	-	500,000	-	500,000	0%	-	HIGH
Sub total for PROTECTION			16,230,000	71,867,732	47,365,596	24,502,136	66%	100,000	
SHELTER AND NON-FOOD ITEMS									
HTI-10/S-NF/31408/R/298	Needs Assessment (merged into project HTI-10/S-NF/31777)	IOM	150,000	-	-	-	0%	-	NOT SPECIFIED
HTI-10/S-NF/31409/R/298	Procurement, transport, and distribution of essential NFIs	IOM	12,000,000	6,400,000	9,991,895	-3,591,895	156%	-	NOT SPECIFIED
HTI-10/S-NF/31410/R/298	Provision of Self-Help Repairs and Protection Support (merged into project HTI-10/S-NF/31777)	IOM	1,000,000	-	-	-	0%	-	NOT SPECIFIED
HTI-10/S-NF/31411/R/298	Immediate Improvement to temporary shelter conditions (merged into project HTI-10/S-NF/31777)	IOM	900,000	-	-	-	0%	-	NOT SPECIFIED
HTI-10/S-NF/31412/R/298	Procurement, transport and distribution of essential NFIs (merged into project HTI-10/S-NF/31409)	IOM	750,000	-	-	-	0%	-	NOT SPECIFIED
HTI-10/S-NF/31413/R/298	Alternative shelter support for the displaced (merged into project HTI-10/S-NF/31777)	IOM	1,000,000	-	-	-	0%	-	NOT SPECIFIED
HTI-10/S-NF/31414/R/298	Settlement Support (merged into project HTI-10/S-NF/31777)	IOM	500,000	-	-	-	0%	-	NOT SPECIFIED
HTI-10/S-NF/31416/R/7039	Evidence Based Damage Situation Analysis and Outreach - WITHDRAWN	UN-HABITAT	1,500,000	-	-	-	0%	-	NOT SPECIFIED
HTI-10/S-NF/31417/R/7039	Resource Centres for Improving Neighbourhood Vulnerability Mitigation and Providing Guidance for Reconstruction	UN-HABITAT	2,800,000	3,500,000	3,298,264	201,736	94%	-	MEDIUM
HTI-10/S-NF/31418/R/7039	Support for Emergency Shelter from Salvaged Building Materials	UN-HABITAT	4,800,000	100,000	30,000	70,000	30%	-	LOW
HTI-10/S-NF/31419/R/7039	Technical Assistance and Monitoring Support to the Emergency Shelter Response	UN-HABITAT	150,000	150,000	-	150,000	0%	120,000	LOW
HTI-10/S-NF/31420/5349	Emergency shelter, basic needs and food distribution assistance through camp management or direct distribution	HI	3,000,000	3,000,000	700,280	2,299,720	23%	-	MEDIUM

Project code (click on hyperlinked project code to open full project details)	Title	Appealing agency	Original requirements (\$)	Revised requirements (\$)	Funding (\$)	Unmet requirements (\$)	% Covered	Uncommitted pledges (\$)	Priority
HTI-10/S-NF/31468/R/5105	Strengthening the response capacity of shelters providing services to victims of gender-based violence and their families (project merged with P-HR-RL/31486)	UNIFEM	700,000	-	-	-	0%	-	NOT SPECIFIED
HTI-10/S-NF/31528/R/298	Awaiting allocation to specific projects	IOM	-	-	-	-	0%	-	NOT SPECIFIED
HTI-10/S-NF/31576/R/298	Shelter and Non Food Items assistance to Haitians Earthquake Victims in the border area with Dominican Republic	IOM	-	436,151	436,151	-	100%	-	NOT SPECIFIED
HTI-10/S-NF/31651/R/7039	Transitional Camps to be Further Developed into Permanent Settlements - WITHDRAWN	UN-HABITAT	-	-	-	-	0%	-	NOT SPECIFIED
HTI-10/S-NF/31681/R/7039	Vulnerable Neighborhood and Housing Security Assessment, Urgent Demolitions and Transitional Camps at Neighbourhood Level	UN-HABITAT	-	3,920,000	4,029,963	- 109,963	103%	-	NOT SPECIFIED
HTI-10/S-NF/31710/R/6079	Emergency Shelter and Non-food Items for Children and Families in Haiti	SC	-	12,124,000	12,124,000	-	100%	-	NOT SPECIFIED
HTI-10/S-NF/31765/R/5349	Transitional shelter and CFW support in Petit Goâve and the Mornes	HI	-	3,450,000	2,288,929	1,161,071	66%	-	MEDIUM
HTI-10/S-NF/31777/R/298	Provision of comprehensive shelter assistance to earthquake-affected communities in Haiti	IOM	-	41,500,000	38,187,922	3,312,078	92%	-	NOT SPECIFIED
HTI-10/S-NF/31816/R/6458	Transitional shelter and non-food items support	ACTED	-	10,159,864	4,347,372	5,812,492	43%	-	HIGH
HTI-10/S-NF/31827/R/6767	Immediate Transitional Shelters for Earthquake Affected IDPs in Haiti	UNOPS	-	17,534,505	4,211,743	13,322,762	24%	-	MEDIUM
HTI-10/S-NF/31934/R/5645	Transitional Shelter support for the People Affected by the Haiti Earthquake of January 2010	CARE International	-	5,625,000	5,625,000	-	100%	-	NOT SPECIFIED
HTI-10/S-NF/31952/R/5167	Emergency shelter for Haitian IDPs	COOPI	-	630,000	819,000	- 189,000	130%	-	NOT SPECIFIED
HTI-10/S-NF/31974/R/5186	Emergency response to earthquake-affected population - Haiti	ACF	-	1,163,000	1,163,279	- 279	100%	-	MEDIUM
HTI-10/S-NF/32134/R/7250	Shelter assistance for Haiti	HFHI	-	1,171,289	1,171,289	-	100%	-	NOT SPECIFIED
HTI-10/S-NF/32142/R/6971	Emergency and Transitional Shelter Programme	RI	-	749,522	749,522	-	100%	-	NOT SPECIFIED
HTI-10/S-NF/32145/R/6707	Quartier Support for Transitional Shelters	World Concern	-	1,095,438	746,783	348,655	68%	-	MEDIUM
HTI-10/S-NF/32446/R/8498	Concern Emergency and Transitional Shelter (GETSHE) response	CW	-	750,000	750,000	-	100%	-	MEDIUM
HTI-10/S-NF/32540/R/6458	Contingency planning: preparedness and emergency response	ACTED	-	930,134	-	930,134	0%	-	LOW
HTI-10/S-NF/32580/R/7250	Shelter Assistance: Haiti Pathways to Permanence	HFHI	-	33,850,000	11,500,000	22,350,000	34%	-	LOW

Project code (click on hyperlinked project code to open full project details)	Title	Appealing agency	Original requirements (\$)	Revised requirements (\$)	Funding (\$)	Unmet requirements (\$)	% Covered	Uncommitted pledges (\$)	Priority
HTI-10/S-NF/32609/R/5349	Transitional Shelter construction for earthquake affected vulnerable population of Haiti (Petit and Grand Goâve municipalities and rural sections)	HI	-	5,871,878	-	5,871,878	0%	-	HIGH
HTI-10/S-NF/32784/R/8498	Concern Emergency and Transitional Shelter (CETSHE) response (ADDENDUM TO ORIGINAL PROPOSAL FOR AN ADDITIONAL 300 TRANSITIONAL SHELTERS)	CW	-	540,000	540,000	-	100%	-	LOW
HTI-10/S-NF/32977/R/120	Provision, transport and distribution of Emergency Shelter to vulnerable groups within the Haitian displaced population	UNHCR	-	882,573	362,788	519,785	41%	-	NOT SPECIFIED
Sub total for SHELTER AND NON-FOOD ITEMS			29,250,000	155,533,354	103,074,180	52,459,174	66%	120,000	
WATER, SANITATION AND HYGIENE									
HTI-10/WWS/31373/R/124	WASH Emergency Response to the affected people in Haiti Earthquake	UNICEF	46,200,000	55,015,500	55,015,500	-	100%	-	HIGH
HTI-10/WWS/31374/R/124	WASH Cluster Coordination Activities	UNICEF	400,000	600,000	600,000	-	100%	-	NOT SPECIFIED
HTI-10/WWS/31475/R/298	Public Hygiene Facilities (merged into project HTI-10/S-NF/31476)	IOM	440,000	-	-	-	0%	-	NOT SPECIFIED
HTI-10/WWS/31476/R/298	Emergency support for IDPs through provision of water and sanitation facilities	IOM	685,000	1,115,760	2,101,759	- 985,999	188%	-	NOT SPECIFIED
HTI-10/WWS/31478/R/5186	WASH Emergency response after the earthquake in Haiti	ACF	700,000	7,703,200	3,842,683	3,860,517	50%	-	HIGH
HTI-10/WWS/31479/R/7039	Emergency Solid Waste Collection Systems in Affected Urban Areas - WITHDRAWN	UN-HABITAT	2,000,000	-	-	-	0%	-	MEDIUM
HTI-10/WWS/31480/R/5120	Immediate relief and early recovery for the earthquake-affected in Haiti	OXFAM GB	3,000,000	5,440,950	5,440,950	-	100%	-	NOT SPECIFIED
HTI-10/WWS/31481/R/6079	Emergency Water, Sanitation, and Hygiene Response for those affected by the earthquake	SC	5,000,000	3,299,451	3,299,451	-	100%	-	NOT SPECIFIED
HTI-10/WWS/31483/R/13282	Expanding Access to Household Water Treatment and Hygiene for Earthquake-Affected Populations	Deep Springs International	400,000	472,592	-	472,592	0%	-	HIGH
HTI-10/WWS/31703/R/5861	Provision of Emergency Sanitation and Hygiene for 3500 Earthquake Affected Households (28000 pax) in the Grande Riviere and Gros Morne Sections of Léogâne Commune, Haiti	IRD	-	1,032,767	1,032,767	-	100%	-	NOT SPECIFIED
HTI-10/WWS/31726/R/5645	Water Sanitation and Hygiene Support for the People Affected by the Haiti Earthquake of January 2010	CARE International	-	2,400,000	2,400,000	-	100%	-	NOT SPECIFIED
HTI-10/WWS/31753/R/5160	Improving Sanitation, Hygiene, and Access to Water for Earthquake-Affected Populations in Haiti	IMC	-	1,108,366	728,121	380,245	66%	-	HIGH
HTI-10/WWS/31819/R/6458	Provision of emergency Watsan relief to earthquake-affected populations in Haiti	ACTED	-	3,117,942	3,117,942	-	100%	-	NOT SPECIFIED

Project code (click on hyperlinked project code to open full project details)	Title	Appealing agency	Original requirements (\$)	Revised requirements (\$)	Funding (\$)	Unmet requirements (\$)	% Covered	Uncommitted pledges (\$)	Priority
HTI-10/WS/31820/R/124	WASH support for Earthquake victims in Dominican Republic and in the areas bordering Haiti - Withdrawn	UNICEF	-	-	-	-	0%	-	NOT SPECIFIED
HTI-10/WS/31875/R/122	WASH support for Earthquake victims in Dominican Republic and in the areas bordering Haiti - WITHDRAWN	WHO	-	188,172	188,172	-	100%	-	NOT SPECIFIED
HTI-10/WS/31876/R/516Z	Water and sanitation emergency activities	COOPI	-	750,000	975,000	- 225,000	130%	-	NOT SPECIFIED
HTI-10/WS/31877/R/552Z	Provision of Emergency Water Supply, Sanitation & Hygiene Promotion in Central Port au Prince.	NCA	-	4,300,000	3,900,521	399,479	91%	-	HIGH
HTI-10/WS/31878/R/5179	Meeting Critical water and Sanitation needs for Communities affected by earthquake in Haiti	IRC	-	1,000,000	1,000,000	-	100%	-	NOT SPECIFIED
HTI-10/WS/31879/R/5633	WASH response to emergency needs of populations affected by earthquake.	Solidarités	-	1,828,074	1,828,074	-	100%	-	NOT SPECIFIED
HTI-10/WS/31932/R/7224	Environmental health	Aide et Action	-	650,000	-	650,000	0%	-	NOT SPECIFIED
HTI-10/WS/31953/R/13139	Capacity Building of Humanitarian Personnel – Watsan	RedR UK	-	414,433	463,902	- 49,469	112%	-	MEDIUM
HTI-10/WS/31953/R/13143	Capacity Building of Humanitarian Personnel – Watsan	Bioforce	-	-	-	-	0%	-	MEDIUM
HTI-10/WS/31963/R/12721	Sanitation project for the district of Belladere-Haiti as an effort to relief the displaced persons of the earthquake in the border area - WITHDRAWN	OXFAM Quebec	-	-	-	-	0%	-	NOT SPECIFIED
HTI-10/WS/31997/R/8502	Hygiene Promotion with Water and Sanitation Facilities in and around Port-au-Prince	WVI	-	2,325,000	2,325,000	-	100%	-	NOT SPECIFIED
HTI-10/WS/32016/R/6971	Emergency Rapid Intervention in Sanitation and Hygiene for Earthquake-Affected Communities	RI	-	4,496,821	1,500,000	2,996,821	33%	-	HIGH
HTI-10/WS/32143/R/5162	Water, Sanitation and Hygiene for Earthquake affected communities	Mercy Corps	-	1,978,336	1,978,336	-	100%	-	MEDIUM
HTI-10/WS/32541/R/5186	Water Trucking for the WaSH Cluster in Port au Prince and its vicinities	ACF	-	3,410,000	3,410,000	-	100%	-	NOT SPECIFIED
HTI-10/WS/32544/R/6458	Stabilization of temporary WASH facilities and hygiene promotion to earthquake-affected populations in Haiti	ACTED	-	4,467,000	-	4,467,000	0%	-	HIGH
HTI-10/WS/32572/R/13935	Clean Water Relief and Public Water System Reconstruction / Public Health Trainings	International Action	-	523,000	-	523,000	0%	-	MEDIUM
HTI-10/WS/32587/R/5633	Rétablir l'accès à l'eau potable, à l'hygiène et à l'assainissement des populations des zones rurales affectées par le séisme et autres catastrophes naturelles, Commune de Petit-Goâve	Solidarités	-	397,680	319,606	78,074	80%	-	HIGH
HTI-10/WS/32589/R/5162	WASH support for Earthquake Victims in PetionVile and Tabarre, Haiti	Mercy Corps	-	1,208,410	1,208,410	-	100%	-	HIGH
Sub total for WATER, SANITATION AND HYGIENE			58,825,000	109,243,454	96,676,194	12,567,260	88%	-	

Project code (click on hyperlinked project code to open full project details)	Title	Appealing agency	Original requirements (\$)	Revised requirements (\$)	Funding (\$)	Unmet requirements (\$)	% Covered	Uncommitted pledges (\$)	Priority
CLUSTER NOT SPECIFIED									
HTI-10/P-HR-RL/31563/R/5025	Awaiting allocation to specific projects	OHCHR	-	-	202,612	n/a	n/a	-	NOT SPECIFIED
HTI-10/SNYS/31364/124	Awaiting allocation to specific project/sector	UNICEF	-	-	-	-	n/a	16,575,613	NOT SPECIFIED
HTI-10/SNYS/31368/298	Awaiting allocation to specific project/sector	IOM	-	-	5,046,802	n/a	n/a	-	NOT SPECIFIED
HTI-10/SNYS/31381/R/8487	Emergency Relief Response Fund (ERRF) Haiti	ERF (OCHA)	-	-	23,753,215	n/a	n/a	100,000	NOT SPECIFIED
HTI-10/SNYS/31497/1171	Awaiting allocation to specific project/sector	UNFPA	-	-	3,099,989	n/a	n/a	-	NOT SPECIFIED
HTI-10/SNYS/31499/R/123	Awaiting allocation to specific projects	FAO	-	-	1,506,938	n/a	n/a	-	NOT SPECIFIED
Sub total for CLUSTER NOT SPECIFIED			-	-	33,609,556	n/a	n/a	16,675,613	
Grand Total			562,060,654	1,488,095,210	946,389,684	541,705,526	64%	18,493,386	

NOTE: "Funding" means Contributions + Commitments

Pledge: a non-binding announcement of an intended contribution or allocation by the donor. ("Uncommitted pledge" on these tables indicates the balance of original pledges not yet committed.)
 Commitment: creation of a legal, contractual obligation between the donor and recipient entity, specifying the amount to be contributed.
 Contribution: the actual payment of funds or transfer of in-kind goods from the donor to the recipient entity.

The list of projects and the figures for their funding requirements in this document are a snapshot as of 25 June 2010. For continuously updated information on projects, funding requirements, and contributions to date, visit the Financial Tracking Service (www.reliefweb.int/fts).

Table V: Total funding per donor (to projects listed in the Appeal)
 Haiti Revised Humanitarian Appeal (January - December 2010)
 as of 25 June 2010
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and appealing organizations.

Donor	Funding (\$)	% of Grand Total	Uncommitted pledges (\$)
Private (individuals & organisations)	277,886,016	29%	100,000
United States	173,678,152	18%	3,300,000
Canada	66,751,964	7%	-
Saudi Arabia	50,000,000	5%	-
European Commission (ECHO)	40,515,590	4%	647,773
Allocation of funds from Red Cross / Red Crescent	39,591,491	4%	120,000
Central Emergency Response Fund (CERF)	38,506,425	4%	-
Japan	38,300,000	4%	-
Spain	30,985,482	3%	13,275,613
Brazil	27,729,241	3%	-
Sweden	21,895,635	2%	-
Norway	18,607,212	2%	-
France	17,089,933	2%	-
Denmark	15,649,065	2%	-
United Kingdom	9,472,042	1%	450,000
Australia	8,552,365	1%	-
Allocations of unearmarked funds by UN agencies	6,812,504	1%	-
Germany	6,493,507	1%	-
Italy	6,001,921	1%	-
Finland	5,214,708	1%	-
Russian Federation	5,200,000	1%	-
Thailand	4,716,854	0%	-
World Bank	3,000,000	0%	-
Belgium	2,688,146	0%	-
Nigeria	2,501,000	0%	-

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Others	28,550,431	3%	600,000
Grand Total	946,389,684	100 %	18,493,386

NOTE: "Funding" means Contributions + Commitments

Pledge: a non-binding announcement of an intended contribution or allocation by the donor. ("Uncommitted pledge" on these tables indicates the balance of original pledges not yet committed.)

Commitment: creation of a legal, contractual obligation between the donor and recipient entity, specifying the amount to be contributed.

Contribution: the actual payment of funds or transfer of in-kind goods from the donor to the recipient entity.

The list of projects and the figures for their funding requirements in this document are a snapshot as of 25 June 2010. For continuously updated information on projects, funding requirements, and contributions to date, visit the Financial Tracking Service (www.reliefweb.int/fts).

Table VI: Total humanitarian assistance per donor (Appeal plus other*)

HAITI - Earthquakes - January 2010

as of 25 June 2010

<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and appealing organizations.

Donor	Funding	% of Grand Total	Uncommitted pledges
	(\$)		(\$)
Private (individuals & organisations)	1,199,741,479	37%	70,273,505
United States	1,117,296,298	35%	3,300,000
Canada	137,792,229	4%	-
Allocation of funds from Red Cross / Red Crescent	86,481,683	3%	120,000
European Commission (ECHO)	68,193,704	2%	97,021,237
Spain	67,983,639	2%	13,275,613
Saudi Arabia	50,000,000	2%	-
Japan	48,127,154	1%	52,400,000
Central Emergency Response Fund (CERF)	38,506,425	1%	-
France	35,956,408	1%	252,100,840
Sweden	33,307,037	1%	278,940
United Kingdom	33,167,336	1%	450,000
Brazil	27,779,241	1%	10,000,000
Norway	26,724,934	1%	-
Denmark	25,690,336	1%	-
Germany	23,839,777	1%	-
Netherlands	22,045,134	1%	-
Italy	21,182,931	1%	-
Australia	12,913,876	0%	-
Switzerland	12,185,228	0%	-
China	11,039,457	0%	5,000,000
Russian Federation	10,900,000	0%	-
Finland	8,241,961	0%	-
Allocations of unearmarked funds by UN agencies	6,812,504	0%	-
Belgium	6,807,315	0%	-
Others	77,272,489	2%	684,800,415
Grand Total	3,209,988,575	100 %	1,189,020,550

NOTE: "Funding" means Contributions + Commitments

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- Pledge: a non-binding announcement of an intended contribution or allocation by the donor. ("Uncommitted pledge" on these tables indicates the balance of original pledges not yet committed.)
- Commitment: creation of a legal, contractual obligation between the donor and recipient entity, specifying the amount to be contributed.
- Contribution: the actual payment of funds or transfer of in-kind goods from the donor to the recipient entity.

* Includes contributions to the Consolidated Appeal and additional contributions outside of the Consolidated Appeal Process (bilateral, Red Cross, etc.)

The list of projects and the figures for their funding requirements in this document are a snapshot as of 25 June 2010. For continuously updated information on projects, funding requirements, and contributions to date, visit the Financial Tracking Service (www.reliefweb.int/fts).

Table VII: Summary of funding to projects not listed in the Appeal
 Other humanitarian funding to HAITI - Earthquakes - January 2010
 as of 25 June 2010
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and appealing organizations.

Recipient	Funding	% of Grand Total	Uncommitted pledges
	(\$)		(\$)
USDOD	493,544,237	22%	-
American RC	241,536,059	11%	3,120,966
NGOs; Red Cross (left unspecified by donor)	230,637,139	10%	8,225,000
MSF	120,300,962	5%	-
Bilateral (to affected government)	114,445,063	5%	228,776,499
IFRC	104,427,247	5%	750,000
NGOs (left unspecified by donor)	96,954,047	4%	15,313,473
UN Agencies, NGOs and Red Cross (left unspecified by donor)	63,984,276	3%	858,869,160
CRS	60,669,261	3%	-
WVI	54,494,336	2%	165,000
USFEMA	49,000,000	2%	-
USAID	41,430,908	2%	-
USDHHS	36,196,000	2%	-
CHF International	31,037,085	1%	-
British RC	24,117,040	1%	981,150
CII	23,434,305	1%	-
Canada RC	22,706,279	1%	140,456
UN agencies and NGOs (left unspecified by donor)	22,311,881	1%	1,742,520
OXFAM GB	22,126,390	1%	-
BBF	22,000,000	1%	-
SHO (NL)	16,150,740	1%	-
IOM	12,449,098	1%	-
SC	11,834,552	1%	251,667
GOAL	11,747,224	1%	-

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Recipient	Funding (\$)	% of Grand Total	Uncommitted pledges (\$)
Chr. Aid	11,532,065	1%	-
GTZ	11,247,423	0%	-
UMCOR	11,000,000	0%	-
Various	9,971,204	0%	1,120,000
CAFOD	8,800,000	0%	-
TEARFUND	8,800,000	0%	-
MEDAIR	8,567,511	0%	-
Oxfam America	8,515,000	0%	-
Mercy Corps	7,652,904	0%	750,000
Action Aid	7,200,000	0%	-
Norway RC	7,006,324	0%	-
Finland RC	6,892,752	0%	-
PADF	6,681,539	0%	-
Denmark RC	6,539,548	0%	-
France RC	6,508,117	0%	125,000
CECI	6,269,932	0%	-
MSB	5,671,608	0%	-
CW	5,627,516	0%	-
ARC	5,303,779	0%	-
AJWS	5,120,000	0%	-
American Institutes for Research	5,000,000	0%	-
FH	4,864,685	0%	-
ADRA	4,730,882	0%	-
FONKOZE	4,630,000	0%	-
FCSR	4,601,875	0%	-
Sweden RC	4,123,057	0%	-
LACSR	4,064,947	0%	-
IRW	4,000,000	0%	-
WCDO	3,718,084	0%	-
Germany RC	3,483,013	0%	-
Japan RC	3,403,366	0%	-

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Recipient	Funding (\$)	% of Grand Total	Uncommitted pledges (\$)
ACDI/VOCA	3,205,800	0%	-
IRC	3,202,539	0%	-
JDC	3,200,000	0%	-
Ireland RC	3,066,378	0%	-
PU	3,052,627	0%	-
Spain RC	3,043,061	0%	-
GVC	2,926,260	0%	-
OXFAM Quebec	2,839,564	0%	-
IRD	2,822,118	0%	-
CARE International	2,810,000	0%	-
Danchurchaid	2,765,484	0%	-
Belgium RC	2,745,792	0%	-
PIH	2,645,895	0%	500,000
USA Fund for UNICEF	2,634,130	0%	550,000
Help the Aged	2,560,000	0%	-
CESVI	2,387,458	0%	-
DEMA	2,326,952	0%	-
Direktoratet for samfunnssikkerhet og beredskap	2,253,032	0%	-
CRWRC	2,174,000	0%	-
OIKOS	2,153,433	0%	-
Inter Aide	2,044,051	0%	-
<i>Aide à l'Enfance de Canada</i>	2,023,121	0%	-
DRI	2,019,963	0%	-
Austria RC	1,858,823	0%	-
WFP	1,858,134	0%	-
<i>Solidarités</i>	1,829,195	0%	-
AMI	1,811,337	0%	-
UN Agencies and Red Cross (left unspecified by donor)	1,750,700	0%	2,550,000
ICRC	1,647,608	0%	-
CISP	1,600,000	0%	-

H a i t i

Recipient	Funding (\$)	% of Grand Total	Uncommitted pledges (\$)
TdH - IT	1,600,000	0%	-
VIS	1,600,000	0%	-
DWHH	1,545,582	0%	-
MDM Canada	1,540,592	0%	-
EDC	1,500,000	0%	-
CARE Canada	1,445,087	0%	-
WVI (Canada)	1,445,087	0%	-
CARITAS	1,344,243	0%	-
MDM France	1,304,993	0%	-
CARE USA	1,250,000	0%	-
Turkey RC	1,250,000	0%	-
ACTED	1,235,465	0%	-
ID	1,235,336	0%	-
Clinton Bush Haiti Fund	1,231,537	0%	-
MSF - Netherlands	1,129,518	0%	-
Operation USA	1,125,000	0%	-
Johanniter Unfallhilfe e.V.	1,112,923	0%	-
<i>Groupe de Recherche et d'Echanges Technologiques</i>	1,112,408	0%	-
CARE France	1,105,592	0%	-
Switzerland RC	1,082,524	0%	-
China RC	1,073,421	0%	-
Kuwait RC	1,000,000	0%	-
MI	1,000,000	0%	-
SOS	1,000,000	0%	-
Yele Haiti	1,000,000	0%	-
INTERSOS	999,400	0%	-
Humedica	980,420	0%	-
Development and Peace	918,000	0%	-
CDERA	899,281	0%	-
Khalifa Foundation	897,820	0%	2,603,542

H a i t i

Recipient	Funding (\$)	% of Grand Total	Uncommitted pledges (\$)
NRC	866,551	0%	-
No channel specified	854,701	0%	-
Malteser International	764,486	0%	-
Finnchurchaid	721,501	0%	-
OXFAM <i>Solidarité</i>	721,501	0%	-
HI B	700,280	0%	-
Chr. Aid-UK	679,593	0%	-
HelpAge International	671,781	0%	-
IOCC	630,000	0%	-
Life for Relief and Development	613,080	0%	-
Church of Sweden	607,723	0%	278,940
US Geological Survey	589,300	0%	-
MDM	560,224	0%	-
<i>Secours Islamique</i>	521,464	0%	-
THW	510,609	0%	-
ACT Alliance	502,000	0%	-
21 CUSO	500,000	0%	-
Associates in Rural Development	500,000	0%	-
IPPFWHR	500,000	0%	-
OXFAM International	500,000	0%	-
Salvation Army	500,000	0%	-
Samaritan's Purse	497,250	0%	-
CANADEM	481,696	0%	-
BA	480,000	0%	-
Medishare	450,000	0%	-
WVI (Germany)	426,901	0%	-
Private (individuals & organisations)	385,000	0%	-
Internews	375,000	0%	-
SECADEV	347,627	0%	-
InterAction	330,083	0%	-
PC	323,150	0%	-

H a i t i

Recipient	Funding (\$)	% of Grand Total	Uncommitted pledges (\$)
Costa Rica RC	312,500	0%	-
GEA Society	300,000	0%	-
OAS	295,260	0%	-
Croatia RC	290,453	0%	-
Meds & Food for Kids	280,000	0%	-
FTC	275,000	0%	-
US Forest Service	267,324	0%	-
OTM	261,481	0%	-
<i>Nehemia Christenhilfsdienst e.V.</i>	252,101	0%	-
Global Links	250,000	0%	-
Food for the Poor	225,000	0%	-
ADRA Germany	216,450	0%	-
DSF	202,429	0%	-
Project HOPE	200,000	0%	-
ATD Fourth World	152,956	0%	-
ADH	144,300	0%	-
Luxembourg RC	144,300	0%	-
Haven	140,056	0%	-
<i>Bundesanstalt Technisches Hilfswerk</i>	136,623	0%	-
TSF	136,580	0%	25,000
AN	134,953	0%	-
PAH	134,750	0%	-
K.I.D.S.	131,000	0%	-
World Bank	128,885	0%	-
HFHI	126,537	0%	-
ERB	125,541	0%	-
Share our Strength	125,000	0%	-
Muslim Aid	120,000	0%	-
MAPACT	109,596	0%	-
Iran RC	104,230	0%	-
Haiti RC	100,000	0%	-

H a i t i

Recipient	Funding (\$)	% of Grand Total	Uncommitted pledges (\$)
MCC	100,000	0%	-
<i>Petits Frères et Soeurs</i>	100,000	0%	-
United Way	100,000	0%	-
CHASE OT	96,476	0%	-
MCIC	96,339	0%	-
IDDI	92,500	0%	-
MAXIMUS	90,000	0%	-
Mohamed Bin Rashid Al Maktoum Humanitarian and Charity Establishment	89,918	0%	-
Clinton Foundation	77,000	0%	-
LWR	75,000	0%	-
PAHO (WHO)	73,549	0%	-
<i>SOS Villages d'enfants</i>	72,150	0%	-
AFU	69,525	0%	-
La chaine de l'espoir	69,525	0%	-
RSF	69,525	0%	-
Americares	65,000	0%	5,000,000
WHO	60,871	0%	-
Haitian Health Foundation	57,800	0%	-
<i>Nachbar in Not</i>	56,022	0%	-
FRF	54,911	0%	-
JPF	54,526	0%	-
Bioforce	53,981	0%	-
FANM	50,000	0%	-
UN Foundation	50,000	0%	-
UNAIDS	50,000	0%	-
USA Friends of WFP	50,000	0%	-
SES	49,723	0%	-
OCHA	46,686	0%	-
CDP	42,161	0%	-
<i>Collectif Haïti de France</i>	41,715	0%	-

H a i t i

Recipient	Funding	% of Grand Total	Uncommitted pledges
	(\$)		(\$)
Fray Rene Giroux Mission	35,000	0%	-
Netherlands RC	28,860	0%	-
IMC	25,000	0%	-
JHPIEGO	25,000	0%	-
MTI	25,000	0%	50,000
Op HH	25,000	0%	-
Lambi Fund of Haiti	24,963	0%	-
Qatar RC	21,000	0%	-
St. Boniface Haiti Foundation	20,000	0%	-
St. Damien Hospital	20,000	0%	-
CARICOM RDP	14,304	0%	-
CARE-UK	12,500	0%	-
Double Harvest	10,000	0%	-
ERD	10,000	0%	-
FMSC	10,000	0%	-
UM	10,000	0%	-
Jamaica RC	9,611	0%	-
ADRA-Haiti	-	0%	522,000
Bulgaria RC	-	0%	179,092
LWF	-	0%	150,000
Morocco RC	-	0%	33,000,000
NC/United Kingdom	-	0%	640,000
United Arab Emirates RC	-	0%	100,000
Voila Earthquake Relief Fund	-	0%	4,000,000
WMI	-	0%	47,699
Grand Total	2,263,598,891	100%	1,170,527,164

NOTE: "Funding" means Contributions + Commitments

Pledge: a non-binding announcement of an intended contribution or allocation by the donor. ("Uncommitted pledge" on these tables indicates the balance of original pledges not yet committed.)

- Commitment: creation of a legal, contractual obligation between the donor and recipient entity, specifying the amount to be contributed.
- Contribution: the actual payment of funds or transfer of in-kind goods from the donor to the recipient entity.
-

The list of projects and the figures for their funding requirements in this document are a snapshot as of 25 June 2010. For continuously updated information on projects, funding requirements, and contributions to date, visit the Financial Tracking Service (www.reliefweb.int/fts).

ANNEX II: CLUSTER MONITORING MATRICES

Agriculture

Objective	Indicators	Data Source	Achieved to date	Target for remainder of 2010
Coordination of the response in agriculture ensuring an efficient use of the resources deployed.	1.1: A common approach for food security, nutrition and livelihood interventions, through coordinated strategies discussed in the Food Security Cluster.	Cluster strategy, MARNDR strategy docs, Agriculture Cluster database.		All cluster members follow strategy outlined in MARNDR and cluster strategic documents.
	1.2: The CNSA capacity to collect data at all administrative unit levels and to analyse it has been strengthened, with the departmental observatories for food security including at least one nutrition indicator in the methodology for monitoring food security.	CNSA reports.		CNSA producing regular reports on food security and nutrition per department.
	1.5: Donors and other humanitarian partners are provided with timely, accurate and transparent information on food security, nutrition and livelihoods in the country. <ul style="list-style-type: none"> • Complementarities and synergy increased and duplication or conflict avoided/limited • Level of confidence among stakeholders, partners and target groups increased • Methodologies for streamlining of processes are improved/developed in view of "pending" disasters 	Agriculture Cluster reports.		The Agriculture Cluster houses information for all partners active in agriculture and provides weekly and ad hoc reports to partners.
Support to food security rehabilitating the food production capacity of the most vulnerable rural-affected families, while promoting the sustainable intensification of food production.	2.1: Number of most vulnerable affected directly and indirectly by the earthquake produce their food and some additional revenue over a period of 4-5 months.	Agriculture Cluster database.	98,000	102,000
Reduction of risks related to natural disasters creating employment and contributing to self-recovery in selected watersheds.	3.1: Number of affected displaced and host vulnerable families receive economic support that allows them to obtain food and essential goods, to rapidly restore some level of self-sufficiency.	FEWSNET reports.		Food security increases in communities affected by poor watershed management.
	3.2: The integrated management of risks related to natural disasters is promoted in selected watersheds.	Project final reports.		Priority watersheds* have integrated management plans *as defined by MARNDR investment plan.

TOTAL SEED AND SEED MATERIAL FOR 2010 IN HAITI - 05/05/2010

Crops	Unit	NEEDS		DISTRIBUTION		GAP SPRING PLANTING SEASON	GAP REST 2010 SEASONS
		25% of the total seeds needs in the country for the entire year 2010*	Urgent needs identified for the Spring planting season (March-May) 2010 (25% of spring needs)	FAO	Cluster distributions (Up to 05 may 2010)**		
<i>Cereals / Céréales</i>	MT	3,450	1,658	243.09	812.38	845	2,395
<i>Legumineuses / Legumineuses</i>	MT	2,225	1,148	481.00	1,238.25	-90.75	505
Total Cereals+ Legumineuses		5,675	2,806	724.09	2,050.63	754	2,900
<i>Racines & Tuberculs / Racine & Tubercules</i>	Million Boutures	611	354	3.03	8.44	345.19	599.16
<i>Banana plants / Plantules banane</i>	Million plants	62.5	31	-	0.12	31.13	62

* Source: MARNDR

** The agriculture cluster partners that have distributed seeds during the spring planting season are: MARNDR, FAO, Oxfam, WINNER, CRS/Caritas, ACDI/VOCA, Project ProHuerta (IICA), Floresta Ayiti, Agro Action Allemande, Earth Institut, VSF, AVSF, Diakonie, UCODEP, UCODEP, GVC, CARE, FHED Inc,

*** There are other Cluster partners that have reported igname distributions but in a different mesures. The quantities for these cases are: 13.60 MT and 0.06 millions Boutures

Camp Coordination and Camp Management

Objective	Indicators	Data Source	Achieved to date	Target for remainder of 2010
Objective 1: Provide support to the earthquake-affected displaced population and host communities by ensuring dignified and safe living conditions.	1.1: Percentage of priority spontaneous settlement sites with camp management or camp committee in place.	DTM and CCCM partner reports.	Original target was set for the 21 priority sites identified at that time. 95% (20 of 21) have camp management agencies other than IOM. All of the 21 priority sites have camp committees.	For camps or spontaneous settlements with populations over 1,000 households, at least 75% will be covered either by camp management agencies or camp committees.
Objective 2: Ensure IDPs in settlements receive effective and well-coordinated humanitarian services to meet their protection and assistance needs.	2.1: Increase in the reported number of camps covered by camp management agencies and other service providers.	DTM and CCCM partner reports.	To date, the level of services is inconsistent as multiple organizations providing assistance during the emergency phase have completed their projects. The needs, however, remain. N/A	A 25% increase in coverage is anticipated for the priority sites.
Objective 3: Support improved conditions in camps through projects focusing on mitigating measures (i.e. management for priority camps, fire safety, disaster risk reduction, information campaigns, governance issues).	3.1: Number of camps reached by projects focusing on mitigation measures.	DTM and CCCM partner reports.	N/A	65% of camps or spontaneous settlements are reached by related projects.
Objective 4: Support for a safe transition strategy to assist IDP returns to places of origin, relocations to host families, planned camps or other transitional shelter options with focus on registration, information campaigns, operational support for relocation.	4.1: Number of households that are able to relocate to one of the safe shelter strategy options.	DTM, registration and CCCM partner reports.	To date, 2,000 households are registered as having moved to a planned relocation site. As registration is completed in more settlements, the ability to monitor both supported and spontaneous movements will be increased.	50% increase in households able to relocate from spontaneous settlements to another safe shelter strategy option.

Coordination and Support Services

Objective	Indicators	Data Source	Achieved to date	Target for remainder of 2010
1. Effective coordination of humanitarian response.	1.1: Comprehensive humanitarian strategy, endorsed by HCT, guiding humanitarian action in support of national priorities. 1.2: Established cluster coordination structure with clear government representation in the clusters.	HCT Cluster minutes	Humanitarian strategy in Flash Appeal updated. Settlement strategy articulated and under discussion with GoH. Clusters well established with GoH participation.	Agreed strategy with GoH to address long-term solutions for displaced. 100% of clusters to have merged into GoH-led structures by the end of the year or be co-chaired by GoH
2. Coordinated disaster preparedness and response.	1.5: Weekly outreach activities to different stakeholders – beneficiaries, civil society and private sector. 2.1: Practical disaster preparedness and disaster response plans agreed in the key disaster-prone areas of Jacmel, Léogâne and Gonaïves.	CDAC reports PI reports HCT	Regular dialogue with different constituent groups through CDAC, PI Officer Group and meetings with Civil Society and Private Sector Group. National response plan has been articulated. Work is now ongoing to develop local plans.	Continued outreach and communication with key stakeholder groups on a weekly basis. At least 26 sessions for the remainder of 2010. Local plans articulated and activated in key departments.
3. Comprehensive strategy to ensure smooth transition to longer-term recovery in support of national priorities.	2.2: Emergency Response Teams operational in Port-au-Prince, Jacmel, Léogâne and Gonaïves. 3.1: Agreed action plan and timeline for clusters to merge into national architecture for recovery and development.	Inter-agency SOPs Cluster strategies	ERT established and already deployed in Port-au-Prince. All clusters are currently engaging with GoH counterparts. ER, Agric, WASH, Education and Education already have good GoH participation and now based outside logbase.	ERTs to be established and operational in other disaster-prone areas. All clusters to convene outside Logbase and to be led or co-led by GoH representative by the end of the year. Early Recovery, Agriculture, Health, Education and WASH to have merged into GoH structure.
4. Strategic information management and analysis to enhance decision-making and inform strategic planning.	4.1: Comprehensive 3W database – regularly updated. 4.2 An information system for progress tracking of the Flash Appeal indicators for all clusters established and regularly updated. 4.3 Inter-cluster assessments/monitoring system established.	3W Database IMM Survey of surveys	3W established but incomplete. 3W maps for 75% of the clusters Good gap analysis for shelter. Information system identifying gaps for all clusters adopted by the ICC	Complete regularly updated 3W. Graphic products/maps generated for 100% of cluster based on 3W data. An information system identifying gaps for all clusters with graphic display (dashboard) implemented and updated quarterly. A monitoring system established for progress monitoring of key indicators outside camp, Support CCCM in strengthening and improving the DTM for camp settings.

**Early Recovery
Governance and Aid Coordination**

* Risk: backlog and social unrest

Objective	Indicators	Data Source	Achieved to date	Target for remainder of 2010
1. Enhance coordination for aid effectiveness and strengthen Government (national and local governments) leadership and community engagement in the reconstruction and recovery efforts.	1.1. Number of area-based multi-sector concerted actions facilitated through Early Recovery Cluster Coordination and network at the national and local levels.	Minutes of meetings	So far, a truly concerted intervention is lacking.	Between 5 and 10 concerted actions.
	1.2. Percentage of target beneficiaries benefiting from advisory and coordination services provided to Government institutions and to affected and host communities via <i>Cellule de Reflexion/Task Force</i> , Support to Local Governments, Reconstruction Support Centres, and Information Mobile Units and media.	Project progress and M&E reports/survey indicating type of support, number of beneficiaries and level of community engagement.	So far, response of the international community has focused on humanitarian relief and interventions of life-saving and mitigation nature. Funding for early recovery is lacking, therefore recovery interventions <i>per se</i> have not yet fully taken place.	At least between 10-20% of about 2 million people (until end 2010).

Early Recovery – Livelihoods

* Risk: delay in launching reconstruction and recovery interventions leading to growing dependency on relief assistance and social unrest

Objective	Indicators	Data Source	Achieved to date	Target for remainder of 2010
2. Create temporary jobs that provide immediate source of income through CFW/FFW and building people's life skills for sustainable improvement of people's livelihoods and instigating 'deconcentration' of economic activities within the country's territory.	2.1. % of total target beneficiaries (2,000,000) (gender and social group disaggregated) having immediate source of income and benefit from livelihood opportunities created through CFW and FFW schemes.	Project progress & M&E/survey reports.	Approximately 10% of total target beneficiaries (200,000 people, out of whom about 35% are women) have temporary jobs and with an estimated average of 3 to 4 people per households, between 600,000 to 800,000 people indirectly benefiting from source of income provided through CFW and FFW projects.	10 to 20% (or between 200,000 and 400,000 people, of whom 40% women) from affected and non-affected communities.
	2.2. Number of people trained and have improved employability or enabled and facilitated to start micro and small businesses and enterprises.	Project progress and M&E/survey reports.	Not yet fully started.	Between 500 and 1,500 people (out of whom 40 to 50% are women and youth or people with disabilities).

Early Recovery

Shelter/Housing, Basic Settlement Infrastructure and Services, and Territorial Management.* Risk: delay in launching reconstruction and recovery interventions leading to growing dependency on relief aid and social unrest

Objective	Indicators	Data Source	Achieved to date	Target for remainder of 2010
<p>3. Facilitate restoration of and restore social, productive and basic infrastructure and services in affected and non-affected areas to pave the way towards 'de-concentration' of economic activities for a more balance distribution of settlements and territorial development</p>	<p>3.1. Percentage of hanging damaged buildings/building ruins demolished, rubble and accumulated debris cleared and recycled in highly populated affected areas of Port-au-Prince and in Jacmel, Miragoane, Léogâne, Petit Goâve, Grand Goâve and Cabaret.</p> <p>3.2. Number of settlement upgrading projects, including restoration of basic infrastructure and vital life-support systems, rehabilitation of houses and building shelter in affected and non-affected areas.</p>	<p>Project progress report, survey for M&E reports</p> <p>Project progress report, survey for M&E reports</p>	<p>A quantity (difficult to record due to the huge amount of debris) of about 1% of hanging damaged buildings demolished rubble and accumulated debris cleared and recycled.</p> <p>This is a critical gap. Due to underdevelopment of other areas plus insufficient interventions in non-affected areas and concentration of social and economic activities in Port-au-Prince, many of the displaced have returned to Port-au-Prince. This is resulting in a growing number of spontaneous and underserved camps established in unsafe locations.</p>	<p>5% up to 10%. (Slow progress due to rainy and hurricane season + lack of heavy equipment should be taken into consideration.)</p> <p>3 to 4 settlement upgrading projects in affected and non-affected areas at least started and upscaled</p>

Early Recovery

Gender and environmental mainstreaming, including disaster risk management

*Risk: delay in launching reconstruction and recovery interventions leading to growing dependency on relief aid and social unrest

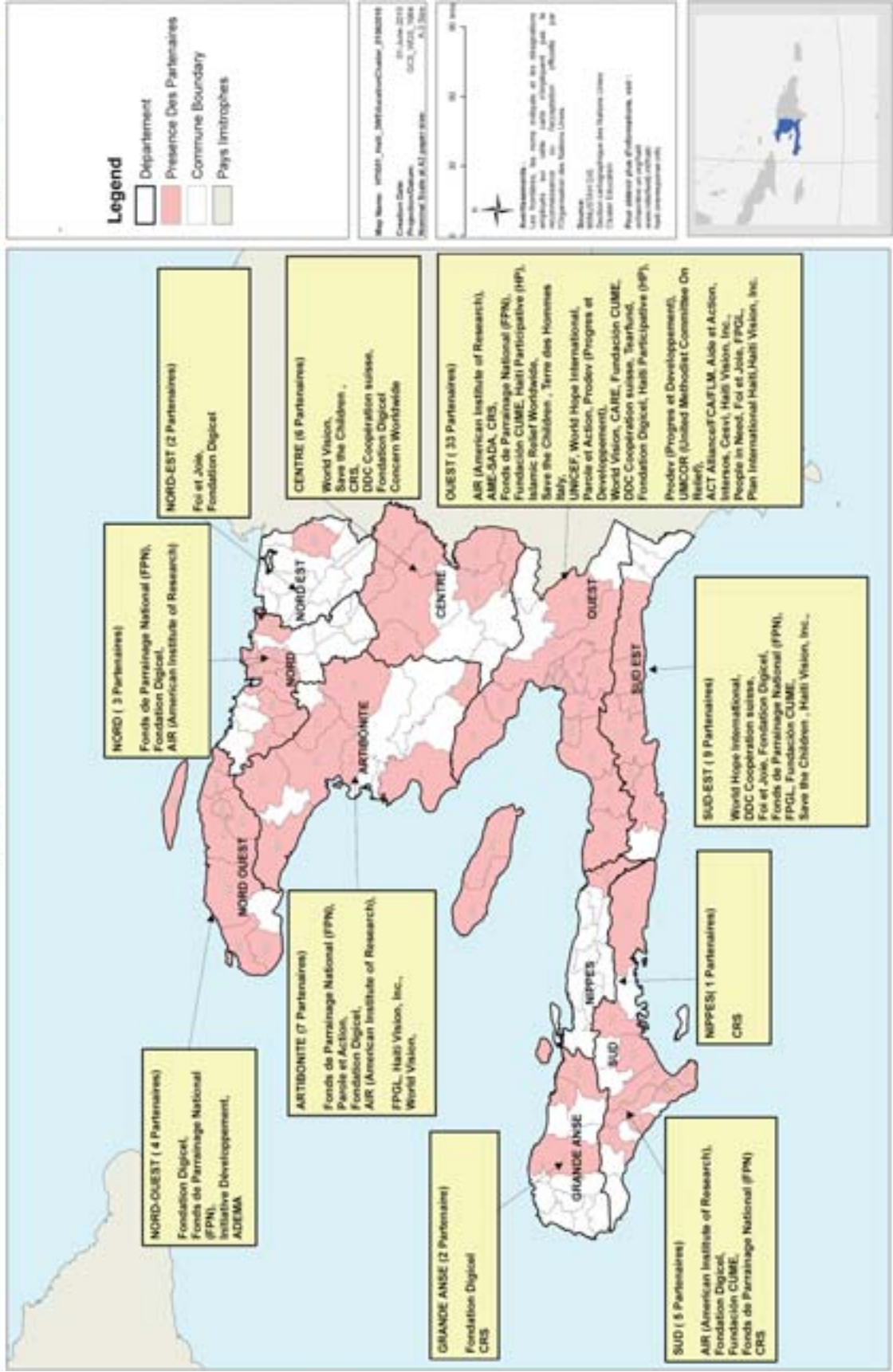
Objective	Indicators	Data Source	Achieved to date	Target for remainder of 2010 Assumption: Projects are 100% and timely funded
4. Mainstream gender equality and environmental management, including disaster risk management in reconstruction and recovery efforts.	4.1. Number of activities implemented to mainstream gender equality in recovery and reconstruction efforts across projects and sectors.	Project sheets and survey conducted for M&E reports	<p>CFW and FFW activities have engaged women whenever possible. About 30-40% of about 200,000 people engaged in CFW and FFW are women. The indirect beneficiaries include youth, children and elderly benefiting from the ongoing CFW/FFW.</p> <p>Specific needs of people who have to live with permanent disability after the quake, as well as children, youth and the elderly must be taken into consideration. Reduction of funds required for Early Recovery activities will lead to further diminution of gender mainstreaming activities.</p>	1 to 3 collaborative activities and joint project proposals developed and implemented to promote and increase activities that address specific needs of people with disability, single-headed women households, youth, children and the elderly.
4.2. Number of projects to mainstream environmental and disaster management in reconstruction and recovery responses.		Project sheets and survey conducted for M&E reports	<p>On hold waiting for funding: 1 project dealing with the elaboration of disaster mitigation contingency planning started and 6 projects dealing with hazards preparedness, disaster management, technical assistance for environmental mainstreaming, and promotion of environmentally sound sanitation and other aspects.</p>	At least three projects up and running (including environmental mainstreaming technical assistance activities) + disaster risk mitigation contingency planning endorsed by the Government and the related operational mechanisms are put in place.

Education

Objective	Indicators	Data Source	Target for 2010	Achieved to date	Target for remainder of 2010	
1. Clear debris from heavily damaged and destroyed schools to allow for the resumption of classes in temporary learning spaces.	1.1: Number of earthquake-damaged or destroyed schools cleared of debris.	MENFP	250	176	74	
	1.2: Number of children benefiting from temporary learning spaces.	MENFP and cluster members	850,000	158,598	691,402	
	1.5: Number of school tents procured and installed.	Cluster members	4,000	1,664	2,336	
	2. Ensure the quality of emergency education services.	2.1: Number of teachers trained.	MENFP	10,000	2,687	7,313
		2.2: Number of children benefiting from provision of basic learning materials.	Cluster members	700,000	209,613	490,387
3. Support the implementation of the MoE psycho-social strategy to reach all school-going children.	3.1: Number of education officials trained in psycho-social methodologies.	MENFP	5,000	3,079	1,921	
4. Increase access to quality early childhood development (ECD) services for children age 0-6.	4.1: Number of children benefiting from early childhood development (ECD) services.	Cluster members	100,000	53,179	46,821	



HAITI - Cluster Education: Présence des partenaires
01 June 2010



Emergency Telecommunications

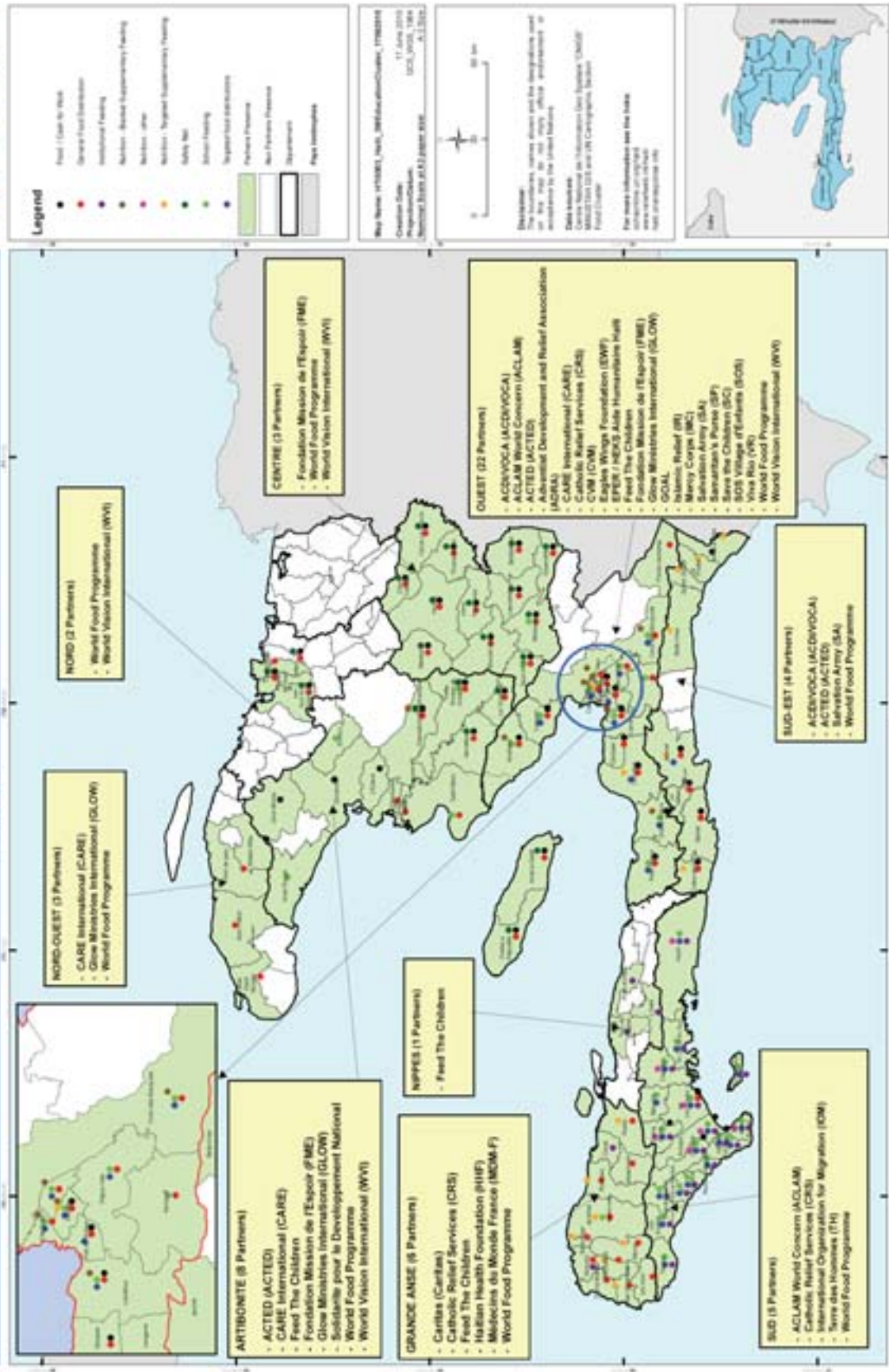
Objective	Indicators	Data Source	Achieved to date	Target for remainder of 2010	Comments
1. Provide emergency telecommunications and data-communication networks and services to the humanitarian community.	1.1: ETC Project Plan prepared and approved based on initial assessment.	HEP Haiti – ETC minutes	Yes	1	Project plan was approved and final revision will be made depending on available funds.
	1.2: Number of local humanitarian organizations receiving emergency telecommunications and data-communication services.	HEP Haiti – ETC minutes	50	50	All target agencies receiving services and to continue for duration of the emergency.
	1.5: Local ETC Working Group established and regular meetings held.	HEP Haiti – ETC minutes	23	8	Weekly and ad hoc meeting held for the first three months, now scheduled as needed (approx monthly).
	1.4: Number of fully MOSS compliant COMCENs established in operational areas.	HEP Haiti – ETC minutes	4	1	These COMCENs provide VHF security communications coverage throughout Haiti.
	2.1: Number of local humanitarian organizations included in the common networks.	HEP Haiti – ETC minutes	50	50	All target agencies included to continue for duration of the emergency.
2. Provide comprehensive IT and telecommunications services for WFP and logistics operations.					
3. Train staff in efficient and appropriate use of telecommunications equipment and services.	3.1: Training programmes on use of ETC services provided and number of individuals and group training programmes.	HEP Haiti – ETC minutes	50	10	To date, ETC has presented 50 courses and trained about 450 users. Additional courses will be presented based on new demands, which are estimated to be 10 courses for 50 users.

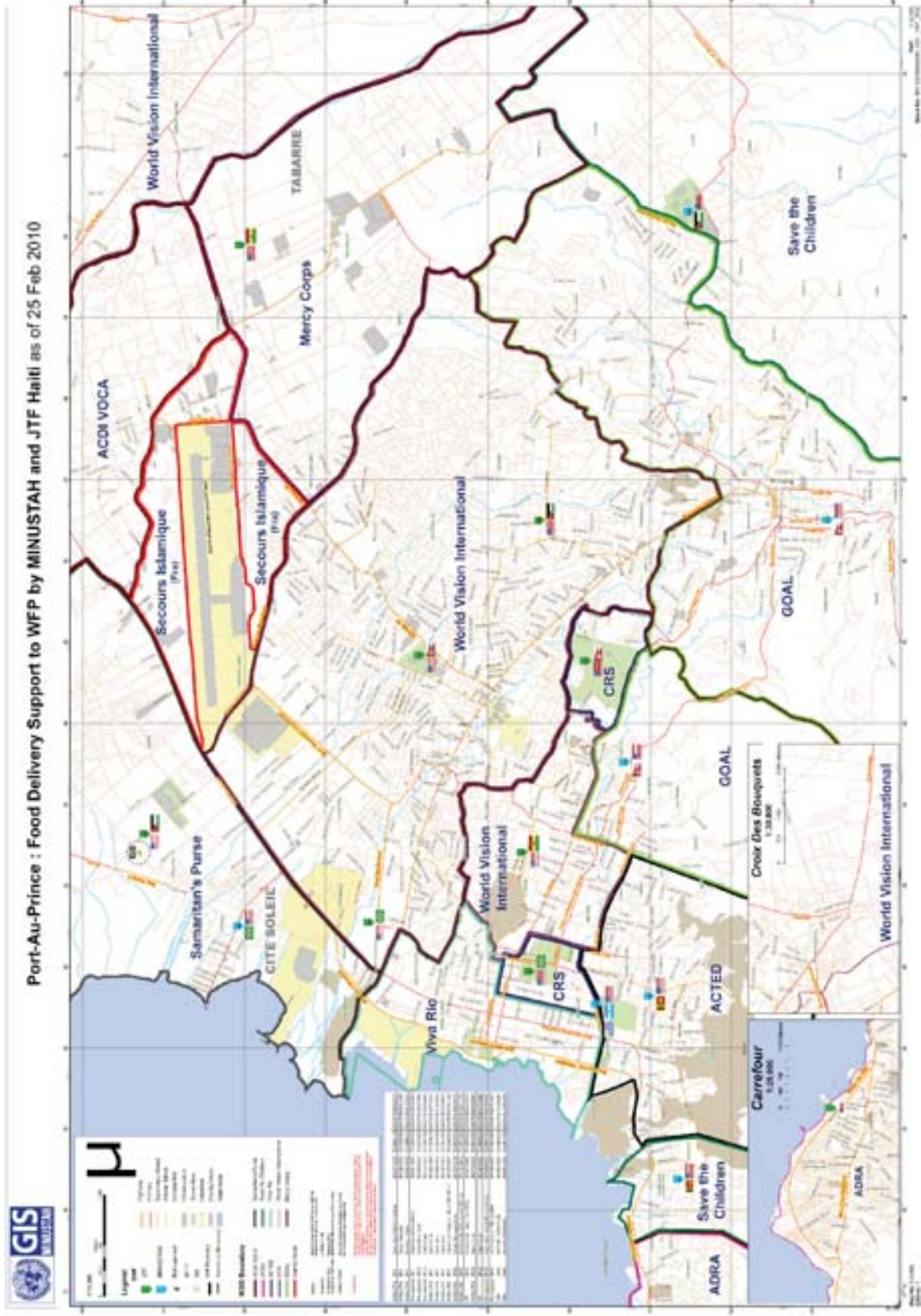
Food

Objective	Indicators	Data source	Achieved to date	Target for remainder of 2010
<p>1. Phase I: Meet the immediate food needs of the most vulnerable populations through the provision of ready-to-eat food.</p>	<ul style="list-style-type: none"> • Number of earthquake-affected food-insecure population receiving food rations. • Quantity of food distributed in MT for earthquake-affected populations vs. planned. • Quantity of commodities purchased per type of commodities. 		<p>GFD: 4,309,987</p>	<p>GFD: 2,000,000.</p>
<p>2. Provide targeted food assistance to vulnerable communities in hospitals, orphanages <i>(finished now)</i> through mobile distributions and organized provision of school meals in primary schools and to all school-age children and nutritional support to at-risk and malnourished pregnant and lactating mothers and children under five.</p>	<ul style="list-style-type: none"> • Number of primary school-age children in school having receiving assistance through school feeding programmes. • Number of primary school-age children in school having receiving assistance through school feeding programmes. • Number of people assisted in hospitals. • Number of people assisted in orphanages. • Number of children under five, pregnant and lactating mothers receiving blanket supplementary feeding ration. • Number of children under five, pregnant and lactating mothers receiving treatment supplementary feeding. 		<p>Treatment Supp Feeding: 73,354 Phase 1 preventative supp feeding: 85,285. Phase 2: 360,639 meals for school-age children: 561,846 hospitals and orphanages: 76,051 individuals.</p>	<p>Treatment Supp Feeding: 101,250 Phase 1 preventative supp feeding: 70,000. Phase 2: preventative supplementary feeding 550,000. Meals for school-age children: 800,000. Hospitals and orphanages: 120,000 individuals.</p>
<p>3. Move to food and CFW activities.</p>	<p>Number of people benefiting from FFW.</p>		<p>C/FFW: 49,100 families.</p>	<p>C/FFW: 700,000 people.</p>



HAITI - Cluster Food: Partners and Activities Presence
17 June 2010





Health

Objective	Indicators	Data Source	Achieved to date	Target for remainder of 2010
1. Effective coordination of the Health Cluster response, needs and disaster risk assessment, monitoring & evaluation, under the NHA's authority.	1.1: Ensure mapping and updating of activities of implementing agencies.	Health Cluster	Complete database of which agencies are doing what where.	Updates June, September and December 2010
	2.1: Sentinel sites reporting rate on communicable diseases occurrence.	MSP/PAHO	50% of IDP sentinel surveillance sites report.	60%
2. Ensure outbreak control and disease surveillance.	2.2: Vaccines coverage (MR, DPT, DT) during immunization campaigns in affected area.	MSP/PAHO-WHO/UNICEF	80% during first round	80% during second round
	2.3: Percentage of targeted families (in temporary settlements) provided with a mosquito net target 95%.	MSP/PSI	10% (bed nets are in the pipeline).	95%
3. Ensure adequate water supply and environmental health.	3.1: Percentage of public hospitals with water quality test results that reach guidelines values 80% of the time.	MSP/PAHO-WHO		60%
	3.2: Percentage of public hospitals with a comprehensive health-care waste management strategy defined.	MSP/PAHO-WHO		60%
4. Re-activation of basic health-care services for a more integrated health system base in primary health care.	4.1: Percentage of public network hospitals providing basic health services, as recommended by WHO.	MSP/PAHO-WHO		100%
	4.2: Campsites of >5,000 people covered by either fixed or mobile services.	Health Cluster	40%	60%
5. Effective treatment and rehabilitation of injured patients	4.3: Proportion of institutional deliveries.	MSP/PAHO-WHO	24%	30%
	4.4: Percentage of health services with clinical management of rape supervisors + emergency contraception + post-exposure prophylaxis (PEP) services available.	Health Cluster		100%
6. Ensure availability of essential drugs and medical supplies	5.1: Percentage of people with physical impairment due to the earthquake who have had access to rehabilitation services.	MSP/PAHO-WHO/Handicap Int/CBM		60%
	6.1: Number of public hospitals with most critical drugs and medical supplies on hand (based on established list) based on on-site assessments.	MSP/PAHO-WHO	100%	100%
6.2: Value of medicines and medical supplies distributed.	6.2: Value of medicines and medical supplies distributed.	PAHO-WHO/NGOs	Over \$2,000,000	
	6.3: Percentage of hospitals and departmental depots that meet international standards of good drug management.	MSP/PAHO-WHO		

Logistics

Objective	Indicators (with targets)	Data Source	Achieved to date	Total target for 2010
1. Continue to provide common logistics services to support the humanitarian community's response.	1.1: Number of storage facilities made available to the humanitarian community.	Log Cluster GIS Services.	3	6
	1.2: Number of logistics hubs made available to the humanitarian community.	Handicap International/Atlas Logistics Reports and Log Cluster GIS Services.	4	4
	1.5: Number of trucks made available countrywide to the humanitarian community.	Handicap International/Atlas Logistics Reports.	50	70
	1.4: Provision of sea assets to the humanitarian community.	Log Cluster/WFP.	0	1
	2.1: Number of coordination meetings held.	Log Cluster.	36	45
	2.2: Number of maps published.	Log Cluster GIS Services.	12	27
	2.3: Establishment and participation in the Joint Operation Tasking Centre to coordinate UN agencies, DPKO, NGOs and military actors' operations.	Log Cluster, MINUSTAH.	1	1
	3.1: Number of workshops rehabilitated and/or built to support the deployment of the fleet of trucks operating in Haiti.	Handicap International/Atlas Logistics Reports and Log Cluster.	0	4
	3.2: Number of accommodation made available to humanitarian workers.	Log Cluster.	500	450
	3.3: Numbers of offices space made available to the humanitarian community.	Log Cluster.	180	220
4. Support the humanitarian community and nationals authorities by providing support to contingency planning for the cyclone season.	4.1: Number of assessment missions conducted in the frame of contingency planning.	Log Cluster, Direction of Civil Protection.	6	8
	4.2: Number of advanced prepositioning bases for logistics support (trucks, mobile storage tents, telecom equipment, prefab offices).	Log Cluster.	0	5
	4.3: Number of joint simulation emergency exercises held.	Log Cluster, Direction of Civil Protection, MINUSTAH.	0	4
	4.4: Number of storage facilities made available to the humanitarian community for pre-positioning needs.	Handicap International/Atlas Logistics Reports and Log Cluster.	4	4

SPECIAL OPERATION 10780/G/2009196

LOGISTICS CLUSTER

Port-au-Prince

USERS 93 DISPATCHES THIS MONTH

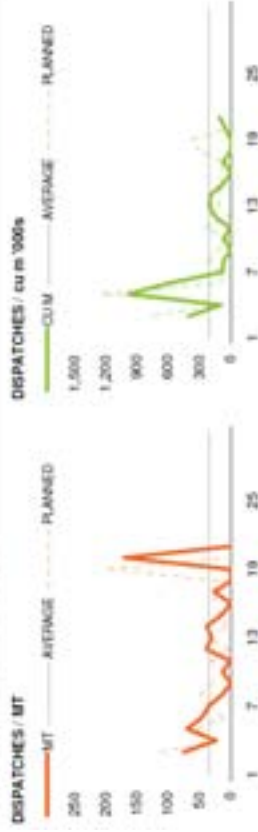
609 MT / 3,190 cu m

DISPATCHES, TOTAL

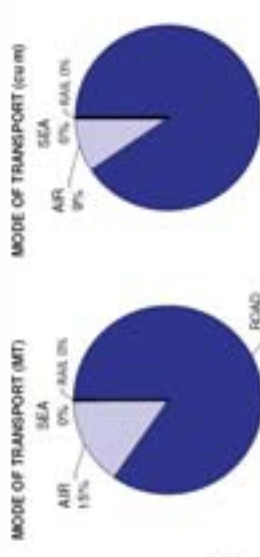
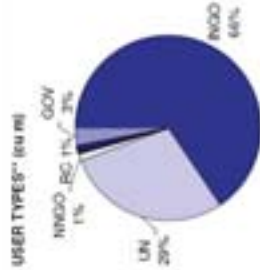
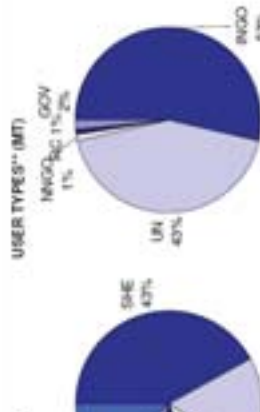
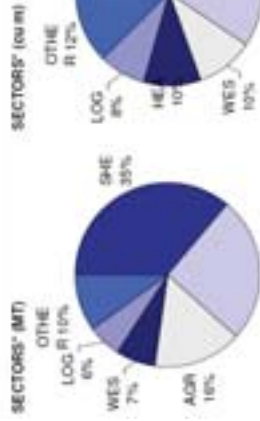
4,747 MT / 18,666 cu m

21 May 2010

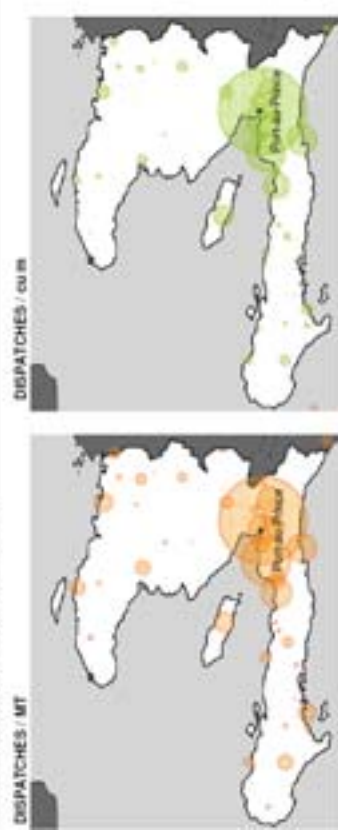
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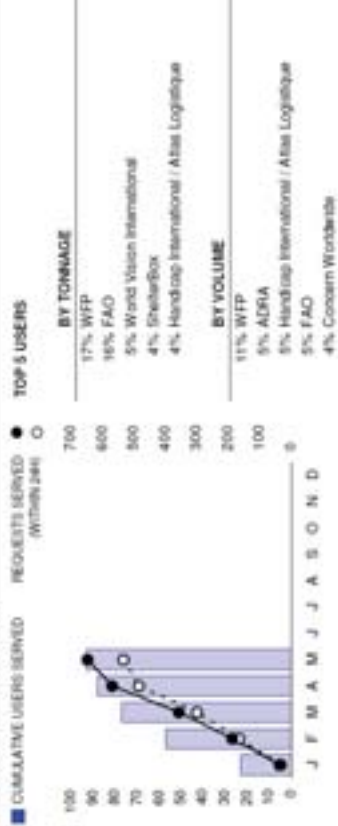
Dispatches



Dispatches by destination



Users & Requests



SPECIAL OPERATION 10760.6.200108

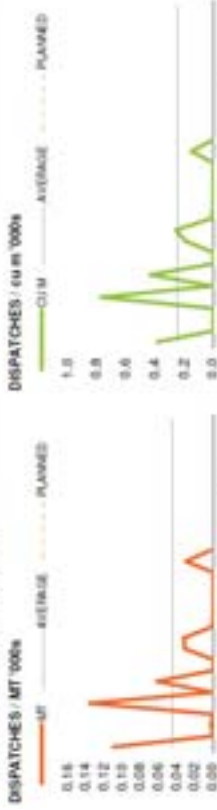
LOGISTICS CLUSTER Santo Domingo

USERS DISPATCHES, THIS MONTH
70 **409 MT / 2,207 cu m**

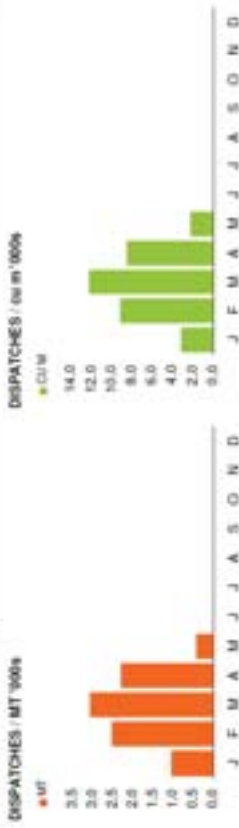
DISPATCHES, TOTAL
9,319 MT / 35,063 cu m

21 May 2010

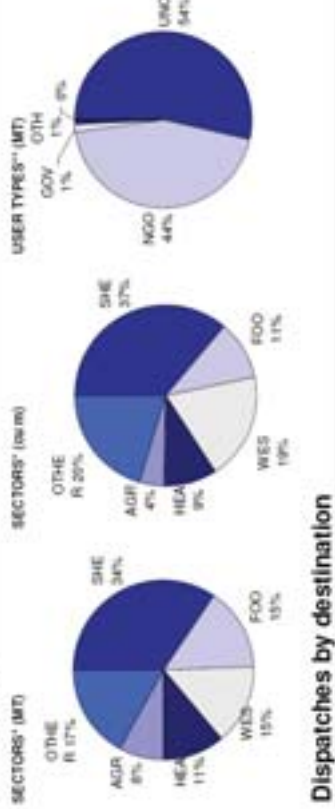
Dispatches this month



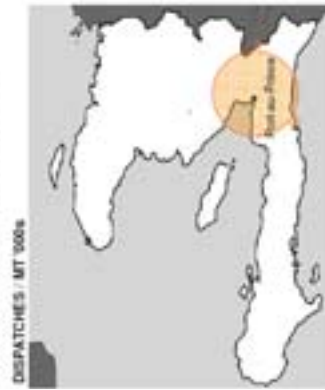
Dispatches total



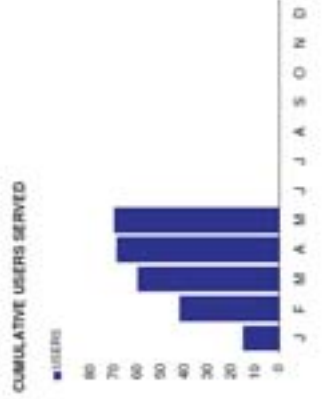
Dispatches



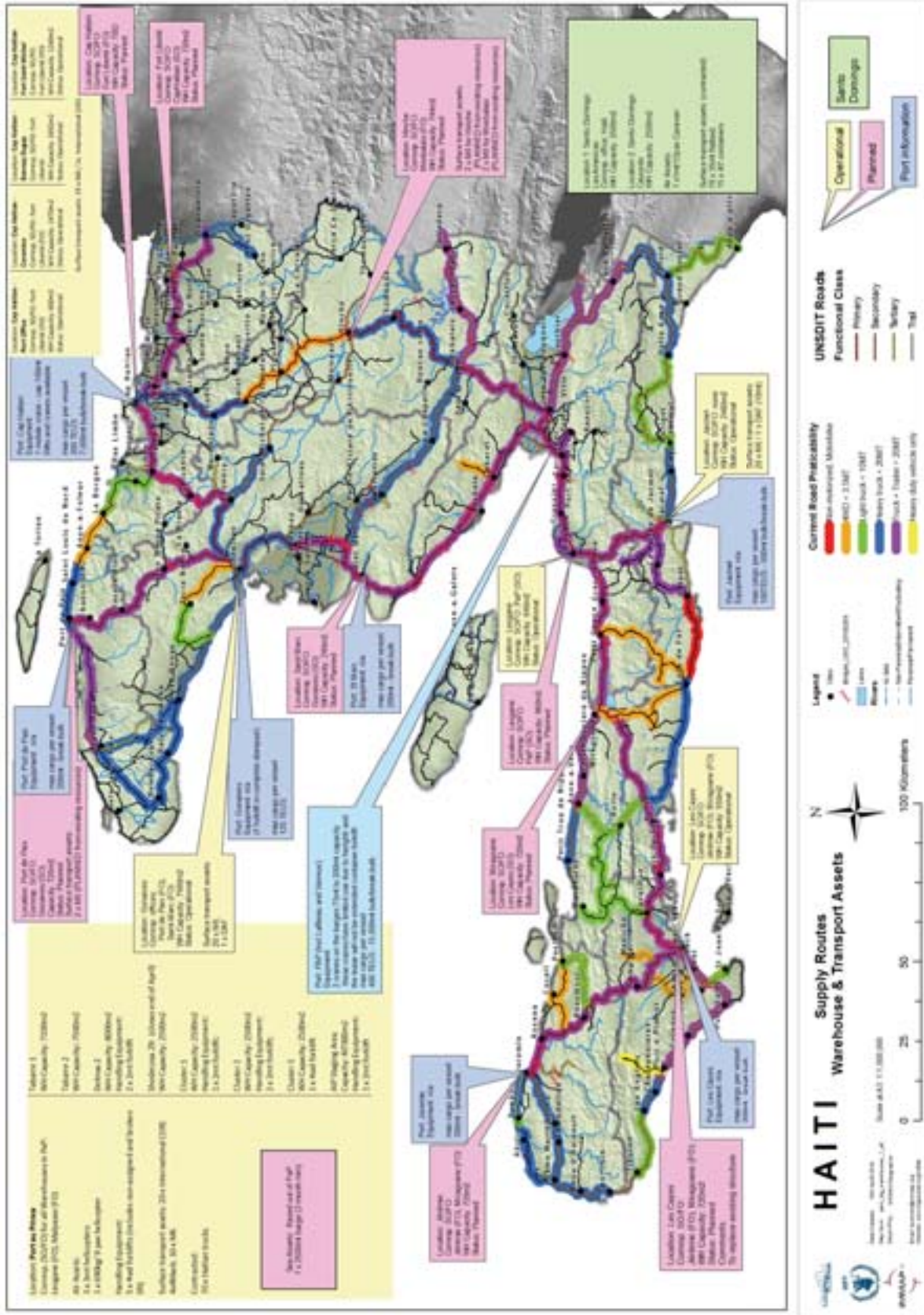
Dispatches by destination



Users



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Nutrition

Objective	Indicators	Data Source	Achieved to date	Target for remainder of 2010
1. Prevent mortality and morbidity associated with malnutrition.	1.1: 5,625 severely malnourished children are admitted into the appropriate selective feeding centre (projected incidence 1.5% and coverage of 50%).	Feeding centre database.	- 1200 children under five admitted into outpatient feeding centre. - 200 children admitted into inpatient facilities.	4,225 children to be admitted.
	1.2: 15,750 moderately malnourished children admitted into the appropriate selective feeding programme.	Feeding centre database.	Approximately 15,750 children admitted into supplementary feeding centres.	8,000 children to be admitted.
	1.5: 550,000 children 6-59 months and pregnant and lactating women receive blanket supplementary feeding products.	Partner reports.	- 550,000 children 6-59 months and pregnant and lactating women received supplementary plumpy, HEBs and/or CSB.	Round II to be completed and Round III to start.
2. Improve infant and young child feeding practices and outcomes.	2.1: Ensure there are adequate PCNBs functioning according to the strategy (200- will revise target to 100 as needs evolve).	Monthly partner reports.	- 92 PCNBs functioning. - Five PCNB trainings conducted.	Depends on needs, but most likely 50 more tents to be established. Decentralized trainings to be conducted in departments. Will depend on the situation.
	2.2: Support partners and work through the cluster to monitor and prevent breaches of the International Code of Marketing of Breastmilk Substitutes. Donations of powdered milk and/or other breastmilk substitutes are prevented through engagement with other clusters and the Government (DPC).	Logistics' cluster reports and import monitoring.	- Approximately 25 breastmilk substitute donations intercepted.	
3. Prevent micronutrient deficiencies.	3.1: Ensure that 144,000 children 6-59 months receive vitamin A capsules during the vaccination campaigns.	MSPS vaccination reports.	Approximately 100,000 children 6-59 months received vitamin A during the vaccination campaign.	Conduct child health weeks in June.
	3.2: Ensure that 550,000 children 6-59 months and pregnant and lactating women receive either lipid-based nutrient spread, micronutrient powders (sprinkles) or multiple micronutrient capsules during the third round of the blanket feeding distribution.	Partner reports.		100%

Objective	Indicators	Data Source	Achieved to date	Target for remainder of 2010
4. Ensure that timely and accurate information is available to monitor nutritional trends.	4.1: Conduct nutrition surveys in disaster-affected areas.		65% of clusters completed in three zones.	35% of clusters remain in three zones.
	4.2 Establish sentinel sites to monitor monthly trends.		Methodology drafted.	Selection and establishment of sites; routine data collection.
	4.3 Establish feeding centre database to monitor monthly selective feeding centre admissions and performance indicators.		Monthly reporting format developed.	Database needs to be created.
	4.4 Establish infant and young child feeding monthly reporting for partners to monitor trends.		Completed.	Ongoing data analysis.
5. Improve and protect household food security through livelihood initiatives.	Define nutritionally vulnerable households and target with conditional cash transfers and fresh-food vouchers to promote food security and micro-credit linked with alternative fuel use (female-headed households, border households, etc.).		No progress.	

Protection

Objective	Indicators	Data Source	Achieved to date	Target for 2010
1. Identify gaps in the protection of earthquake-affected people to enhance protection responses. Focus on gaps in responses related to durable solutions for IDPs, particularly in the context of the Safe Shelter Strategy.	1.1: 4 Participatory assessments on protection of IDPs in camps and in host families completed.	OHCHR, UNHCR	50%	100%
	1.2: 12 situation or thematic reports generated and disseminated by the Protection Cluster, including on the issue of evacuation, relocation and durable solutions.	OHCHR, UNHCR	30%	100%
	1.5: Protection issues monitored in informal and formal settlements, with a particular focus on vulnerable groups.	OHCHR, IRC, USCRI/GARR, ARC, HI	40%	70%
	1.4: Recommendations and action points to relevant national and international actors on protection issues are made.	OHCHR	50%	70%
	2.1: 12 trainings on protection of IDPs undertaken for camp managers, human rights monitors and national authorities.	OHCHR, UNICEF, OCHA, UNFPA, UNHCR	30%	80%
4. Strengthen the response of communities and relevant actors including the Government of Haiti, and national and international organizations to protection challenges, in particular the protection of vulnerable groups.	2.2: Vulnerable individuals and groups, in particular disabled, old people, people with mental disorders and individuals with no support, have access to protection and assistance.	OHCHR, UNHCR, HI	40%	80%
	2.3: 85 quick-impact projects implemented and relief protection items benefiting 400,000 IDPs in host communities and camps, in particular the most vulnerable people.	UNHCR, OHCHR	30%	100%
	2.4: At least three national institutions' (OPC, DPC, MOJ) capacity to respond to protection issues, particularly in the context of reconstruction, return and local integration, are reinforced through the provision of material support and human resources.	UNHCR, OHCHR	10%	80%
	3.1: Policy and strategy papers on thematic protection issues are drafted.	OHCHR	50%	70%
5. Advocate rights-based interventions for the protection of affected communities by setting policies and strategies.	3.2: Information on key protection issues is provided to affected populations, targeting in particular people with special needs.	OHCHR, IMS, HI, Internews	40%	90%

Protection Sub-Cluster: Child Protection

Objective	Indicators	Data Source	Achieved to date	Target for 2010	Comments
1. Prevent and respond to separated and unaccompanied children.	# of active sub-cluster members	3W mapping	34	60	
	# of caseworkers trained to register, trace and follow up with separated children	HUB FTR	114	250	
	# of children registered total	HUB FTR	1,501	5,000	
	# of families actively traced	HUB FTR	299	5,000	
	# of families currently in mediation	HUB FTR	91	1,500	
	# of child trafficking victims reunified with their families through the Family Tracing and Reunification Programme	HUB FTR	33	350	
	% of children who have been reunified with their families	HUB FTR	15%	30%	
	GoH child protection strategy (yes/no)	MAST/IBESR	No	Yes	
	# of child trafficking victims intercepted and provided with necessary support (BPM)	BPM	40	500	
	# of IBESR offices set up and fully operational	IBESR	1	5	
2. Strengthen the Government of Haiti's capacity to protect children from violence, trafficking, exploitation, abuse and neglect.	# of IBESR staff trained on temporary care and psycho-social support	HUB FTR, IBESR, cluster members	140	140	
	# of BPM antennae (operational sites)	BPM	2	5	
	# of BPM agents in border areas	BPM	4	8	
	# of BPM staff trained on temporary care and psycho-social support	BPM, UNICEF, MINUSTAH	0	50	
	# of Child-Friendly Spaces	3W mapping	200	350	
	# of children who benefit from psycho-social activities	3W mapping	55,000	350,000	
	Functional referral network in place (yes/no)	3W mapping	No	Yes	
	# of protection committees established	3W mapping	0	175	
	# of protection cases identified and referred to relevant authorities/services	UNICEF, IBESR	0	200	Data collection system not yet established
	# of women and girls assisted with relevant services	GBV Sub-Cluster	0	200	
3. Strengthen and support for community-based mechanisms for child protection, including creation and support for community-based child protection focal points and networks, and creation and implementation of child-friendly spaces with psycho-social support for children and their caregivers.	# of women's centres established	GBV Sub-Cluster	0	5	
	# of women and girls trained on life-skills issues	Cluster members, GBV WG	0	40,000	
	# of trainings conducted with relevant staff working in CFS on GBV	GBV Sub-Cluster CFS WG	0	150	

Protection Sub-Cluster: Prevention of and Response to Gender-Based Violence (GBV)

Objective	Indicators	Data Source	Achieved to date	Target for remainder of 2010
<p>1. Preventing GBV through work with security and other sectors.</p>	<p>1.1: Training conducted for camp management, and other relevant actors on GBV prevention for displaced people.</p> <p>1.2: NFI distributed to protect women and girls from GBV, exploitation and abuse.</p> <p>1.5: Programmes funded and implemented for vocational trainings and livelihoods for vulnerable women and girls.</p>	<p>Training reports, sub-cluster updates.</p> <p>Grants and sub-grants made through Flash Appeal funding.</p> <p>Grants and sub-grants made through Flash Appeal funding.</p>	<p>One training for Camp Management conducted in collaboration with the Protection Cluster.</p> <p>Distribution of solar lamps, dignity kits, etc., to 39,000 women and girls.</p> <p>0</p>	<p>Ongoing camp management trainings as needed. Minimum of three more trainings provided.</p> <p>Distribution of 20,000 solar lamps. Distribution of 50,000 dignity kits.</p> <p>Minimum of five livelihoods/vocational training programmes are available to women and girls.</p>
<p>2. Ensuring women and girl survivors of GBV have access to essential services.</p>	<p>1.4: GBV prevention campaigns are carried out across the country (in Port-au-Prince and outside).</p> <p>1.5: Participation in patrols and security assessments to ensure that women and girls are receiving adequate protection.</p> <p>2.1: Reference information is communicated to ensure referrals can be made for survivors.</p> <p>2.2: Number of case managers trained.</p> <p>2.3: Number of humanitarian service providers trained on adequate response to GBV survivors.</p> <p>2.4: GBV response messages aired across the country.</p>	<p>Sub-cluster updates.</p> <p>Assessment reports, patrol reports, sub-cluster updates.</p> <p>Referral cards & leaflets are printed and distributed</p> <p>Training reports, sub-cluster updates.</p> <p>Training reports, sub-cluster updates.</p> <p>Sub-cluster updates.</p>	<p>Six messages aired on all national radio stations.</p> <p>Participation in Joint Security Assessment and day/night patrols of camps.</p> <p>25,000 cards, 25,000 leaflets.</p> <p>0</p> <p>One training conducted on GBV basic concepts for members of GBV Sub-Cluster.</p> <p>One message aired on all national radio stations.</p>	<p>Continuous airing of GBV messages across the country on seven major radio stations.</p> <p>Ongoing participation in security assessments and patrols.</p> <p>Referral card details are verified monthly and a minimum of 50,000 referral cards distributed.</p> <p>Minimum of 100 direct service providers trained in case management.</p> <p>Minimum of 100 humanitarian actors trained on adequate response to GBV survivors.</p> <p>Creation of six new GBV response messages aired across the country on seven major radio stations.</p>

Objective	Indicators	Data Source	Achieved to date	Target for remainder of 2010
<p>3. Re-establishing monitoring, reporting and coordination mechanisms.</p>	<p>3.1: Weekly coordination meetings are conducted with relevant actors on issues of GBV response and prevention. 3.1: Ensure mapping and updated activities nationwide.</p>	<p>Meeting minutes. Complete 3W database.</p>	<p>18 meetings conducted since January 12, 2010. Initial mapping completed through June.</p>	<p>Minimum of 25 meetings conducted. Updated mapping every three months (September, December).</p>
	<p>3.2: Existence of GBV Sub-Cluster Working Groups at the sub-national level (nine departments + Port-au-Prince).</p>	<p>Sub-cluster updates, Meeting minutes.</p>	<p>3 of 9 sub-national working groups established.</p>	<p>Six sub-national working groups established.</p>
	<p>3.3: Number of service-providing agencies trained in the use of the national form for data collection.</p>	<p>Training report, sub-cluster updates.</p>	<p>0</p>	<p>Minimum of 50 service-providing agencies trained on data sharing protocols and use of the national form for data collection.</p>
	<p>3.4: National form for data collection revised to be aligned with international good practice.</p>	<p>Meeting minutes, sub-cluster updates, forms submitted.</p>	<p>0</p>	<p>Minimum of two meetings held to discuss challenges related (must include trained service providers) to utilizing the national form, document clarifying ongoing challenges and recommendations for changes.</p>
	<p>3.5: Number of service providers who are part of the GBV Sub-Cluster using the national form for data collection for reporting cases.</p>	<p>Forms submitted.</p>	<p>0</p>	<p>50 direct service-providing agencies are actively engaged in sub-cluster at either national or sub-national levels and using the national form.</p>

Shelter & Non-Food Items

Objective	Indicators	Data Source	Achieved to date	Target for remainder of 2010	Comments
1. Emergency shelter within three months, before the hurricane season.	1.1: Percentage of families receiving NFI support within three months. Estimated number of families affected 302,977. 1.2: Percentage of families receiving waterproof cover within three months. Estimated number of families affected 302,977.	Shelter Cluster	Blankets 83%, jerry cans 99%, hygiene kits 100%, kitchen sets 49%, mats 25%, mosquito nets 33%, ropes 55% tool kits 9% of estimated needs. 350,466 households received emergency shelter.	Remaining distribution focused on gap filling/covering wear & tear needs.	
	1.5: Percentage of families whose houses have been assessed for seismic, rain & hurricane risk – 188,383 homes destroyed or damaged. ³²	Ministry of Public Works /UNOPS	70,000 public and private buildings surveyed. Another 40,000 to be surveyed by 12 June.	Remaining 400,000-900,000 to be surveyed.	UNOSAT data: one million earthquake-affected buildings. Quantity of additional buildings to be surveyed, resource dependent.
2. Full transitional shelter within the next 12 months.	2.1: Percentage of families receiving support with hurricane-resistant shelter before 2011. Current target, 123,350 transitional shelters by 1 June 2011.	Shelter Cluster	1,873 transitional shelters built.	Best-case scenario, 60,000 transitional shelters constructed by end of 2010 of planned 123,350.	* Revised timeline from February appeal. Previous appeal – complete 100,000 transitional shelters by February 2011. Key reasons for delay: land shortage; limited local capacity (rubble clearing); rain/hurricane season.
	2.2: Transitional shelter targeting criteria developed & implemented.	Shelter Cluster Technical Working Group	Production & adoption of <i>Family Shelter Response Guidelines</i> – April 2010. Vulnerability focused: function of income, tenure, security and special needs.	Continue to promote adoption/usage of <i>Family Shelter Response Guidelines</i> through Shelter Cluster.	N/A

³² GOH – see OCHA Humanitarian Bulletin, Issue no. 3, 24th May.

Objective	Indicators	Data Source	Achieved to date	Target for remainder of 2010	Comments
2. Full transitional shelter within the next 12 months (cont.)	2.3: Earthquake-affected families have access to accurate public information on shelter-related hazards - 188,383 homes destroyed or damaged. ³³	Shelter Cluster Ministry of Public Works /UNOPS MINUSTAH	Outreach programme on safe building practice & natural hazard-resistant construction. <i>First Phase complete: 50,000 information packages distributed in largely rural areas.</i> 70,000 public and private buildings surveyed for structural damage. Another 30,000 to be surveyed by 12 June.	<i>Second Phase: Outreach programme on upgrading emergency shelters. Target 50,000 emergency shelter dwellers in camps.</i> Completed by August 2010. Remaining 400,000-900,000 to be surveyed by end of 2010. Media campaign on best building practices. Completed by August 2010.	UNOSAT data: one million earthquake-affected buildings. Quantity of additional buildings to be surveyed, resource dependent.
3. Detailed gathering of all transitional shelter needs in the next six months, adopting a zoned structure with shelter actors assessing & sharing the needs in zones they work, avoiding gaps & duplication.	3.1: Clear mapping of areas where shelter actors are implementing / assessing.	Shelter Cluster	Hubs established, TORs agreed & 60% of areas where shelter actors working mapped.	100% coverage (additional 40%) of where all shelter actors are implementing.	
	3.2: Coordination meetings with coordination hubs operating in Port-au-Prince, Léogâne, Petit-Goâve & Jacmel.	Shelter Cluster	Regular meetings held, minutes shared, including best practices.	Regular meetings continue & best practice shelter solutions shared among cluster members.	
	3.3: Shelter needs assessed in all key earthquake-affected areas.	Shelter Cluster	TOR agreed & reporting assessment templates shared.	Comprehensive shelter assessment of all shelter needs in key earthquake-affected areas.	

³³ GOH – see OCHA Humanitarian Bulletin, Issue no. 3, 24th May.

TRANSITIONAL SHELTER - WHO WHAT WHERE (29 May 2010)

Prepared by the Shelter Cluster
if you have any questions, please contact
shelter@ha.undp.org

Numbers represent
planned transitional
shelter construction

* denotes that an agency
is undertaking shelter,
materials & training or
repair and retrofitting

Total planned: 123,350
Funded: 95,754 (78%)
Completed: 1873

People in need of shelter

- 0 - 25,000
- 25,000 - 100,000
- 100,000 - 200,000
- 200,000 - 320,000
- No data

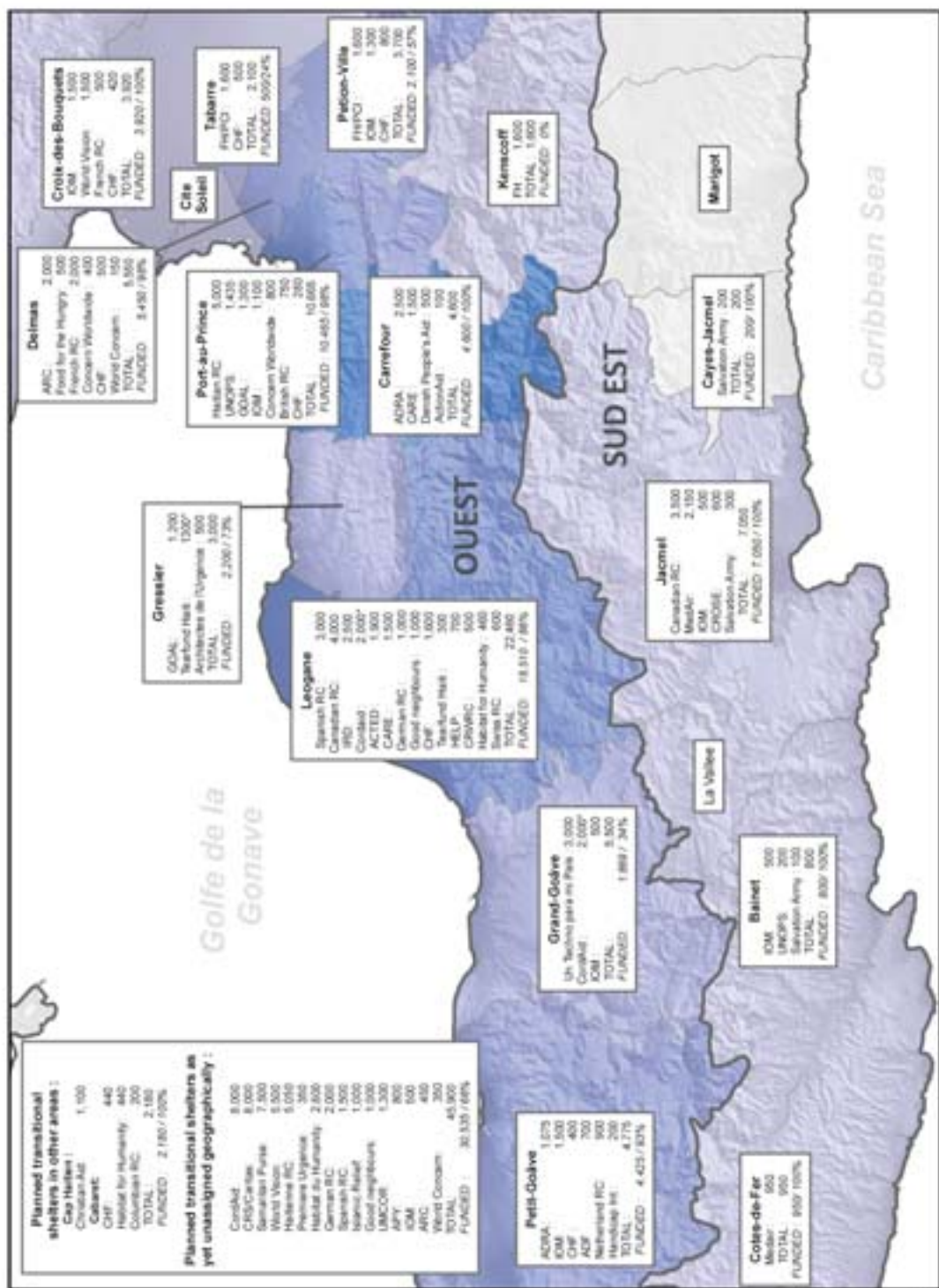
Department boundaries

People requiring shelter reported
by the Government (28 Feb 2010)
Affected community - community
where death, missing, injured people
living in shelter, needs unmet or at
risk - reported by the Government

Agency based on planned
transitional shelter numbers reported
to the Shelter Cluster. If you have any
updates to additional data, please
send to: shelter@ha.undp.org

Date created: 29 May 2010
Map number: SC/HA/10/0000000
Registration/label: Geographic / HA/2010
GEM Number: 80-2010-0000000-001

The location and use of transitional
shelters and associated data should not
be used for attribution or comparison
by the Shelter Cluster



TRANSITIONAL SHELTER - IMPLEMENTATION and COORDINATION (29 May 2010)

Port-au-Prince, Leogane, Gressier, Grand Goave, Petit Goave

IASC Inter-Agency Standing Committee
HAITI SHELTER CLUSTER

Produced by the Shelter Cluster
If you have any information to add to this map, please email: sheltermap2010.mf@gmail.com

Sections/Communities where agency has indicated that they will be implementing

Communes where agency has indicated that they will be working

- Commune
- Section/Communal
- T-Shelter implementing
- Activities
- Roads

T-Shelter Coordination Zones

- T-Shelter Zone without a lead point
- T-Shelter Zone with a lead point



Map Sources
Carte Nationale de l'habitation
Geo-Optim
UNEP/UNEP
Shelter Cluster

Date created: 29 May 2010
Map Number: 01/04, Shelter Zones
Registration: Geographic (1/02/04)
Scale Number: 01/010-00008-1/0

The shelter map is a work in progress and subject to change as more information is received.



WASH

Objective	Indicators	Data Source	Achieved to date	Target for remainder of 2010	Comments
1. Ensure equitable access to safe drinking water for displaced people, directly or indirectly affected by the earthquake, to cluster-defined standards.	1.1: % of people with access to 10L/person/day of safe water. 1.2: % of sites where trucked water distribution points meet national water quality standards (chlorine residual only).	NGO reports, DINEPA, survey, monitoring teams. NGO reports, WHO – water quality group, monitoring teams.	5 L/person/day N/A	10 L/person/day. 100% water points in camps with a free chlorine residual between 0.5 to 1.0 mg/L.	
2. Ensure adequate excreta disposal facilities for all earthquake-affected populations according to and appropriate for the type of settlement site so that no excreta is visible in site surroundings and no queues.	2.1: No of people per functioning latrine.	NGO reports, monitoring teams.	1:190	Average 1:50 but depending on settlement site.	
3. Contribute to reducing the risk of WASH-related diseases among earthquake-affected populations by mobilizing them to use provided water, sanitation and hygiene facilities effectively for better hygiene and dignity.	2.2: No of people per functioning shower/bathing space. 3.1: % of sites with adequate numbers of functioning hand- washing stations (soap and water present). 3.2% of men, women and children, including people with disabilities, who can demonstrate knowledge of key hygiene practices. 3.3% of sites with ongoing hygiene promotion activities using trained promoters.	NGO reports, survey, monitoring teams. NGO reports, surveys, monitoring teams. NGO reports, surveys, CDAC reports. NGO reports, monitoring teams.	1:250 N/A N/A N/A	Average 1:50 but depending on settlement site. 80% 100% of the affected population. 80% of people.	See the manual on standards for excreta disposal for hand- washing facility standards.



May 06, 2010

WASH Agency Partners Port-au-Prince

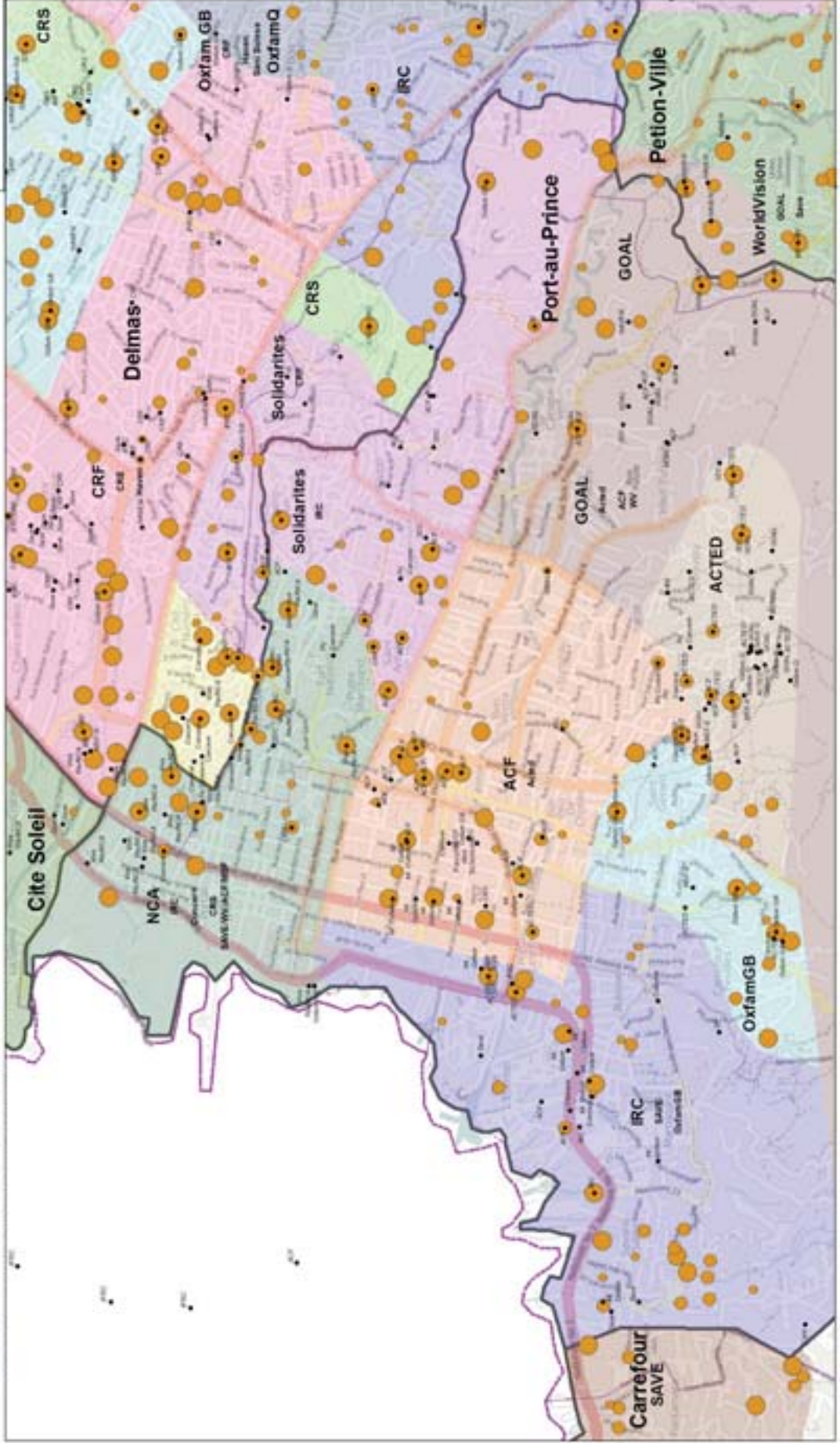
(Based on information received from 3 May activity reports)

Source: DTM, 08 April, 2010; Partners Activity Reports (3 May); Open Street Map

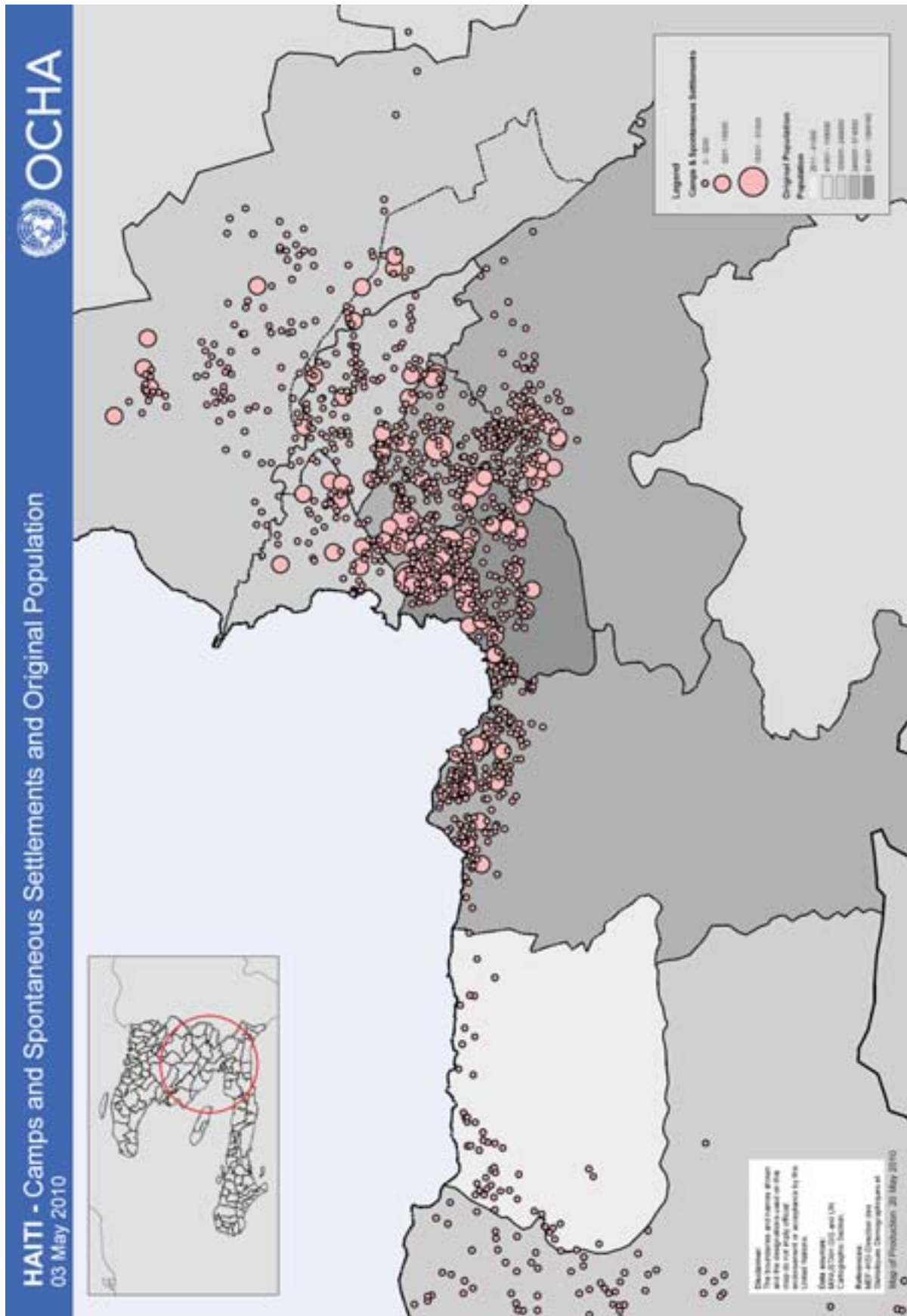
Legend

- WASH Partners (May 3) - Circle by house hold
- Comments - Square

Scale: 0 500 1000



ANNEX III: MAPS

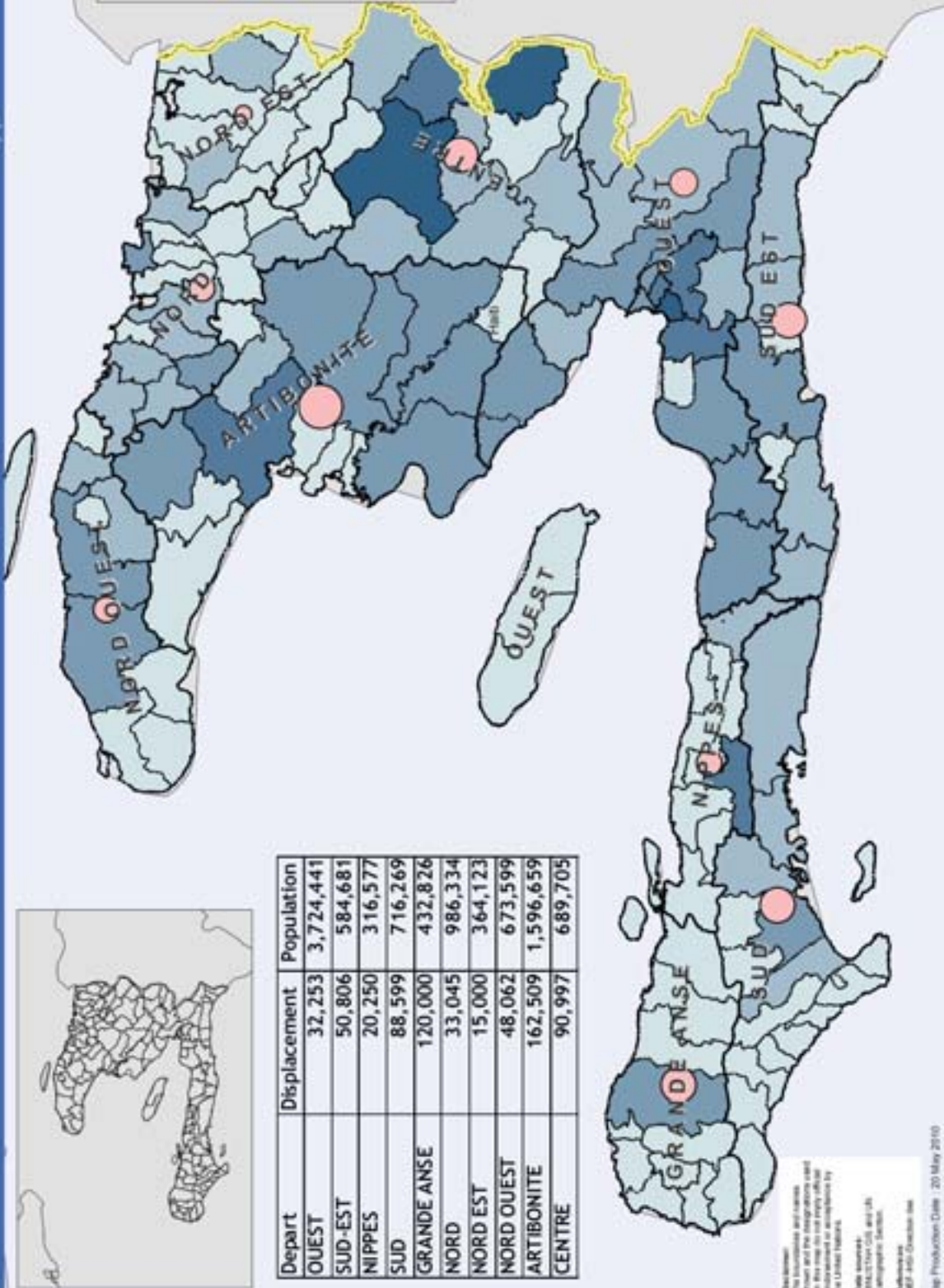




Depart	Displacement	Population
OUEST	32,253	3,724,441
SUD-EST	50,806	584,681
NIPES	20,250	316,577
SUD	88,599	716,269
GRANDE ANSE	120,000	432,826
NORD	33,045	986,334
NORD EST	15,000	364,123
NORD OUEST	48,062	673,599
ARTIBONITE	162,509	1,596,659
CENTRE	90,997	689,705



Dominican Republic

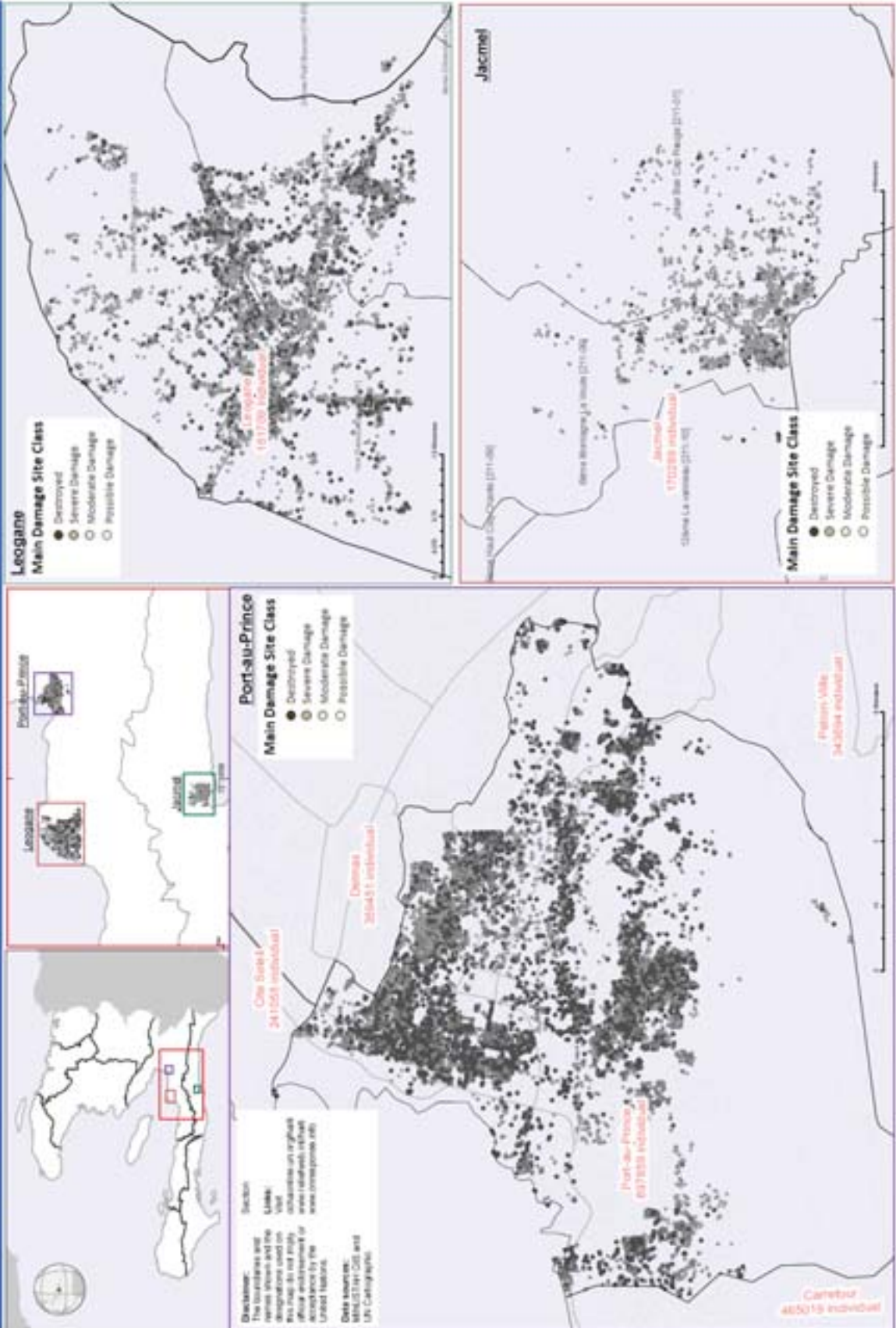


Data Source:
The boundaries and names shown on this map do not imply an endorsement or acceptance by UNICEF.

Data Source:
MAGNETIC, GIS, and GIS Cartography Section
Mapmakers
MSP - UNICEF

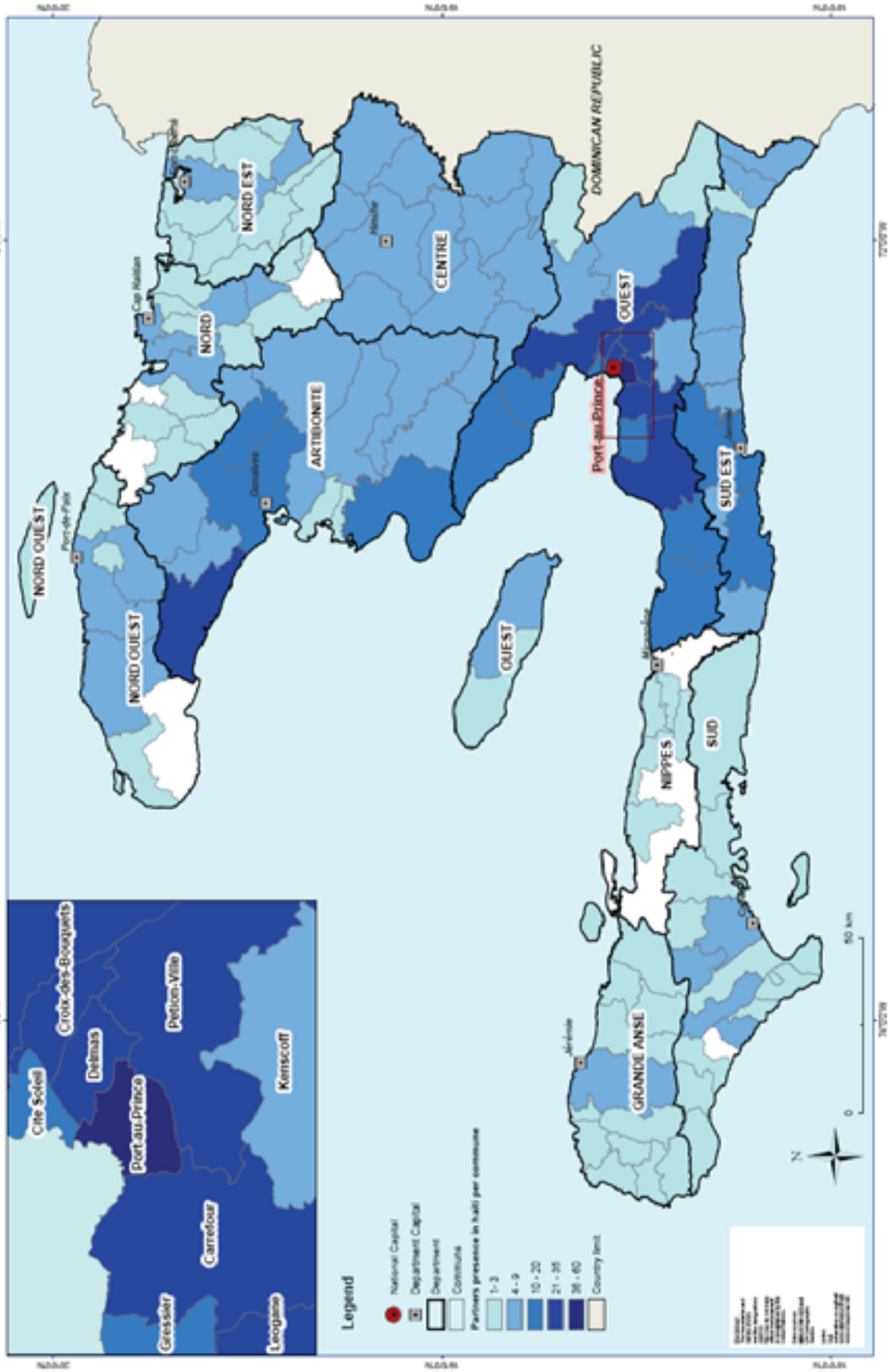
Map Production Date : 20 May 2010

HAITI - Building destruction - Satellite analysis (Port-au-Prince, Leogane, and Jacmel)
20 February 2010





HAITI - Clusters in Haiti, partners presence per commune
18 Mai 2010



ANNEX IV: ACRONYMS AND ABBREVIATIONS

3W	Who does What Where
AAI	Airline Ambassadors International
ACDI/VOCA	Agricultural Cooperative Development International / Volunteers in Overseas Cooperative Assistance
ACF	<i>Action Contre la Faim</i> (Action Against Hunger)
ACTED	Agency for Technical Cooperation and Development
ADEPFOMA	<i>Association des Directeurs d'Ecoles Privées de Fontamara et de Martissant</i>
ADF	America Development Foundation
ADRA	Adventist Development and Relief Agency
AECID	<i>Agencia Española de Cooperación Internacional para el Desarrollo</i> (Spanish Agency for International Cooperation)
AEPCGH	<i>initiative de la Région Guadeloupe</i>
AG	Assemblies of God
AHFH	Army Hawaii Family Housing
AHPH	<i>l'Association des hôpitaux privés d'Haïti</i> (Private Hospital Association of Haiti)
ALEHA	<i>Association des leaders Evangéliques d'Haïti</i>
AMECON 2000	American Continental
AME-SADA	African Methodist Episcopal Church-Service and Development Agency
AMI	<i>Aide Médicale Internationale</i>
AMURT	Ananda Marga Universal Relief Team
ANA	American Nurses Association
AOR	area of responsibility
APAM	<i>Promotion des Arts du Monde</i>
APROS/S	<i>Administración Provincial de Seguros de Salud</i>
ARC	American Refugee Committee
ARI	Allied Recovery International
ASPF	São Tóme Association for Family Promotion
AVISER-Haiti	<i>Action Viable et Solidaire pour la Renforcement de l'education en Haiti</i>
AVSF	<i>Agronomes et vétérinaires sans frontières</i>
AVSI	<i>Associazione Volontari per il Servizio Internazionale</i>
AWO	African World Organization
BB	Beyond Borders
BPM	Brigades for Protection of Minors
CAFOD	Catholic Agency for Overseas Development
CBM	Christian Blind Mission
CBR	community-based rehabilitation
CCCM	Camp Coordination and Camp Management
CDAC	Communications with Disaster-Affected Populations
CDC	(US) Center for Disease Prevention and Control
CECI	Centre for International Studies and Cooperation
CECOSIDA	<i>Centre de Communications Sur le SIDA</i>
CEEC	<i>Commission épiscopale pour l'éducation catholique</i>
CEHPAPE	<i>Centre Haitien pour la Promotion de l'Agriculture et la Protection de l'Environnement</i>
CEMEAH	<i>Comité pour l'Encadrement des Enfants Abandonnés de Morne l'Hôpital</i>
CEPAM	Center for Women's Promotion and Action
CESVI	<i>Cooperazione e Sviluppo</i>
CFS	child-friendly space
CFSM	Crop and Food Supply Assessment Mission
CfW	cash-for-work
CHF	CHF International
CHR	<i>Conférence Haïtienne des Religieux</i>
CIDA	Canadian International Development Agency
CISP	<i>Comitato Internazionale per lo Sviluppo dei Popoli</i>
CMAM	community management of acute malnutrition
CMMB	Catholic Medical Mission Board
CMRS	<i>centre météorologique régional spécialisé</i>
CNEH	<i>Confederation Nationale des Educatrices et Educateurs d'Haïti</i>
CNM	<i>Centre National de Météorologie d'Haïti</i>
CNP	Children's Nutrition Programme
CNSA	<i>Coordination Nationale de la Sécurité Alimentaire</i> (National Coordination of Food Security)
CODEP	Comprehensive Development Project
COMCEN	communication centre

CONEH	<i>Corps National des Enseignants d'Haiti</i>
COOPI	<i>Cooperazione Internazionale</i>
CRF	Christian Relief Fund
CROSE	<i>Coordination Régionale des Organisations du Sud-Est</i>
CRS	Catholic Relief Services
CSC	Coordination Support Committee
CSDI	Centre for Sustainable Development Initiatives
DDASE	<i>Direction Départementale Agricole du Sud-Est</i>
DDC	<i>Direction du développement et de la coopération</i>
DFID	(UK) Department for International Development
DINEPA	<i>Direction Nationale de l'Eau potable et de l'Assainissement</i> (National Directorate for Potable Water and Sanitation)
DPC	<i>Direction de la Protection Civile</i> (Directorate for Civil Protection)
DPSPE	<i>Direction de Promotion de la Santé et de Protection de l'Environnement</i>
DPT	diphtheria, pertussis, tetanus
DR	Dominican Republic
DSRSG	Deputy Special Representative of the Secretary-General
DT	diphtheria and tetanus
DTM	Displacement Tracking Matrix
EC	European Commission
ECD	early childhood development
ECHO	European Commission Humanitarian Aid Office
EDC	Education Development Centre
EDM	<i>Entrepreneurs du Monde</i>
EFS	<i>Explorers sans Frontières</i>
EFSA	Emergency Food Security Assessment
EMDH	<i>Enfants du Monde Droits de l'Homme</i>
EMMUS	<i>Enquête Mortalité, Morbidité, et Utilisation des Services</i>
EOMC	Emergency Operation Management Centre
EPER	<i>Entraide Protestante Suisse</i>
ER	early recovery
ERSF	Early Recovery Strategic Framework
ETC	Emergency Telecommunications Cluster
FAO	Food and Agriculture Organization of the United Nations
FCA	FinnChurchAid
FDEH	<i>Fonds pour le Développement de l'Education en Haïti</i>
FEWS NET	Famine Early Warning System Network
FFW	food-for-work
FHI	Food for the Hungry International
FLM	<i>Fédération Luthérienne Mondiale</i>
FONCOMA	<i>Fondation College Mixte Ampere</i>
FROCSAH	<i>Fondation Rocher Salut d'Haïti</i>
FONHEP	<i>Fondation haïtienne de l'Enseignement Privé</i>
FONHFARA	<i>Fondation haïtienne des familles des rapatriés</i>
Forum CS	Civil Society Forum
FOSAC	[full name not provided]
FPGL	<i>Fondation Paul Gérin-Lajoie pour la Coopération Internationale</i>
FPN	<i>Fonds de Parrainage National</i>
FSB	Federation of Small Businesses
FTA	Free Trade Agreement
FTC	Feed the Children - Haiti
FTS	Financial Tracking Service
GAA	German Agro Action (<i>Deutsche Welthungerhilfe</i>)
GAM	global acute malnutrition
GARR	<i>Groupe d'Appui aux Rapatriés et Réfugiés</i>
GBV	gender-based violence
GEM	Gender Empowerment Measure
GFD	general food distribution
GHA	Global Health Action
GHESKIO	Haitian Group for the Study of Kaposi's Sarcoma and Opportunistic Infections
GIC	Group Intervened for Children
GIEL	<i>Groupe d'Initiative des enseignants des lycées</i>
GJARE	Youth in Action for Reform
GNA	global needs analysis
GNI	gross national income
GoH	Government of Haiti

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GREPS	<i>Groupe de Réflexion sur les Problèmes Sociaux</i>
GTZ	<i>Deutsche Gesellschaft für Technische Zusammenarbeit</i>
GVC	<i>Gruppo di Volontariato Civile</i>
HA	Heartland Alliance
Haiti Participative	Haiti Participative
HAS	<i>Hopital Albert Schweitzer</i>
HAS	Humanitarian Air Service
HC	Humanitarian Coordinator
HCC	Haitian Centers Council
HCT	Humanitarian Country Team
Heartland	Heartland Alliance for Human Needs & Human Rights
HEB	high-energy biscuit
HEKS	<i>Hilfswerk der Evangelischen Kirchen Schweiz – Swiss Interchurch Aid</i>
HERO	Housing, Education, and Rehabilitation of Orphans
HF	high frequency
HFP	Haiti Film Production
HHI	Harvard Humanitarian Initiative
HI	Handicap International
HIV/AIDS	human immuno-deficiency virus/acquired immuno-deficiency syndrome
HNP	Haiti National Police
HP	Haiti Participative
HRC	Haiti Response Coalition
HSC	<i>Hôpital Sacré Coeur</i>
HSIS	health services information system
HUB	call centre
HWA	Hilfswerk Austria International
IAAS	International Association of Adaptive Sciences
IAC	Inter-Agency Committee
IAHV	International Association for Human Values
IASC	Inter-Agency Standing Committee
IAT	International Action Ties
IBESR	<i>Institute de Bien-Être Social et Recherche</i>
IBR	institute-based rehabilitation
ICC	International Computing Centre
ICRC	International Committee of the Red Cross
ICT	information and communication technologies
ICVA	International Council of Voluntary Agencies
ID	<i>Initiative Développement</i>
IDEAC	<i>Instituto para el Desarrollo de la Empresa Asociativa Campesina</i>
IDP(s)	internally displaced person (people)
IEC	information, education and communication
IEDA	International Emergency and Development Aid
IFAD	International Fund for Agricultural Development
IFPRI	International Food Policy Research Institute
IFRC	International Federation of Red Cross and Red Crescent Societies
IGPEH	<i>Institut de gestion et de la protection de l'environnement d'Haiti</i>
IHSI	<i>Institut Haïtien de Statistique et d'Informatique</i> (Haitian Institute of Statistics and Informatics)
IICA	Inter-American institute for Cooperation on Agriculture
ILO	International Labour Organization
IMC	International Medical Corps
IMS	International Media Support
IOCC	International Orthodox Christian Charities' Response to Earthquake In Haiti
IOM	International Organization for Migration
IR	Islamic Relief
IRC	International Rescue Committee
IRD	International Relief and Development
IRD/MEBSH	<i>Integrated Rural Development/Mission Evangélique Baptiste du Sud d'Haïti</i>
IRIN	Integrated Regional Information Network
IRW	Islamic Relief Worldwide
ISDR	International Strategy for Disaster Reduction
IYCN	Infant and Young Child Nutrition
JCICS	Joint Council on International Children's Services
JJD Foundation	Jean Joseph Darbouze Foundation
JOTC	Joint Operation and Tasking Centre
JRS	Jesuit Refugee Service
JTF	Joint Task Force

KNH	<i>Kindernothilfe</i>
LRT	Logistics Response Team
LWF	Lutheran World Federation
MAM	moderate acute malnutrition
MARNDR	<i>Ministère de l'Agriculture, des Ressources Naturelles et du Développement Rural</i>
MAST	<i>Ministère des Affaires Sociales et du Travail</i>
MDM Canada	<i>Médecins du Monde Canada</i>
MDM France	<i>Médecins du Monde France</i>
MDM Greece	<i>Médecins du Monde Greece</i>
MDM Suisse	<i>Médecins du Monde Suisse</i>
MDM	<i>Médecins du Monde</i>
MED	<i>Mission d'Espoir pour les démunis</i>
MENFP	Ministry of National Education and Professional Training
MERLIN	Medical Emergency Relief International
MFK	Medicines and Food for Kids
MHPSS	mental health and psycho-social support
MINUSTAH	United Nations Stabilization Mission in Haiti
MISP	minimal initial service package
MIT	Massachusetts Institute of Technology
MoA	Ministry of Agriculture
MOB	Management Oversight Board
MoE	Ministry of Education
MoH&P	Ministry of Health and Population
MoSA	Ministry of Social Affairs
MoSPP	<i>Ministère de la Santé publique et de la Population</i> (Ministry of Public Health and Population)
MOSS	Minimum Operating Security Standard
MSF	<i>Médecins sans frontières</i> (Doctors Without Borders)
MSPP	Ministry of Public Health and Population
MTs	metric tons
MUAC	mid-upper arm circumference
MYR	Mid-Year Review
NCA	Norwegian Church Aid
NFI(s)	non-food item(s)
NGO(s)	non-governmental organization(s)
NHA	National Health Authority
NICCO	Nippon International Cooperation for Community Development
OAS	<i>Organisation es états américains</i>
OCCED'H	<i>l'Organisation des coeurs pour le changement des enfants démunis d'Haïti</i>
OCHA	Office for the Coordination of Humanitarian Affairs
OFDA	(US) Office of Foreign Disaster Assistance
OGITH	General Independent Organisations of Workers of Haiti
OHCHR	Office of the High Commissioner for Human Rights
OLE	Open Learning Exchange
OMS	<i>Organisation Mondiale de la Santé</i> (WHO)
OPADI	<i>Organización de Padres y Amigos de Discapacitados intelectuales</i>
OPC	<i>Office de la Protection du Citoyen</i>
OPS/OMS	<i>Organización Panamericana de la Salud</i> (PAHO) / <i>Organisation Mondiale de la Santé</i>
ORE	Organization for the Rehabilitation of the Environment
OTF	Outpatient Therapeutic Feeding Centres
PADF	Pan American Development Foundation
PAHO	Pan-American Health Organization
PAM	<i>Programme Alimentaire Mondial</i> (WFP)
PAP	Port-au-Prince
PCI	Project Concern International
PCNB	<i>Points de Conseil de Nutrition pour les Bébés</i>
PDNA	Post-Disaster Needs Assessment
PDSRSG	Principal Deputy SRSG
PEP	post-exposure prophylaxis
PEPFAR	US President's Emergency Plan for AIDS Relief
PESADEV	<i>Perspectives pour la Sante et le Développement</i> (Prospects for Health and Development)
PFB	Pennsylvania Farm Bureau
PHARE	<i>Programme Haitien d'Appui à la Réforme de l'Education</i>

PI	Plan International
PIH	Partners in Health
Plan	Plan International
PMCC	Project Management Coordination Cell
PNH	<i>Police Nationale d'Haïti</i> (National Police of Haiti)
PNUD	<i>Programme des Nations Unies pour le Développement</i>
PRODEV	<i>Progrès et Développement</i>
PROGRESSIO	Catholic Institute for International Relations (working name)
PROMESS	<i>Programme de Médicaments Essentiels</i> (Essential Drugs Programme)
PSF	<i>Pharmaciens Sans Frontières</i>
PSI	Population Service International
PU	<i>Première Urgence</i>
RANCOD	<i>Rassemblement des notables pour le développement communautaire</i>
RC	Resident Coordinator
RDPC	<i>Rassemblement des Détourneurs et Petits Copains</i>
REPT	<i>Regroupement Education pour toutes/tous</i>
RET	Refugee Education Trust
RI	Relief International
RITA	Relief Items Tracking Application
RJNA	Ministry to conduct an initial Rapid Joint Needs Assessment
RNDDH	<i>Réseau National de Défense des Droits Humains</i>
RTI	Right to Information
RUIF	ready-to-use infant formula
SP	Samaritan's Purse
SAM	severe acute malnutrition
SC	Save the Children
SGBV	sexual and gender-based violence
SGM	Soka Gakkai Malaysia
SJRM	Jesuit Service for Refugees and Migrants
SME	small and medium enterprise
SMTN	Sun Mountain International
SNRE	<i>Service National des Ressources en Eau</i>
SOFI	State of Food Insecurity
SOP	Standard Operational Procedure
SP	Samaritan's Purse
SPHERE	Humanitarian Charter and Minimum Standards in Disaster Response
SSSA	Seed Social Security Assessment
Tdh	<i>Terre des Hommes</i>
ToR	terms of reference
TSF	<i>Télécoms Sans Frontières</i>
UCODEP	Unity and Cooperation for the Development of the People
UHP	Union of Haitian Peasants
UMC	United Methodist Committee
UMCOR	United Methodist Committee on Relief
UN	United Nations
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNDP	United Nations Development Programme
UNDSS	United Nations Department of Safety and Security
UNEP	United Nations Environment Programme
UNEPAM	<i>Unité des écoles privées dans l'aire métropolitaine</i>
UNESCO	United Nations Educational Scientific and Cultural Organization
UNFPA	United Nations Population Fund
UN-HABITAT	United Nations Human Settlements Programme
UNHAS	United Nations Humanitarian Air Service
UNHCR	Office of the United Nations High Commissioner for Refugees
UNHRD	United Nations Humanitarian Response Depot
UNIBE	<i>Universidad Iberoamericana</i>
UNICEF	United Nations Children's Fund
UNNOH	<i>Union Nationale des Normaliens d'Haïti</i>
UNOOSA	United Nations Office of Outer Space Affairs
UNOPS	United Nations Office for Project Services
UNOSAT	United Nations Organization Satellite
UNPOL	United Nations Police
UNV	United Nations Volunteers
US or USA	United States of America
USAID	United States Agency for International Development

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USDOD	United States Department of Defense
USCRI	U.S. Committee for Refugees and Immigrants
USDA	United States Department of Agriculture
VETERMON	Veterinarians Without Borders (Spain)
VHF	very high frequency
VSAT	very small aperture terminal
VSF	<i>Volontiers sans Frontières</i>
VSF	<i>Vétérinaires sans Frontières</i>
VETERMON	<i>Vétérinaires sans Frontières</i>
WASH	water, sanitation and hygiene
WSM	World Service of Mercy
WCC	World Council of Churches
WFP	World Food Programme (<i>Programme Alimentaire Mondial</i>)
WHI	World Hope International
WHO	World Health Organization
WINNER	Watershed Initiative for National Natural Environmental Resources
WIR	World Islamic Relief
WMO	World Meteorological Organization
World Hope International	World Hope International
World YWCA	World Young Women's Christian Association
WSM	World Service of Merci
WV(I)	World Vision (International)
WWW	who-what-where
YMCA	Young Men's Christian Association

About the Consolidated Appeal Process (CAP)

The CAP is the tool by which aid organizations jointly plan, coordinate, implement and monitor their response to disasters and emergencies, and to appeal for funds together instead of competitively.

It is the forum for developing a strategic approach to humanitarian action, focusing on close cooperation between host governments, donors, non-governmental organizations (NGOs), the International Red Cross and Red Crescent Movement, International Organization for Migration (IOM) and United Nations agencies. As such, it presents a snapshot of the situation and response plans, and is an inclusive and coordinated programme cycle of:

- Strategic planning leading to a Common Humanitarian Action Plan (CHAP)
- Resource mobilization leading to a Consolidated Appeal or a Flash Appeal
- Coordinated programme implementation
- Joint monitoring and evaluation
- Revision, if necessary
- Reporting on results

The CHAP is the core of the CAP. It is a strategic plan for humanitarian response in a given country or region, including the following elements:

- A common analysis of the context in which humanitarian action takes place
- An assessment of needs
- Best, worst and most likely scenarios
- A clear statement of longer-term objectives and goals
- Prioritized response plans, including a detailed mapping of projects to cover all needs
- A framework for monitoring the strategy and revising it if necessary

The CHAP is the core of a Consolidated Appeal or, when crises break out or natural disasters strike, a Flash Appeal. Under the leadership of the Humanitarian Coordinator, and in consultation with host governments and donors, the CHAP is developed at the field level by the Humanitarian Country Team. This team includes IASC members and standing invitees (UN agencies, the International Organization for Migration, the International Red Cross and Red Crescent Movement, and NGOs that belong to ICVA, Interaction, or SCHR). Non-IASC members, such as national NGOs, can also be included.

The Humanitarian Coordinator is responsible for the annual preparation of the consolidated appeal document. The document is launched globally near the end of each year to enhance advocacy and resource mobilization. An update, known as the Mid-Year Review, is presented to donors the following July.

Donors generally fund appealing agencies directly in response to project proposals listed in appeals. The **Financial Tracking Service (FTS)**, managed by the United Nations Office for the Coordination of Humanitarian Affairs (OCHA), is a database of appeal-funding needs and worldwide donor contributions. FTS can be found on www.reliefweb.int/fts.

In summary, the CAP is how aid agencies join forces to provide people in need with the best available protection and assistance, on time.

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