



**UN EBOLA RESPONSE MPTF
ANNUAL PROJECT NARRATIVE REPORT
Year: 2016**

Project Number and Title: #52 - Psychosocial and economic recovery support for EVD survivors and affected communities.	PROJECT START DATE¹: 17-03-2016 Note: Project was officially launched in June 2016	AMOUNT ALLOCATED by MPTF <i>(please indicate different tranches if applicable)</i> \$1,500,000 Funding received on 19th April 2016	RECIPIENT ORGANIZATION IMPLEMENTING PARTNER(S): Ministry of Social Action, Woman and Child Protection (MASPFE) Guinean Red Cross and International Federation of Red Cross. (CRG/IFRC)
Project ID: 00098565 (Gateway ID)	EXTENSION DATE: 30-06-2017	FINANCIAL COMMITMENTS As of 31-12-2016 \$ 185,084	
Project Focal Point: Name: Marc Wajnszok E-mail: marc.wajnszok@undp.org	PROJECTED END DATE: 30-06-2017	EXPENDITURES as of 31.12.2016 \$ 703,660	
Strategic Objective (STEPP) SO# - RSO 2 – Socio – Economic Revitalization Recovery Strategic Objectives RSO2 – Socio – Economic Mission Critical Action MCA 8 - This project targets most EVD affected prefectures in Guinea, and as part of a larger scale program that aims to provide at the national level a comprehensive package for survivors and their communities.			
Location: Country or Regional	Sub-National Coverage Areas: Result 1 Psychosocial support through community healing dialogue: Macenta , Guékédou, Nzérékoré et Kérouané Result 2 Cured self-support capacity: Countrywide Result 3 Fight against anti-stigmatization: Macenta, Guékédou, Nzérékoré et Kérouané Result 4 Socio-economic community strengthening: Component 1 Socio-economic development programs identified within communities affected by Ébola: Macenta , Guékédou, Nzérékoré et Kérouané Component 2 Other socio-economic support activities in favour of Ebola survivors: Boke, Boffa, Fria, Telimele, Pita, Mali, Dalaba, Tougue, Faranah, Kouroussa, Sigui, Kankan, Kissidougou, Beyla, Lola		

¹ The date project funds were first transferred.



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	and Yomou.
Report Submitted by:	Report Cleared by:
<ul style="list-style-type: none"> o Name: Aboubacar Mariam Sylla o Title: Project manager Cluster Inclusive Development o Date of Submission o Participating Organization (Lead): PNUD o Email address 	<ul style="list-style-type: none"> o Name: Lionel Laurens o Date of Submission: 06/04/17 o Participating Organization (Lead): UNDP o Email address: lionel.laurens@undp.org

OUTPUT INDICATORS					
Indicator	Geographic Area	Projected Target (as per results matrix)	Quantitative results for the reporting period	Cumulative results since project commencement (quantitative)	Delivery Rate (cumulative % of projected total) as of date
<i>Description of the quantifiable indicator as set out in the approved project proposal</i>					
Résult 1 <i>Number of community healing sessions conducted</i>	Nzerekore, Macenta, Guekedou, Kerouane,	400 community healing dialogue (CHD) sessions conducted for survivors living in 20 sub-prefectures. <i>(Note 1: 40 community healing dialogue groups set up in 20 sub-prefectures. Each group conducts 10 sessions of CHD.)</i>	412 community healing dialogue sessions conducted until to December 2016 11 991 benefiting from community heal dialogue sessions up to December 2017.	412 community healing dialogue sessions conducted until to December 2016 11 991 benefiting from community heal dialogue sessions up to December 2017.	103 %
<i>Number of individual psychosocial counseling done after community healing dialogue</i>		40 beneficiaries need specific and close follow up. <i>(Note 2: Number of beneficiaries identified in need</i>	24 people identified in need of specific and close follow up support up to December 2016.	24 people identified in need of specific and close follow up support up to December 2016	60%



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		<i>of specific and close follow up or referral after CHD conducted by Red Cross volunteers)</i>			
Result 2: <i>Nb of cured (survivors) followed and sensitized</i>	Nzerekore, Macenta, Guekedou, Kerouane,	447 cured people benefiting from adequate follow up	0 cured people benefiting from adequate follow up	0 cured people benefiting from adequate follow up	0 <i>Note 3: Activity has been scheduled in February 2017. Further details provided into component 2 of the quarterly report.</i>
Result 3: <i>% of the population with sensitized about EVD survivor's situation to decrease stigmatization</i>	Nzerekore, Macenta, Guekedou, Kerouane,	80 % of target groups per the results of the baseline. <i>(Note 4: 11, 000 direct beneficiaries sensitized are expected)</i>	13 000 people has been sensitized, 20 radio emissions have been broadcasted in the target areas. <i>(Note 5: Baseline has been finalized on December 2016. 4 456 surveys socio-economic surveys done.)</i>	13 000 people has been sensitized, 20 radio emissions have been broadcasted in the target areas. <i>(Note 6: Baseline has been finalized on December 2016. 4 456 surveys socio-economic surveys done.)</i>	118 %
Result 4: <i># of community economic projects implemented</i>	Boke, Boffa, Fria, Telimele, Pita, Mali, Dalaba, Tougue, Faranah, Kouroussa, Siguir, Kankan, Kissidougou, Beyla, Lola and Yomou	At least 20 projects implemented	Activities related to the 20 socio-economic development programs previously identified are implemented up to 60% of the activities initially planned.	Activities related to the 20 socio-economic development programs previously identified are implemented up to 60% of the activities initially planned.	100% of development projects initially planned have been identified. 60% of achievement for the activities initially planned per project
<i># of Red Cross Volunteers trained</i>	Nzerekore, Macenta, Guekedou, Kerouane,	450 volunteers	0 volunteers <i>(Note 7: 350 volunteers have been identified in forest guinea. Training activities have been</i>	0 volunteers	0%



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			<i>scheduled for the first quarter of 2017.)</i>		
<i># number of project financed and implemented through the civil society platform</i>	Boke, Boffa, Fria, Telimele, Pita, Mali, Dalaba, Tougue, Faranah, Kouroussa, Siguri, Kankan, Kissidougou, Beyla, Lola and Yomou	10-15 projects.	<i>8 projects targeting survivor's socio-economic development done by civil society platforms have been identified and activities are implemented up to 60%.</i>	<i>8 projects targeting survivor's socio-economic development done by civil society platforms have been identified and activities are implemented up to 60%.</i>	80% of achievement for the activities initially planned per project. <i>(Note 8: Socio economic development projects have been adjusted to the budget available and the needs identified by the survivors on the field.)</i>
Result 5: <i># of prefectural ministry branches supported (rehabilitation, trainings, support to running costs)</i>	Nzerekore, Macenta, Guekedou, Kerouane,	4 prefectural ministry branches supported.	4 prefectural ministry branches have been supported with IT equipment, deployment of social workers, running costs and capacity building trainings.	4 prefectural ministry branches supported. <i>(Note 9: Ministry of Social Action has recruited and deployed 60 social workers in the targeted areas. Ministry of Social Action was equipped with adequate material.)</i>	100%
EFFECT INDICATORS (if available for the reporting period)					
Result 1 and 2. Psychosocial conditions of the EVD survivors (or affected communities) improved	Nzerekore, Macenta, Guekedou, Kerouane	2% of the total population found with serious traumatic conditions after the baseline is done. <i>(Note 10: Total survivor's population estimated to calculate 2% is around 8 000 surveys countrywide. Baseline will be</i>	4 456 socio-economic surveys done. <i>(Note 11: Survivors baseline ended into January 2017. Data analysis will be available on the 1st quarter 2017)</i>	4 456 surveys have been done countrywide.	56 %



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		<i>done to at least to 8 000 people)</i>			
<p>Result 3 and 4. <i>Socio-economic support.</i> % of EVD Survivors improving their socio-economic living condition through de-stigmatization and better economic opportunities</p>	<p>Nzerekore, Macenta, Guekedou, Kerouane, Boke, Boffa, Fria, Telimele, Pita, Mali, Dalaba, Tougue, Faranah, Koroumussa, Siguiri, Kankan, Kissidougu, Beyla, Lola and Youmou</p>	<p>20% of the targeted population improves the coverage of the daily needs. Targeted population is identified through baseline and/or based on statistics available.</p> <p><i>(Note 13: Data collected from baseline according to a representative sample of beneficiaries participating into psychosocial support activities.)</i></p>	<p>4 456 socio-economic surveys done.</p> <p><i>(Note 12: Data collected from baseline per a representative sample of beneficiaries participating into socio-economic and ant stigmatization activities.)</i></p>	<p>4 456 socio-economic surveys done.</p> <p>13 000 sensitized against stigmatisation.</p>	<p>Results of the analysis will be provided the first quarter of year 2017.</p>
<p>Result 5 Improved monitoring system.</p>	<p>Nzerekore, Macenta, Guekedou, Kerouane</p>	<p>60 % of the activities done to improved monitoring system</p>	<p>60 % of monthly reports received from Nzerekore, Macenta, Guedkedou and Kerouané by the Ministry of Social Action</p>	<p>60 % of monthly reports received from Nzerekore, Macenta, Guedkedou and Kerouané by the Ministry of Social Action</p> <p><i>(Note 14: Social workers deployed by the Ministry of Social Action must send to the Ministry regular reports about vulnerabilities and achievements of the programme following the monitoring tools</i></p>	<p>60%</p>



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				<i>developed. Equipment supplied to the Ministry of Social Affairs.)</i>	
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EXECUTIVE SUMMARY

Current Situation and Trend *(please provide a brief introduction to the project and the related outcomes in relation to implementation of the project (1-2 paragraphs))*

All the activities initially planned up to December 2016 are ongoing and at least 90% will complete on time. However, some changes and adjustments will be required for the first quarter of 2017 to ensure adequate alignment of the program with the public policies and recommendations provided by the Guinean government as well as to improve the quality of the delivering and better measure key achievements of the program.

An oversight on the preliminary results achieved indicates that stigmatization still is considered as an issue among survivors. Moreover, psychosocial support is highly appreciated by communities and individuals affected by Ebola and is considered as a good tool to fight against traumas provoked by Ebola. Although Community Healing Dialogue is useful to allow survivors and communities communicate and engage a dialogue on how to improve day to day lives, this tool cannot replace psychosocial medical-clinical care. From this point of view psychosocial support activities have allowed practitioners working on psychosocial issues to identify gaps on the clinical treatment for Ebola survivors in Guinea. Even though survivors in need of psychosocial treatment and follow up who are detected by the Red Cross are referred to the national Guinean health system, it is obvious that Guinean health system lacks of adequate professionals and has a poor knowledge on the subject. This gap has been communicated to the Ministry of Health through the ANSS.

Narrative section *(About 1,000 words):*

Regarding psychosocial support, cumulative data since the beginning of the project indicate that we have supported **11,991** people (amongst whom **6,534** Women and 5,457 Men) through community healing dialogue. Statistics for this period indicate that there is a considerable increase of Community Healing Dialogues (338 Vs 74 for the first and second period). Likewise, the number of people to be reached has increased during this quarter (10,672 Vs 1,319 for the two last quarters). This increase is a result of the deployment of 66 new PSS Red Cross volunteers in the field in respective sub-prefectures.

The main findings are issues related to stigmatization, mental health disorders like memory trouble and nightmares, stress due to day to day life difficulties. During these sessions **19** persons were identified as having needs to be individually followed up. Two of them are volunteers who suffered from psychological disorders and were referred to the Psychologist, the PSS Delegate who had a specialized consultation with them. The four other cases are related to issues of stigmatization, socio economic reintegration and stress due to daily socioeconomic difficulties. The 5 persons will therefore benefit a specific and individualized follow up by Red Cross PSS volunteers. Worked done by PSS volunteers rise some challenges with the referral mechanisms to health facilities. A common agreement has been found with the Ministry of Health to refer detected cases to the prefectural health centres or CTPEIs for follow up.

On the other hand, 28 socio-economic development projects have been identified and are currently under execution in Forest Guinea. Some projects, especially the ones related to supporting farming activities are going to be delayed to be aligned with the agricultural season activities. Technical teams have recommended an extension of the implementing period up to 30 June 2017 to ensure adequate delivering of 100% activities. In addition, development projects implemented by PNUD in Forest



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guinea are covering several sectors such as farming activities for women through trainings and supply of assets and inputs; the construction of public sanitation facilities; the improvement of warehousing stock facilities for groups of farmers; technical support to income generation activities or finally a strengthened access to basic services of water, health and sanitation. More than 40 000 beneficiaries will benefit from activities set up through the project.

Two main activities have been held during this period. First is related to the development of the socio-economic baseline which is a powerful tool allowing to analyze socio-economic trends regarding survivors needs. This tool allows to better target training development activities. Regarding the questionnaires used, we can mention the “Hopkins checklist” which allows to determine the level of anxiety and depression and the “Harvard trauma questionnaire” which allows to determine the post stress trauma for the interviewed people. The baseline has been done by the Ministry of Social Action.

Regarding the improvement of skills for frontline workers (Red Cross volunteers) working during the Ebola outbreak to enhance economic reinsertion. Two main activities have been developed. First one consist on the set up of an internal survey aiming to evaluate which are key axes to enhance frontline workers getting a better access to the labor market. A preliminary analysis of the results has shown that: *a) Ebola impacted negatively on the lives of frontline workers and being stigmatized by the society. b) These stigmatizations adopt several forms such as difficulties to get access to the labor market in their vicinity or loss of social network. c) Improvement basic skills is an important tool to enhance frontline workers to overcome this situation getting a better access to labor market. d) Main activities demanded by frontline workers are: support to improve basic skills (driving license, language and computer skills or support for income generation activities)*

On the one hand, to achieve the objective of improving frontline working skills and enhancing a better access to the labor market and on the other hand bearing in mind the preliminary results of the information available, PNUD got in touched with the NGO “Dare to Innovate” (“*Ossez Innover*”) who has submitted a comprehensive educational proposal divided in three components. First component will be based on training frontline workers on basic skills related to seeking a job, labor market, entrepreneurship. A capacity assessment and training profile will be created for each people. Second component of the intervention aims to support special training needs arisen from the assessments such as trainings on informatics, basic language and written skills, driving license and/or advanced principles about business and entrepreneurship. The ones that will be most interested into these activities will be accompanied to elaborate an income generation project that will be supported economically depending on the nature of the business to be run. Activities are expected to be run starting from February 2017 and will go beyond the ending date of the program to ensure close monitoring of the projects developed by frontline workers through this innovative approach.

Finally, project allowed building capacities on the existing resources of the Ministry of Social Affairs through the deployment of 120 agents in affected areas specially touched by Ebola outbreak, with a special focus in Forest Guinea Region. In addition, Ministry of Social Affairs benefited of IT equipment and office materials to ensure adequate delivering of public services. In addition, project took adequate steps to facilitate the activities planned aiming to build operational capacities. TDRs have been prepared for the recruitment of an accountant in charge to strengthen accountant proceedings and SOPs and an external cabinet is going to be recruited to improve data management. It is expected the activities will begin the first quarter of the year 2017.

Key Achievements:

Key achievements of the program for the reported period going from October 2016 to December 2016 are:

Result 1: Psychosocial support through community healing dialogue for survivors in Forest Guinea.

412 Community healing sessions has been conducted in the third quarter. Thus, **11 991** people were reached by Red Cross volunteers through the community healing sessions in the targeted areas. Red Cross volunteers identified **24 people** in need of special follow up in terms of PSS support because of psychosocial trauma. **66** volunteers of Guinea Red Cross were



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trained in Guékédou and Nzérékore.

Result 2: Cured support self-capacity

Thanks to the collaboration agreement the PNUD and National Agency of Sanitary Surveillance (ANSS) (ex-NERC) are deploying **272 health staff** to accomplish health tasks described into the SACEINT strategy for the follow up of the cured from August 2016 to February 2017. MPTF project will support the cost of health staff deployment on February 2017. Health staff deployed at health centers are focused on strengthening epidemiological control around survivors, families and communities around survivors establishing adequate mechanisms to enhance access to effective and efficient health care services (SACEINT strategy approved by the Guinean Government).

Result 3: Fight against stigmatization

20 radio programs were broadcast throughout Radio Nzaly Liberte FM in Nzerkore (Forest Guinea): The main topics were about fight against stigma for Ebola survivors. During these radio programs, 19 calls from auditors were registered. A documentary on the PSS project achievements has been produced and disseminated through social media with the funding of MPTF. Technical team suggest requesting a non-cost extension aiming to finalize anti-stigmatization pending activities, the strengthening of survivor's civil society associations and better evaluate the impact of the program on the ground.

Result 4: Socio-economic support for survivors

20 socio-economic projects are on progress in Forest Guinea for a total amount of 3 062 639 200 GNF (346 251 USD). 60% of the socio-economic activities initially planned into the 20 projects have been accomplished. It is expected that 100% of the projects activities will arrive to an end on March 2016. Further details are provided below for the component 4. Regarding the set-up of socio-economic activities in favor of frontline workers a baseline survey has been finalized. More than 4 548 surveys have been done by social workers and the analysis of the results is on progress. Others analysis have been done to identify training needs aiming to improve frontline skills allowing frontline workers getting a better access to labor market in Guinea. PNUD has contacted with the ONG "Dare to Innovate" to work on a training program aiming to cover the gaps detected and based on the following principles: *a)* Training on basic skills to enhance labor market research for frontline workers and entrepreneurs. *b)* Training on specific skills per the preliminary results of the baseline (expected to be achieved beyond the ending date of the program) *c)* Support to income generation activities run by frontline workers (expected to be achieved beyond the ending date of the program). 60% of the activities planned under the component "socio-economic activities" run by civil society have been achieved. However, some of the projects will arrive to an end beyond the deadline retained for MPTF funding. Technical team suggest requesting a non-cost extension aiming to finalize current socio-economic activities and better evaluate the impact of the program.

Result 5: Strengthening MASPFE

Ministry of Social Action has deployed social workers (60 people) on the prefectures targeted. Social workers have participated actively in close collaboration with Red Cross volunteers and local Red Cross Committees to do socio-economic baseline survey and collect data about frontline workers training gaps. Administrative measures have been taken to facilitate the activities planned aiming to strengthen the Ministry of Social Action at operational level. TDRs have been prepared for the recruitment of an accountant in charge to strengthen accountant procedures and an external cabinet is going to be recruited to improve data management at the MASPFE. It is expected the activities will start at the beginning of 2017. These activities are on delay in comparison with the plan initially established and to gain in efficiency it is suggested by the managerial team to extent the date of delivery for these activities.

Delays or Deviations – *(Please indicate, if applicable, any reason that may have contributed to any delays or deviation, and describe the measures adopted to move forward to achieve the expected results)*

