



**UN Haiti Cholera Response Multi-Partner Trust Fund
PROJECT NARRATIVE REPORT
Year: 2017**

Project Number and Title: #2- Community assistance to Mirebalais: new UN approach to cholera in Haiti	PROJECT START DATE¹: 16-Jun-2017	AMOUNT ALLOCATED by MPTF \$500,000 Other Sources: 0 Government Input: 0	RECIPIENT ORGANIZATION UNDP Haiti																								
Project ID: 00105932 (Gateway ID)																											
Project Focal Point: Name: Yvonne Helle E-mail: yvonne.helle@undp.org Telephone : +509 4889 5141	EXTENSION DATE: 31 June 2018																										
Proposal Location (Departments): Haiti (whole country)	PROJECTED END DATE: 31 June 2018	EXPENDITURES as of 31 December 2017 \$ 68,269.20	IMPLEMENTING PARTNER(S): Ministry of Health Partners in Health (Zanmi Lasanté) (tbd)s																								
Strategic Objective TRACKS		Beneficiaries: <i>Please, indicate the number of beneficiaries and provide disaggregated data, if available</i>																									
<input type="checkbox"/> TRACK 1a: Intensifying efforts to cut transmission of cholera and improve access to care and treatment		<table border="1"> <thead> <tr> <th colspan="2">No. of Beneficiaries</th> <th colspan="2">No. of Beneficiaries</th> </tr> </thead> <tbody> <tr> <td>Communities</td> <td align="center">5</td> <td>Women</td> <td align="center">49,973</td> </tr> <tr> <td>Total</td> <td align="center">5</td> <td>Girls</td> <td></td> </tr> <tr> <td></td> <td></td> <td>Men</td> <td align="center">44,926</td> </tr> <tr> <td></td> <td></td> <td>Boys</td> <td></td> </tr> <tr> <td></td> <td></td> <td>Total expected cases</td> <td align="center">88,889 (49,128<18)</td> </tr> </tbody> </table>		No. of Beneficiaries		No. of Beneficiaries		Communities	5	Women	49,973	Total	5	Girls				Men	44,926			Boys				Total expected cases	88,889 (49,128<18)
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<input type="checkbox"/> TRACK 1b: Addressing the medium/longer term issues of water, sanitation and health systems																											
<input checked="" type="checkbox"/> TRACK 2: Assistance and Support																											
Report Submitted by:		Report Cleared by:																									
<ul style="list-style-type: none"> o Name: Chiara Brunetti o Title: International Consultant o Date of Submission: 31 March 2018 o Participating Organization (Lead): UNDP Haiti o Email address: Chiara.brunetti@undp.org 		<ul style="list-style-type: none"> o Name: (Head of Agency): Yvonne Helle o Date of Submission: 31 March 2018 o Participating Organization (Lead): UNDP Haiti o Email address: Yvonne.helle@undp.org 																									

OUTPUT INDICATORS

Indicator	Geographic Area	Projected Target (as per results matrix)	Quantitative results for this current 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>					

¹ The date project funds were first transferred.



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Database and maps of key actors active in cholera defiance are elaborated for the 18 cholera priority communes	18 cholera priority communes	Updated database and visual maps	First draft of database elaborated	1	50%
1 Commune and 4 community sections of Mirebalais have produced their Local Development Plans	Mirebalais	5 Community development plans for 1 commune and 4 Communal Sections	4 Local Priorities Documents for the 4 Communal Sections elaborated	4/5	80%
Selected micro-projects are implemented by local partners	Mirebalais	Micro-project fully executed	Tender launched for Crête Brulée and Procurement plans in process for other 2 communities	3/5	10%
EFFECT INDICATORS (if available for the reporting period)					
% of execution of the prioritized project as symbolic reparation to victims, families and communities affected by cholera in Mirebalais	Mirebalais	100% of the Community projects executed	Local consultations have been carried out in the 4 Communal Sections, which led to the identification of local priorities	Execution 0%. Identified projects will be implemented in 2018.	0%
Number of victims, families and communities affected by cholera in Mirebalais reached by the reparation projects	Mirebalais	10,000 people among victims, their families and communities reached	Local consultations have been carried out in the 4 Communal Sections	88,899 people live in the 4 communal Sections of Mirebalais, we estimate that representatives of at least a 10% of this population will be directly reached by the reparation projects and many more indirectly	80%



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EXECUTIVE SUMMARY

In June 2017 UNDP, Haiti started implementation of Project “Community assistance to Mirebalais: new UN approach to cholera in Haiti” under Track 2, to support Haitian families directly affected by cholera in Mirebalais. The initiative includes three main components.

The first component is to develop a map of implementing actors active in the 18 cholera priority communes: by the end of 2017, UNDP elaborated a first draft of the key cholera stakeholder database that has been shared with relevant Agencies and partners before starting the elaboration of the visual map.

The second component is to conduct local consultations in Mirebalais with affected communities, including local representatives, formal and informal leaders as well as victims and families affected by cholera. Good progress has been made: a methodology for local consultations through community approach has been elaborated and validated by engaged UN agencies and the SE’s office, community platforms have been put in place in the 4 communal sections of Mirebalais, Grand Boucan, Sarasin, Gascogne and Crête Brulée and local consultations have been carried out in these 4 communal sections, which led to the identification of local priorities. UNDP conducted a technical and financial analysis of selected priorities in communal sections which led to the identification of community projects that were qualified as feasible and urgent by local population.

Unfortunately the funding provided was too limited to allow for the implementation of any of the projects identified by the local population. UNDP drafted a budget revision proposal accordingly that was submitted to MPTF for approval.

The third component of the project, the implementation of community projects in Mirebalais identified during the consultations, will start in 2018, as a result of local consultation process.

ANNUAL PROGRAMME REPORT FORMAT

Current Situation and Trend

In December 2016, the Secretary-General apologized to the Haitian people for the role of the United Nations in the cholera outbreak and its spread in Haiti and presented his report on the United Nations’ new approach to cholera in Haiti (A/71/620*). While Track 1 of this new UN approach focuses on reducing and ultimately ending the transmission of cholera, improving access to care and treatment, and addressing the longer-term issues of water, sanitation and health systems in Haiti, Track 2 involves developing a package that will provide material assistance and support to those Haitians and their communities most directly affected by cholera. Under Track 2, the community approach promotes the implementation of projects based on priorities established in consultation with communities, victims, and their families.



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In June 2017 UNDP, Haiti started implementation of Project “Community assistance to Mirebalais: new UN approach to cholera in Haiti” under Track 2, to complement and reinforce the interventions of other UN Agencies on the ground to support this community development action, in order to support Haitian families directly affected by cholera in Mirebalais. This project represents a concrete and tangible expression of the UN’s regret for the suffering that the Haitian people have endured as a result of cholera, proposes the implementation of a symbolic project in Mirebalais, the commune where cholera started in Haiti.

The initiative includes three main components:

- Mapping of implementing actors active in the 18 cholera priority communes;
- Local consultation in Mirebalais with affected communities, including local representatives, formal and informal leaders as well as victims and families affected by cholera;
- Implementation of community projects in Mirebalais identified during the consultations and according to the selection criteria defined by the team.

Narrative section:

▪ **Key Achievements:**

Regarding the first output indicator initially set in the project, the elaboration of a database and maps of key actors active in cholera defiance for the 18 cholera priority communes, progress has been made toward it reaching 50% of the output achievement.

Project staff held various meetings with other UN Agencies, like UNICEF, OCHA and PAHO to coordinate the construction of the database and to share relevant information. UNDP has also participated in several meetings of the Plan for the Elimination of Cholera Monitoring Group, an inter-institutional committee, that is discussing, among other things, on how to build a common database on all cholera-related issues. And as UNICEF is already drafting a mapping in the 18 priority communes, for the list of WASH stakeholders, partners and projects, UNDP will focus on stakeholder, partners and projects of the economic and social sectors.

A consultant has been recruited to carry out the data collection and systematization and by the end of 2017, a data grid has been validated and first draft of key cholera stakeholder database in the 18 communes has been elaborated.

With regard to the second output indicator set in the project, carrying out local consultations in Mirebalais with affected communities and produce Local Development Plans for 1 Commune (Centre Ville) and 4 communal sections, by the end of 2017 80% of the indicator has been achieved, as the process has been completed in the 4 Communal Sections.

First of all, UNDP elaborated a methodology for local consultations through community approach based on (1) the relevant elements of the 16/6 methodology, which was successfully implemented by UNDP for



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some community projects after the earthquake and designed with other UN Agencies, such as OIM, (2) the lessons learned from UNDP Colombia on methodologies and tools used for community consultations, identification of victims and their engagement during the peace processes and (3) the inputs raised during the first visits to Mirebalais. The methodology has then been shared and validated by the other UN Agencies.

Consultations process started with first meetings with Local Authorities - ASEC/CASEC and community leaders of the Commune of Mirebalais and of the Communal sections of Sarazin, Grand Boucan and Crête Brûlée and visit to the main spots of the communities. Then UNDP put community platforms in place in the 4 Communal Sections of Grand Boucan, Sarasin, Gascogne and Crête Brulée. Each Platform/Committee contains 9 members, and is composed of representatives of victims, community leaders, representatives of the social and private sector. 3 members in each Committee are victims' representatives. In coordination and with the support of the local committees, UNDP carried out local consultations in the 4 Communal Sections, which led to the identification of local priorities.

UNDP carried out a technical and financial analysis of selected priorities to evaluate feasibility of the selected interventions in the communities. Project staff realized regular meetings with the communities and field visits to the spots which facilitated the feasibility analysis, including with the engineer expert for technical assessment.

The result of the assessment was the identification of the following priorities: for Gran Boucan Communal Section, the construction of two water reservoirs and community water kiosque in Fond Cheval and a water catchment, conveyance and construction of two reservoirs in Pernier et Boyer. In Crête Brulée, the community prioritized the construction of the local market (Marché Mina), as the heart of the village. In Gascogne communal section, the community selected the rehabilitation of a drinkable water catchment system and the construction of the local market, called Marché Canard. In Sarasin, the priority is a water catchment source of St. Jean, and the conveyance and construction of three reservoirs. Most of the priorities identified by the communities are water related interventions or small infrastructure improvement of local markets, which will improve the hygiene and sanitation in food markets and will have a direct impact on cholera reduction strategies. In Mirebalais Centre Ville, UNDP faced a hostile environment towards the United Nations that led to security concerns for project staff. UNDP will therefore start consultation process in Centre Ville in 2018 in close collaboration with local authorities.

Regarding the third output indicator set in the project, the execution of local projects selected by the communities, implementation will start in 2018.

UNDP during 2017 also participated in various High-Level Committee for the Elimination of Cholera in Haiti, and carried out permanent Inter-Agency coordination through constant communication, weekly reports and regular meetings.



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▪ **Delays or Deviations**

The project is implemented under difficult conditions, given the sensitive nature of the initiative. Expectations of the population are high and given the limited funds available for track 2 they are unlikely to be met. Influential players like Bureau des Avocats Internationaux (BAI) are engaged in consultations with cholera victims and claim to present many of them. The project has had to put mitigation measures to counter the interventions of BAI that create unrealistic expectations from communities, local authorities and media. Permanent risk analysis and flexible response measures are discussed and put in place to mitigate this situation.

In Mirebalais Centre Ville, UNDP faced a hostile environment, that did not allow the team to set up the platform during 2017. It has been decided in close consultation with the Special Envoy and the local authorities to only start the process once the first community selected projects are being implemented.

The very limited funding for the project has impacted its speedy delivery. After exploring many options with the community it was decided to approach the SE and the MPTF to seek an increase in the budget to facilitate the implementation of the community projects.

▪ **Best Practice and Summary Evaluation**

Local consultations carried out in the 4 Communal Sections through many meetings and field visits with the Community platforms led to constructive dialogue and conciliation within the communities on project prioritization process. The community has very much appreciated the “no agenda” approach of the team that allowed them to set their own priorities.

▪ **Lessons learned**

The involvement of local communities and victims in all the phases of the project is key to achieve the expected results. The process of identification and involvement of key stakeholder, the building of trust with and between local actors and victims, especially in a context where many community members suffered losses and profound affliction, is slower than expected. Time is necessary to generate trust, listen to victims and all stakeholder stories and priorities, overcome the suffering and identify common elements that can benefit the community as a whole.

▪ **Story from the Communities**

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