

Peacebuilding Fund Project Progress Report



**PEACEBUILDING
FUND** 

PROJECT OVERVIEW

Thank you for taking the time to complete the PBF Progress report. For projects with more than one recipient, please consult among co-recipients prior to filling out the form to ensure collaboration on the responses. You can generate a print out of the blank form by clicking on the *print* icon on the top right corner of the page. If you have any questions or require technical assistance in filling out the form, please send an email to keshni.makoond@un.org

Click Next below to start

» Report Submission

Type of report *

- Semi-annual
 Annual
 Final
 Other

Date of submission of report *

2022-06-15

Name and Title of Person submitting the report *

Peace through Health: peacebuilding and violence reduction in communities in the Far-North, through inclusive health and social interventions

Name and Title of Person who approved the report *

Dr DOUBA EPEE Emmanuel, Emergency Preparedness and Response Officer (EPR) Team Lead, WHO

Have all fund recipients for this project contributed to the report? *

- yes
 no

Did PBF Secretariat review the report? *

If there is no PBF secretariat in country, please select "Not applicable". If there is a PBF secretariat, you should normally ensure that they have an opportunity to review.

- yes
 no
 Not Applicable

» Project Information and Geographical Scope

Is this a cross-border project? *

- yes no

Please select the geographical region in which the project is implemented

- Asia and the Pacific Central & Southern Africa East Africa
 Europe and Central Asia Global Latin America and the Caribbean
 Middle East and North Africa West Africa

Country of project implementation *

- Angola Burundi Cameroon
 Central African Republic Chad Congo, The Democratic Republic
 Gabon Lesotho Rwanda
 Zimbabwe Other, Specify

Project Title *

- 00119720: Appui à la participation des femmes et des jeunes aux initiatives de consolidation de la paix, de renforcement des mécanismes de cohésion sociale et du vivre ensemble
- 00119721: Est/Adamaoua/Nord : réduction des tensions/conflits liés à l'utilisation des ressources naturelles pour les activités agro-pastorales
- 00129531: Leveraging community participation in local governance for effective conflict prevention and resolution in the Littoral and West regions affected by the North-West and South-West crisis in Cameroon
- 00129532: Peace through Health: peacebuilding and violence reduction in communities in the Far-North, through inclusive health and social interventions
- 00119722: Projet secrétariat : appui à la coordination et au suivi des projets du fonds pour la consolidation de la paix
- 00130027: Renforcement de la coexistence Pacifique durable et l'autonomisation des jeunes déplacés dans les communes des régions de l'Ouest et du littoral au Cameroun
- 00125641: Renforcement de la participation des mécanismes communautaires et du rôle des défenseuses des droits humains au processus de consolidation de la paix dans les Régions du Nord-ouest et du Sudouest Cameroun
- 00119719: Stabilisation et relèvement des communautés affectées par la crise sécuritaire à l'Extrême-Nord
- 00112785: Strengthening capacities in support of peaceful electoral processes and social cohesion
- Other, Specify

Project Start Date *

2021-12-02

Project end Date *

2023-06-01

Has this project received an extension? *

- YES, Cost Extension
- YES, No Cost Extension
- YES, Both Cost and No Cost extensions
- NO, No Extensions

Will this project be requesting an extension? *

- YES, Cost Extension
- YES, No Cost Extension
- YES, Both Cost and No Cost extensions
- NO, No Extensions

Is funding disbursed either into a national or regional trust fund? *

- yes
- no

Recipients

Is the lead recipient a UN agency or a non UN entity? *

- UN entity
- Non-UN Entity

Please select the lead recipient *

- UNDP: United Nations Development Programme IOM: International Organization for Migration
- UNICEF: United Nations Children's Fund
- OHCHR: Office of the United Nations High Commissioner for Human Rights
- UNWOMEN: United Nations Entity for Gender Equality and the Empowerment of Women
- UNHCR: United Nations High Commissioner for Refugees UNFPA: United Nations Population Fund
- FAO: Food and Agriculture Organization WFP: World Food Programme
- UNHABITAT: United Nations Human Settlements Programme
- UNESCO: United Nations Educational, Scientific and Cultural Organization
- UNEP: United Nations Environment Programme ILO: International Labour Organization
- WHO: World Health Organization PAHO/WHO
- UNCDF: United Nations Capital Development Fund UNODC: United Nations Office on Drugs and Crime
- UNOPS: United Nations Office for Project Services
- UNIDO: United Nations Industrial Development Organization ITC: International Trade Centre
- UNDPO Other, Specify

Are there other recipients for this project? *

- No other recipients
- Yes, other UN recipients only
- Yes, other non-UN recipients only
- Yes, both UN and non-UN recipients

Please select other UN recipients recipients *

- UNDP: United Nations Development Programme IOM: International Organization for Migration
- UNICEF: United Nations Children's Fund
- OHCHR: Office of the United Nations High Commissioner for Human Rights
- UNWOMEN: United Nations Entity for Gender Equality and the Empowerment of Women
- UNHCR: United Nations High Commissioner for Refugees UNFPA: United Nations Population Fund
- FAO: Food and Agriculture Organization WFP: World Food Programme
- UNHABITAT: United Nations Human Settlements Programme
- UNESCO: United Nations Educational, Scientific and Cultural Organization
- UNEP: United Nations Environment Programme ILO: International Labour Organization
- WHO: World Health Organization PAHO/WHO
- UNCDF: United Nations Capital Development Fund UNODC: United Nations Office on Drugs and Crime
- UNOPS: United Nations Office for Project Services
- UNIDO: United Nations Industrial Development Organization ITC: International Trade Centre
- UN Department of Peace Operations Other, Specify

Financial Reporting

» Delivery by Recipient

Please enter the total amounts in US dollars allocated to each recipient organization

Please enter the original budget amount, amount transferred to date and estimated expenditure by recipient.

*Please make sure you enter the correct amount. All values should be entered in **US Dollars***

Recipients	Total Project Budget (in US \$) <i>Please enter the total budget as is in the project document in US Dollars</i>	Transfers to date (in US \$) <i>Please enter the total amount transferred to each recipient to date in US Dollars</i>	Expenditure to date (in US \$) <i>Please enter the approximate amount spent to date in US dollars</i>	Implementation rate as a percentage of total budget <i>(calculated automatically)</i>
WHO: World Health Organization	1273300 *	509320 *	147145.33 *	11.56 %
IOM: International Organization for Migration	1288743.4 *	515497.36 *	65938.35 *	5.12 %
TOTAL	2562043.4	1024817.36	213083.68	8.32 %

The approximate implementation rate as percentage of total project budget based on the values entered in the above matrix is **8.32%**. Can you confirm that this is correct? *

Correct
 Incorrect

» Gender-responsive Budgeting

Indicate what **percentage (%)** of the budget contributes to gender equality or women's empowerment (GEWE)?

34.62

The dollar amount of the budget contributing to Gender Equality and Women's Empowerment (GEWE) based on percentage entered above and total project budget is **US \$ 886979.43**. Can you confirm that this is correct?

Correct Incorrect

If it is incorrect, please enter the *budget amount* allocated to GEWE in US Dollars

886869.69

Amount expended to date on efforts contributing to gender equality or women's empowerment is **US \$ 73769.57**. Is this correct?

Correct Incorrect

ATTACH PROJECT EXCEL BUDGET SHOWING CURRENT APPROXIMATE EXPENDITURE.

The templates for the budget are available [here](#)

SEMI ANNUAL REPORT PB.0047 Final-13_28_27.xlsx



Project Markers

Please select the Gender Marker Associated with this project *

- Score 1 for projects that contribute in some way to gender equality, but not significantly (less than 30% of the total budget for GEWE)
- Score 2 for projects that have gender equality as a significant objective and allocate between 30 and 79% of the total project budget to GEWE
- Score 3 for projects that have gender equality as a principal objective and allocate at least 80% of the total project budget to Gender Equality and Women's Empowerment (GEWE)

Please select the Risk Marker Associated with this project *

- Risk marker 0 = low risk to achieving outcomes
- Risk marker 1 = medium risk to achieving outcomes
- Risk marker 2 = high risk to achieving outcomes

Please select the PBF Focus Area associated with this project *

- (1.1) Security Sector Reform
- (1.2) Rule of Law
- (1.3) Demobilisation, Disarmament and Reintegration
- (1.4) Political Dialogue
- (2.1) National reconciliation
- (2.2) Democratic Governance
- (2.3) Conflict prevention/management
- (3.1) Employment
- (3.2) Equitable access to social services
- (4.1) Strengthening of essential national state capacity
- (4.2) Extension of state authority/Local Administration
- (4.3) Governance of peacebuilding resources (including PBF Secretariats)

Is the project part of one or more PBF priority windows? *

Select all that apply

- Gender promotion initiative
- Youth promotion initiative
- Transition from UN or regional peacekeeping or special political missions
- Cross-border or regional project
- None

PART I: OVERALL PROJECT PROGRESS

NOTES FOR COMPLETING THE REPORT:

- Avoid acronyms and UN jargon, use general /common language.
- Report on what has been achieved in the reporting period, not what the project aims to do.
- Be as concrete as possible. Avoid theoretical, vague or conceptual discourse.
- Ensure the analysis and project progress assessment is gender and age sensitive.
- If relevant, please include any COVID-19 related considerations, adjustments and results and respond to section IV. **(This section is optional)**

Briefly outline the *status of the project* in terms of implementation cycle, including whether preliminary/preparatory activities have been completed (i.e. contracting of partners, staff recruitment, etc.)

Please limit your response to 1500 characters including spaces.

During the reporting period, both WHO and IOM made strong progress to activate and operationalize the “Peace through Health” project, with the final result at the end of this semi-annual period of a greater buy-in from the National Disarmament, Demobilization, and Reintegration Commission (NDDRC) to further mainstream health and non-health orientated community violence reduction (CVR) activities into their own workplans and annual budgets, and a strong buy in from local communities on community based planning (CBP) processes led by their local health authorities. WHO also continued the recruitment of a project coordinator for which interviews took place in early-June 2022.

Following the project’s start date 2 December 2021, WHO and IOM completed a 2-day planning workshop in Yaounde (22-23 Dec.) and focused on project sensitization, targeting and visibility, and in early 2022, the Cameroonian ministers of Health (4 Mar.), Territorial Administration (10 Mar.) and Economic Planning (28 Apr.) were sensitized and consulted on the project interventions. On 27 March, a participatory targeting workshop was held in Far North region that successfully selected 15 comités de santé (COSA). In April, WHO and IOM staff conducted sensitization and consultation sessions with government counterparts, and COSA facilitation trainings for CBP processes are now under development and scheduled for June.

Summarize *the main structural, institutional or societal level change* the project has contributed to. This is not anecdotal evidence or a list of individual outputs, but a description of progress made toward the main purpose of the project

FOR PROJECTS WITHIN SIX MONTHS OF COMPLETION ONLY; (1500 character limit)

Outcome 1: Rate the current status of the outcome progress: on track

Following a participatory targeting workshop 27 March in the company of the NDDRC, the heads of targeted health districts, and the mayors of targeted arrondissements, 15 COSAs were officially targeted including the three COSA surrounding the three key DDR sites in Far North of Mora, Meri and Meme.

WHO and IOM staff then proceeded to conduct sensitization and consultation processes partly accompanied by a representative of the Governor and the NDDRC, meeting with all 15 COSA over the month of April to sensitize COSA members on the project, its aims, and to collect preliminary information on each COSA's interactions with local community dynamics such as community grievances and pressures, and the presence of local organisations. A strong level of buy-in and interest was achieved, with COSA requested to nominate five COSA representatives (COSA size typically 13-14) to participate in future facilitation trainings.

Outcome 2: Rate the current status of the outcome progress: on track

Concerning specifically the DDR capacity building elements of the project, throughout the project period, IOM and the department for Peace Operations DDR Section have continued to build strong in-roads towards the development of key DDR strategic documents and action plans. From 22 to 26 March the first joint IOM-NDDRC mission to the Far North supported by this project was conducted, with the joint viewing of key DDR sites and a working session by NDDRC and IOM technical colleagues that resulted in a draft NDDRC roadmap presented to the National Coordinator and IOM Chief of Mission for 2022-23, which currently awaits final modification and validation by the Resident Coordinator's Office (RCO). Between the 19-23 April, another joint mission with the NDDRC to Far North was conducted, this time for the NDDRC to participate and take a leading role in the COSA sensitization and consultation sessions around the three key DDR sites of Mora, Meri and Meme.

Outcome 3: Rate the current status of the outcome progress: on track

During the reporting period, initial community engagement activities with COSA in the Far North region have also contributed towards progress in outcome 3 for greater socio-economic opportunities to serve as alternatives for youth enrolment and recidivism.

PART II: RESULT PROGRESS BY PROJECT OUTCOME

Describe overall progress under each Outcome made during the reporting period (for June reports: January-June; for November reports: January-November; for final reports: full project duration). Do not list individual activities. If the project is starting to make/has made a difference at the outcome level, provide specific evidence for the progress (quantitative and qualitative) and explain how it impacts the broader political and peacebuilding context.

- "On track" refers to the timely completion of outputs as indicated in the workplan.
- "On track with peacebuilding results" refers to higher-level changes in the conflict or peace factors that the project is meant to contribute to. These effects are more likely in mature projects than in newer ones.

How many OUTCOMES does this project have *

1 2 3 4 5 6 7 8 more than 8.

Please write out the project outcomes as they are in the project results framework found in the project document

Outcome 1: *

Trust between communities as well as trust in the authorities is increased, through using health as an entry point for community engagement and participatory and inclusive dialogue that leads to more equitable and improved access to health and other social services in the targeted communities of the Far-North region

Outcome 2: *

Confidence between the NDDRC, former Armed Groups Designated as Terrorist Organizations (AGDTO) associates and host communities at local level (in the Far North region) is improved through greater capacities and resources to meet the health needs of former associates and develop a comprehensive and inclusive DDR framework in respect of International Humanitarian Law (IHL) and the Integrated DDR Standards (IDDRS).

Outcome 3: *

Youth enrolment and recidivism in AGDTOs is reduced through the creation of socio-economic alternatives to violence – for youth at-risk of recruitment (including girls and young women) in the Far-North, while contributing to health preparedness and equitable access to health care at community level

Outcome 1:

Trust between communities as well as trust in the authorities is increased, through using health as an entry point for community engagement and participatory and inclusive dialogue that leads to more equitable and improved access to health and other social services in the targeted communities of the Far-North region

Rate the current status of the outcome progress *

1. Off Track 2. On Track 3. On Track with evidence of peacebuilding results

Progress summary *

Please limit your response to 3000 characters including spaces.

Following a participatory targeting workshop 27 March in the company of the NDDRC, the heads of targeted health districts, and the mayors of targeted arrondissements, 15 COSAs were officially targeted including the three COSA surrounding the three key DDR sites in Far North of Mora, Meri and Meme.

WHO and IOM staff then proceeded to conduct sensitization and consultation processes partly accompanied by a representative of the Governor and the NDDRC, meeting with all 15 COSA over the month of April to sensitize COSA members on the project, its aims, and to collect preliminary information on each COSA's interactions with local community dynamics such as community grievances and pressures, and the presence of local organisations. A strong level of buy-in and interest was achieved, with COSA requested to nominate five COSA representatives (COSA size typically 13-14) to participate in future facilitation trainings.

Indicate any additional analysis on how Gender Equality and Women's Empowerment and/or Youth Inclusion and Responsiveness has been ensured under this Outcome

Please limit your response to 1500 characters including spaces.

The 15 COSAs were sensitized to take into account 30% of women among their members and we had ensured that this quota was respected during capacity building

Outcome 2:

Confidence between the NDDRC, former Armed Groups Designated as Terrorist Organizations (AGDTO) associates and host communities at local level (in the Far North region) is improved through greater capacities and resources to meet the health needs of former associates and develop a comprehensive and inclusive DDR framework in respect of International Humanitarian Law (IHL) and the Integrated DDR Standards (IDDRS).

Rate the current status of the outcome progress *

1. Off Track 2. On Track 3. On Track with evidence of peacebuilding results

Progress summary *

Please limit your response to 3000 characters including spaces.

Concerning specifically the DDR capacity building elements of the project, throughout the project period, IOM and the department for Peace Operations DDR Section have continued to build strong in-roads towards the development of key DDR strategic documents and action plans. From 22 to 26 March the first joint IOM-NDDRC mission to the Far North supported by this project was conducted, with the joint viewing of key DDR sites and a working session by NDDRC and IOM technical colleagues that resulted in a draft NDDRC roadmap presented to the National Coordinator and IOM Chief of Mission for 2022-23, which currently awaits final modification and validation by the Resident Coordinator's Office (RCO).

Between the 19-23 April, another joint mission with the NDDRC to Far North was conducted, this time for the NDDRC to participate and take a leading role in the COSA sensitization and consultation sessions around the three key DDR sites of Mora, Meri and Meme. Prior to the mission NDDRC Yaounde officials were briefed on the value of CVR approaches for DDR and were trained on the specific sensitization interview guide developed which they then took the lead in asking questions to COSA members to build their capacities with community outreach and engagement. This approach led to positive reviews and further buy-in by the NDDRC for community-based approaches, for the NDDRC to use similar methodologies for community engagement within their own workplans in the future.

The first large scale initiative with the NDDRC is scheduled for the week of 13 June, where IOM and DPO will be organizing a DDR study exchange to New York to provide the NDDRC with a platform to share their experiences on DDR with a range of international actors, including putting the NDDRC in touch with the permanent mission of Colombia to the United Nations for the scheduling of a future south-south DDR exchange to Colombia.

Indicate any additional analysis on how Gender Equality and Women's Empowerment and/or Youth Inclusion and Responsiveness has been ensured under this Outcome

Please limit your response to 1500 characters including spaces.

Visits to DDR centers made it possible to assess the support needs for better integration of women.

Outcome 3:

Youth enrolment and recidivism in AGDTOs is reduced through the creation of socio-economic alternatives to violence – for youth at-risk of recruitment (including girls and young women) in the Far-North, while contributing to health preparedness and equitable access to health care at community level

Rate the current status of the outcome progress *

1. Off Track 2. On Track 3. On Track with evidence of peacebuilding results

Progress summary *

Please limit your response to 3000 characters including spaces.

During the reporting period, initial community engagement activities with COSA in the Far North region have also contributed towards progress in outcome 3 for greater socio-economic opportunities to serve as alternatives for youth enrolment and recidivism. This is due to the fact that COSA will eventually be used as the entry point for facilitating a participative selection of youth to benefit from these socio-economic opportunities in the later stages of the project once COSA members are trained on facilitation techniques and exercises.

Indicate any additional analysis on how Gender Equality and Women's Empowerment and/or Youth Inclusion and Responsiveness has been ensured under this Outcome

Please limit your response to 1500 characters including spaces.

A quota of 30% of women was required for each COSA during training.

INDICATOR BASED PERFORMANCE ASSESSMENT

Using the Project Results Framework as per the approved project document or any amendments- provide an update on the achievement of key indicators at the **outcome** level in the table below

- If an outcome has more than 3 indicators , select the 3 most relevant ones with most relevant progress to highlight.
- Where it has not been possible to collect data on indicators, state this and provide any explanation. Provide gender and age disaggregated data. (300 characters max per entry)

» Outcome 1: Trust between communities as well as trust in the authorities is increased, through using health as an entry point for community engagement and participatory and inclusive dialogue that leads to more equitable and improved access to health and other social services in the targeted communities of the Far-North region

Outcome	Performance Indicators	Indicator Baseline	End of Project Indicator Target	Indicator Milestone	Current Indicator progress	Reasons for Variance / Delay (if any)
1						

1.1	Improved perception during interventions among community members participating in health dialogue forums (COSA) in the ability of local authorities to respond to their needs (disaggregated by gender and age)	-	70%	Finalization of baseline assessment in 15 targeted COSA		WHO and IOM are in the month of June conducting a comprehensive baseline assessment to assess community level perceptions, and were able to proceed with this only once preliminary meetings and COSA selected were completed.
1.2	Improved perception during interventions among community members participating in health dialogue forums (COSA) in the ability of multiple villages within the same aire de santé to create solutions to shared issues of concern (disaggregated by gender and age)	-	70%	Finalization of baseline assessment in 15 targeted COSA		WHO and IOM are in the month of June conducting a comprehensive baseline assessment to assess community level perceptions, and were able to proceed with this only once preliminary meetings and COSA selected were completed.
1.3						

» **Outcome 2: Confidence between the NDDRC, former Armed Groups Designated as Terrorist Organizations (AGDTO) associates and host communities at local level (in the Far North region) is improved through greater capacities and resources to meet the health needs of former associates and develop a comprehensive and inclusive DDR framework in respect of International Humanitarian Law (IHL) and the Integrated DDR Standards (IDDRS).**

Outcome 2	Performance Indicators	Indicator Baseline	End of Project Indicator Target	Indicator Milestone	Current Indicator progress	Reasons for Variance / Delay (if any)
2.1	Increased understanding by officials from the NDDRC or other relevant state institutions of IDDRS modules (disaggregated by gender and age)	-	70%	Commencement of future large IDDRS trainings		
2.2	Increased understanding of officials from the NDDRC or other relevant state institutions of the specific gender components of DDR for consideration in the Far-North context (disaggregated by gender and age)	-	70%	Commencement of future large IDDRS trainings		

2.3	Number of strategic documents (new legislation, government strategies, workplans or frameworks) aiming to facilitate DDR processes that are worked upon and are demonstrated to be	0	3	Next milestone to follow NDDRC New York and Colombia exchanges		
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» Outcome 3: Youth enrolment and recidivism in AGDTOs is reduced through the creation of socio-economic alternatives to violence – for youth at-risk of recruitment (including girls and young women) in the Far-North, while contributing to health preparedness and equitable access to health care at community level

Outcome 3	Performance Indicators	Indicator Baseline	End of Project Indicator Target	Indicator Milestone	Current Indicator progress	Reasons for Variance / Delay (if any)
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3.1	Percentage of local authority representatives who believe that socio-economic and training opportunities for youth have decreased the risk of recruitment in the Far-North by the provision of alternatives disaggregated by gender and age)	-	70%	Finalization of baseline assessment in 15 targeted COSA		WHO and IOM are in the month of June conducting a comprehensive baseline assessment to assess community level perceptions, and were able to proceed with this only once preliminary meetings and COSA selected were completed.
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3.2	Percentage of youth benefiting from socio-economic and training opportunities that say they feel that their economic position has been improved (disaggregated by gender and age)	-	90%	Commencement of socio-economic and training opportunities		
3.3	Percentage of the targeted 325 youth integrated into health-related disease surveillance mechanisms and other socio-economic activities who feel that they now hold positive roles within their communities (disaggregated by gender and age)			training opportunities		

PART III: Cross-Cutting Issues

*

Please indicate any significant project-related events anticipated in the next six months, i.e. national dialogues, youth congresses, film screenings, etc.

Please limit your response to 3000 characters including spaces.

Throughout June 2022, WHO and IOM plan to deliver a series of facilitation trainings to COSA members with the NDDRC. Moreover, during the week of 13 June, an study exchange for two NDDRC representatives to New York will take place with the objective of putting the NDDRC in contact with technical partners and UN member states implementing DDR programmes such as Colombia, Somalia and South Sudan to share experience and best practices. Through a UN member states group of 'Friends of DDR', an event will take place during which the NDDRC will present their work on DDR.

IOM and DPO will then be planning a south-south cooperation DDR exchange trip to Colombia, in which the NDDRC will be able to see first-hand how disarmament, demobilization and reintegration approaches are supported and operated by government counterparts in other international contexts, including the mainstreaming of gender considerations.

In a few sentences, explain whether the project has had a positive *human impact*. May include anecdotal stories about the project's positive effect on the people's lives. Include direct quotes where possible or weblinks to strategic communications pieces.

This is an optional question. You may leave it unanswered if not relevant(2000 character limit)

During the reporting period the project had a strong human impact, by making progress to empower COSA for wider community engagement with each COSA having now nominated five representatives for facilitation trainings, as well as making the NDDRC officials more confident and determined to conduct functioning DDR processes in Cameroon. For example, following an NDDRC officials' trip with WHO and IOM for the conducting of joint sensitization and consultation exercises, the participant thanked WHO and IOM for their assistance and said that they now understood the value of community based activities within DDR and were determined to advocate for their mainstreaming within the NDDRC's workplan moving forward.

You can also upload upto 3 files in various formats (picture files, powerpoint, pdf, video, etc..) to illustrate the human impact of the project

OPTIONAL

File 1

OPTIONAL

PBF_Project Progress Report_2022_Final-14_23_34.pdf



File 2

OPTIONAL

Click here to upload file. (< 5MB)

File 3

OPTIONAL

Click here to upload file. (< 5MB)

You can also add upto 3 links to online resources which illustrate the human impact of the project

OPTIONAL

Link 1

OPTIONAL

Link 2

OPTIONAL

Link 3

OPTIONAL

» Monitoring

Please list monitoring activities undertaken in the reporting period *

Please limit your response to 1000 characters including spaces.

During the project's activities for the sensitization and consultation with COSA on the project's key outcomes and to collect information relevant for creating a better understanding of local dynamics, a monitoring tool was developed and used to get an understanding of the key perceptions of COSA members and surrounding communities. However, a more comprehensive baseline assessment including with focus group discussions on the perceptions of a larger number of community members is still in process during May/June 2022, with the full baseline data therefore still unavailable.

Do outcome indicators have baselines? *

If only some of the outcome indicators have baselines, select 'yes'

yes

no

Please provide a brief description *

Please limit your response to 3000 characters including spaces.

During the month of June, WHO and IOM are conducting a comprehensive baseline assessment with data collection on community level perceptions at the each of the 15 COSA targeted within the project.

Has the project launched perception surveys or other community-based data collection? *

yes

no

» Evaluation

Has an evaluation been conducted during the reporting period? *

- yes
- no

Evaluation budget (in USD): *

8

If project will end in next six months, describe the evaluation preparations

Please limit your response to 3000 characters including spaces.

» Catalytic Effect

Catalytic Effect (financial): Has the project led to additional funding from other sources? *

- yes
- no

Catalytic Effect (non-financial): Has the project enabled or created a larger or longer-term peacebuilding change to occur? *

- No catalytic effect
- Some catalytic effect
- Significant catalytic effect
- Very Significant catalytic effect
- Don't Know
- Too early to tell

Please describe how the project has had a (non-financial) catalytic effect *

Please limit your response to 3000 characters including spaces.

During the reporting period, key catalytic effects have been observed, namely:

1. An overall increase in interest by international actors in DDR policy and implementation, with a donor presentation by DPO in early March to a selected number of embassies and technical agencies following a visit to Cameroon in November 2021 that has meant there is more potential for actors working on this area of peacebuilding in Cameroon in the near future.

2. A change in the position of the NDDRC to be more open to conducting community-based activities within the framework of DDR processes in Cameroon.

PART IV: COVID-19

Please respond to these questions if the project underwent any monetary or non-monetary adjustments due to the COVID-19 pandemic.

This section is optional. You can leave it blank if not relevant

Monetary adjustments:

Please indicate the total amount in USD of adjustments due to COVID-19:

Non-monetary adjustments: Please indicate any adjustments to the project which did not have any financial implications:

Please limit your response to 3000 characters including spaces.

Please select all categories which describe the adjustments made to the project (and include details in general sections of this report):

- Reinforce crisis management capacities and communications
- Ensure inclusive and equitable response and recovery
- Strengthen inter-community social cohesion and border management
- Counter hate speech and stigmatization and address trauma
- Support the SG's call for a global ceasefire
- None
- Other (please describe):

If relevant, please share a COVID-19 success story of this project (i.e. how adjustments of this project made a difference and contributed to a positive response to the pandemic/prevented tensions or violence related to the pandemic etc.)

Please limit your response to 3000 characters including spaces.

Are there any other issues concerning project implementation (related to COVID-19 or not) that you want to share, including any capacity needs of the recipient organizations? (1500 character limit)

Please limit your response to 3000 characters including spaces.

Final Steps

- Please save a pdf copy of the form by clicking on the *Printer* icon on the top right corner of the page.
- A dialogue box will appear: Please select the A4 size and portrait orientation.
- Click "prepare" and save the document as a PDF (if on first attempt, the generated page is not readable, close the pop up page and try again. If the problem persists, you can contact technical support at the email address below)
- Please upload the pdf version of the report as well as your financial report in excel format on the MPTF-O gateway.

If you encounter any difficulty in filling the form or generating the print-out for MPTFO gateway, please contact Anupah Makoond keshni.makoond@un.org

Thank You. You have finished the report. Please Click on the SUBMIT button below. When the report is submitted, a confirmation note will appear on a yellow banner on top of the page. This can take a few seconds.