

Migration MPTF

Joint Programme Document

PROJECT INFORMATION	
Joint Programme Title:	Strengthening capacities of border municipalities in the Brazilian Amazon to face the challenges of migration, climate change and health
Country(ies)/ Region (or indicate if a global initiative):	Brazil
Convening Agent (Lead PUNO)	International Organization for Migration (IOM)
PUNO(s):	International Organization for Migration (IOM); Pan American Health Organization (PAHO) - Regional office for the Americas of the World Health Organization (WHO)
Implementing Partners	Ministry of Environment and Climate Change Ministry of Health Local communities' organizations and associations, including indigenous ones Migrants' organizations and associations Civil society organizations
Migration MPTF Thematic Area <i>(select one and delete others)</i>	Thematic Area 5: Improving the social inclusion and integration of migrants
Primary GCM objectives	Obj 2: Minimize adverse drivers Obj 7: Address and reduce vulnerabilities in migration Obj 15: Provide access to basic services for migrants Obj 16: Inclusion and social cohesion
Relevant SDG Target¹	1.5: By 2030, build the resilience of the poor and those in vulnerable situations and reduce their exposure and vulnerability to climate-related extreme events and other economic, social and environmental shocks and disasters (42%, mainly Outcome 3) 3.D: Strengthen the capacity of all countries, in particular developing countries, for early warning, risk reduction, and management of national and global health risks (28%, mainly Outcome 2) 17.14: Enhance policy coherence for sustainable development (29%, mainly Outcome 1)

¹ Please refer to Annex 5: List of Global Compact Objectives per Thematic area and Key SDG Targets.

Expected Project Commencement Date²	<i>September 2023</i>
Period of Implementation (in months):	<i>24 months</i>
Requested Budget: <i>Indicate total budget, and budget per PUNO</i>	2,504,468.75 USD - Total 1,503,992.00 USD – IOM 1,000,476.75 USD – PAHO/WHO
Project Description <i>(Max 400 characters, including blank space)</i>	The main objective of this Joint Programme is to contribute to addressing the compound challenges posed by migration, climate change, and health issues and increasing access of migrants to essential health services in border municipalities in the Brazilian Amazon, aiming at strengthening policy coherence, building capacities of the local healthcare systems, and improving community health, including among cross-border indigenous peoples.

Marker Questions ³	
Human Rights Marker Score (A, B, C or N/A if none applies) Which of the following human rights marker applies to your proposal? A: The Human Rights Marker has largely been achieved B: The Human Rights Marker shows significant integration of human rights in the Joint Programme but some challenges remain. C: The Human Rights Marker shows a very partial integration of human rights in the Joint Programme <i>Please refer to the Migration MPTF Human Rights Marker Guidance Note, Annex: Self-Assessment Matrix</i>	A
Gender Marker Score (A, B, C or N/A if none applies) Which of the following gender marker applies to your proposal? A: Projects that have gender equality and women's empowerment (GEWE) as the primary objective B: Projects that significantly contribute to gender equality and women's empowerment (GEWE) C: Projects that make a marginal contribution to gender equality and women's empowerment (GEWE), but not significantly N/A: Projects that are not expected to make a noticeable contribution to advancing gender equality and/ or the women's empowerment (GEWE) <i>Please refer to the Migration MPTF Gender Marker Guidance Note</i>	B

² Note: actual commencement date will be the date of first funds transfer.

³ Please refer to the Migration MPTF Guidance Notes on the Human Rights Marker, Gender Marker, and Child Sensitivity Marker, available in separate PDF document Annex D.

<p>Child Sensitivity Marker Score (A, B, C or N/A if none applies)</p> <p>Which of the following child sensitivity marker applies to your proposal?</p> <ul style="list-style-type: none"> A) Upholding the rights and addressing the needs of boys and girls under 18 is the primary or principal objective B) Will make a significant contribution towards upholding the rights and addressing the needs of boys and girls under 18 C) Will contribute in some way to upholding the rights and addressing the needs of boys and girls under 18 	<p>B</p>
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SIGNATURE PAGE

UN Resident Coordinator ⁴	Representative of the National Authority ⁵
<p><i>Country</i> Brazil</p> <p><i>Name</i> Silvia Rucks del Bo</p> <p><i>Date</i> 19/05/2023 [Redacted]</p> <p><i>Signature</i> [Redacted]</p>	<p><i>Name of institution</i> Ministry of Environment and Climate Change, National Secretariat for Traditional Peoples and Communities</p> <p><i>Name of representative</i> Edel Nazaré de Moraes [Redacted]</p> <p><i>Date</i> [Redacted]</p> <p><i>Signature and seal</i></p>

PUNOs (PUNO)	
<p><i>Name of Convening Agent (Lead PUNO)</i> International Organization for Migration (IOM)</p> <p><i>Name of Representative</i> Stéphane Rostiaux</p> <p><i>Date</i> [Redacted] 07:28</p> <p><i>Signature</i> [Redacted]</p>	<p><i>Name of PUNO</i> Pan American Health Organization/World Health Organization (PAHO/WHO)</p> <p><i>Name of Representative</i> Socorro Gross Galiano Signing in the name of Jarbas Barbosa da Silva Jr.</p> <p><i>Date:</i> 2023.05.19</p> <p><i>Signature</i> [Redacted]</p>

⁴ Not applicable for regional or global initiatives.

⁵ Not applicable for regional or global initiatives. For regional initiatives, please provide signature from the relevant regional entity partner (e.g. Regional Economic Commission)

LEGAL BASIS FOR THE JOINT PROGRAMME

Mandatory text: The legal basis for the Joint Programme is the Legal Annex for the signed United Nations Sustainable Development Cooperation Framework (UNSDCF) 2023-2027. It refers to the cooperation or assistance agreements or other agreements that are the existing legal basis for the relationship between the Government of Brazil and each Participating UN Organization (PUNO).

JOINT PROGRAMME PROPOSAL NARRATIVE

1. Migration Context and Rationale

1a) The Migration Context and Needs Analysis: The Brazilian Amazon experiences significant human mobility, including cross-border movements through its over 10 official border posts. According to data from the Brazilian border authority (Federal Police), over 330,000 cross-border movements of international migrants were registered in 2022 alone (215,000 entries and 122,000 exits). Border cities of Pacaraima (border with Venezuela), Tabatinga (with Colombia and Peru) and Assis Brasil (with Peru) had the most significant movements. The region received, in the past decades, a large number of migrants from Haiti, Colombia, Venezuela and Cuba, including vulnerable individuals and families, and unaccompanied and separated children. These migrants often move on to other Brazilian states in the South and Southeast.

International borders in the Brazilian Amazon are home to over 20 recognized indigenous lands, besides other traditional populations such as riverside communities. It is common for local indigenous people to cross international borders without moving through official border posts, and their movements are likely not reflected in official data. While indigenous peoples and other local communities use traditional systems for sustainable forest management, they are faced with new challenges posed by climate change, as rainfall and drought cycles are disrupted. These hazards impact food security, mental health, vulnerability to communicable diseases, among others. Indigenous territories in Brazil have a specific healthcare sub-system under the authority of the Ministry of Health, which faces challenges in dealing with cross-border indigenous persons, including lack of proper documentation for indigenous migrants who cross international borders without leaving their traditional territories.

Climate change impacts health in a variety of ways, including through death from extreme events, communicable disease outbreaks, disruption of food systems and related food insecurity, increased risk of zoonosis and vector-transmitted diseases, and vulnerability to mental health issues like stress and anxiety. Poor health outcomes related to environmental risks, such as pulmonary/gastrointestinal diseases, malaria due to rapid deforestation, limited access to safe food and water are on the rise in the Amazon. Due to environmental changes, there is an increased risk of zoonotic spillover and emergence of new human communicable diseases that may turn into a Public Health Emergency of International Concern. Climate change is disrupting some of the social determinants of health, such as livelihoods, access to healthcare and social support systems, compelling people to move. Climate change adaptation efforts can increase the resilience of the health system and communities to face climate change related challenges, but few tools for adaptation to health impacts of climate change have become operational and mainstreamed in decision making processes at the local level.

Brazil has a public, free-of-charge, and universal healthcare system, which nonetheless faces challenges such as budgetary strain and gaps in coverage. The Brazilian Healthcare System (SUS) directs efforts towards the expansion and strengthening of capacities in surveillance, early warning and response to outbreaks, epidemics and public health emergencies, expanding its network of Centers for Strategic Information in Health Surveillance (CIEVS) and its Public Health Border Laboratories (LAFRONS). The compounded impacts of climate change and health systems impact migration, as local populations choose or are forced to leave their communities of origin to adapt to adverse factors and may be particularly exposed to climate and health hazards. The link between environment and climate change, migration, and health leads to significant challenges for healthcare systems. In the Amazon, these are of special relevance due to persistent gaps in coverage and access, as precarious local health systems negatively impact the population's health, who become increasingly vulnerable to chronic non-transmissible diseases, tuberculosis, polio, among others. COVID-19 has further exacerbated these dynamics.

In light of this context, the Joint Programme will aim to address the identified challenges and gaps by: 1) strengthening policy coherence among the migration, environment and climate change, and health areas; 2) providing capacity building for the national public healthcare system to face challenges related to climate change

and international migration; and 3) strengthening community resilience in border municipalities, including cross-border indigenous peoples and other traditional communities. The programme will be implemented in ten (10) border municipalities (Figure 1): Pacaraima (RR), Tabatinga (AM), São Gabriel da Cachoeira (AM), Benjamin Constant (AM), Assis Brasil (AC), Brasileia (AC), Oiapoque (AP), Epitaciolândia (AC), Bonfim (RR) and Guajará-Mirim (RO). It will use as entry points the key issues that are at the intersection of migration, environment and health, identified during consultative processes with government stakeholders and representatives of local communities, as well as internal human rights-based situational analysis conducted. These key issues include malaria and other transmissible diseases, food insecurity, health outcomes related to environmental pollutants, and deforestation.

1b) Complementarity and Additionality: The Joint Programme expands and complements activities implemented in the Amazon region by IOM and PAHO and other actors. IOM, with funds from other donors, has a strong presence in the Amazon, in the states of Roraima, Amazonas, and Pará, where it works in the response to Venezuelan migration flows, including strengthening capacities of local communities, with a sub-office in Pacaraima. Since 2021, IOM implements health activities in Roraima, Amazonas and Pará, with over 6,000 persons assisted in 134 traditional (indigenous, quilombola and riverside) communities. PAHO's strong presence in the region includes activities focused on border health. It implements an innovative initiative in Oiapoque, supporting the state government in the "cross-border health surveillance program". Expected Programme results include close coordination of health, migration and environment sectors that is currently not covered by other programmes developed by IOM and PAHO or other stakeholders. Action is needed to strengthen health system resilience and accelerating climate change adaptation. The programme is timely in addressing these significant issues not covered by other programmes.

1c) Alignment to the GCM, SDGs, UNSDCF and Relevant Frameworks: The Joint Programme is well-aligned with the Global Compact for Migration (GCM) and contributes particularly to Objective 2 (Minimize adverse drivers), Objective 7 (Address and reduce vulnerabilities in migration), Objective 15 (Provide access to basic services for migrants), and Objective 16 (Inclusion and social cohesion). It directly contributes to the 2030 Agenda, in particular to the following SDG Targets: 1.5 (By 2030, build the resilience of the poor and those in vulnerable situations and reduce their exposure and vulnerability to climate-related extreme events and other economic, social and environmental shocks and disasters); 3.D (Strengthen the capacity of all countries, in particular developing countries, for early warning, risk reduction, and management of national and global health risks; and 17.14 (Enhance policy coherence for sustainable development).

Programme objectives are in line with the upcoming United Nations Sustainable Development Cooperation Framework 2023-2027 for Brazil (at the final stage of negotiation with the Brazilian Government), particularly Strategic Result 3.2 (By 2027, Brazil will have made progress implementing actions to mitigate climate change and adapt to its effects, reducing deforestation and disaster risks, considering vulnerable groups and people, with a view to promoting a resilient and decarbonized economy, in light of legal frameworks and national regulatory frameworks). The Joint Programme also contributes to further the implementation of IOM's Strategy on Migration, Environment and Climate Change 2021-2030, WHO's Global Strategy on Health, Environment and Climate Change, and PAHO's Agenda for the Americas on Health, Environment and Climate Change 2021-2030. It is in line with the International Health Regulations (2005), adopted by the World Health Assembly.

Objectives and activities of the Joint Programme are also in line with national priorities and seek to contribute to them, ensuring national ownership and sustainability. Environmental policies are on the highest level of priority for the Brazilian Government, as well as the strengthening of institutions tasked with environmental protection, particularly the Brazilian Institute for Environment and Renewable Natural Resources (IBAMA) and the Chico Mendes Institute for Biodiversity Conservation (ICMBio). It is in line with the goals and targets of Brazil's existing Climate Change National Adaptation Plan (NAP – Ministerial Ordinance nº 150/2016). Brazil's current strategy to tackle the climate change emergency includes a transversal approach to strengthen its institutional framework for a robust and articulated climate governance, with participation of all relevant federal structures and a strong coordination with local governments. The Joint Programme is also in line with the National Policy on Territorial and Environmental Management of Indigenous Territories (PNGATI – Decree nº 7.747/2012). National priorities also focus on the

elimination of inequalities in access to health, with particular attention to the social and environmental determinants of health, with a gender and race perspective. The Programme is aligned with the National Policy of Health Surveillance (PNVS – Resolution nº 588/2018 of the National Council on Health), including the National Policy on Environmental Health Surveillance, the National Policy on Laboratorial Surveillance, and the National Policy on Surveillance on Worker’s Health. It is also in line with the National Policy on Surveillance, Warning and Response (VIGIAR-SUS – Ministerial Ordinance nº 1.802/2021), and the Sectorial Plan for the Implementation of the Minamata Convention (elaborated by a working group established by Ministerial Ordinance nº 2.197/2018).

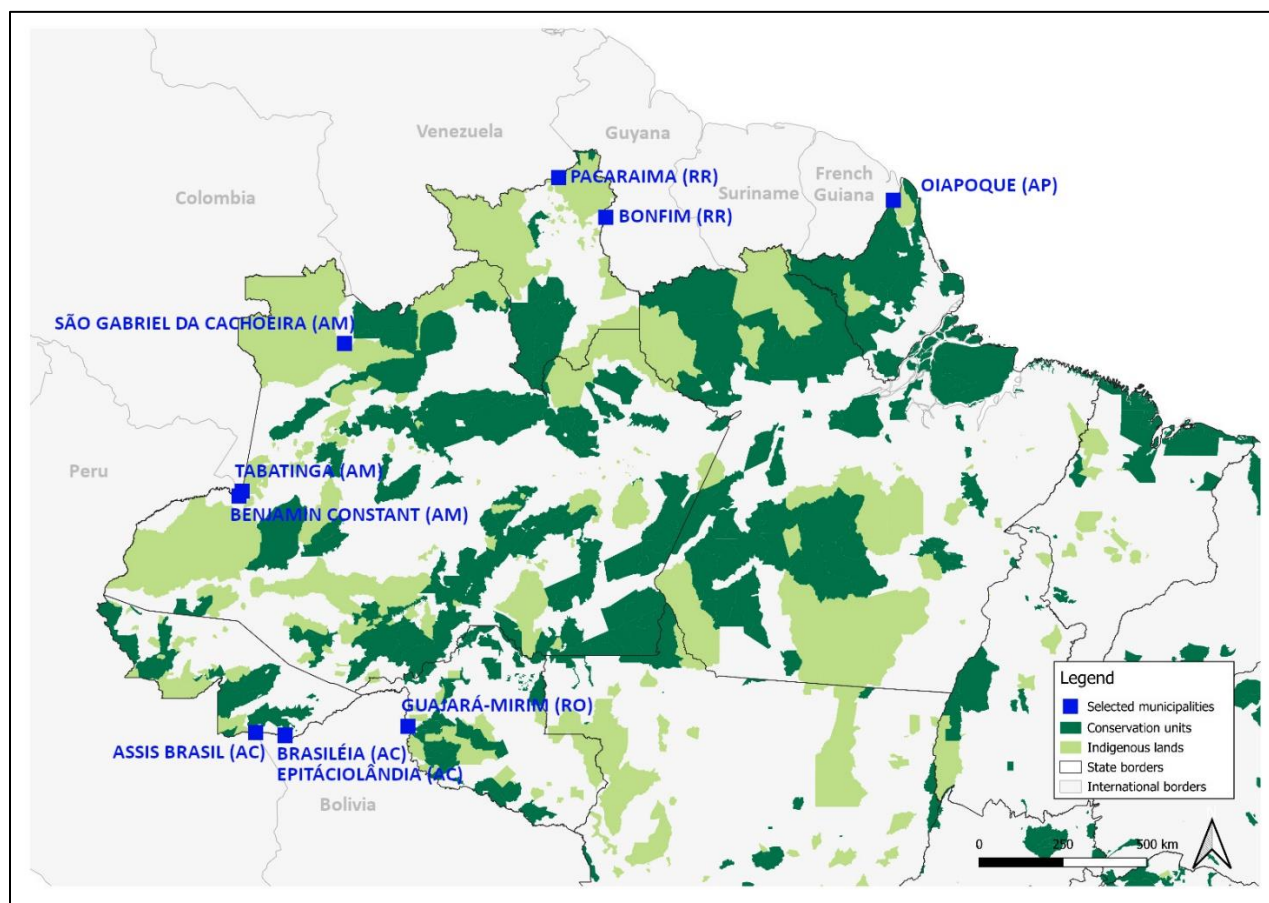


Figure 1. Border municipalities where the Joint Programme will be implemented. Source: Own elaboration with data from the Brazilian Institute of Geography and Statistics (IBGE), Ministry of Environment and Climate Change (MMA) and National Foundation of Indigenous Peoples (FUNAI). Indigenous lands refer to those whose process of homologation is either concluded or underway.

2. Results Framework and Theory of Change

2a) Results Framework: The main objective of this Joint Programme is contributing to address the compound challenges posed by migration, climate change, and health issues and increasing access of migrants to essential health services in ten (10) border municipalities in the Brazilian Amazon region. In line with the GCM objectives, it aims at strengthening policy coherence (Outcome 1), building capacities of the local healthcare systems (Outcome 2), and improving community health and resilience to climate change (Outcome 3), including among cross-border indigenous peoples and other traditional populations. This will be implemented through the following components:

Outcome 1. Policy coherence between migration, climate change and environment, and health, is strengthened in border municipalities and at the national level.

Policy coherence across the migration, environment and climate and change and health sectors will be strengthened, at municipal and national level, through the production and dissemination of new evidence on the nexus between the three sectors (Output 1.1). A report on capacities and gaps in the National Healthcare System (SUS) in ten border municipalities will be produced, with recommendations on improving climate resilience of SUS and preparing for migration movements. A study on migration and climate change in the Amazon will be conducted to expand the evidence base on the topic and inform policy making. A Displacement Tracking Matrix (DTM) survey will be conducted in the target border municipalities, with a gender, race, ethnicity, and age perspective.

Local and national policy makers and local communities will have increased capacities to identify and address key mobility and climate change related health outcomes in ten municipalities (Output 1.2). A seminar will be organized to discuss state-of-the-art evidence and identify key topics of interest, as part of discussions leading to COP28 (Nov-Dec 2023). In-person trainings targeted at public officials and key stakeholders will address topics such as integrated climate-health surveillance and forecasting climate-related disasters, contributing to build capacities on topics for which there is a significant gap in training available. Towards the conclusion of the project, events will be organized to widely disseminate lessons learned with the project and best practices developed or identified.

In order to contribute to improve resilience, the joint programme will support border municipalities in developing plans and protocols to respond cohesively to the main challenges and demands identified (Output 1.3). Technical assistance will also be provided to border municipalities and federal authorities to strengthen multisector coordination and action to respond cohesively to the main environment, climate change and health needs, building on monitoring structures that are either existing or under development, such as observatories and networks.

Local and national policy makers will have increased capacities to prepare for and respond to events of public health importance associated with human mobility and climate change (Outcome 1.4). Building on the new evidence produced and on previous experiences with pandemics and humanitarian responses, activities will build capacity for preparedness and response at the local level, including through trainings and simulated exercises to prepare for different scenarios, such as increased migration and events of public health importance.

Outcome 2. Brazilian National Healthcare System (SUS) actors in border municipalities are prepared to respond to challenges related to migration and climate change, including extreme events, emerging zoonosis, and others.

The joint programme will provide technical support to local public health authorities to strengthen their preparedness and response capacities at official points of entry in target municipalities (Output 2.1). Activities will engage the local healthcare system, in particular Basic Health Units (UBS, in the Portuguese acronym), and Reference Centres for Worker's Health (CEREST, in the Portuguese acronym), on migration, environment and climate change, and health, strengthening capacities to assist migrants, identify climate change related health outcomes, among others. Support will be provided to the development of plans for climate resilient healthcare facilities in border municipalities, building on an assessment of risks and needs conducted by the Ministry of Health and the new evidence generated through Output 1.1.

The Centres for Strategic Information in Health Surveillance (CIEVS, in the Portuguese acronym) and Public Health Border Laboratories (LAFRONS, in the Portuguese acronym) will have increased capacity for identification and prevention of climate change, health and migration related risks in border municipalities where this infrastructure is completely or partially installed (Output 2.2). Their staff will receive specialized training and simulation exercises will be organized, including on the identification of emerging zoonosis and surveillance of diseases of special epidemiological importance. Meetings for exchange of experiences between CIEVS and LAFRONS will be organized.

Cross-border cooperation will also be strengthened through the development of protocols for routine public health information sharing with neighbouring countries and mitigation of the international spread of emerging diseases (Output 2.3). Trainings and workshops will be organized in the ten municipalities and simulation exercises will be organized to prepare the local healthcare systems to respond in the event of identification of transmissible diseases of special epidemiological importance.

Outcome 3. Cross-border communities have increased resilience to address challenges posed by climate change and health hazards.

Communities in border municipalities will have increased knowledge about prevention and treatment of climate change related health risks (Output 3.1). Participatory information sessions and trainings will be held with local communities, building on their traditional knowledge on health and adaptation mechanisms, aiming to promote engagement and participation in the creation of community-led adaptation solutions. Trainings subjects will include fighting wildfires, participatory water management, including protection of drinking water sources, and community-led efforts to reforest and restore or protect watersheds. The Forest Guardian program, led by the Ministry of Environment and Climate Change to engage and partner with local populations in forest conservation, will be strengthened through provision of training and equipment to participating community members, as well as IBAMA and ICMBio. Technical assistance and seed funds will support pilot interventions for climate change adaptation of agricultural production. A meeting of leaderships will discuss climate change impacts on migration and health.

Communities in border municipalities, including cross-border indigenous peoples, will have increased knowledge about access to rights, health, migration, and environment (Output 3.2). Participatory information sessions and knowledge exchange events will be held with local communities, and information materials will be developed and published in Portuguese and other relevant languages, including indigenous languages of cross-border indigenous peoples. Indigenous community leaders will also be supported to participate in national and international forums to discuss and share their experience on the nexus of climate change, human mobility and health.

The joint programme will also ensure cross-border indigenous communities receive training, equipment, and supplies for identification and treatment of diseases related to environment and climate change risks (Output 3.3). This will be done in partnership with communities and indigenous associations based on an initial needs assessment, aiming at promoting local autonomy in the identification of diseases, prevention, treatment and correct referral, with an initial focus on malaria cases. The communities will also be supported to develop community-led solutions for the prevention, identification and treatment of diseases.

2b) Theory of change

If migration, health, and environmental policies are increasingly integrated and coherent in border municipalities, *if* local structures of the Brazilian Public Health System (SUS) in border municipalities have increased capacity to identify and respond to challenges posed by the nexus migration, health, and climate change, and *if* communities have increased resilience to face risks related to climate change, migration, and health, **then** border municipalities will be better prepared and more resilient to respond to challenges posed by climate change, health and migration, including a stronger ability to respond to health emergencies of international interest, **assuming** there will be continued engagement of communities and stakeholders at the national and subnational level with the joint programme.

3. Project Implementation Strategy

3.a) Implementation Strategy: The Joint Programme will be led by IOM in partnership with PAHO, and both agencies will ensure effective coordination with federal and local governments. IOM and PAHO have a strong presence in the region and, over the past years, both Organizations have developed and implemented projects and programmes focused on addressing migration and border health issues in the region, including through direct assistance to international migrants and host communities and capacity development of local authorities and other relevant actors. In this context, IOM and PAHO have been promoting strategic actions and providing support to the Healthcare System in addressing public health events and emergencies in the border areas, contributing to reduce vulnerabilities associated with human mobility.

IOM and PAHO will jointly produce studies, publications, and capacity building activities. For activities jointly implemented, as well as for activities implemented by each agency, IOM and PAHO will have specific budget lines. During the initial phase of project implementation, a Steering Committee will be created and will accompany all project implementation, to be co-chaired by the UN Resident Coordinator's Office, the Ministry of Environment and Climate Change, and the Ministry of Health, with the two PUNOs (IOM and PAHO) serving as members. The Steering Committee, informed by the new evidence produced, will advise on the selection of geographical areas and communities and beneficiaries selected. In the case of indigenous communities, participation in activities of the Joint Programme will be conditioned to communities' agreement upon prior and informed consultation processes, in dialogue with the National Indigenous Peoples' Foundation (FUNAI).

IOM and PAHO have experience implementing projects in the states of the Brazilian Amazon, with presence in Roraima, Amazonas, Pará and Amapá, beyond projects under implementation in other regions of the country. The Joint Programme expands these activities and incorporates new areas of activity, particularly in the strengthening of policy coherence between the areas of migration, environment and climate change, and health. These activities build on IOM and PAHO's experience in Brazil and worldwide.

With specific geographic, demographic, economic and cultural issues, the Brazilian Amazon faces challenges to its local healthcare system, aggravated by climate change, influencing the determinants of health, such as livelihoods, housing, income, equality in the access to healthcare and others. Climate sensitive determinants and risks of health are disproportionately felt by populations in higher vulnerability, that will be beneficiaries of the Joint Programme. Specific indigenous and traditional communities that will receive project activities will be defined through consultative processes, always ensuring indigenous peoples' rights to prior and informed consultation, in line with international instruments and the Brazilian constitution, and following all procedures for entrance in indigenous territories established in the Brazilian legal framework. The Joint Programme will also have among its beneficiaries local policymakers, and professionals of SUS, IBAMA and ICMBio. Regarding ICMBio, actions will strengthen the management of Conservation Units (UCs) which are, in any percentage, within the territorial limits of the municipalities benefiting from the Joint Programme, namely: a. National Park of Monte Roraima (Pacaraima – RR); b. National Park of Pico da Neblina (São Gabriel da Cachoeira – AM); c. Ecological Station of river Acre (Brasiléia – AC); d. National Park of Cape Orange (Oiapoque – AP); e. Extractivist Reserve of Barreiro das Antas (Guajará-Mirim – RO).

3.b) Cross-cutting principles: A human rights based approach will be at the core of the Joint Programme. The principles of equality and non-discrimination are foundational in this regard, as the results reach all migrants, as well as host communities, equally. The principles of participation and inclusion are also mainstreamed throughout activities, incorporating local systems' and communities' participation and expertise. Finally, activities will be designed in such a way as to ensure accountability and rule of law, including through appropriate training and guidance to staff and non-staff personnel working in the Joint Programme.

Through consultative processes and an internal situational analysis, the Joint Programme was able to identify key human rights issues, as well as right holders and duty bearers, and develop responses to them. Potential unintended

negative consequences were also mapped out and measures to monitor and mitigate them were developed in coordination with government stakeholders and communities. As for the rights concerned, climate change impact represents a major threat to the enjoyment of a wide range of human rights, including the rights to life, health, food, housing, territorial rights of indigenous peoples, among others. These situations can be exacerbated when mobility dimensions are considered, with direct impact on the rights of people on the move and host communities. Importantly, measures designed and implemented to respond to a climate crisis, including adaptation and mitigation measures to climate change, may also bring risks to the full enjoyment of human rights, highlighting the importance of cross-cutting consideration to human rights in the context of climate change, which will be incorporated in this Joint Programme. Particular attention will be dedicated to indigenous rights, including by understanding indigenous linguistic rights as a strategic tool to inform and promote access to other rights, such as the right to health, right to a sustainable environment and migrants' rights. Meetings will be held and reference documents in indigenous languages will be developed with meaningful community engagement and participation.

Gender will be mainstreamed in all activities and actions related to this Joint Programme. The diversity of gender identities in affected populations, including cross-border indigenous communities, will be considered across programme activities, as well as the specific health needs and climate change impacts on those identities. All new evidence produced for the Joint Programme will incorporate a gender, race, and ethnicity perspective and all data collected on beneficiaries will be disaggregated by sex and age, as well as other relevant identities. All capacity-building activities will aim at gender parity, which will inform the selection and prioritization of participants and the engagement with partners. Special attention will be given to gender parity/balance in programme activities, in particular those developed with local communities, including by fostering the participation of women community leaders. Activities will also include preparedness of border municipalities to face women's health needs in emergency contexts, including for a healthy pregnancy and safe birth, prevention and response to the occurrence of Gender-Based Violence (GBV), building on best practices identified by IOM, PAHO and the Brazilian Government. A gender perspective on human rights, including the topic of sexual and reproductive rights, will be included in the activities and publications. Recommendations will be developed to incorporate gender-sensitive best practices into public policies and protocols that can be activated in case of an emergency. These activities will contribute to the overall objectives of the Joint Programme by strengthening the human rights of women and strengthening gender equality in the access to health and a sustainable environment, across the diversity of gender identities. The Joint Programme will also ensure gender balance and inclusion in staffing. Moreover, in keeping with the shared responsibility of the UN system to strengthen protection and prevention of sexual exploitation, abuse, and harassment (PSEAH), and in line with existing policies and guidelines of the PUNOs, IOM and PAHO will ensure all staff and non-staff personnel and partners receive appropriate and timely training on this subject.

Joint Programme activities are in line with the Lima work programme on gender and its gender action plan. Particularly, they have synergy with following activities of the action plan: A.1 (Strengthen capacity-building efforts in mainstreaming gender in national climate change policies, plans, strategies and action); A.4 (Strengthen the evidence base and understanding of the differentiated impacts of climate change on men and women); D.3 (Promote the deployment of gender-responsive technological solutions to address climate change); D.4 (Support the collection and consolidation of information and expertise on gender and climate change in sectors and thematic areas); D.7 (Enhance the availability of sex-disaggregated data for gender analysis, taking into consideration multidimensional factors, to better inform gender-responsive climate policies, plans, strategies and action).

Child-specific needs will be considered across the project, with special attention to undocumented, unaccompanied and separated migrant children. These children are at particular risk and might have particular health needs, including of mental health, which will also be considered during the project. Brazil has a National Council dedicated to Children's Rights (CONANDA), under the umbrella of the Ministry of Human Rights. The Council has issued a Resolution (nº 232/2022) regarding identification, documentation and referral of unaccompanied and separated migrant children at Brazilian border posts, addressing issues of migratory regularization and referral to the child protection system. In 2014, Brazil was one of the four countries to address the Inter-American Court of Human Rights on the issue of the rights of migrant and refugee children, resulting in Advisory Opinion nº 21/2014, which

established directives on the protection of rights of these children, including for official border posts, but challenges remain in its implementation. Capacity building activities will inform the local network on the aspects of the Resolution and Advisory Opinion and an integration between the actions of the child protection system and the National Healthcare System will be sought. Moreover, PUNOs and partners will ensure that safeguarding policies and practices are in place throughout the implementation of the Joint Programme, in line with their relevant institutional policies and guidance. In addition to PSEAH training, as mentioned above, all staff and non-staff personnel and partners working with children in the Joint Programme will receive specific training on engaging with children and on children's rights and needs.

4. Partnerships

4.a) Stakeholder mapping: The Joint Programmes will incorporate a people-centred, whole-of-government and whole-of-society approach, in line with GCM Guiding Principles. As such, multi-stakeholder partnerships will be pursued throughout the intervention, taking into consideration all relevant stakeholders, including migrants, local authorities, and host communities. This will ensure their interests, needs, expertise, and capacities are accounted for and leveraged to promote meaningful engagement and partnerships to deliver programme results, as well as to anticipate potential risks and mitigate or avoid any negative impacts. For the design phase, IOM and PAHO have conducted an initial stakeholder mapping in close consultation with focal points of the Ministry of Environment and Climate Change and the Ministry of Health. PAHO/WHO's engagement with non-State Actors is subject to PAHO/WHO's Framework for the Engagement with non-State Actors (FENSA).

The following stakeholders have been preliminarily identified:

Government at the national level, in particular

- Ministry of Environment and Climate Change
- Ministry of Health
- Ministry of Indigenous Peoples
- Ministry of Women
- Ministry of Human Rights and Citizenship
- National Council of Health
- National Council of State Secretaries of Health (CONASS)
- National Council of Municipal Secretaries of Health (CONASEMS).

Government at the local level, in particular

- Relevant sectoral departments of the target municipalities (including Health, Environment, Social Protection Departments and others).
- Indigenous Foundation of the State of Amazonas (FEI)
- Interstate Consortium for the Sustainable Development of the Legal Amazon

Civil Society, in particular

- Hutukara Yanomami Association
- Urihi Yanomami Association
- Socio-Environmental Institute
- Local communities' organizations
- Migrant communities and migrants' organizations

Academia and Research Institutes, in particular

- Oswaldo Cruz Foundation (Fiocruz)
- Institute for Environmental Research of the Amazon (IPAM)
- Potsdam Institute for Climate Impact Research (PIK)

4.b) Partnerships: The programme will work in close partnership with municipal and state governments and relevant national structures, particularly the Ministry of Environment and Climate Change and the Ministry of Health. It will also build on existing partnerships with local civil society organizations.

The Ministry of Environment and Climate Change and the Ministry of Health have been invited to contribute to the development of the Joint Programme document from early on, playing a crucial role in the refinement of the programme scope and activities and ensuring its alignment with the national priorities set up by both ministries, including existing and planned public policies that the programme will contribute to strengthen, particularly through

promoting policy coherence. The Joint Programme document has been shared in advance and reviewed by partners in both ministries, and a joint workshop was organized where the Ministry of Environment and Climate Change and the Ministry of Health have discussed and contributed to the Joint Programme with IOM and PAHO. While the Ministry of Environment and Climate Change and the Ministry of Health are priority partners and have been included in the Joint Programme development phase, partnerships with other relevant federal structures will be sought, such as with the Ministry of Indigenous Peoples, the Ministry of Women, the Ministry of Human Rights and Citizenship, among others, aiming at a whole-of-Government approach.

Partnerships will also be sought with existing structures dedicated to the governance of the Brazilian Healthcare System, including the engagement with the National Council of Health, as well as the National Council of State Secretaries of Health (CONASS, in the Portuguese acronym) and the National Council of Municipal Secretaries of Health (CONASEMS, in the Portuguese acronym). Previous activities organized by IOM in the states of Roraima and Amazonas have allowed for a closer dialogue with local healthcare professionals, and through these, IOM was requested to expand training activities to include the impact of climate change in health and migration, as this Joint Programme proposes.

Partnerships with sub-national governments will be sought both at the municipal and state levels, including through specific coordination structures such as the Interstate Consortium for the Sustainable Development of the Legal Amazon. The Consortium has an ongoing partnership with the United Nations in Brazil through the Working Group on Sustainable Development of the Legal Amazon and will be invited to extend this partnership in support of this Joint Programme.

Through their ongoing partnerships, both IOM and PAHO, have been able to identify needs and demands of affected communities and the local healthcare system. IOM has ongoing partnerships in Roraima with the Hutukara and Urihi Yanomami Associations, which has been crucial in developing a co-designed pilot health intervention in the Yanomami territory, focused on the training of community members for the identification and referral of malaria cases, including the provision of microscopes and other small equipment for the communities. This pilot intervention will be scaled up and extended to other interested indigenous communities through this Joint Programme. Dialogue with leaderships from the Sanöma and Ye'kwana indigenous communities in Roraima has led to further identification of demands, particularly through accounts of the impact of climate change in their agricultural production and consequences on nutrition and community wellbeing. This dialogue with leaderships, associations, and grassroots groups was crucial in prioritizing topics and designing activities of the Joint Programme.

Similar partnerships will be sought with indigenous associations in all participating border municipalities. IOM also has an ongoing partnership with the Socio-Environmental Institute (ISA in the Portuguese acronym), an organization that works closely with indigenous peoples in the Amazon region, including several of the participating areas, and is a national reference in the work with indigenous communities. Local partnerships will contribute to project implementation also through co-implementation of activities with implementing partners, particularly through workshops for participatory project design and provision of technical assistance and seed grants for implementing partners. The 2022 National Conference on Indigenous Health also contributed to the identification of issues addressed by the programme.

Academic partners will be engaged in the project, building on existing partnerships of IOM and PAHO. PAHO has a longstanding partnership with Oswaldo Cruz Foundation (Fiocruz), a leading Latin American research institute on health, with headquarters in Rio de Janeiro and offices in other Brazilian cities. Partnerships with other academic institutions will be sought, including with the Institute for Environmental Research of the Amazon (IPAM, in the Portuguese acronym), a reference in scientific research in the area, that acts with knowledge production and implementation of local sustainable initiatives and advocacy on sustainable development, equality and environmental preservation. Partnership will also be sought with the Potsdam Institute for Climate Impact Research (PIK), with which OIM has previously collaborated in Peru. PIK currently conducts research on migration and climate change in several countries, including a focus on Brazil. The broad range of partners will ensure the joint programme



follows a whole-of-government and whole-of-society approach in addressing the challenges posed by the nexus migration, environment and climate change, and health.

5. Innovation, Sustainability and Exit Strategy

5a) Innovation: The Joint Programme applies the “One Health” approach, which consists of an integrated and holistic approach balancing and optimizing human, animal, and ecosystem health sustainably. It contributes to a full understanding of co-benefits, risks, trade-offs and opportunities to advance health solutions that are equitable and holistic, consequently addressing a variety of adverse drivers of international migration. The programme will contribute to overcome challenges in the implementation of this approach, through production of new evidence and trainings but also by promoting policy coherence between relevant areas. This strengthens the programme’s catalytic potential to develop solutions that could be replicated in other border municipalities and beyond to support the integration of a “One Health” approach in decision-making at the local level.

The Joint Programme is innovative in the region by focusing on the intense cross-border human mobility in the Amazon. While cross-border mobility in the Amazon has been observed in the last years and is a characteristic of the cross-border indigenous territories in the region, this has received insufficient attention so far and solutions need to be developed to strengthen climate change adaptation and health solutions that fully incorporate human mobility. One example is healthcare provision in the indigenous health subsystem, which faces challenges in planning for and incorporating health assistance to indigenous persons who live in the same traditional territory but, being born in parts of traditional land that are not in the Brazilian territory, do not have Brazilian nationality. The programme will contribute to the development of such solutions, particularly ones that engage migrants and local communities.

Gender and child-sensitive issues will be developed in an innovative way by addressing existing gaps. The diversity of gender identities in cross-border indigenous communities will be mainstreamed in activities engaging these communities, including by assessing specific health needs and climate change impacts. Incorporating a gender diversity approach to activities targeted at traditional communities is highly innovative as people with diverse sexual orientations, gender identities, gender expressions and/or sex characteristics (SOGIESC) are often not included in the development of solutions for climate change and health challenges among traditional communities, although they might face specific intersectional impacts and have specific demands.

Activities proposed will aim to catalyse their impact beyond the duration of the Joint Programme by contributing to consolidate the “One Health” approach in border municipalities, promoting and strengthening policy coherence in migration, climate change, and health, and increasing community resilience to face climate change related risks and associated health outcomes.

5b) Sustainability and exit strategy: A strong focus on capacity building, development of instruments and policy coherence demonstrates the programme’s potential for expansion and replication beyond the proposed activities. Training sessions will include training-of-trainers strategies and the production of support materials for capacity building that will outlive the joint programme’s duration. IOM and PAHO have a strong track record of implementing such activities in Brazil and ongoing partnerships with local partners for course production and dissemination. The joint programme exit strategy will be based on building legacy and strengthening governments communities at the local level. As highlighted in other sections, this will be done particularly through strategic and long-term engagement with local actors on the areas of migration, environment and health, aiming at promoting the creation of permanent structures of coordination and action across policy sectors and the development of municipal policies and pilot initiatives that will outlive the joint programme implementation period and have an impact on migration management for the benefit of migrant and host communities.

Furthermore, the joint programme activities will have the potential to be replicated in other official border posts within the Brazilian Amazon, and to be adapted to the Brazilian Midwest and Southern regions and other neighbouring countries. With views of promoting scaling and replicability, IOM and PAHO will promote activities within and beyond the scope of the joint programme to disseminate good practices, lessons learned, and innovative solutions identified in this experience. This will be implemented, in particular, through the organization of a national event targeted at border municipalities of the Brazilian Midwest and Southern regions (under Output 1.2). This

highlights the joint programme's contribution to discussions on migration, climate change and health beyond the implementation region, at the national and regional levels.

The joint programme's workplan will also contribute evidence about the migration, environment and climate change and health nexus to public discussions on climate change. The project will initiate with a seminar on migration, environment and climate change and health, bringing the topic into discussion with key stakeholders in the lead up to COP 28 (Nov-Dec 2023). New evidence produced by the studies and reports conducted in this joint programme will be presented in an event in the lead up to COP 29 (2024). Finally, the main innovations and lessons learned will be presented as a parallel event during COP 30 (2025), for which Belém (PA), one of the main cities in the Brazilian Amazon, is a candidate city.

6. Project Management and Coordination

6a) PUNOs and Implementing Partners: The Joint Programme will be coordinated by IOM, as Convening Agent, in partnership with PAHO, who will jointly, as PUNOs, ensure the effective programme implementation and coordination with national and local stakeholders, building on existing partnerships established by both agencies and long-standing experience working within their mandates in Brazil. Both IOM and PAHO will have dedicated budget lines. Project implementation will rely on coordination with the Brazilian Healthcare System in its three management levels (municipality, state, and federal).

IOM established its Migration, Environment and Climate Change division in 2015, becoming the first international organization to install an institutional unit completely dedicated to this topic, under the broader area of Peace and Development. In 2021, IOM launched its “2021-2030 Institutional Strategy for Migration, Environment and Climate Change”. In this context, IOM has been actively supporting the development of innovative solutions to the challenges related to environment and climate change, including activities that focus on migration, environment and climate change, and health nexus. This expertise and experience demonstrates IOM’s capacity to implement the Joint Programme as Convening Agent.

6b) Joint Programme Management and Coordination: A Steering Committee will be created to provide strategic oversight and guidance to the Joint Programme, to be co-chaired by the UN Resident Coordinator’s Office, the Ministry of Environment and Climate Change, and the Ministry of Health, with the two PUNOs (IOM and PAHO) serving as members. Other relevant ministries, as well as civil society organizations (CSOs), municipal governments and community leaderships will also be invited to take part in the Steering Committee as members, with a consultative and advisory role. As the lead PUNO, IOM will provide coordination and programmatic leadership to the Joint Programme team during implementation.

6c) Risk Management: IOM and PAHO will develop a comprehensive Risk Management Plan, which will be periodically reviewed and updated to evaluate pre-identified risks and identify new and emerging ones and the required treatment actions across the intervention cycle, to establish control measures, assess their effectiveness and take actions when necessary. Risk management information will be obtained from dialogue with programme stakeholders, municipal and state authorities and other relevant actors. Some of the risks already identified include:

- Institutional changes in municipal government leadership, particularly after municipal elections (Oct. 2024), can delay project implementation
- Low engagement from key municipal stakeholders
- Divergence between Federal, State and Municipal levels
- Occurrence of extreme events can temporarily change the priorities of municipal stakeholders
- Possible action of criminal armed groups in border municipalities

6d) Joint Programme Monitoring and Knowledge Management: The design, oversight and implementation of Monitoring, Evaluation, Accountability and Learning (MEAL), Reporting, and Knowledge Management (KM) activities and workflows for this Joint Programme will be led by IOM, in close coordination with PAHO, ensuring adherence to the relevant policies and standards of the Migration Multi-Partner Trust Fund and respective internal policies and standards of each Organization. IOM and PAHO’s programme managers will be responsible for coordinating the regular collection, analysis and use of data and information about programme implementation and progress, in line with relevant policies and guidelines, as well as recording and reporting of the results achieved, identification of good practices and lessons learned, and conduction of knowledge exchange and learning exercises.

IOM Brazil’s Programme Support Unit, in coordination with PAHO’s Representation in Brazil, will support programme managers in conducting MEAL, reporting, and KM activities and ensure staff of both Organizations have adequate capacity and knowledge. This will be facilitated, among others, by the development and deployment of appropriate tools and templates, delivery of capacity building activities where needed, and regular programme coordination

meetings. In addition, a detailed MEAL and KM Plan will be developed at the onset of implementation to provide guidance and support IOM and PAHO teams. Both Organizations will also have monitoring and reporting field staff who will support on site data collection activities. Local partners and relevant authorities will be mobilized and engaged to support those activities as appropriate (e.g. by facilitating access to certain data sources) and participate in knowledge exchange and learning activities.

With the purpose of effectively tracking progress towards the intended results and identifying changing priorities and corresponding adaptation measures to be timely taken, a four-level monitoring strategy will be employed for the Joint Programme:

- **Results monitoring.** A Results Monitoring Framework will be developed as part of the MEAL and KM Plan, based on the Programme Results Matrix, to integrate all the programme results and indicators and will provide detailed information on sources, data collection methods, disaggregation level and the corresponding responsibilities for periodic measurement and reporting.
- **Activity monitoring.** IOM and PAHO will regularly update a detailed common work plan, which will include a timeframe of programme activities, responsible parties, process indicators and milestones of progress.
- **Risk monitoring.** As described above, a comprehensive risk management plan will be developed and periodically reviewed by IOM and PAHO.
- **Financial monitoring:** IOM and PAHO will work in coordination to guarantee the timely execution of funds and perform budget control and monitoring throughout the implementation, including programme burn rate and use of budget lines for each Organization, and prepare financial reports in accordance with the procedures and timelines agreed upon.

IOM and PAHO will ensure all relevant information and data are shared with the Steering Committee and Ministry of Environment and Climate Change and the Ministry of Health's technical focal points in a timely and appropriate manner. The technical focal points, in particular, will be invited to collaborate in programme monitoring, reporting and learning activities and to provide regular feedback and inputs. IOM and PAHO will also ensure accountability to the affected populations through meaningful participation and the establishment of a feedback mechanism.

6e) Evaluation: An external, independent summative evaluation will be conducted at the end of the Joint Programme, led by IOM as Convening Agent with the support of PAHO, in coordination with the Steering Committee, following GCM guiding principles of whole-of-government, whole-of-society, and people-centred. The objective of the evaluation will be to assess the relevance of programme design, the coherence of the programme vis-à-vis other initiatives, efficiency of the programme management and implementation, the effectiveness and performance of the programme, and to a certain extent, the impact of the programme and its sustainability (as per the OECD-DAC criteria). Cross-cutting themes such as incorporation of a Rights-Based Approach (RBA), gender-responsiveness and child-sensitivity will also be analysed. Opportunities to establish synergies and collaboration with other processes in the country will be explored, in particular the new UNSDCF. The evaluation process will be participative and will involve all relevant programme stakeholders and partners. Evaluation results will be disseminated amongst government, development partners, civil society, and other stakeholders. A Joint Management Response will be developed upon completion of the evaluation process to ensure adequate and timely follow-up of the evaluation recommendations. In addition, the Joint Programme foresees the conduction of at least two Programme Retrospectives, jointly organized by the PUNOs after specific programme milestones are reached, with a view to ensuring the regular assessment of programme implementation, adequate reflection on progress, success and challenges, efficient stock-taking of lessons learned, and timely corrective actions to improve the delivery of programme results. A brief internal report will be produced following each Programme Retrospective outlining relevant findings and practical recommendations. As per IOM standard policies and in line with the Migration MPTF guidelines, 5 per cent of the Joint Programme budget will be allocated for monitoring, evaluation, and learning activities.

7. Project Budget and Workplan

7a) Budget:

Total budget: USD 2.504.468,75; Budget breakdown: IOM: USD 1.503.992,00; PAHO: USD 1.000.476,75

Cost sharing: IOM and PAHO have ongoing activities in the Amazon region, with funding from different sources. Thus, it is understood that some of the proposed activities could be co-funded directly or indirectly by other sources, as applicable. As an example, staff and office costs, travel and other activities that are part of IOM and PAHO's programming in the region could be co-funded.

b) Workplan:

Workplan detailed in annex 4.

Annex 1: Results Framework

RESULTS	INDICATORS	Data Source and Collection Method	Baseline	Targets	ASSUMPTIONS
Overall Objective Statement: The main objective of this Joint Programme is to contribute to addressing the compound challenges posed by migration, climate change, and health issues and increasing access of migrants to essential health services in border municipalities in the Brazilian Amazon, aiming at strengthening policy coherence, building capacities of the local healthcare systems, and improving community health, including among cross-border indigenous peoples.					
Outcome 1	Outcome Indicator 1a # of sectoral policies where migration has been mainstreamed.	Surveys/Interviews with key counterparts	0	2	Political environment is conducive to intersectoral coordination between actors
Policy coherence between migration, climate change and environment, and health, is strengthened in border municipalities and at national level SRF STO 4B.2	Outcome Indicator 1b # of government-led initiatives implemented or facilitated through improved multisector coordination and policy coherence	Survey/Interviews with key counterparts	0	10	Willingness of municipal governments to engage in intersectoral dialogue
Output 1.1	Output Indicator 1.1a # of new information and evidence products on migration, environment and climate change, and health developed and published	List of publications	0	4	
New evidence is available on health needs and climate-change related adverse	Output Indicator 1.1b # of government officials and other key stakeholders who participated in events to	List of participants in events	0	200	Access to relevant data sources and informants is not restrained

drivers of mobility of migrants crossing official border posts in target municipalities	disseminate new evidence produced (disaggregated by location, type of actor, and gender)				Consultants deliver products of a satisfactory quality in a timely manner
<p><i>List activities under Output 1.1</i></p> <p><i>1.1.1. Produce a report about installed capacities and existing gaps in the Brazilian Healthcare System to face the challenges of migration and climate change, including in the context of disasters and humanitarian response</i></p> <p><i>1.1.2. Conduct a comprehensive study about migration, environment and climate change in the Amazon region, with a gender and age perspective, focusing on different aspects such as impacts on health, livelihoods, and others</i></p> <p><i>1.1.3 Conduct a DTM in ten (10) border municipalities</i></p> <p><i>1.1.4. Organize events to disseminate the results and findings of the new evidence produced</i></p>					
Output 1.2					
Local policy makers and communities have increased capacities to identify and evaluate key climate change related health outcomes in target border municipalities, and increased knowledge on the nexus between migration, climate change and the risks for health	Output Indicator 1.2a # of officials and community members who participate in capacity development activities (disaggregated by location, type of actor, and gender)	List of participants who conclude training	0	1200	Officials and community members the topics relevant and will be committed to participate in trainings
	Output Indicator 1.2b # of communities reached with information and outreach materials on migration, environment and climate change, and health	Communities that receive communication materials	0	20	Access to indigenous territories is authorized
<p><i>List activities under Output 1.2</i></p> <p><i>1.2.1. Organize a seminar with state-of-the-art evidence on migration, environment and climate change, and health</i></p> <p><i>1.2.2. Develop and conduct in-person trainings on migration, environment and climate change, and health, targeted at national and municipal public officials and key stakeholders</i></p> <p><i>1.2.3. Develop and implement an online course on migration, environment and climate change, and health, targeted at national and municipal public officials and key stakeholders</i></p> <p><i>1.2.4. Organize events to disseminate lessons learned with the project and best practices</i></p>					

1.2.5. Develop and disseminate informational booklets for the general public on key climate change related health outcomes, with a gender and age perspective

1.2.6. Develop and disseminate communication pieces with information on key climate change related health outcomes, with a gender and age perspective

Output 1.3					
Border municipalities supported to develop protocols in areas of health, environment, and migration to respond cohesively to the main environment and climate change and health demands identified in an initial assessment	Output Indicator 1.3a # of border municipalities supported to develop new or revised municipal plans and protocols for multisector coordination and action	Project records	0	10	Municipal governments engage with the topics discussed
	Output Indicator 1.3b # of government officials and other stakeholders who participated in workshops on gaps, needs and opportunities (disaggregated by location, type of actor, and gender)	List of participants	0	200	
List activities under Output 1.3					
1.3.1. Organize national and municipal workshops on gaps, needs and opportunities for multisector coordination and action to respond cohesively to the main environment and climate change and health demands					
1.3.2. Provide technical assistance to federal authorities for the development of a national strategy for multisector coordination and action to respond cohesively to the main environment, climate change and health demands					
1.3.3. Provide technical assistance to border municipalities to develop municipal plans and protocols for multisector coordination and action					
Output 1.4					
Local policy makers have increased capacities to prepare for and respond to events of public health importance associated	Output Indicator 1.4a # of government officials and key community stakeholders trained to prevent, detect and/or respond to public health threats (disaggregated by location, type of actor, and	List of participants in trainings	0	200	Officials and community members the topics relevant and will be committed to participate in trainings

with human mobility and climate change	gender) Output Indicator 1.4b # of government-led or community-led services and facilities supported with information materials developed with programme support	Facilities that receive communication materials	0	30	Municipal governments accept to disseminate communication materials through local facilities
<p><i>List activities under Output 1.4</i></p> <p><i>1.4.1. Provide training for municipal policy makers in target border municipalities on migration, migrants' rights and humanitarian response principles, with a gender and age perspective</i></p> <p><i>1.4.2. Provide training for municipal policy makers in target border municipalities on combatting trafficking in persons, labour exploitation, gender-based violence and child labour, with a gender perspective</i></p> <p><i>1.4.3. Organize trainings and simulated exercises in target border municipalities to prepare municipal policy makers to respond in the event of identification of an emerging zoonosis</i></p> <p><i>1.4.4. Organize trainings and simulated exercises in target border municipalities to prepare municipal policy makers to respond to events of increased cross-border migration, including response to health needs of migrants and managing environmental impact of humanitarian operations</i></p> <p><i>1.4.5. Develop and publish informational booklets on migrants' rights and counter-trafficking in relevant languages according to identified needs</i></p>					
Outcome 2 Brazilian National Healthcare System (SUS) actors in border municipalities are prepared to respond to challenges related to migration and climate change, including extreme events, emerging zoonosis, and others SRF STO 3B.2	Outcome Indicator 2a # of PoEs supported to undertake preparedness and/or response measures for public health emergencies Outcome Indicator 2b # of strategies, plans, and protocols developed at the national and subnational levels to strengthen preparedness and response to migration, environment	Project records Survey/interview with key counterparts	0 0	10 10	Municipal actors in PoEs engage with the topics discussed Municipal and national stakeholders are willing and able to implement strategies, plans and protocols

	and climate change, and health challenges				
Output 2.1					
Technical support is available for municipal public health authorities to evaluate preparedness and response capacities at ten (10) official points of entry, and plans for increased resilience are developed	Output Indicator 2.1a # of health professionals, authorities and other key stakeholders trained on migration, environment and climate change, and health themes (disaggregated by type of actor, and gender)	List of participants in trainings	0	200	Health staff find the topics relevant and will be committed to participate in trainings
	Output Indicator 2.1b # of health professionals, authorities and other key stakeholders who participated in meetings to discuss climate resilient healthcare infrastructure (disaggregated by type of actor, and gender)	List of participants in meetings to discuss climate resilient infrastructure	0	200	Health professionals, authorities and other stakeholders engage with the topics discussed
<p><i>List activities under Output 2.1</i></p> <p><i>2.1.1. Provide training for staff in Basic Health Units (UBS) and local public health authorities on monitoring and surveillance of the quality of air, potable water, and human exposure to chemicals</i></p> <p><i>2.1.2. Provide training for staff in Basic Health Units (UBS) and local public health authorities on identification and referral of victims of trafficking in persons, labour exploitation, gender-based violence and child labour</i></p> <p><i>2.1.3. Provide training for staff in Basic Health Units (UBS) and local public health authorities on assistance to international migrants</i></p> <p><i>2.1.4. Provide training for staff in the Reference Centres for Worker's Health (CEREST) on migration, environment and climate change and health</i></p> <p><i>2.1.5. Support the development of architectural plans for the construction of climate resilient healthcare infrastructure</i></p>					
Output 2.2					
Centres for Strategic Information in Health	Output Indicator 2.2a # of government officials and	List of participants in trainings	0	200	Health staff find the topics relevant and will

Surveillance (CIEVS) and Public Laboratories (LAFRONS) have increased capacity for identification and prevention of climate-change, health and migration related risks in target border municipalities where this infrastructure is completely or partially installed	<p>key community stakeholders trained to prevent, detect and/or respond to public health threats (disaggregated by type of actor, and gender)</p> <p>Output Indicator 2.2b # of public officials, health authorities and other key stakeholders engaged in the development or improvement of surveillance and monitoring resources (disaggregated by type of actor, and gender)</p>	List of participants in meetings to discuss improvements in surveillance and monitoring resources	0	50	<p>be committed to participate in trainings</p> <p>Public officials, health authorities and other stakeholders engage with the topics discussed</p>
<p><i>List activities under Output 2.2</i></p> <p><i>2.2.1. Provide training for staff in CIEVS and LAFRONS on identification and prevention of climate change, health and migration related risks</i></p> <p><i>2.2.2. Organize trainings and simulated exercises to prepare CIEVS and LAFRONS to respond to the identification of emerging zoonosis</i></p> <p><i>2.2.3. Organize trainings and simulated exercises to prepare CIEVS and LAFRONS to respond to public health emergencies in entry points</i></p> <p><i>2.2.4. Organize meetings for exchange of experiences of CIEVS and LAFRONS on challenges related to migration and climate change</i></p> <p><i>2.2.5. Provide technical support for the development and implementation of strategies for evaluation and monitoring of risks, particularly those related to migration and climate change</i></p> <p><i>2.2.6. Provide technical assistance for the development and implementation of protocols for syndromic surveillance for diseases of special epidemiologic relevance</i></p>					
Output 2.3					
Protocols are available for routine public health information sharing with neighbouring countries and mitigation of the international spread of emerging diseases	<p>Output Indicator 2.3a # of health professionals, authorities and other key stakeholders who participated in trainings and workshops on routine information sharing (disaggregated by type of actor, and gender)</p>	List of participants in trainings	0	200	<p>Health professionals, authorities and other stakeholders find the topics relevant and will be committed to participate in trainings</p> <p>Health professionals, authorities and other</p>

	Output Indicator 2.3b # of health professionals, authorities and other key stakeholders who participated in simulated exercises for identification of emerging zoonosis (disaggregated by type of actor, and gender)	List of participants in simulated exercises	0	200	stakeholders engage with the exercises
<p><i>List activities under Output 2.3</i></p> <p><i>2.3.1. Provide training for the local healthcare system and municipal policy makers on routine information sharing with neighbouring countries</i></p> <p><i>2.3.2. Organize workshops in target municipalities to identify gaps, needs and opportunities to improve routine information sharing with neighbouring countries</i></p> <p><i>2.3.3. Develop protocols in target municipalities for routine information sharing with neighbouring countries</i></p> <p><i>2.3.4. Organize simulated exercises in target border municipalities to prepare the local healthcare system to respond in the event of identification of an emerging zoonosis</i></p> <p><i>2.3.5. Develop and publish informational material on the mitigation of the spread of emerging diseases</i></p>					
Outcome 3					
Cross-border communities have increased resilience to face the challenges posed by climate change and health SRF STO 2A.1	Outcome Indicator 3a % of target municipalities with community-led initiatives developed to address health, migration, and environmental issues	Project records	0	70% (7 out of 10)	Solutions developed are effective to address identified challenges
	Outcome Indicator 3b # of community associations who develop pilot interventions with seed funds received	Project records	0	3	

Output 3.1					
Communities in border municipalities, including cross-border indigenous peoples, have increased knowledge about prevention and treatment of climate change related health risks, based on an initial assessment of priorities	Output Indicator 3.1a # of community members and other municipal stakeholders reached with information sessions (disaggregated by age, sex, ethnicity, and other relevant identities as applicable)	List of participants in information sessions	0	500	Communities find the topics relevant and will be committed to participate in information sessions
	Output Indicator 3.1b # of municipal community leaders who participate in strategic coordination meetings and events (disaggregated by age, sex, ethnicity, and other relevant identities as applicable)	List of participants in strategic coordination meetings and events	0	20	Community leaderships engage with the topics
<p><i>List activities under Output 3.1</i></p> <p><i>3.1.1. Conduct information sessions for local communities in target border municipalities on human mobility, environment and climate change issues, including health risks</i></p> <p><i>3.1.2. Provide training and equipment for local communities in the combat to forest fires, in particular to community members participating in the Forest Guardians program</i></p> <p><i>3.1.3. Provide training for indigenous cross-border communities on the National Policy for Environmental and Territorial Management of Indigenous Lands (PNGATI), with focus on climate change impacts</i></p> <p><i>3.1.4. Provide technical assistance and seed funds for the development of pilot interventions for climate change adaptation of agricultural production in selected communities</i></p> <p><i>3.1.5. Organize a meeting of leaderships from cross-border indigenous communities to discuss climate change impacts on migration and health, shared challenges, and community-led solutions, with a gender perspective</i></p>					
Output 3.2					
Communities in border municipalities,	Output Indicator 3.2a # community members, and	Distribution lists	0	200	Local associations accept to disseminate

including cross-border indigenous peoples, have increased knowledge about access to rights, with emphasis on the areas of health, migration and environment	other municipal stakeholders reached with information materials, including on women and children's rights Output Indicator 3.2b # of local community leaders supported to participate in national and international discussions on migration, climate change and environment, and health (disaggregated by location, age, sex, ethnicity, and other relevant identities as applicable)	List of participants in national and international meetings	0	5	communication materials Community leaderships engage with the topics
<p><i>List activities under Output 3.2</i></p> <p>3.2.1. Develop an informational booklet in Portuguese and other relevant languages, including indigenous languages about access to migration regularization procedures</p> <p>3.2.2. Develop an informational booklet in Portuguese and other relevant languages, including indigenous languages about access to healthcare</p> <p>3.2.3. Develop an informational booklet in Portuguese and other relevant languages, including indigenous languages on decent work</p> <p>3.2.4. Conduct informational sessions for local communities about access to rights, with emphasis on the areas of health, migration and environment</p> <p>3.2.5. Organize a meeting of leaderships from local communities to discuss access to rights, with emphasis on the areas of health, migration and environment</p> <p>3.2.6. Support the participation of local leaderships from target border communities in national and international fora to discuss impacts of climate change on human mobility and health</p>					
Output 3.3					
Cross-border indigenous communities receive training, equipment, and supplies for identification and treatment of diseases,	Output Indicator 3.3a # of health professionals, community members, and other municipal stakeholders who completed training on prevention and control of communicable diseases	List of participants in training Project records	0 0	40 4	Communities find the topics relevant and will be committed to participate in training

based on an initial assessment of priorities	(disaggregated by age, sex, ethnicity, and other relevant identities as applicable) Output Indicator 3.3b # of indigenous communities supported with the donation of equipment				
<p><i>List activities under Output 3.3</i></p> <p>3.3.1. Conduct an assessment to identify priorities and needs of cross-border indigenous communities</p> <p>3.3.2. Conduct capacity-building activities for indigenous communities' members on the use of microscopes to identify malaria and referral procedures</p> <p>3.3.3. Donate small equipment for indigenous communities to act in the identification and referral of malaria cases</p> <p>3.3.4. Conduct workshops with cross-border indigenous communities and public officials to develop community-led solutions for the identification and treatment of diseases</p>					

REFERENCE: Definition of Key Terms (Reference: UNDG Results Based Management Handbook 2012 ⁶)

Results based management (RBM): A management strategy by which all actors, contributing directly or indirectly to achieving a set of results, ensure that their processes, products and services contribute to the desired results (outputs, outcomes, overall objective) and use information and evidence on actual results to inform decision making on the design, resourcing and delivery of programmes and activities as well as for accountability and reporting.

Results: Changes in a state or condition that derive from a cause-and-effect relationship. There are three types of such changes - outputs, outcomes and impact - that can be set in motion by a development intervention. The changes can be intended or unintended, positive and/ or negative.

Results chain

The causal sequence for a development intervention that stipulates the necessary sequence to achieve desired results – beginning with inputs, moving through activities and outputs, and culminating in individual outcomes and those that influence outcomes for the community, goal/impacts and feedback. It is based on a theory of change, including underlying assumptions.

Impact

⁶ See: <https://undg.org/wp-content/uploads/2016/10/UNDG-RBM-Handbook-2012.pdf>

Impact implies changes in people's lives. This might include changes in knowledge, skill, behaviour, health or living conditions for children, adults, families or communities. Such changes are positive or negative long-term effects on identifiable population groups produced by a development intervention, directly or indirectly, intended or unintended. These effects can be economic, socio-cultural, institutional, environmental, technological or of other types. Positive impacts should have some relationship to the Millennium Development Goals (MDGs)⁷, internationally-agreed development goals, national development goals (as well as human rights as enshrined in constitutions), and national commitments to international conventions and treaties.

Goal (same as Overall Objective)

A specific end result desired or expected to occur as a consequence, at least in part, of an intervention or activity. It is the higher order objective that will assure national capacity building to which a development intervention is intended to contribute.

Outcome

Outcomes represent changes in the institutional and behavioral capacities for development conditions that occur between the completion of outputs and the achievement of goals.

Outputs

Outputs are changes in skills or abilities and capacities of individuals or institutions, or the availability of new products and services that result from the completion of activities within a development intervention within the control of the organization. They are achieved with the resources provided and within the time period specified.

⁷ Please note that the MDGs should be replaced with the Sustainable Development Goals (SDGs).

Annex 2: Risk Management Plan

Risks	Risk Level (Number: Likelihood times Impact)	Likelihood Certain: 5 Likely: 4 Possible: 3 Unlikely: 2 Rare: 1	Impact Essential: 5 Major: 4 Moderate: 3 Minor: 2 Insignificant: 1	Mitigation measures	Responsible PUNO
i) Possible action of criminal armed groups in border municipalities	12	3	4	PUNOs will coordinate with municipal authorities and communities to ensure activities can take place in a safe environment and that public security risks are duly monitored and anticipated.	IOM, PAHO
ii) Institutional changes in municipal government leadership, particularly after municipal elections (oct24)	9	3	3	PUNOs will coordinate with stakeholders the planning and implementation of programme activities to ensure the election period does not affect them.	IOM, PAHO
iii) Loss of engagement of municipal stakeholders	9	3	3	PUNOs will work to strengthen relations with municipal stakeholders, taking into account their priorities and expectations, and ensure they are adequately informed and engaged in programme activities.	IOM, PAHO
iv) Divergence between Federal, State and Municipal levels	9	3	3	PUNOs will closely coordinate with federal, state, and municipal authorities, and conduct regular advocacy and information exchange to ensure alignment of priorities and action between different stakeholders.	IOM, PAHO
v) Occurrence of extreme events can temporarily change the priorities of municipal stakeholders	6	2	3	PUNOs will work with municipal stakeholders to monitor and mitigate possible risks related to extreme events.	IOM, PAHO

LIKELIHOOD	Occurrence	Frequency
5: Very Likely	The event is expected to occur in most circumstances	Twice a month or more frequently
4: Likely	The event will probably occur in most circumstances	Once every two months or more frequently
3: Possibly	The event might occur at some time	Once a year or more frequently
2: Unlikely	The event could occur at some time	Once every three years or more frequently
1: Rare	The event may occur in exceptional circumstances	Over every seven years or more frequently

IMPACT	Result
5: Essential	An event leading to massive or irreparable damage or disruption
4: Major	An event leading to critical damage or disruption
3: Moderate	An event leading to serious damage or disruption
2: Minor	An event leading to some degree of damage or disruption
1: Insignificant	An event leading to limited damage or disruption

	IMPACT				
LIKELIHOOD	Insignificant (1)	Minor (2)	Moderate (3)	Major (4)	Extreme (5)
Very Likely ((5)	Medium (5)	High (19)	High (15)	Very High (20)	Very High (25)
Likely (4)	Medium (4)	Medium (8)	High (12)	High (16)	Very High (20)
Possible (3)	Low (3)	Medium (6)	High (9)	High (12)	High (15)
Unlikely (2)	Low (2)	Low (4)	Medium (6)	Medium (8)	High (10)
Rare (1)	Low (1)	Low (3)	Medium (3)	Medium (4)	High (5)

Level of Risk	Results
Very High	Immediate action required by executive management. Mitigation activities/treatment options are mandatory to reduce likelihood and/or impact. Risk cannot be accepted unless this occurs.
High	Immediate action required by senior/executive management. Mitigation activities/treatment options are mandatory to reduce likelihood and/or impact. Monitoring strategy to be implemented by Risk Owner.
Medium	Senior Management attention required. Mitigation activities/treatment options are undertaken to reduce likelihood and/or impact. Monitoring strategy to be implemented by Risk Owner.
Low	Management attention required. Mitigation activities/treatment options are recommended to reduce likelihood and/or impact. Implementation of monitoring strategy by risk owner is recommended.

Annex 3a: Budget Template – Results Based Budget

Migration MPTF

Joint Programme Budget (Results-Based Budget)

	Outcome/ output/ activity formulation:	IOM Budget by recipient organization	PAHO Budget by recipient organization	TOTAL (all PUNOs)	Amount reserved for direct action on gender equality (if any):
PROGRAMMATIC BUDGET					
OUTCOME 1: Policy coherence between migration, climate change and environment, and health, is strengthened in border municipalities and at national level					
Output 1.1:	New evidence is available on health needs and climate change related adverse drivers of mobility of migrants crossing border posts	155000	18500	173500	37125
Activity 1.1.1:	Report about SUS installed capacities	10000	8500	18500	4625
Activity 1.1.2:	Study about migration, environment and climate change	60000	0	60000	15000
Activity 1.1.3:	DTM	70000	0	70000	17500
Activity 1.1.4:	Dissemination events	15000	10000	25000	

Output 1.2:	Local policy makers and communities have increased capacities to identify and evaluate key climate change related health outcomes and increased knowledge on the nexus migration, climate change and health	60000	116500	176500	80875
Activity 1.2.1:	Seminar on migration, climate change and health	20000	15000	35000	8750
Activity 1.2.2:	In person trainings for local public officials	7500	15000	22500	5625
Activity 1.2.3:	Online training for local public officials	0	40000	40000	10000
Activity 1.2.4:	Events to disseminate lessons learned and best practices	25000	24000	49000	49000
Activity 1.2.5:	Informational booklets on key climate change related health outcomes	0	12500	12500	3125
Activity 1.2.6:	Communication pieces	7500	10000	17500	4375
Output 1.3:	Ten (10) border municipalities supported to develop protocols in areas of health, environment and migration to respond cohesively to the main challenges	45000	35000	80000	0
Activity 1.3.1:	National and local workshops on multisector coordination and action	15000	15000	30000	
Activity 1.3.2:	Technical assistance to develop national strategy for multisector coordination and action	15000	10000	25000	
Activity 1.3.3:	Technical assistance for municipalities to develop local plans for multisector coordination and action	15000	10000	25000	
Output 1.4:	Local policy makers have increased capacities to prepare for and respond to events of public health importance	47500	28000	75500	44250
Activity 1.4.1:	Training for local policy makers on migrants' rights and humanitarian response	7500	0	7500	
Activity 1.4.2:	Training for local policy makers on protection issues	7500	0	7500	7500
Activity 1.4.3:	Trainings and simulated exercises (emerging zoonosis)	0	12500	12500	

Activity 1.4.4:	Trainings and simulated exercises (humanitarian response)	25000	8000	33000	33000
Activity 1.4.5:	Informational booklets on protection	7500	7500	15000	3750
Total for Outcome 1 (Outputs 1.1 + 1.2 + 1.3...etc.)		307500	198000	505500	118000
OUTCOME 2: Brazilian National Healthcare System (SUS) actors in border municipalities are prepared to respond to challenges related to migration and climate change, including extreme events, emerging zoonosis and others					
Output 2.1:	Technical support is available for local public health authorities to evaluate preparedness and response capacities at ten border municipalities	22500	62500	85000	27500
Activity 2.1.1:	Training for SUS staff (surveillance)	0	50000	50000	
Activity 2.1.2:	Training for SUS staff (protection)	7500	0	7500	7500
Activity 2.1.3:	Training for SUS staff (migration)	7500	0	7500	7500
Activity 2.1.4:	Training for CEREST (migration and climate change)	7500	0	7500	
Activity 2.1.5:	Plans for climate resilient infrastructure	0	12500	12500	12500
Output 2.2:	CIEVS and LAFRONS have increased capacities for identification of climate change and migration related health risks	7500	122500	130000	15625
Activity 2.2.1:	Training for CIEVS and LAFRONS on climate change, migration and health	7500	15000	22500	
Activity 2.2.2:	Trainings and simulated exercises for CIEVS and LAFRONS (emerging zoonosis)	0	10000	10000	
Activity 2.2.3:	Trainings and simulated exercises for CIEVS and LAFRONS (public health emergency in PoE)	0	10000	10000	10000
Activity 2.2.4:	Meeting exchange of experiences CIEVS+LAFRONS	0	30000	30000	
Activity 2.2.5:	Technical support for evaluation+monitoring risks	0	35000	35000	
Activity 2.2.6:	Protocols for syndromic surveillance	0	22500	22500	5625
Output 2.3:	Protocols are available for routine public health information sharing with neighbouring countries	0	170000	170000	3750

Activity 2.3.1:	Training for routine information sharing	0	40000	40000	
Activity 2.3.2:	Workshops on routine information sharing	0	40000	40000	
Activity 2.3.3:	Develop protocols for routine information sharing	0	50000	50000	
Activity 2.3.4:	Simulated exercises (emerging zoonosis)	0	25000	25000	
Activity 2.3.5:	Informational material (mitigation spread diseases)	0	15000	15000	3750
Total for Outcome 2 (Outputs 2.1 + 2.2 + 2.3...etc.)		30000	355000	385000	46875
OUTCOME 3: Cross-border communities have increased resilience to face the challenges posed by climate change and health issues					
Output 3.1:	Communities in border municipalities have increased knowledge about prevention and treatment of climate change related health risks	375000	28000	403000	233000
Activity 3.1.1:	Information sessions for border communities	20000	13000	33000	33000
Activity 3.1.2:	Training and equipment (Forest Guardians Program)	150000	0	150000	
Activity 3.1.3:	Training (PNGAT and climate change)	20000	0	20000	
Activity 3.1.4:	Technical assistance and seed funds (pilots for climate adaptation of agricultural production)	160000	0	160000	160000
Activity 3.1.5:	Meeting of leaderships (climate change impacts)	25000	15000	40000	40000
Output 3.2:	Communities in border municipalities have increased knowledge about rights	67500	37500	105000	58750
Activity 3.2.1:	Informational booklet (regularization procedures)	7500	0	7500	
Activity 3.2.2:	Informational booklet (healthcare)	0	12500	12500	3125
Activity 3.2.3:	Informational booklet (decent work)	0	12500	12500	3125
Activity 3.2.4:	Informational sessions	20000	12500	32500	32500
Activity 3.2.5:	Meeting of leaderships (access to rights)	20000	0	20000	20000
Activity 3.2.6:	Participation of leaderships in fora (national&int)	20000	0	20000	

Output 3.3:	Cross-border indigenous communities receive training, equipment and supplies for identification and treatment of diseases	130000	0	130000	10000
Activity 3.3.1:	Assessment of priorities	10000	0	10000	10000
Activity 3.3.2:	Capacity building (identification + referral malaria)	60000	0	60000	
Activity 3.3.3:	Donation small equipment and supplies	35000	0	35000	
Activity 3.3.4:	Workshops (community-led solutions for identification and treatment of diseases)	25000	0	25000	
Total for Outcome 3 (Outputs 3.1 + 3.2 + 3.3...etc.)		572500	65500	638000	301750
TOTAL PROGRAMMATIC BUDGET: (Outcomes 1 + 2 + 3...)		910000	618500	1528500	466625

PERSONNEL, OPERATIONAL, M&E BUDGET				
Personnel costs if not included in activities above	405600	285600	691200	
Operational costs if not included in activities above	45000	30925	75925	
Monitoring and evaluation (must include provision for final independent evaluation) - minimum 3% of total budget	45000	0	45000	
TOTAL PERSONNEL, OPERATIONAL, M&E BUDGET:	495600	316525	812125	

SUB-TOTAL PROJECT BUDGET: (Programmatic + Personnel, Operational and M&E)	1405600	935025	2340625	
Indirect support costs (7%):	98392	65451.75	163843.75	
TOTAL PROJECT BUDGET:	1503992	1000476.75	2504468.75	

GENDER BUDGET: % of total budget reserved for GEWE (indicative) <i>Please calculate Total budget reserved for GEWE divided by Total Project Budget (%)</i>	31%
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Annex 3b: Budget Template – UNDG Budget Categories

Migration MPTF: Joint Programme Budget (by UNDG budget categories)

CATEGORIES	IOM	PAHO	JOINT PROGRAMME TOTAL
1. Staff and other personnel	405600	285600	691.200
2. Supplies, Commodities, Materials	35000	25925	60.925
3. Equipment, Vehicles, and Furniture (including Depreciation)	10000	5000	15.000
4. Contractual services	130000	24740	154.740
5.Travel	75000	60000	135.000
6. Transfers and Grants to Counterparts	100000	0	100.000
7. General Operating and other Direct Costs	650000	533760	1.183.760
Sub-Total Project Costs	1405600	935025	2340625
8. Indirect Support Costs (must be 7%)	98392	65451.75	163843.75
TOTAL	1503992	1000476.75	2504468.75

Annex 4: Workplan

Activities	Responsible Party	Timeframe							
		Year 1				Year 2			
		Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
1.1.1. Report about SUS installed capacities	IOM, PAHO	X							
1.1.2. Study about migration, environment and climate change	IOM	X	X						
1.1.3. DTM	IOM		X						
1.1.4. Dissemination events	IOM, PAHO			X	X	X	X	X	X
1.2.1. Seminar on migration, climate change and health	IOM, PAHO	X							
1.2.2. In person trainings for municipal public officials	IOM, PAHO			X		X			
1.2.3. Online training for municipal public officials	PAHO				X				
1.2.4. Events to disseminate lessons learned and best practices	IOM, PAHO							X	X
1.2.5. Informational booklets on key climate change related health outcomes	PAHO	X							
1.2.6. Communication pieces	IOM, PAHO		X	X	X				
1.3.1. National and municipal workshops on multisector coordination and action	IOM, PAHO		X	X	X	X			
1.3.2. Technical assistance to develop national strategy for multisector coordination and action	IOM, PAHO				X				
1.3.3. Technical assistance for municipalities to develop municipal plans for multisector coordination and action	IOM, PAHO					X	X	X	X
1.4.1. Training for municipal policy makers on migrants' rights and humanitarian response	IOM			X					

1.4.2. Training for municipal policy makers on protection issues	IOM				X				
1.4.3. Trainings and simulated exercises (emerging zoonosis)	PAHO				X				
1.4.4. Training and simulated exercises (humanitarian response)	IOM, PAHO					X			
1.4.5. Informational booklets on protection	IOM	X	X	X					
2.1.1. Training for SUS staff (surveillance)	PAHO				X				
2.1.2. Training for SUS staff (protection)	IOM					X			
2.1.3. Training for SUS staff (migration)	IOM						X		
2.1.4. Training for CEREST (migration and climate change)	IOM							X	
2.1.5. Plans for climate resilient infrastructure	IOM, PAHO						X	X	
2.2.1. Training for CIEVS and LAFRONS on climate change, migration and health	IOM, PAHO				X				
2.2.2. Trainings and simulated exercises for CIEVS and LAFRONS (emerging zoonosis)	PAHO					X			
2.2.3. Trainings and simulated exercises for CIEVS and LAFRONS (public health emergency in PoE)	PAHO						X		
2.2.4. Meeting exchange of experiences CIEVS+LAFRONS	PAHO							X	
2.2.5. Technical support for evaluation + monitoring risks	PAHO				X	X	X		
2.2.6. Protocols for syndromic surveillance	PAHO				X				
2.3.1. Training for routine information sharing	PAHO					X	X		
2.3.2. Workshops on routine information sharing	PAHO						X		
2.3.3. Develop protocols for routine information sharing	PAHO						X	X	
2.3.4. Simulated exercises (emerging zoonosis)	PAHO						X		

2.3.5. Informational material (mitigation spread diseases)	PAHO			X	X	X			
3.1.1. Information sessions for border communities	IOM		X	X	X	X	X		
3.1.2. Training and equipment (Forest Guardians Program)	IOM			X	X	X	X		
3.1.3. Training (PNGAT and climate change)	IOM				X	X	X	X	
3.1.4. Technical assistance and seed funds (pilots for climate adaptation of agricultural production)	IOM		X	X	X	X	X	X	X
3.1.5. Meeting of leaderships (climate change impacts)	IOM, PAHO				X			X	
3.2.1. Informational booklet (regularization procedures)	IOM	X	X	X					
3.2.2. Informational booklet (healthcare)	PAHO	X	X	X					
3.2.3. Informational booklet (decent work)	IOM, PAHO	X	X	X					
3.2.4. Informational sessions	IOM		X	X	X	X	X		
3.2.5. Meeting of leaderships (access to rights)	IOM				X			X	
3.2.6. Participation of leaderships in fora (national and international)	IOM					X			
3.3.1. Assessment of priorities	IOM, PAHO	X	X	X					
3.3.2. Capacity building (identification + referral malaria)	IOM		X	X	X	X	X		
3.3.3. Donation small equipment and supplies	IOM		X	X	X	X	X		
3.3.4. Workshops (community-led solutions for identification and treatment of diseases)	IOM					X	X	X	

Annex 5: List of Global Compact Objectives per Thematic area and Key SDG Targets

Migration MPPTF Thematic Areas

<div>Thematic Area</div> <div>1</div> <div>GCM Objectives</div>	<div>Promoting fact-based and data-driven migration discourse, policy and planning</div> <div></div>	<div></div> <div>1 DATA</div>	<div></div> <div>3 INFORMATION PROVIDER</div>	<div></div> <div>17 ELIMINATE DETENTION SYSTEM</div>		
<div>Thematic Area</div> <div>2</div> <div>GCM Objectives</div>	<div>Protecting the human rights, safety and wellbeing of migrants, including through addressing drivers and mitigating situations of vulnerability in migration</div> <div></div>	<div></div> <div>2 MIGRANTS' SAFETY DRIVERS</div>	<div></div> <div>7 REDUCE VULNERABILITIES</div>	<div></div> <div>8 SAFE LIVES</div>	<div></div> <div>12 SCREENING AND REFERRAL</div>	<div></div> <div>13 ALTERNATIVES TO DETENTION</div>
<div>Thematic Area</div> <div>3</div> <div>GCM Objectives</div>	<div>Addressing irregular migration including through managing borders and combatting transnational crime</div> <div></div>	<div></div> <div>9 COUNTER SMUGGLING</div>	<div></div> <div>10 ERADICATE TRAFFICKING</div>	<div></div> <div>11 MANAGE BORDERS</div>	<div></div> <div>14 CONSULAR PROTECTION</div>	<div></div> <div>21 SECURE ID SYSTEMS AND IDENTIFICATION</div>
<div>Thematic Area</div> <div>4</div> <div>GCM Objectives</div>	<div>Facilitating regular migration, decent work and enhancing the positive development effects of human mobility</div> <div></div>	<div></div> <div>5 REGULAR PATHWAYS</div>	<div></div> <div>6 RECRUITMENT AND DECENT WORK</div>	<div></div> <div>18 SKILLS DEVELOPMENT AND RECOGNITION</div>	<div></div> <div>19 MIGRANT AND DIASPORA CONTRIBUTIONS</div>	<div></div> <div>20 REMITTANCES</div>
<div>Thematic Area</div> <div>5</div> <div>GCM Objectives</div>	<div>Improving the social inclusion and integration of migrants</div> <div></div>	<div></div> <div>4 LEGAL IDENTITY AND DOCUMENTATION</div>	<div></div> <div>15 ACCESS TO BASIC SERVICES</div>	<div></div> <div>16 INCLUSION AND SOCIAL COHESION</div>	<div></div> <div>22 SOCIAL PROTECTION</div>	
<div>Cross-Cutting</div> <div>GCM Objectives</div>	<div>Applicable to all thematic areas</div> <div></div>	<div></div> <div>23 INTERNATIONAL COOPERATION</div>				

Annex 6: Human Rights Marker and Child Sensitivity Marker Self-Assessment Matrices

Human Rights Marker Self-Assessment Matrix

Element of an HRBA	Yes/No/Not Applicable	Justification
<p>1. A human rights-based situational analysis has been conducted to identify:</p> <ul style="list-style-type: none"> a. The key human rights obligations of the State(s) in which you work/whose government's you are supporting; and b. The key human rights issues of relevance to your intended target group, including a particular attention to migrants most vulnerable to human rights violations and abuses and/or most at risk of being left behind 	Yes	PUNOs have conducted consultative processes with government stakeholders and representatives of local communities, as well as an internal human rights-based situational analysis to identify key issues to be addressed.
<p>2. Staff are aware of the human rights obligations of the government they are supporting</p>	Yes	Staff and non-staff personnel working in the Joint Programme will receive appropriate training and guidance on relevant human rights themes.
<p>3. Measures have been identified to mitigate any unintended negative human rights identified in the situational analysis and their monitoring has been integrated in the project's Monitoring and Evaluation processes</p>	Yes	Potential unintended negative consequences were mapped out and measures to monitor and mitigate them were developed in coordination with

		government stakeholders and communities.
4. Monitoring processes are in place and evaluation processes are contemplated that make specific reference to relevant human rights and other relevant standards	Yes	Monitoring and evaluation mechanisms will incorporate relevant elements of a human rights-based approach to programming, including monitoring of specific rights principles.
5. Migrants, civil society, national human rights institutions and other stakeholders have been meaningfully engaged in the design and development of the Joint Programme	Yes	The PUNOs conducted consultations with key government stakeholders and representatives of local communities to identify key human rights issues, as well as right holders and duty bearers, and develop responses to address through the Joint Programme.
6. A plan to ensure a meaningful consultation process with all relevant stakeholders is in place and will be maintained throughout the duration of the Joint Programme and in the evaluation phase	Yes	The Joint Programme will ensure regular consultations with relevant stakeholders, including national and subnational governments, local health authorities, and community leaders, as evidenced in several of the programme activities.

7. Appropriate due diligence will be exercised throughout the duration of the joint programme, regarding partnerships with or support to State, non-State, civil society, employers' and workers' organizations and corporate actors	Yes	PUNOs due diligence policies, which already include relevant provisions on human rights considerations, will be strictly applied regarding partnerships with public actors, private entities, and civil society.
8. A plan is in place to ensure that Joint Programme staffing is gender-balanced and staff are equipped to respond effectively to stakeholder and target group needs	Yes	The Joint Programme will ensure gender balance and inclusion when hiring its staff, in line with existing policies and guidelines of the PUNOs and international best practices.
9. Transparency and access to information by the intended target group and relevant stakeholders, including cultural, linguistic, and age-appropriate access, will be maintained throughout the duration of the joint programme	Yes	The PUNOs will ensure affected populations are effectively and timely informed of programme activities, results and stakeholders, building upon existing initiatives already implemented by the PUNOs in similar contexts.
10. Measures, including an effective complaint and remedy mechanism, will be put in place in order to provide redress for negative human rights impacts	Yes	The Joint Programme will establish an integrated feedback mechanism in coordination with relevant stakeholders to ensure the affected populations in the target communities are able to express their views, concerns

		and complaints about the intervention and receive timely and appropriate response and redress.
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A	8-10	The Human Rights Marker has been largely achieved
B	4-7	The Human Rights Marker shows significant integration of human rights in the joint programme but some challenges remain
C	1-3	The Human Rights Marker shows a very partial integration of human rights in the joint programme

Child Sensitivity Marker Self-Assessment Matrix

Self-Assessment Questions	Answer	Justification / Additional Info
1. Has a child rights impact assessment been conducted to identify potential positive and negative impacts of the project on children, whether intended or unintended?	Yes / No	No such assessment has been conducted so far
2. Do PUNOs and implementing partners have safeguarding policies and practices in place, and will all staff and non-staff personnel working with children receive training on safeguarding prior to commencement of joint programme implementation?	Yes / No	PUNOs and partners will ensure that safeguarding policies and practices are in place throughout the

		implementation of the Joint Programme, in line with their relevant institutional policies and guidance.
3. Please provide an estimated percentage of the programme budget allocated towards advancing children's rights and meeting children's needs. If not 100%, explain your rationale/the formula you used for reaching this percentage	25%	The joint programme rationale is that all planned activities will ultimately contribute to improve conditions of children and their families living in the target municipalities, in particular cross-border communities. The 25% of the budget allocated towards advancing children's rights corresponds to specific contents focused on children in the activities.
4. Do you have a plan to establish and maintain a meaningful consultation process with children throughout the duration of the Joint Programme, including the evaluation phase?	Yes / No	The joint programme does not foresee to conduct specific consultations with children.
5. Does the joint programme include capacity-building for children on their rights?	Yes / No	The programme will include relevant children's rights topics in some of its information activities and materials targeted at communities, which may

		reach children beneficiaries directly and indirectly.
6. Will all staff and non-staff personnel of PUNOs and implementing partners working with children in the joint programme be trained on engaging with children and on children's rights and needs, including on children's participation, prior to commencement of joint programme implementation?	Yes / No	All staff and non-staff personnel and partners working with children in the Joint Programme will receive specific training on engaging with children and on children's rights and needs.
7. For any joint programme expected results (outcomes, outputs) that involve children, will all data collected be disaggregated by age, sex, and where possible other identities, e.g., migration status, disability, LGBTQ+, taking into account data protection principles?	Yes / No	All data collected on programme beneficiaries will be disaggregated by age and sex as a minimum, as well as other identities as applicable.
8. Please choose one of the following below or choose N/A if not applicable. A: Achieving impact for children by addressing the specific needs and challenges faced by children affected by migration is the overall/primary objective of the joint programme. All outcomes and outputs contribute towards, and all indicators measure change in terms of children's rights and needs. B: Achieving impact for children by addressing the specific needs and challenges faced by children affected by migration is a significant component of the joint programme. At least one outcome contributes towards, and related output-level indicator(s) measure change in terms of children's rights and needs. C: Achieving impact for children by addressing the specific needs and challenges faced by children affected by migration is a minor component of the joint programme. At least one output contributes towards, and related indicator(s) measure change in terms of children's rights and needs.	A, B, C or N/A	Outcome 3 contributes to address the needs and challenges faced by migrant children as part of cross-border communities. Output Indicator 3.2a measures change in terms of increased knowledge, including women and children's rights.

