

UN HAITI CHOLERA RESPONSE MULTI-PARTNER TRUST FUND



2020 Annual Report



Office of the UN Secretary-General's Special Envoy for Haiti and
UN Multi-Partner Trust Fund Office
<http://mptf.undp.org/cholera>

CONTRIBUTORS



ALGERIA



ISRAEL



PORTUGAL



ARGENTINA



ITALY



QATAR



BAHAMAS



JAMAICA



REPUBLIC of KOREA



BELGIUM



JAPAN



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New UN approach to cholera in Haiti

UN Secretary-General Antonio Guterres has successfully led the UN and its partners to work closely with the Government of Haiti in implementing the new approach to cholera: significant progress has been made towards elimination of the disease, as well as the provision of material assistance and support to communities most directly affected. The UN, in partnership with the Government of Haiti, has intensified its support to treat and reduce cholera, and ultimately to cut the transmission of the disease to zero and end this chapter with dignity. In addition, the UN has sought to increase investment in long-term solutions that facilitates equitable and sustainable access to water, sanitation and health systems, while developing a package of material assistance and support for those Haitians most directly affected by cholera. Successfully ending the cholera epidemic will require adequate resources and a concerted focus on coordination and partnership with all stakeholders, including the Government and People of Haiti, the UN, the International Community and Civil Society.

TRACK 1

INTENSIFYING SUPPORT FOR CHOLERA CONTROL AND RESPONSE

The first track is a greatly intensified effort to respond to and reduce the incidence of cholera in Haiti.

Track 1a: Intensifying support for cholera control and response

- ⇒ Rapid Response
- ⇒ Surveillance
- ⇒ Vaccination
- ⇒ Emergency Medical Care

Track 1b: Addressing effectively the medium to long-term solutions on water, sanitation and health systems

TRACK 2

PROVIDING MATERIAL ASSISTANCE FOR THOSE MOST AFFECTED BY CHOLERA



Project Selection meeting in Soufrière

Location: Haiti - **Soufrière**

Photo credit: UNDP-UNOPS - Project Phase 2 of the Community Assistance in 4 cholera priority communes (Cap-Haitien area)

FOREWORD

On 20 June 2017, I was appointed as UN Special Envoy for Haiti, and mandated by the Secretary-General to guide the full implementation of the New Approach to Cholera in Haiti and support national efforts to implement Haiti's 2030 sustainable development goals. Most urgently, the determination was set to end the transmission and deaths from the cholera epidemic, which is suspected to have infected more than 820,000 Haitians. Practically, this required supporting Haiti in developing a unified strategy and implementation plan and coalescing the capacities of the entire UN system behind the one plan. The task also called for addressing the broader water and sanitation issues faced by Haiti and to provide meaningful support to those Haitian most affected by the disease. On 31 December 2020, after 3.5 years and 3 mandate extensions, my time as Special Envoy officially drew to a close.

We have made important progress in halting the spread of cholera in Haiti. Upon completion of my mandate, more than two consecutive years have passed without a single case of cholera anywhere in Haiti. This is in stark contrast to the peak of the outbreak, when upwards of 18,500 suspected cases were recorded per week. Achieving this feat is the result of deep partnership with the leadership of the Government of Haiti, tireless efforts of Haitian front-line workers and civil society, coordinating efforts under one unified and innovative Government of Haiti/United Nations plan, and raising funding to be strategically deployed at critical moments of the cholera response.

Key areas of intervention included the development of laboratory testing capacity, rapid specimen transport systems, and the creation of emergency response teams to respond to all suspected cases. Once laboratory capacity was bolstered, epidemiological analysis became possible, allowing resources to be directed towards confirmed cholera cases, rather than on suspected cases, which often were merely cases of acute watery diarrhea. Focusing on only confirmed cases of cholera was the critical final step needed to surge in support exactly when and where it was needed, and ultimately stop the spread of cholera all together. This was enabled, in part, through a country-wide network of Emergency Response Teams that could respond to every single case of suspected cholera. The teams are comprised of UNICEF-trained front-line community health leaders, more than half of which were female. This innovative approach, driven by local knowledge and communications systems is another replicable innovation for infectious disease management in under-developed regions of the world.

Certifying eradication is a technical process that must be confirmed by both WHO and Haiti. Under the criteria of the WHO's Global Cholera Task Force, three years must pass without any confirmed cases to officially certify that cholera is eradicated from Haiti. We are on track to reach this goal by February 2022 thanks to the strategy, systems, and financial support that have put in place. It is critical, however, that we remain vigilant every step of the way to ensure that cholera can officially be declared eradicated from Haiti by WHO's Cholera Global Task Force and the Government of Haiti.

Our main partners on the ground, including UNICEF and PAHO/WHO, have been fully funded for this period via the Haiti Cholera Multi-Partner Trust Fund in order to continue their work until the three-year benchmark is reached.

While my first and most immediate goal as Special Envoy was to stop the deaths linked to cholera and systematically end the spread of the disease, the work to support victims of cholera under Track 2 has been of paramount importance. This track is critical to Haiti's ultimate recovery from cholera and in seeking to address the pain and suffering experienced by Haitians affected by cholera.

I have sought ways to make progress and expand our work with victims in such a way that is both impactful and meaningful, ensuring that any funds reach those that were hardest hit as soon as possible. In practice, this has meant working directly with the communities most affected by cholera and providing them with a platform to engage in participatory planning with the UN so that they may define the support that they themselves identify as most meaningful.



*Josette Sheeran
UN Secretary-General's Special
Envoy for Haiti*

FOREWORD

This community-based approach has been very meaningful at the village level, where individual victims have bound together to choose projects that address the challenges of their communities. The project began as a pilot in the five administrative sections of Mirebalais, where the outbreak was first reported in 2010, and has since been expanded to 20 new communities in the North Department. We are in the planning phases of a further expansion to an additional 20 communities.

As I transition out of my role as Special Envoy, the UN will double down on our ongoing approach, and will continue to work to ensure cholera transmission is halted in Haiti by investing in its overarching health systems, epidemiological and emergency response capacity, and by addressing the underlying socioeconomic vulnerabilities of the Haitian population. It is through this holistic approach, in partnership with the Haitian Government, that Haiti can meet their Sustainable Development Goals during the Decade of Action and raise the bar and the ambition for Haiti's trajectory.

To ensure prioritization of Haiti's sustainable development, inclusive of cholera eradication and support to hardest hit communities, the global leadership of the UN's efforts will remain with the Secretary-General, with the Deputy Secretary-General and Chair of the UNSDG, providing strategic direction to guide implementation.

In Haiti, key members of the UN Country Team, including UNICEF, UNDP, UNOPS and WHO/PAHO will continue to implement direct programming at the operational level, and will be led by the DSRSG/Resident and Humanitarian Coordinator, Bruno Lemarquis. My team, which has led the UN's efforts for the past 3.5 years, will remain in place for the next year and bring with them their institutional knowledge and relationships with the Government and other stakeholders. They will support both the Deputy Secretary General, the DSRSG/RC/HC and the UNCT.

It has been an honor and a privilege to work with the people of Haiti and serve as Special Envoy over these past 3.5 years, and I remain committed to continuing to support this cause - a cause that is so dear to my heart - in any way that I can long into the future. I am confident with the world's continued support that this chapter in Haiti's history can and will be closed with dignity.

Josette Sheeran
UN Special Envoy of the Secretary-General for Haiti



FUND FACTS AND INFOGRAPHIC

FUND FACTS AND INFOGRAPHICS

The [UN Haiti Cholera Response MPTF](#) was established in October 2016 to address the critical needs in line with the New UN approach to cholera in Haiti. Four years of work with the Haitian communities has led to significant results: since February 2019, no laboratory confirmed cases of cholera have been identified in Haiti (as of March 2021). The focus for the next couple of years is on the country's water and sanitation infrastructure, which remains underdeveloped resulting in continued vulnerability of the population to the disease.

GOVERNING BODIES

The [new Governance Structure as of 1 January 2021](#) is co-led by the Resident Coordinator/Humanitarian Coordinator in Haiti and the Director of the Sustainable Development Unit of the Executive Office of the Secretary General.

The [Advisory Committee](#) includes the Co-Chairs, the Recipient Entities and eight Contributors - Canada, Chile, France, Japan, Norway, Republic of Korea, the United Kingdom - and the United States of America. The Government of Haiti participates as observer.

The Fund is administered by the [Multi-Partner Trust Fund Office](#), center of expertise on pooled financing instruments for the Sustainable Development Goals (<http://mptf.undp.org>)

KEY FIGURES

Contributions

Million

\$20.8



Transfers

Million

\$14.2

Recipient Organizations

5



Number of projects

7

2020 SUMMARY OF PROJECTS	Track	UN Entity	Approved Budget million*	Status
Haiti Cholera Medical Response	Track 1a	PAHO/WHO	1.5	Op. closed
Community assistance Mirebalais: New UN Approach cholera Haiti	Track 2	UNDP	1.2	On-going
Preventing and Cutting Transmission in four persistent departments	Track 1a	UNICEF	0,5	Fin. closed
Preventing and cutting cholera transmission in Ouest Department	Track 1a	UNICEF	1	Op. closed
Operational and Technical Support to the OSE for a UN response to cholera in Haiti	Global Support	UNDPO	0.4	On-going
Community assistance in 4 cholera priority communes (Cap-Haitian area) phase 2: New UN Approach cholera Haiti	Track 2	UNOPS and UNDP	5.6	On-going
Strengthening the national response for the elimination of Cholera in Haiti	Track 1a	UNICEF and PAHO/WHO	4	On-going

Table 1. List of UN Haiti Cholera Response MPTF as of 31 Dec 2020

While this 2020 Annual Report is being prepared, a proposal submitted by UNDP was approved on Track 2 for US\$ 1,100,000 focusing on **Strengthening Resilience, Health and Sanitation Systems in Haiti through community support*

* The amounts are rounded

FUND FACTS AND INFOGRAPHICS

Since its establishment, **45 contributors** supported the New UN approach to cholera in Haiti through the fund. As of **31 December 2020**, the UN Haiti Cholera Response MPTF received an overall total amount of **\$20,888,101***, which includes the reallocation of the unencumbered MINUSTAH from 31 Member States that responded to the invitation from the Secretary-General, dated 25 July 2017, in support of the new UN approach to Cholera in Haiti.

Detailed information related to contributions are included in the Financial Section.

Additional contributions, in the amount of \$10,387,903, were received in 2020, enabling the continuation of activities on the ground; leveraging the lessons learned in the fight of cholera in Haiti; strengthening the capacity in terms of surveillance and response in order to prevent the surge of other potential diseases. The work in partnership with the Government of Haiti has the common objective to work jointly through the milestone of 2022 declaration of cholera eradication in Haiti.

WHERE THE FUNDS ARE COMING FROM

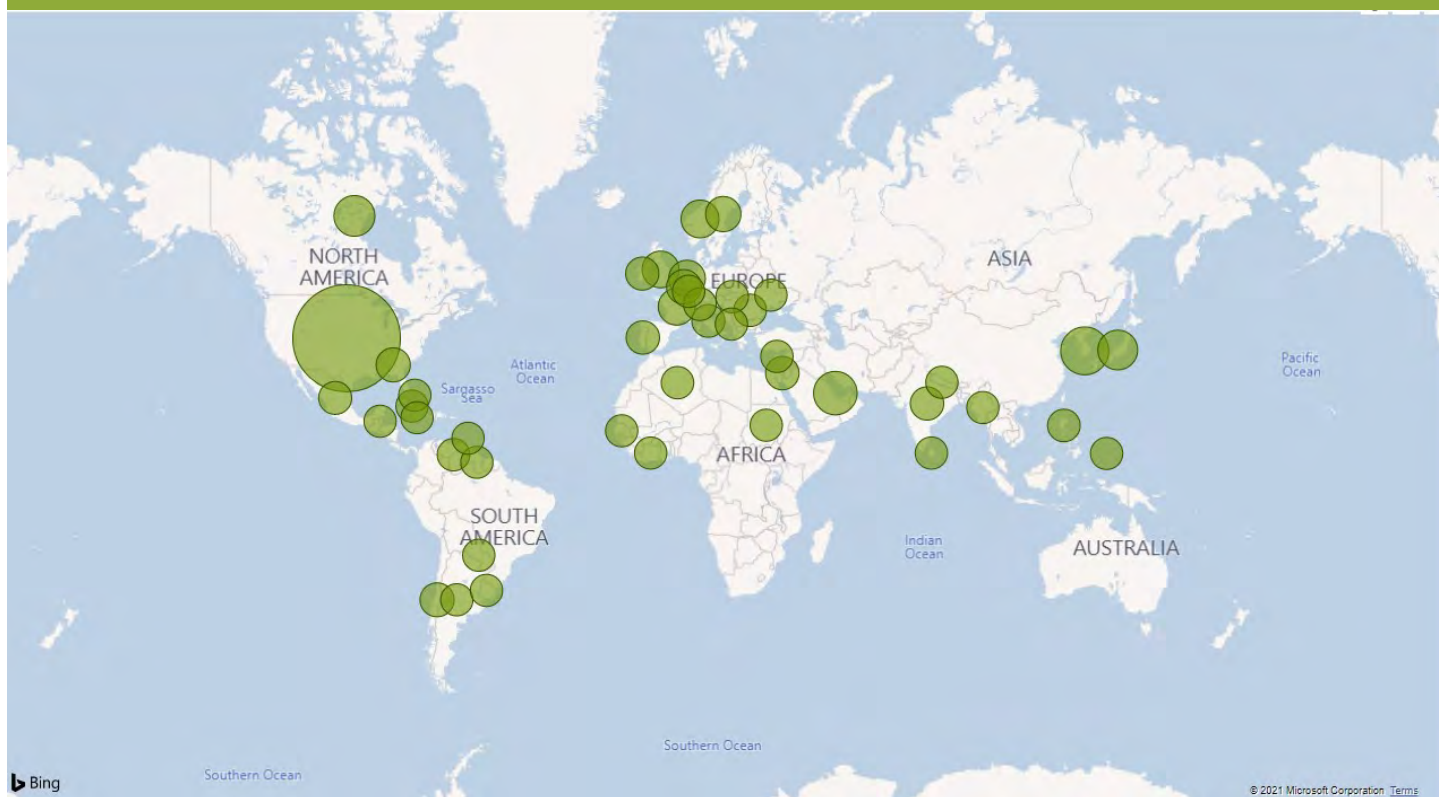


Table 2. Map of the Contributors to the UN Haiti Cholera Response MPTF as of 31 Dec 2020
(internally prepared with PowerBi)

**In 2021, the Fund received additional \$1,000,000*

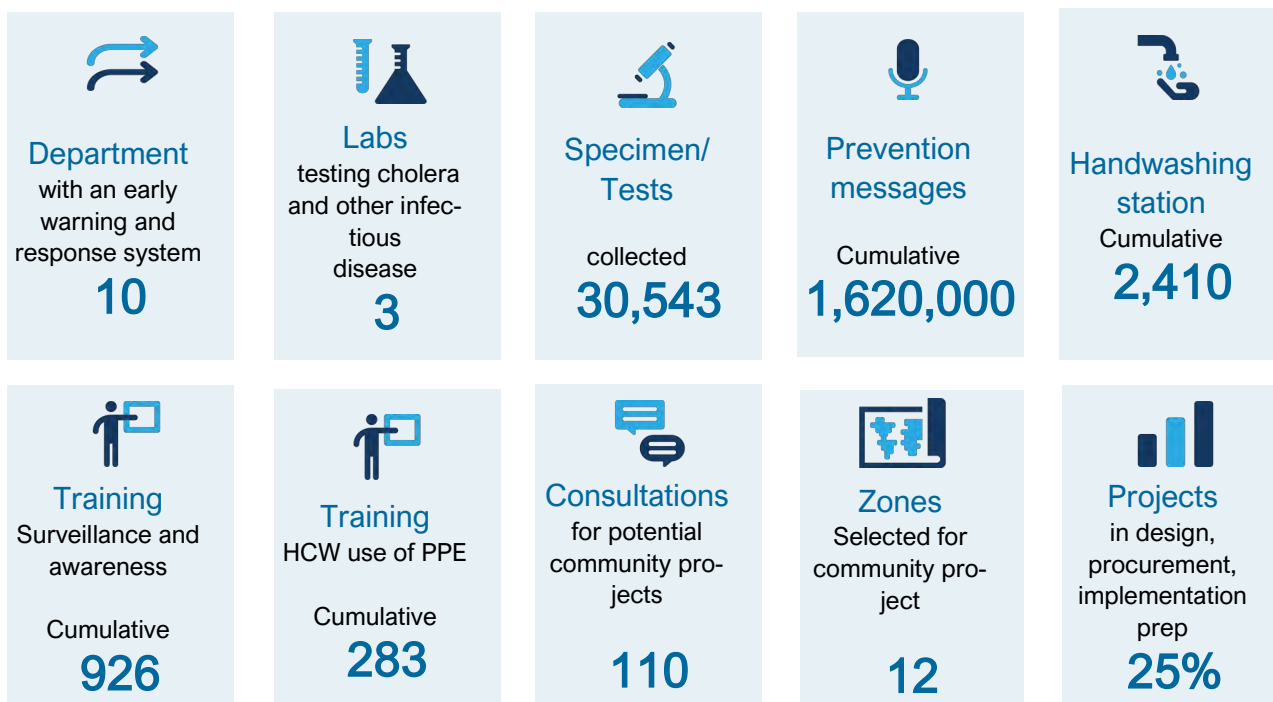
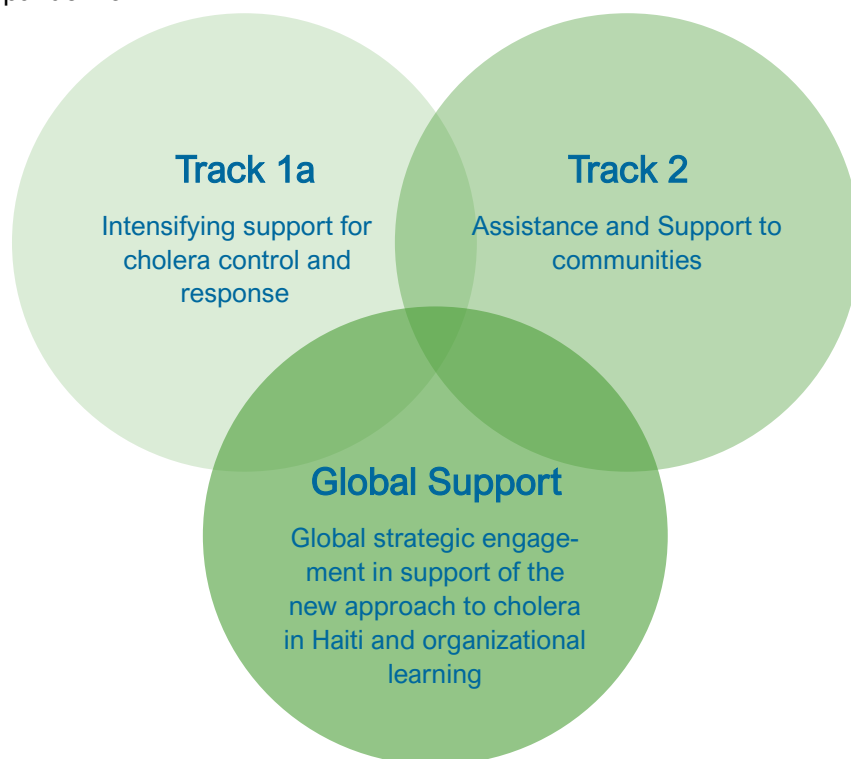
In 2020, the four on-going projects reported on activities responding to the tracks of the New UN approach to cholera in Haiti.

UNICEF and PAHO focused on Track 1a - Intensifying support for cholera control and response - whereas UNDP and UNOPS work on Track 2 to support the affected communities.

The work was coordinated by the Secretariat team sitting within the Office of the Special Envoy for Haiti that works close with the implementing entities on the ground.

KEY ACHIEVEMENTS

This is an excerpt of the results highlighted in the Annual Project reports provided by the Agencies for the period Jan-Dec 2020, which are available on the [UN-Haiti Cholera Response MPTF Gateway site](#). These achievements underscore the critical role and the outstanding work done on the ground by the implementing entities and partners that, despite remarkable challenges, limitations and the negative impact of the unique situation caused by Covid-19, were able to work closely to the communities to eradicate cholera in the country and in the fight of this unprecedented global pandemic.



Note: the cumulative achievements relates to the MPTF funding and other sources



Community Sensitization followed by hand washing demonstration by ACTED agents, one of UNICEF's partners, in
Location: Dame Marie (Grand'Anse)
Photo credit: UNICEF



OVERVIEW OF THE FUND OPERATIONS

OVERVIEW OF THE FUND OPERATIONS

Track 1

Haiti has reported over 820,000 cholera cases and nearly 10,000 cholera deaths since October 2010, when the epidemic began. Persistent efforts by the Government of Haiti through the Ministry of Public Health and Population (MSPP) and the National Directorate for Water Supply and Sanitation (DINEPA) – with support from the Pan American Health Organization / World Health Organization (PAHO / WHO), UNICEF, and other partners – have led to a steep decline in the incidence of cholera in Haiti. Compared with 352,033 suspected cholera cases and 2,927 deaths reported in

elimination of cholera in Haiti”, was launched. The project is being jointly implemented by PAHO / WHO and UNICEF to support the Government of Haiti in its efforts to prevent and cut community transmission of cholera in Haiti. The scope of this project was broadened to include COVID-19, given the potential catastrophic impact that the outbreak might have had on Haiti’s national health care system.

As part of the project, awareness raising activities were reinforced by UNICEF with messages on prevention (that included both cholera and COVID-19 prevention key



2011, a total of 720 suspected cases and 3 deaths were reported in 2019. The last laboratory-confirmed case of cholera in Haiti was reported more than two years ago, in early February 2019. In all of 2020, only 83 suspected cases of cholera were reported by the Ministry of Public Health and Population (MSPP), all of which were tested and were confirmed to be negative. This suggests that the elimination of cholera may soon be within reach.

To meet this objective, in July 2020, the MPTF project, titled “Strengthening the national response for the

messages), carried out by rapid response teams (which were reinforced from 15 to around 40). In addition, at the level of community surveillance, the cholera rapid response teams financed by UNICEF through its NGO partners, supported the health directorates in order to allow more effective investigations of suspected COVID-19 cases, and re-direct awareness-raising activities in the municipalities reporting a large number of cases. community level.

OVERVIEW OF THE FUND OPERATIONS

Track 1

The number of handwashing stations installed has more than doubled the planned targets (including the simple buckets with lid and tap distributed and installed in public areas, and the more formal structures with bigger tanks).

In line with the objectives of the project, PAHO / WHO provided support to reinforce the early warning and response system of the MSPP's Directorate of Epidemiology Laboratory and Research (DELR) through the integration of assistant epidemiologists in all 10 departmental health directorates. These epidemiologists provided assistance with the coordination of alert and response activities, epidemiological investigations, and reporting of epidemic intelligence to health authorities at the central level. Furthermore, technical and logistical support was provided to Haiti's National Public Health Laboratory (LNSP) for the expansion of the national surveillance system of acute watery diarrhea (AWD) to facilitate the detection of *Vibrio cholerae*. To date, the system includes more than 50 health institutions throughout the territory. These activities were complemented with the training

of health professional on the collection and management of specimens from AWD cases. Furthermore, laboratory technicians were trained on culture and antibiotic susceptibility testing of stool specimens. Moreover, PAHO / WHO has provided assistance for the training, equipping, and deployment of Labo-moto nurses, who are field nurses that support the collection and transport of samples from health institutions to laboratories on motorcycles. Finally, to strengthen infection prevention and control (IPC) so as to reduce the risk transmission of cholera, COVID-19 and other infectious diseases, personal protective equipment was distributed to various health care institutions and health care personnel was trained on IPC measures.

The above-mentioned actions have been key for the strengthening of Haiti's national preparedness and response capacities for cholera and other infectious diseases, including COVID-19. By contributing to the reduction of the circulation and burden of these diseases, this project is having a real impact on the lives of people and communities across Haiti.

Table 1. Evolution of cholera in Haiti, 2010-2020

Year	Population	Suspected cases	Institutional deaths	Community deaths	Total deaths	Incidence by 1,000 pop.
2010	10,085,214	185,351	2,521	1,580	4,101	18.4
2011	10,248,306	352,033	1,950	977	2,927	34.4
2012	10,413,211	101,503	597	311	908	9.8
2013	10,579,230	58,574	403	184	587	5.5
2014	10,745,665	27,392	209	88	297	2.6
2015	10,911,819	36,045	224	98	322	3.3
2016	11,078,033	41,421	307	140	447	3.7
2017	12,201,437	13,681	110	49	159	1.1
2018	12,542,135	3,777	20	21	41	0.3
2019	12,893,402	720	2	1	3	0.06
2020	13,255,590	83	0	0	0	0.006



Page 6 View from a rural community in Southern Haiti

Photo credit: Ramsey Ben-Achour - Office of the UN Secretary-General's Special Envoy for Haiti

Page 7 Community Assistance: Lessons learned workshop, Community project proposal, Project selection and Project proposal

Photo credit: UNDP-UNOPS

OVERVIEW OF THE FUND OPERATIONS

Track 2

In line with the United Nation's New Approach to Cholera in Haiti, the UN system is working towards providing meaningful support to the most severely cholera-affected populations in Haiti. To this end, the current phase of the track 2 programming, co-implemented by UNDP and UNOPS has seen significant advancements in 2020. All 20 administrative sections of the 4 cholera communes prioritized by the current phase of track 2 programming have established locally-run victim-led platforms, and over 110 local consultations have been carried out. This is in addition to the 5 community platforms established under previous phases of this project. These local consultations with victims of cholera were carried out using a participatory community assessment process for the selection of the community projects.

In total, the abovementioned 20 platforms have worked with the wider community of victims in their administrative sections to identify upwards of 302 potential projects that victims deemed as meaningful to their communities, 42 of which were identified in 2020. Since then and throughout 2020, regular follow-up by UNDP, both on-site and remotely, has facilitated continued dialogue between the local communities and victim platforms, despite significant reductions in ability

to physically travel to and engage with communities due to COVID-19. In order to identify a final list of projects out of the 302 developed by communities, pre-feasibility evaluations were jointly conducted by UNDP, UNOPS and the communities between January and December 2020. Based on the carried-out assessments, a total of 15 projects have been labeled as feasible in 12 out of the 20 targeted zones areas. Work will continue into 2021 with the remaining 8 communities to finalize their selection of impactful and feasible projects.

On 17 December 2020, UNDP and UNOPS sought a cost-extension of the current project to account for delays related to COVID-19 in 2020 and the social unrest that accelerated in 2019. The extension was approved, and the end date of the project was extended to February 2022.

Despite the significant delays due to the COVID-19 restrictions as well as civil unrest, communication with each of the targeted communities was actively maintained. Not only did this effective communication allow for ongoing dialogue with communities, it also allowed for awareness raising and prevention activities related to the COVID-19 pandemic, as well as the hurricane season.



OVERVIEW OF THE FUND OPERATIONS

Global Support

2020 saw the second consecutive year without a single confirmed case of cholera anywhere in Haiti, inching significantly closer to reaching the 3-year benchmark for declaring Haiti cholera free. The Office of the Special Envoy for Haiti continued to provide strategic guidance and coordination support to all actors working on the new UN approach to cholera in Haiti.

At a strategic level, OSE, under the leadership of the Special Envoy, sought to align the UN's strategy on cholera elimination with the emerging need to combat other infectious diseases, namely COVID-19. To that end, OSE, in its capacity of Haiti Cholera MPTF secretariat lead, worked closely with the Advisory Committee to release funding to the fund's implementing partners for both track 1 and track 2 in such a way that benefited both the cholera response as well as the COVID-19 response. In particular, UNICEF and WHO/PAHO were provided funding to strengthen Haiti's epidemiological and laboratory capacity, as well as to continue the alert-response strategy with the aim of better detecting and responding to suspected cases of cholera as well as COVID-19. Capitalizing on the presence of UNDP and UNOPS in communities that were heavily impacted by cholera, both organizations were provided with additional funding to, among other things, allow for community sensitization on COVID-19 mitigation strategies.

As noted in the Forward of this current report, the end of 2020 saw the completion of the mandate of the Special Envoy for Haiti after 3.5 years. Despite the end in mandate, the Special Envoy worked closely with the Secretary General and Deputy Secretary General to ensure a transition strategy that will ensure the continued prioritization of the UN's new approach to cholera in Haiti. To ensure prioritization of Haiti's sustainable development, inclusive of cholera eradication and support to hardest hit communities, the global

leadership of the UN's efforts will remain with the Secretary-General, with the Deputy Secretary-General and Chair of the UNSDG, providing strategic direction to guide implementation.

In Haiti, key members of the UN Country Team, including UNICEF, UNDP, UNOPS and WHO/PAHO will continue to implement direct programming at the operational level, and will be led by the DSRSG/Resident and Humanitarian Coordinator, Bruno Lemarquis. The Office of the Special Envoy, which has led the UN's efforts for the past 3.5 years, will remain in place for the next year and bring with it, its institutional knowledge and relationships with the Government and other stakeholders. OSE will support both the Deputy Secretary General, the DSRSG/RC/HC and the UNCT.



Office of the UN Secretary-General's Special Envoy for Haiti
Photo credit: Ramsey Ben-Achour - Office of the UN Secretary-General's Special Envoy for Haiti



2020 FINANCIAL INFORMATION

for the period 1 January to 31 December 2020

DEFINITIONS

Allocation

Amount approved by the Advisory Committee for a project/programme.

Approved Project/Programme

A project/programme including budget, etc., that is approved by the Advisory Committee for fund allocation purposes.

Contributor Commitment

Amount(s) committed by a donor to a Fund in a signed Standard Administrative Arrangement with the UNDP Multi-Partner Trust Fund Office (MPTF Office), in its capacity as the Administrative Agent. A commitment may be paid or pending payment.

Contributor Deposit

Cash deposit received by the MPTF Office for the Fund from a contributor in accordance with a signed Standard Administrative Arrangement.

Delivery Rate

The percentage of funds that have been utilized, calculated by comparing expenditures reported by a Recipient Organization against the 'net funded amount'.

Indirect Support Costs

A general cost that cannot be directly related to any particular programme or activity of the Recipient Organizations. UNDG policy establishes a fixed indirect cost rate of 7% of programmable costs.

Net Funded Amount

Amount transferred to a Recipient Organization less any re-funds transferred back to the MPTF Office by a Recipient Organization.

Recipient Organization

A UN Organization or other inter-governmental Organization that is an implementing partner in a Fund, as represented by signing a Memorandum of Understanding (MOU) with the MPTF Office for a particular Fund.

Project Expenditure

The sum of expenses and/or expenditure reported by all Recipient Organizations for a Fund irrespective of which basis of accounting each Recipient Organization follows for donor reporting.

Project Financial Closure

A project or programme is considered financially closed when all financial obligations of an operationally completed project or programme have been settled, and no further financial charges may be incurred.

Project Operational Closure

A project or programme is considered operationally closed when all programmatic activities for which Recipient Organization(s) received funding have been completed.

Project Start Date

Date of transfer of first instalment from the MPTF Office to the Recipient Organization.

Total Approved Budget

This represents the cumulative amount of allocations approved by the Advisory Committee.

US Dollar Amount

The financial data in the report is recorded in US Dollars and due to rounding off of numbers, the totals may not add up.

INTRODUCTION

This Consolidated Annual Financial Report of the **UN Haiti Cholera Response MPTF** is prepared by the United Nations Development Programme (UNDP) Multi-Partner Trust Fund Office (MPTF Office) in fulfillment of its obligations as Administrative Agent, as per the terms of Reference (TOR), the Memorandum of Understanding (MOU) signed between the UNDP MPTF Office and the Recipient Organizations, and the Standard Administrative Arrangement (SAA) signed with contributors.

The MPTF Office, as Administrative Agent, is responsible for concluding an MOU with Recipient Organizations and SAAs with contributors. It receives, administers and

manages contributions, and disburses these funds to the Recipient Organizations. The Administrative Agent prepares and submits annual consolidated financial reports, as well as regular financial statements, for transmission to contributors.

This consolidated financial report covers the period 1 January to 31 December **2020** and provides financial data on progress made in the implementation of projects of the **UN Haiti Cholera Response MPTF**. It is posted on the MPTF Office GATEWAY (<http://mptf.undp.org/factsheet/fund/CLH00>).

The financial data in the report is recorded in US Dollars and due to rounding off of numbers, the totals may not add up.

2020 FINANCIAL PERFORMANCE

This chapter presents financial data and analysis of the **UN Haiti Cholera Response MPTF** using the pass-through funding modality as of 31 December **2020**. Financial information for this Fund is also available on the MPTF Office GATEWAY, at the following address: <http://mptf.undp.org/factsheet/fund/CLH00>.

1. SOURCES AND USES OF FUNDS

As of 31 December **2020**, **45** contributors deposited US\$ **20,888,101** in contributions and US\$ **272,669** was earned in interest.

The cumulative source of funds was US\$ **21,160,770**.

Of this amount, US\$ **14,151,535** has been net funded to **5** Recipient Organizations, of which US\$ **7,012,812** has been reported as expenditure. The Administrative Agent fee has been charged at the approved rate of 1% on deposits and amounts to US\$ **208,881**. Table 1 provides an overview of the overall sources, uses, and balance of the **UN Haiti Cholera Response MPTF** as of 31 December 2020.

Table 1. Financial Overview, as of 31 December 2020 (in US Dollars)

	Annual 2019	Annual 2020	Cumulative
Sources of Funds			
Contributions from donors	752,500	10,387,903	20,888,101
Fund Earned Interest and Investment Income	55,482	101,790	272,669
Interest Income received from Recipient Organizations	-	-	-
Refunds by Administrative Agent to Contributors	-	-	-
Fund balance transferred to another MDTF	-	-	-
Other Income	-	-	-
Total: Sources of Funds	807,982	10,489,693	21,160,770
Use of Funds			
Transfers to Recipient Organizations	5,697,056	4,000,000	14,208,023
Refunds received from Recipient Organizations	(56,488)	-	(56,488)
Net Funded Amount	5,640,568	4,000,000	14,151,535
Administrative Agent Fees	7,525	103,879	208,881
Direct Costs: (Advisory Committee, Secretariat...etc.)	-	-	-
Bank Charges	33	275	705
Other Expenditures	-	-	-
Total: Uses of Funds	5,648,125	4,104,154	14,361,121
Change in Fund cash balance with Administrative Agent	(4,840,143)	6,385,539	6,799,649
Opening Fund balance (1 January)	5,254,253	414,110	-
Closing Fund balance (31 December)	414,110	6,799,649	6,799,649
Net Funded Amount (Includes Direct Cost)	5,640,568	4,000,000	14,151,535
Recipient Organizations' Expenditure (Includes Direct Cost)	1,311,813	3,078,229	7,012,812
Balance of Funds with Recipient Organizations			7,138,723

2. PARTNER CONTRIBUTIONS

Table 2 provides information on cumulative contributions received from all contributors to this Fund as of 31 December 2020.

The **UN Haiti Cholera Response MPTF** is currently being financed by **45** contributors, as listed in the table below.

The table below includes commitments made up to 31 December **2020** through signed Standard Administrative Agreements, and deposits made through **2020**. It does not include commitments that were made to the fund beyond **2020**.

Table 2. Contributors' Commitments and Deposits, as of 31 December 2020 (in US Dollars)

Contributors	Total Commitments	Prior Years as of 31-Dec-2019 Deposits	Current Year Jan-Dec-2020 Deposits	Total Deposits
ALGERIA	30,140	30,140	-	30,140
ARGENTINA	10,000	10,000	-	10,000
BAHAMAS	5,115	5,115	-	5,115
BELGIUM	349,555	349,555	-	349,555
BELIZE	79	79	-	79
CANADA	1,153,728	1,153,728	-	1,153,728
CHILE	250,000	250,000	-	250,000
COTE D'IVOIRE	711	711	-	711
CUBA	5,134	5,134	-	5,134
CYPRUS	16,984	16,984	-	16,984
FRANCE	638,100	638,100	-	638,100
GRENADA	79	79	-	79
GUYANA	1,160	1,160	-	1,160
INDIA	158,220	158,220	-	158,220
IRELAND	132,318	132,318	-	132,318
ISRAEL	169,840	169,840	-	169,840
ITALY	100,000	100,000	-	100,000
JAMAICA	711	711	-	711
JAPAN	1,010,900	1,010,900	-	1,010,900
LIECHTENSTEIN	77,780	52,961	24,819	77,780
LUXEMBOURG	25,279	25,279	-	25,279
MEXICO	113,358	113,358	-	113,358
MONTENEGRO	10,000	-	10,000	10,000
MYANMAR	395	395	-	395
NEPAL	5,237	237	5,000	5,237
NETHERLANDS	585,356	585,356	-	585,356
NORWAY	762,791	762,791	-	762,791
Open Society Foundation	270,000	270,000	-	270,000
PALAU	79	79	-	79
PARAGUAY	1,106	1,106	-	1,106

PHILIPPINES	52,500	52,500	-	52,500
PORTUGAL	154,830	154,830	-	154,830
Qatar Fund for Development	1,500,000	1,500,000	-	1,500,000
REPUBLIC of KOREA	2,105,358	1,805,358	300,000	2,105,358
ROMANIA	48,084	-	48,084	48,084
SENEGAL	198	198	-	198
SLOVAK REPUBLIC	37,917	37,917	-	37,917
SRI LANKA	7,449	7,449	-	7,449
SUDAN	395	395	-	395
SWEDEN	412,720	412,720	-	412,720
UKRAINE	8,137	8,137	-	8,137
UNITED KINGDOM	623,450	623,450	-	623,450
URUGUAY	7,801	7,801	-	7,801
USAID	10,000,000	-	10,000,000	10,000,000
VENEZUELA	45,106	45,106	-	45,106
Grand Total	20,888,101	10,500,197	10,387,903	20,888,101

3. INTEREST EARNED

Interest income is earned in two ways: 1) on the balance of funds held by the Administrative Agent (Fund earned interest), and 2) on the balance of funds held by the Recipient Organizations (Agency earned interest) where their Financial Regulations and Rules allow return of interest to the AA.

As of 31 December **2020**, Fund earned interest amounts to US\$ **272,669**.

Details are provided in the table below.

Table 3. Sources of Interest and Investment Income, as of 31 December 2020 (in US Dollars)

Interest Earned	Prior Years as of 31-Dec-2019	Current Year Jan-Dec-2020	Total
Administrative Agent			
Fund Earned Interest and Investment Income	170,879	101,790	272,669
Total: Fund Earned Interest	170,879	101,790	272,669
Grand Total	170,879	101,790	272,669

4. TRANSFER OF FUNDS

Allocations to Recipient Organizations are approved by the Advisory Committee and disbursed by the Administrative Agent. As of 31 December **2020**, the AA has transferred US\$ **14,208,023** to **5** Recipient Organizations (see list below).

4.1 TRANSFER BY RECIPIENT ORGANIZATION

Table 4 provides additional information on the refunds received by the MPTF Office, and the net funded amount for each of the Recipient Organizations.

Table 4. Transfer, Refund, and Net Funded Amount by Recipient Organization, as of 31 December 2020 (in US Dollars)

Recipient Organization	Prior Years as of 31-Dec-2019			Current Year Jan-Dec-2020			Total		
	Transfers	Refunds	Net Funded	Transfers	Refunds	Net Funded	Transfers	Refunds	Net Funded
PAHO/WHO	1,500,000		1,500,000	2,000,000		2,000,000	3,500,000		3,500,000
UNDP	2,152,937		2,152,937				2,152,937		2,152,937
UNDPO	454,422		454,422				454,422		454,422
UNICEF	1,500,791	(56,488)	1,444,303	2,000,000		2,000,000	3,500,791	(56,488)	3,444,303
UNOPS	4,599,873		4,599,873				4,599,873		4,599,873
Grand Total	10,208,023	(56,488)	10,151,535	4,000,000		4,000,000	14,208,023	(56,488)	14,151,535

5. EXPENDITURE AND FINANCIAL DELIVERY RATES

All final expenditures reported for the year **2020** were submitted by the Headquarters of the Recipient Organizations. These were consolidated by the MPTF Office.

Project expenditures are incurred and monitored by each Recipient Organization, and are reported as per the agreed upon categories for inter-agency harmonized reporting. The reported expenditures were submitted via the MPTF Office's online expenditure reporting tool. The **2020** expenditure data has been posted on the MPTF Office GATEWAY at <http://mptf.undp.org/factsheet/fund/CLH00>.

5.1 EXPENDITURE REPORTED BY RECIPIENT ORGANIZATION

In **2020**, US\$ **4,000,000** was net funded to Recipient Organizations, and US\$ **3,078,229** was reported in expenditure.

As shown in table below, the cumulative net funded amount is US\$ **14,151,535** and cumulative expenditures reported by the Recipient Organizations amount to US\$ **7,012,812**. This equates to an overall Fund expenditure delivery rate of **50** percent.

The agencies with the three highest delivery rates are: UNDP (99%), UNDP (85%) and UNICEF (77%)

Table 5.1. Net Funded Amount, Reported Expenditure, and Financial Delivery by Recipient Organization, as of 31 December 2020 (in US Dollars)

Recipient Organization	Approved Amount	Net Funded Amount	Expenditure			Delivery Rate %
			Prior Years as of 31-Dec-2019	Current Year Jan-Dec-2020	Cumulative	
PAHO/WHO	3,500,000	3,500,000	693,196	806,804	1,500,000	42.86
UNDP	2,152,937	2,152,937	1,408,383	413,383	1,821,766	84.62
UNDPPO	454,422	454,422	283,356	167,102	450,458	99.13
UNICEF	3,500,791	3,444,303	1,434,733	1,229,297	2,664,030	77.35
UNOPS	4,599,873	4,599,873	114,915	461,643	576,558	12.53
Grand Total	14,208,023	14,151,535	3,934,582	3,078,229	7,012,812	49.56

5.2 EXPENDITURE BY PROJECT

Table 5.2 displays the net funded amounts, expenditures reported and the financial delivery rates by Recipient Organization.

Table 5.2. Expenditure by Project within Sector, as of 31 December 2020 (in US Dollars)

Sector / Project No. and Project Title		Recipient Organization	Project Status	Total Approved Amount	Net Funded Amount	Total Expenditure	Delivery Rate %
1a Prevent & Cut Transmission							
00122749	CLH7 - Strengthening the national response for the elimination of Cholera in Haiti	PAHO/WHO	Ongoing	2,000,000	2,000,000		0
00122749	CLH7 - Strengthening the national response for the elimination of Cholera in Haiti	UNICEF	Ongoing	2,000,000	2,000,000	1,226,622	61.33
00105773	#1 Haiti Cholera Medical Response	PAHO/WHO	Operationally Closed	1,500,000	1,500,000	1,500,000	100.00
00109989	#4 Preventing and cutting transmission	UNICEF	Operationally Closed	1,000,791	1,000,791	993,896	99.31
00105774	#3 Preventing and cutting transmission	UNICEF	Financially Closed	500,000	443,512	443,512	100.00
1a Prevent & Cut Transmission: Total				7,000,791	6,944,303	4,164,030	59.96
2 Support to Affected							
00105932	#2 Community assistance Mirebalais	UNDP	Ongoing	1,172,876	1,172,876	1,172,516	99.97
00115476	#6 Phase 2 Community assistance	UNDP	Ongoing	980,060	980,060	649,250	66.25
00115476	#6 Phase 2 Community assistance	UNOPS	Ongoing	4,599,873	4,599,873	576,558	12.53
2 Support to Affected: Total				6,752,810	6,752,810	2,398,324	35.52
Global Support							
00109990	#5 Operational and technical support	UNDPO	On Going	454,422	454,422	450,458	99.13
Global Support: Total				454,422	454,422	450,458	99.13
Grand Total				14,208,023	14,151,535	7,012,812	49.56

5.3 EXPENDITURE REPORTED BY CATEGORY

Project expenditures are incurred and monitored by each Recipient Organization and are reported as per the agreed categories for inter-agency harmonized reporting. See table below.

2012 CEB Expense Categories

Staff and personnel costs
 Supplies, commodities and materials
 Equipment, vehicles, furniture and depreciation
 Contractual services
 Travel
 Transfers and grants
 General operating expenses
 Indirect costs

Table 5.3 Expenditure by UNDG Budget Category, as of 31 December 2020 (in US Dollars)

Category	Expenditure			Percentage of Total Programme Cost
	Prior Years as of 31-Dec-2019	Current Year Jan-Dec-2020	Total	
Staff & Personnel Cost	522,820	712,677	1,235,497	18.86
Suppl, Comm, Materials	133,370	40,157	173,527	2.65
Equipment, Vehicles, Furniture, Depreciation	663,698	283,971	947,669	14.47
Contractual Services	463,204	299,754	762,957	11.65
Travel	238,536	85,426	323,962	4.95
Transfers and Grants	1,350,560	1,290,900	2,641,461	40.33
General Operating	304,720	159,773	464,493	7.09
Programme Costs Total	3,676,909	2,872,657	6,549,566	100.00
¹ Indirect Support Costs Total	257,673	205,572	463,245	7.07
Total	3,934,582	3,078,229	7,012,812	

¹ **Indirect Support Costs** charged by Recipient Organization, based on their financial regulations, can be deducted upfront or at a later stage during implementation. The percentage may therefore appear to exceed the 7% agreed-upon for on-going projects. Once projects are financially closed, this number is not to exceed 7%.

6. COST RECOVERY

Cost recovery policies for the Fund are guided by the applicable provisions of the Terms of Reference, the MOU concluded between the Administrative Agent and Recipient Organizations, and the SAAs concluded between the Administrative Agent and Contributors, based on rates approved by UNDG.

The policies in place, as of 31 December 2020, were as follows:

- **The Administrative Agent (AA) fee:** 1% is charged at the time of contributor deposit and covers services provided on that contribution for the entire duration of the Fund. In the reporting period US\$ **103,879** was deducted in AA-fees. Cumulatively, as of 31 December 2020, US\$ **208,881** has been charged in AA-fees.
- **Indirect Costs of Recipient Organizations:** Recipient Organizations may charge 7% indirect costs. In the current reporting period US\$ **205,572** was deducted in indirect costs by Recipient Organizations. Cumulatively, indirect costs amount to US\$ **463,245** as of 31 December 2020.

7. ACCOUNTABILITY AND TRANSPARENCY

In order to effectively provide fund administration services and facilitate monitoring and reporting to the UN system and its partners, the MPTF Office has developed a public website, the MPTF Office Gateway (<http://mptf.undp.org>). Refreshed in real time every two hours from an internal enterprise resource planning system, the MPTF Office Gateway has become a standard setter for providing transparent and accountable trust fund administration services.

The Gateway provides financial information including: contributor commitments and deposits, approved programme budgets, transfers to and expenditures reported by Recipient Organizations, interest income and other expenses. In addition, the Gateway provides an overview of the MPTF Office portfolio and extensive information on individual Funds, including their purpose, governance structure and key documents. By providing easy access to the growing number of narrative and financial reports, as well as related project documents, the Gateway collects and preserves important institutional knowledge and facilitates knowledge sharing and management among UN Organizations and their development partners, thereby contributing to UN coherence and development effectiveness.

Acknowledgments

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Icons: UNOCHA and the Noun Project

Cover Photo: Project Selection meeting in Soufrière

Location: Haiti - Soufrière

Photo credit: UNDP-UNOPS - Project Phase 2 of the Community Assistance in 4 cholera priority communes (Cap-Haitien area)

Layout Designer: UN MPTF Office Reporting Team



Office of the UN Secretary-General's Special Envoy for Haiti and
UN Multi-Partner Trust Fund Office
<http://mptf.undp.org/cholera>