UN HAITI CHOLERA RESPONSE MULTI-PARTNER TRUST FUND
FINAL PROGRAMME NARRATIVE REPORT
DATE:

DATE:	_		
Programme Title & Project Number		Country, Locality(s), Priority Area(s) / Strategic Results ¹	
Programme Title: Community assistance to Mirebalais: new UN approach to cholera in Haiti – Phase I		Haiti, Centre, Mirebalais	
 Programme Number CLH2 MPTF Office Project Reference Number:² 00105932 (Gateway ID) 		Priority area/ strategic results TRACK 2: Providing a package of material assistance and support to Haitians most directly affected by Cholera	
Participating Organization(s)		Implementing Partners	
UNDP Haiti		 National counterparts (government, private, NGOs & others) and other International Organizations MPCE, Local Authorities, Community Leaders 	
Programme/Project Cost (US\$)		Programme Duration	
Total approved budget as per project document:MPTF /JP Contribution3:TOTAL\$1,172,876.22UNDPTranche 1\$ 500,000.00Tranche 2\$ 672,876.22		Overall Duration <i>(months)</i> : 42 months Start Date ⁴ <i>(dd.mm.yyyy)</i> : June 15 th , 2017	
Agency Contribution • by Agency (if applicable) N/A		Original End Date ⁵ (<i>dd.mm.yyyy</i>) October 31 st , 2017	
Government Contribution (<i>if applicable</i>) N/A		Actual End date ⁶ : December 31^{st} , 2020 Have agency(ies) operationally closed the Programme in its(their) system?Yes No	

¹ Strategic Results, as formulated in the Strategic UN Planning Framework (e.g. UNDAF) or project document;

² The MPTF Office Project Reference Number is the same number as the one on the Notification message. It is also referred to as "Project ID" on the project's factsheet page on the <u>MPTF Office GATEWAY</u>.

³ The MPTF/JP Contribution is the amount transferred to the Participating UN Organizations – see <u>MPTF Office</u> <u>GATEWAY</u>

⁴ The start date is the date of the first transfer of the funds from the MPTF Office as Administrative Agent. Transfer date is available on the <u>MPTF Office GATEWAY</u>

⁵ As per approval of the original project document by the relevant decision-making body/Steering Committee.

⁶ If there has been an extension, then the revised, approved end date should be reflected here. If there has been no extension approved, then the current end date is the same as the original end date. The end date is the same as the operational closure date which is when all activities for which a Participating Organization is responsible under an approved MPTF / JP have been completed. As per the MOU, agencies are to notify the MPTF Office when a programme completes its operational activities. Please see <u>MPTF Office Closure Guidelines</u>.

Other Contributions (donors) (<i>if applicable</i>)		Expected Financial Closure date ⁷ : June 30 th , 2021	
TOTAL: US \$ 1,172,516.23			
Programme Assessment/Review/Mid-Term Eval.		Report Submitted By	
Evaluation Completed □ Yes No Date: dd.mm.yyyy Evaluation Report - Attached □ Yes No Date: dd.mm.yyyy		 Name: Jessica Laconi Title: Technical Advisor Participating Organization (Lead): UNDP Email address: jessica.laconi@undp.org 	

⁷ Financial Closure requires the return of unspent balances and submission of the <u>Certified Final Financial Statement and</u> <u>Report.</u>

LIST OF ACRONYMS

UN: United Nations UNDP: United Nations Development Programme MPTF: Multi-Partner Trust Fund PDC: Plan de Développement Communal

FINAL PROGRAMME REPORT FORMAT

EXECUTIVE SUMMARY

On August 2016, the Secretary-General of the United Nations announced a new approach by the United Nations to cholera in Haiti ($A/71/620^*$). In his accompanying public statement, he conveyed his deep regrets for the suffering endured by the Haitian people as a result of the cholera epidemic and that the United Nations has a moral responsibility to the victims and to support the Haiti overcome the epidemic.

The new UN approach to cholera in Haiti launched by the SG includes two tracks. While Track 1 focuses on reducing and ultimately ending the transmission of cholera, improving access to care and treatment, and addressing the longer-term issues of water, sanitation and health systems in Haiti, Track 2 involves developing a package that will provide material assistance and support to those Haitians and their communities most directly affected by cholera.

In June 2017, UNDP started implementing a symbolic pilot project in Mirebalais, the commune where cholera started in Haiti, under the Track 2 of the United Nation's New Approach to Cholera in Haiti. The project represents a concrete and tangible expression of the UN's regret for the suffering that the Haitian people have endured because of cholera.

To this end, the Pilot Project was implemented by UNDP in the commune of Mirebalais and its 4 communal sections Crête Brûlée, Gascogne, Sarazin, Grand Boucan. All 5 administrative sections have established locally-run victim-led platforms through a local inclusive consultation process.

In total, the abovementioned 5 platforms worked with the wider community of victims in their administrative sections to identify upwards of 15 potential projects that victims deemed as meaningful to their communities, 6 of which were then approved and implemented. Local consultations with victims of cholera were carried out using a participatory community assessment process for the selection of the community projects.

Throughout the project implementation, regular follow-up by UNDP, both on-site and remotely, has facilitated continued dialogue between the local communities and victim platforms, despite the significant delays due to civil unrest as well as the COVID-19 restrictions. 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.

Lessons learned from the pilot phase, as well as experiences of human rights organizations and researchers suggests that there are three key conditions that must be met in order for consultations with victims of violence to be meaningful. First, the consultations must be systematic and broadly inclusive, so that they do not give voice to the opinions of some groups over others. Second, the consultations must be seen as legitimate and impartial, and must include follow-up dialogue with communities to discuss decisions made as a result of the consultations. Finally, the consultation must be conducted in a transparent and sensitive manner that allows survivors to speak openly and comfortably about their views.

Ultimately, the implementation of the symbolic track 2 project in Mirebalais provided important lessons and a proof of concept that has allowed for the further expansion of the approach into new regions of Haiti.

I. Purpose

The Mirebalais Community Assistance Pilot Project is a United Nations project under Track 2 executed by UNDP. UNDP's interventions under this project were based on the organization's core mandate, including human and community development, and were to promote sustainable and inclusive development in support of processes to improve the living conditions of communities. The project also used a community-based approach based on ownership of the process and the participation of all affected members of the community in the identification and implementation of priority projects, including the most vulnerable. The project has managed to contribute to the following SDGs: (5) Gender Equality; (6) Clean Water and Sanitation; (10) Reduced Inequalities; (11) Sustainable Cities and Communities; (13) Climate Action; (17) Partnerships for the Goals.

The targeted groups of this intervention were the communities of Mirebalais downtown, its four communal sections Crête Brulée, Gascogne, Sarazin and Grand Boucan and especially the families most directly affected by cholera. Community platforms were launched in each community, all five of which served as the representatives of all sectors and layers of the community throughout the whole project.

Key stakeholders from the communal and local sections were identified to participate in the local consultations, project identification, priority actions selection and projects implementation.

The project ensured that women had the same access to information and the same level of participation as men in consultation processes and that specific needs of women were considered in the decisionmaking on priority projects. Representatives of women's organizations were invited to join the community platforms. As of today, women who participate in the platforms have the same right as men in the decision making.

II. Assessment of Programme Results

i) Narrative reporting on results:

The project has managed to achieve the project's intended Strategic Objective, i.e. "Proposing a package of material assistance and support to Haitians most directly affected by cholera", implementing 100% of the targeted communities' projects and supporting more than 10,000 victims, their families and communities (Result Indicator #1 and #2).

From a global point of view, the implementation of this project allowed the UNDP on behalf of the UN to set up a discussion mechanism on priority problems in the targeted communities by promoting the active involvement of civil society in decision-making and in the achievements of community projects, reaching not only the victims of cholera directly but also the most vulnerable members of the targeted communities, especially those who are in rural areas where basic social services almost non-existent.

<u>Output Indicator 1.</u> Database and maps of key actors active in cholera defiance are elaborated for the 18 cholera priority communes

The project made it possible to have a general overview of the nature of international organizations' interventions in the 18 cholera priority communes. This allowed the elaboration of an updated database and visual maps, thanks to which the communities' needs analysis was improved in order to avoid

duplications in the field. A local consultant was specifically hired to carry out field surveys of the international institutions operating in the 18 cholera priority communes. This led to the elaboration of a map showing the areas and the sectors in which the stakeholders intervened. The existing database and maps are accessible to the project team and updated on a regularly basis before any expansion of the methodology.

Output Indicator 2. 1 Commune and 4 community sections of Mirebalais have produced their Local Development Plans.

The project has also facilitated the alignment of the needs of the communities with the local and national existing Development Plans. This facilitated good cohesion and better prioritization of needs by the communities and the national stakeholders. The collaboration between local authorities and communities in identifying needs, implementing priority projects and managing the solutions put in place was enhanced. Civil society also became increasingly aware of and involved in the problems of their communities and were more willing to contribute to solutions.

Output Indicator 3. Selected micro-project are implemented by local partners

During the implementation, several activities were oriented towards facilitating communication between communities. Beneficiaries were able to come together to identify their representatives whose role was to lead discussions and inclusive decision-making processes. 5 community platforms were then set up to enable a close collaboration between the project stakeholders and local authorities in order to ease the launch of the local consultation process. At least 70 local consultations were carried out in the targeted communities, which led to the development of a list of 31 potential projects identified by the communities themselves.

After the project team field assessment, out of the 31 identified possibilities of projects, 16 were considered as feasible. A total of 6^8 projects were ultimately selected⁹ and carried out in the 5 intervention areas of the commune of Mirebalais – Mirebalais downtown and its 4 communal section – including the construction of a market, as well as water sanitation and road development projects. These projects are still beneficial not only to the direct and indirect victims of the communities but also to the entire community of Mirebalais, estimated at around 94,899 inhabitants.

⁸ Communities ultimately narrowed down the selection to these 6 projects, with support from project staff, and were selected in order of priority and compliance with the selection criteria (i.e. environmental standards, budget availability, alignment with municipal development plans, capacity for the community to take charge of the sustainability of the project).

⁹ The remaining projects not ultimately funded through this program were shared with local authorities and other UN entities in the hopes that they may be implemented through other programs or initiatives.

The implemented micro-projects are listed in the following table:

Type of project	Communal Section	Number of project	Description of project
Market Construction	Crête Brûlée	1	The informal marketplace was replaced with a modern and sanitary marketplace with over 120 vendor stalls, an abattoir, and latrines.
Rehabilitation of a water supply system	Gascogne	1	The pre-existing water supply system had not functioned since 1993. The community worked with the UN to rehabilitate it, which allowed the beneficiaries of the localities of Anba Lam, Bake, Devarieux to have access to drinking water.
Construction of a water supply system	Sarazin	1	An existent non-potable water source was redirected into a reservoir, treated and distributed to the localities of St-Jean and Wanny. This system was then connected to the main water supply system of Mirebalais.
Construction of two water supply systems	Grand Boucan	2	Phase 1: 3 tanks of 20 m ³ were built in locality of Fonds Cheval with no access to drinking water. Phase 2: an existent non-potable water source was redirected into a reservoir, treated and distributed to the locality of Pranno. By securing the water system and constructing distribution points, this has reduced the risk of sexual and gender based violence for young girls who were at high risk during the long walks to collect water.
Construction of a road	Centre-ville	1	A road of 250 linear meters long, 7 linear meters wide, 0.20 linear meters thick, with gutters on both sides, was built. This construction allowed to reduce the risk of floods, to clean up the canals and to realign the ravines.

ii) Evaluation, Best Practices and Lessons Learned

Progress was negatively affected by the materialization of some of the risks pre-identified in the project document. The socio-political instability and deteriorating security situation in 2018, 2019 and 2020 caused substantial delays in the finalization of project activities. The political turmoil in June and September 2019 led to violence in the project areas, leading procurement processes and construction work activities to be temporarily put on hold and follow-up meetings with the national counterpart being postponed. Additionally, because of the preventive measures taken to contain the spread of the COVID-19 pandemic, most of the activities were rescheduled, further affecting project implementation.

Despite project slowdowns, valuable lessons were learned throughout the rollout of this pilot project, including on size and scope of projects. Initially, only the pilot project was budgeted to cost \$500,000, including \$370,000 for the implementation of the micro-projects in the 5 communities. Following the evaluations of the proposed projects, the allocated budget proved to be totally insufficient for the implementation of the selected projects. The Office of the Special Envoy conducted an assessment of the viability of the project's objectives given the financial constraints that UNDP were given. This led to a recommendation at the senior leadership level that further resources be made available for community projects. Despite the reality that increasing the envelope for each community would ultimately reduce the number of communities that could be reached with the current level of funding that was available, the decision was taken to increase the initial allocated budget of 500,000 USD to 1,172,876 USD. The decision was formalized in a cost-extension in December 2018, which was subsequently further extended via two other no-cost extensions in December 2019 and April 2020, due to a number of external variables outside the control of the project.

The extensions allowed for a number of mitigation measures to be taken, and course correct on delays. To alleviate the negative impact of the various delays, strong communication was maintained remotely with the 5 local communities and platforms via various forms of electronic communication. This allowed the project to present the communities with detailed explanations for the reasons for the suspension of field activities as well as to raise awareness on the COVID-19 pandemic, as well as the hurricane season and to share key messages about important prevention measures communities could take to protect themselves.

To build and maintain relationships of trust, the project always aimed to involve the wider communities' of victims in decision-making processes and sought to inform them in general about the project, its approach, and how it operates. The inclusive project methodology ensured the overall stakeholders' satisfaction, as well as the sustainability of the projects. The project indirectly created a space of consultation between direct and indirect victims of Cholera, local and national authorities and technical human resources of the communities around their real and priority needs. The consultation process facilitated a local approach which was useful to the various partners and which granted the responsibilities' appropriation at the community level. In terms of sustainability, all the implemented projects had their own Management Committee (Comité de Gestion) whose role is to contribute to the follow-up and maintenance of the project. These Committees currently still work jointly under the direction of local and national authorities (ASEC / CASEC, Town Halls, DINEPA, etc.). For water systems, the Comité de Gestion (run by CAEPA - Committee for the Sanitation of Drinking Water) have been set up and trained by DINEPA so that it can ensure the sustainability of an efficient use of the water systems built.

For the Market, a Committee of Merchants, formed by merchants from the market itself, has been set up to ensure the proper functioning and improvement of the market. This Committee works jointly with the local authorities (ASEC / CASEC) of the area and the municipality of Mirebalais. For the construction of the road, the municipality of Mirebalais took direct ownership of the project from the very beginning, since part of the road was financed and carried out by the Town Hall itself.

Additionally, being transparent and clear about the strengths and limitations of the project with victims up front has always been crucial so as not to create false expectations that cannot be met.

The communication strategy implemented, which planned to keep a low profile, prevented the visibility of the victims and created misunderstandings. It is essential, in the future phases, to design a more intensive communication strategy to promote the project and its results, as well as the implication of the community members with their success stories.

The encouragement of collaboration between victim platforms and local authorities has been fundamental and allowed a better joint work and, consequently, a better implementation of the selected projects. However, empowerment of platforms must remain the priority, and political influence must continue to be mitigated.

While the infrastructure projects that were selected by communities have contributed to the improvement of the living conditions of the population of the beneficiary communities, it is essential to provide more funding so as to support communities as they maintain the infrastructure.

Ultimately, the implementation of the symbolic track 2 project in Mirebalais provided important lessons and a proof of concept that has allowed for the further expansion of the approach into new regions of Haiti. The lessons learned from the pilot phase, as well as experiences of human rights organizations and researchers suggests that there are three key conditions that must be met in order for consultations with victims of violence to be meaningful. First, the consultations must be systematic and broadly inclusive, so that they do not give voice to the opinions of some groups over others. Second, the consultations must be seen as legitimate and impartial, and must include follow-up dialogue with communities to discuss decisions made as a result of the consultations. Finally, the consultation must be conducted in a transparent and sensitive manner that allows survivors to speak openly and comfortably about their views.

	<u>Achieved</u> Indicator Targets	Reasons for Variance with Planned Target (if any)	Source of Verification
Outcome 1 ¹⁰ Indicator: Baseline: Assuming a Zero baseline Planned Target: % of execution of 370,000 USD prioritized project as symbolic reparation to victims, families and communities affected by cholera in Mirebalais Number of people among victims, their families and communities reached	100% of the selected communities projects are executed More than 10,000 people among victims, their families and communities are reached		Project reports, field Monitoring, missions report
Output Indicator 1.1 Database and maps of key actors active in cholera defiance are elaborated for the 18 cholera priority communes Baseline Assuming a Zero	Database and maps of key actor active in cholera defiance are elaborated for 18 cholera priority communes		Database files and usual material
Planned Target Updated database and visual maps			
Output Indicator 1.2 1 Commune and 4 community sections of Mirebalais have produced their Local Development Plans	PDC document for the commune of Mirebalais		PDC
Baseline Existing PDC document Planned Target			

¹⁰ Note: Outcomes, outputs, indicators and targets should be **as outlines in the Project Document** so that you report on your **actual achievements against planned targets**. Add rows as required for Outcome 2, 3 etc.

5 community development plans for 1 commune and 4 communal sections		
Output Indicator 1.3 Selected micro-project are implemented by local partners	6 selected micro-projects are fully executed	Progress report, and field missions
Baseline		
0 project implemented		
Planned Target At least 5 micro-projects fully executed		

iv) A Specific Story (Optional)

Problem / Challenge faced:

People from Grand Boucan, mostly women, proposed to build reservoirs within the community because the available water sources were very far away and crossed insecure areas, where there had been several cases of rape.

Programme Interventions:

The budget planned for the communal section of Grand Boucan has been divided into two to carry out two major water supply projects in two different locations.

Result (if applicable):

By securing the water system and constructing distribution points in much safer and closer areas, this has reduced the risk of rape and pregnancy for young girls who had to walk long distances to get water.

Lessons Learned:

By actively involving beneficiaries in decision-making, this made it possible to adapt the programme's interventions in the field in order to solve specific problems, as well as to meet real needs and to reduce relevant risks within the communities.

ANNEX 1. Pictures of project activities.







Community meeting in the communal section of Gascogne – August 2017



Community meeting in the communal section of Grand Boucan – November 2017



Water system at Gascogne – December 2018





Market at Crête Brulée – April 2020



Water system at Grand Boucan: Phase 1 – June 2019



Water system Grand Boucan: Phase 2 – June 2019



Road construction in Mirebalais Downtown - June 2020