



## Rapid Response Fund

### ACT Secretariat Approval

Project Code 14/2022

Project Name Humanitarian response to the population affected by the hurricane Ian in Cuba

The ACT Secretariat has approved the use of **USD 72,600** from its Global Rapid Response Fund (GRRF22) and would be grateful to receive contributions to wholly or partially replenish this payment.

#### For further information please contact:

National Forum Convenor

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ACT Regional Representative

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A handwritten signature in black ink, appearing to read 'Cyra'.

**Cyra Michelle Bullecer**

Global Humanitarian Operations Manager

ACT Alliance Secretariat

## Project Proposal

### Emergency Prepared and Response Plan

EPRP last updated	June 2022
Do you have a Contingency Plan for this response?	Yes
EPRP link on the online platform (or attach hard copy with proposal)	Hard copy submitted

Please submit this form to the Regional Humanitarian Programme Officer in your region with a copy to the Regional Representative

Date submitted to ACT Secretariat

10/10/2022

### Section 1 Project Data

#### Project Information

Project Name	Humanitarian response to the population affected by the hurricane Ian in Cuba
Project Code	14/2022
Country Forum	Cuba
ACT Requesting Member (if there are more than one member, please use ALT+<Enter> to add another member)	Consejo de Iglesias de Cuba (CIC)
Name of person leading the project	Elina Ceballos Villalón
Job Title	Coordinator
Email	<a href="mailto:cuba.act57@gmail.com">cuba.act57@gmail.com</a>
Tel no./Whatsapp/Skype	+53 52853877/+63 52904874
Location(s) of project (city / province)	Province of Pinar del Río: Municipality of Pinar del Río: Pinar del Río city Municipality of Viñales: Viñales and Puerto Esperanza
Project start date (dd/mm/yyyy)	08/Nov/22
Project end date (dd/mm/yyyy)	08/Feb/23

#### Which sectors your response activities most relate to

(please indicate number of planned beneficiaries per organisation in each sector where you plan to give assistance)

Sectors	Member Consejo de Iglesias de Cuba (CIC)	
	Male	Female
Cash/ Vouchers		
Camp Management		
Education		
Food/Nutrition		
Health		
Household items		
Livelihood		
Psychosocial	509	771
Shelter		
Wash	1,685	2,065

### Section 2 Project Description

#### 2.1 Context

**1. CHS Commitment 1. Summarize the crisis event and how it is likely to develop over the duration of the project**  
(maximum 5 bullet points)

Since the 22nd of September, hurricane Ian (Category 3) has been impacting Cuba, particularly the provinces of Pinar del Rios, Artemisa, Mayabeque, the Special Municipality Isla de la Juventud, and La Habana, causing landfalls, floods, damages to the infrastructure, housing, electricity and telecommunications services, crops, and the disruption of the provision of critical public and social services.

- Approximately 3 million people have been affected, 4 casualties have been reported, and 116,000 people were evacuated from their homes and sought refuge with their relatives, and neighbors, in emergency shelters or in local churches.
- Around 100,000 houses, 11 hospitals, and 992 schools were severely affected.
- Electricity service remains intermittent: In the province of Pinar del Rio 144 out of 150 circuits are without electricity, and in the province of Artemisa, the electricity service is only working at 46% of its capacity.
- Water supply deficit: in Pinar del Río, the population is heavily dependent on tank truckers and generator sets.
- Damages in the food sector increase, with acute damages in agriculture, and wide losses in livestock. Food distribution has been interrupted by damages suffered, which directly and negatively impacts the Family Welfare System and the most vulnerable population who heavily depend on food rations distributed by the government.
- The complex situation has seriously affected the psychosocial well-being of vulnerable groups, especially elderly persons, children, women, persons with disability, and persons with chronic illnesses.
- Health authorities warn about the need to increase epidemiological surveillance of the most affected territories, in a context of a high incidence of dengue.

**2. CHS Commitment 1,2,3,4. Explain the impact of the crisis specific to the people you want to help** (maximum 5 bullet points)

According to the UN Country Team and other official sources, the most vulnerable population was hit the most: elderly people, some of them living by themselves, and with some type of disability. The loss of important crops, the deterioration and/or loss of basic household goods, the unavailability of electricity, which affects water and communication services, as well as the considerable loss of homes and other buildings due to total and/or partial collapse, make this emergency even more critical. Given that 80% of schools are damaged and around 53% with considerable damage, preschool and school-age children remain in their homes, evacuation centers, or in the homes of relatives and neighbors, provisional spaces converted into schools. Besides the above-mentioned reports, initial consultations were conducted by CIC and CCRD with local church leaders and ACT Forum Cuba members with a presence in the affected territories, a considerable number of women, children, older adults and persons with disabilities have shown signs of distress (fear, insomnia, crying, excessive passivity, alertness, etc.) after the passage of Hurricane Ian.

AsperCCRD and the CIC and the information provided by government authorities, the Office of the UN Representative Coordinator in Cuba, and especially leaders and other community stakeholders in the affected territories, pressing humanitarian needs have been identified in the sectors of Food/Nutrition, households items, psychosocial support, and WASH.

**3. CHS Commitment 9. Explain the availability of funding each of your organisation can access for this crisis.**  
(maximum 3 bullet points)

The forum is seeking to partner with CARE INTERNACIONAL in Cuba for a response in six municipalities of Pinar del Río and is currently in the process of fundraising 300,000 USD. Moreover, CIC has also activated its fundraising strategy and/or other resources to amplify its total response in the province of Pinar del Río.

## 2.2 Activity Summary

**1. CHS Commitment 1, 2, 4. Explain your proposed project and why you have selected this particular response to the crisis.** *If multiple members are responding, please explain the role of each member in the coordinated response as indicated in your EPRP Contingency Plan.*

The CIC will provide humanitarian relief as follows:

- **WASH:** CIC is working with the governments, local CIC emergency committees, and, the affected population on the beneficiaries targeting methodology. The installation of 4 community water purification systems in Pinar del Rio will guarantee the provision of safe water to 3, 750 people in 750 households (367 men, 540 women, 1,090 boys y 1,290 girls including vulnerable groups identified for this project) to prevent waterborne diseases. The installation of the systems is accompanied by educational and awareness-raising activities. A monitoring visit is planned to evaluate the functioning of the equipment and the practice achieved by the people in charge of managing it, the number of people benefiting continuously, as well as the relevance of the educational activities in the modification of behavior concerning health care.
- **Psychosocial support:** The Community of Practice of the national forum on Community-Based Psychosocial Support intends to work on the protection of 1,280 people from 425 households (226 women, 136 men, 437 girls, 300 boys and 181 elderlies, and disabled people identified as having psychosocial needs in the 4 localities through monthly group activities that reinforce their return to "normality", individual and collective resilience, self-esteem, and dignity. There will also be a child protection and safeguarding mechanism to work with children in child-friendly/safe spaces set up to prevent incidents of gender-based violence and/or child abuse, as well as a confidential hotline as part of the complaints mechanism. These community activities are carried out by the people participating in the training (3 days). The inclusion of this response sector will put into practice both the guiding principles of the ACT Alliance for Community-Based Psychosocial Support, as well as the SMAPS IASC and Sphere guidelines.
- **Emergency Preparedness & Forum Capacity strengthening:** Given the increasing increase of hydro-meteorological events, CIC foresees contributing to the capacity building for local churches and other FBOs in the affected region through a Sphere training/refreshing, which includes CHS that would facilitate the design and implementation of quality humanitarian projects in the face of future crises. Twenty-five people will be selected based on gender equity criteria from La Isla de la Juventud and Pinar del Río. Furthermore, participation of youth will be encouraging as it has been identified many young people actively participate in the Humanitarian Network and are among the few ones remaining in the island, as most of adults are either elderly or have migrated

**2. CHS Commitment 2. Explain how you will start your activities promptly.** *Project implementation should start within two weeks. The project should be a maximum of 6 months.*

One of the main measures to overcome the embargo-related barriers is the purchase of goods in neighboring countries and/or Spain. To that end, the ACT Forum Cuba is setting up the procure mechanism to mitigate these barriers, which includes having a list of foreign providers with whom the CIC has worked previously, a Purchasing Committee which will establish a procurement protocol that allows the publication and subsequently selection of the provider in a just, transparent and cost-benefit manner. This mechanism will also include a clear follow-up of the process of negotiation, shipment, and nationalization of the goods. CIC/CCRD will request the Secretariat ACT to transfer the payment directly to the selected provider. With this procurement mechanism in place, it is foreseen a 21-day timeframe (on average) between the call from tenders and the delivery of household, food, and non-food items to the affected population. Once the goods are in Cuba, the kits are prepared and distributed, taking into account the ACT co-branding, explanation of the complaint's mechanism, and finally, the monitoring of the degree of satisfaction of the beneficiaries, according to the planned schedule.

It is worth mentioning, ACT Forum Cuba is already working with CARE on the initial needs assessment and the provision of humanitarian assistance. Once the CIC and CCRD have access to the funding requested through this members of the CBPS Community of Practice in Cuba carry out the Psychosocial Damages and Needs Assessment while selecting the personnel for training in psychosocial care issues and who would be in charge of carrying out community activities under the supervision of a team with expertise in previous emergencies. The 4 community water purification systems are procured in Cuba and the technical team is ready to start the installation work.

**3. CHS Commitment 6. How are you co-ordinating and with whom?** *Coordination ensures complementarity of interventions within forum members and other humanitarian actors to maximise the use of our resources and will address all unmet needs*

National forum informed ACT Regional Secretary about the CIC's intention to respond to the crisis caused by Hurricane Ian, as well as the complex situation of personnel to assume Alert formulation due to the collapse of national power grid. However, the fluid communication with the regional Humanitarian Officer and the Representative in LAC, as well as the availability to support in the formulation of the project, is allowing us to face this new challenge. Beside this, there is coordination with relevant organizations, such as the United Nations Agencies, international non-governmental organizations in the country such as: CARE Cuba, in order to avoid effort duplications. CIC is coordinating the purchase with Centro de Reflexion y Diálogo (CCRD), communication & visibility with Martin Luther King Jr. Memorial Centre. Also there is a first response with some churches and other ecumenical centers such as Evangelical Theological Seminary of Matanzas, Latin American Mission Canada, Siervos Unidos Alrededor del Mundo, Iglesia de Cristo, Fraternidad de Iglesias Bautista, Iglesia Metodista-Obra Misionera de Berlin Reformed Presbyterian Church, Church of God, Iglesia Evangelica Libre, Confraternidad Obrero Estudiantil Bautista de Cuba – COEBAC among others, providing medicines, basic food, household items, etc.

Provincial and Local Emergency Committees, that are located closest to the disaster areas, have established mechanisms of communication and interaction with local governments, civil society in the communities, and with their various stakeholders.

There will be constant communication with government authorities at all levels ensuring synergy in the response.

**4. CHS Commitment 3, 9. How are you planning to procure your goods or services? (This includes cash transfer methodologies) Please tick boxes that apply.** *Goods and services procured locally supports and revitalises economic activity either as*

Locally or within the affected areas		Nationally	X	Regionally or neighbouring countries	X	Internationally	
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Do you have a procurement policy? What factors did you consider when you made this decision?

The CIC will oversee the management of the financial resources. CIC has a procurement manual in revision at this moment, governed by values such as Good Faith, accountability, transparency, and quality, among others. The Manual covers all purchases of Goods and Services in which the organization participate.

## 2.3 Description of Target Population

**1. CHS Commitment 1, 9. How do you calculate the beneficiary numbers for this project?** *For example, food and hygiene kits given to 2500 families, and 1 family = x beneficiaries.*

Selection Criteria: Households with elderly members & children, unaccompanied older people, households with single mothers as head of household, households with disabled and/or chronically sick members, households with pregnant women, and households not receiving support from other entities or the government.

Protection: 425 families /1 family = 3 beneficiaries (Total 1,280 people)

WASH: 750 families 1 family = 5 beneficiaries (Total 3,750 people)

In total, **this action will reach 3,750 people (1,290 girls, 1,090 boys, 540 women, and 367 men), and 750 households**

**2. CHS Commitment 1, 2, 3, 4. Which vulnerable groups are you specifically targeting? What makes them vulnerable? Please explain.**

The targeting methodology that will be used in this project will give priority to families with the following criteria:

- Damaged or destroyed houses
- Single-mother households
- Households with dependent elderly adults
- Households with children under five years of age and/or pregnant women
- Households with persons with disabilities
- Unaccompanied older people
- Children
- Disabled and/or chronically sick people

**3. CHS Commitment 4. Explain how the target population has been/is involved in the design of the proposed intervention** *(maximum 5 bullet points)*

Given the challenges of access to transport and communication, it has only been possible to make very precarious initial contact with some people and organizations on the ground and with the Office of Risk Management in Pinar del Río, from where data has been received virtually on the number of people affected, disaggregated by sex and age. However, communication has been maintained with OCHA to learn about the results of the assessment exercises they have carried out. CIC will carry out their needs assessments will be carried out with the affected population, including psychosocial assessments.

## 2.4 Expected Results

### 1. What will this project's success look like based on your time frame? *Please write your activities milestones including dates.*

This project is successful if people affected by the hurricane are recovering from the impact. The affected population in the two communities has safe drinking water and will not be affected by vector-borne diseases. People who have suffered from psychological trauma are feeling safe and able to get back to their normal lives. There is social cohesion in the community which will build their resilience to face another disaster in the future. Local churches will be able to respond to future crises with knowledge of humanitarian standards.

### 2. Describe the risks to a successful project and how you are managing them.

Risk/Problem	Mitigation measure
Embargo-related challenges and barriers: national prices are very high which will heavily affect CIC's purchasing power.	Reduction of the participant's and staff's locomotion as much as possible so the project implementation is not so dependent on fuel availability.
Distribution and monitoring could be affected by the limited availability of fuel and the rising cost of transportation, given the deep electro-energy crisis in the country, which hurricane Ian has exacerbated.	The Cuban state guarantees cards at prices subsidized by 15 percent and with priority access to fuel for religious institutions. Further negotiations with authorities to facilitate access to fuel to run electrical generators that churches have made available to support the humanitarian response. Implementation of pre-established voluntary agreements with private transport service providers that have agreements with the government for the provision of fuel on the most-possible stable basis.
Access to telecommunications (collapse of ETECSA in Pinar del Río)	Ensure communications with the leadership of affected territories through mobile phones with balance transfers to keep the service active depending on the response.

## 2.5 Monitoring, Accountability & Learning

### 1. CHS Commitment 7. Describe how you will monitor the project. What monitoring tools and process will you use? How will you gather lessons from the project?

CIC and CCRD oversee the follow-up and monitoring process of the project by maintaining communication with local leaders, through satisfaction surveys, and other information-gathering tools, including a learning review to identify lessons learned and good humanitarian practices. To that end, an M&E plan will be drafted as soon as possible, which also will include the follow-up on the feedback and complaint mechanism in place when feedback/complaint is reported. It is also planned to maintain fluid communication with the regional ACT Secretariat by providing timely and transparent information on the progress of the project, as well as on any obstacles encountered in order to take joint action.

### 2. CHS Commitment 8. Does your organisation have a Code of Conduct? Have all staff and volunteers signed the Code of Conduct? *We may ask you to submit copies of the signed Code of Conduct. You can use ACT Alliance's Code of Conduct if your organisation does not have one.*

CIC has its Code of Conduct and all staff and volunteers that are involved in the response have signed it. The CIC designates staff to confidentially address complaints properly.

### 3. How will you ensure you and all stakeholders will be accountable to the affected population. How will you share information. How will you collect and use feedback and complaints? CHS 4 and 5

CIC will abide by and enforce the ACT Alliance Complaint Policy. In addition, a phone number is already available to several stakeholders by which feedback/complaints can be reported confidentially and safely; and information sessions will be delivered to inform the affected people assisted about the principles by which CIC and CCRD are governed, the behavior must be performed by the humanitarian personnel when providing humanitarian services, as well as the feedback and complaint mechanism in place. In addition, a Satisfaction Survey is designed and applied to all beneficiaries at the end of the project.

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## Rapid Response Fund

### Financial Budget and Report

Project Code

14/2022

Project Name

Humanitarian response to the Cuban population affected by the hurricane Ian in Cuba

Budget Exchange rate (1 USD to local currency)

1.000000

Please use exchange rate from this site:

<http://www.floatrates.com/historical-exchange-rates.html>

Description		Type of Unit	No. of Units	Unit Cost	Budget	
				local currency	USD	USD
DIRECT COSTS						
1 PROJECT STAFF						
1.2.1.	Project coordinator	month	3	300	900	900
TOTAL PROJECT STAFF					900	900
2	PROJECT ACTIVITIES					
2.8.	Psychosocial				20,700	20,700
2.8.1.	A.1 Two field trips for Psychosocial needs assessment in 3 localities (3 especialistas x 4 días: gastos de transporte Habana – Pinar, alimentación, hospedaje, en entrevistas y 4 grupos focales con grupos vulnerables)	travel	2	3,000	6,000	6,000
2.8.2.	Training on CBPS & First Psychological Support (PAP) for 21 church leaders in Pinar del Rio province	workshop	1	3,500	3,500	3,500
2.8.3.	A.3 Design and printing of 1 material aimed at groups with differentiated needs on their rights and safety to guarantee their protection in emergencies.	unit	100	40	4,000	4,000
2.8.4.	A.4 Psychosocial support activities for affected populations (women, children, people with disabilities, and the elderly).	activities	9	800	7,200	7,200
2.10	WASH				27,400	27,400
2.10.1	A.6 Purchase of 4 communal water purification systems	unit	4	5,000	20,000	20,000
2.10.2	A.7 Installation of purification water systems	unit	4	600	2,400	2,400
2.10.3	A.8 Development and printing of educational material for the promotion of safe water and human health.	unit	100	20	2,000	2,000
2.10.4	A.9 Educational activities on the use of water purification system and for health promotion	activities	3	1,000	3,000	3,000
TOTAL PROJECT ACTIVITIES					48,100	48,100
3 PROJECT IMPLEMENTATION						
3.1	Forum Coordination				-	-

3.1	Forum Coordination				2,000	2,000
3.1.1	Coordination meetings (including inception, etc)	meeting	5	100	500	500
3.1.2	Travel and Accommodation	travel	1	1,500	1,500	1,500
3.1.3	External coordination				-	-
3.2	Capacity Development				3,500	3,500
3.2.1	Training: Sphere and CHS training from national Forum members & Regional Emergency Committee. (25 participants)	workshop	1	3,500	3,500	3,500
3.2.2	Local partners/national members				-	-
3.2.3	Target beneficiaries				-	-
3.2.4	Faith communities				-	-
<b>TOTAL PROJECT IMPLEMENTATION</b>					<b>5,500</b>	<b>5,500</b>
<b>4 QUALITY AND ACCOUNTABILITY</b>						
4.1	Assessments				-	-
4.2	Complaints and Response Mechanisms				-	-
4.3	Safeguarding				-	-
4.3	Discussion session of Child Safeguarding and Protection mechanisms in emergency situations in selected communities	unit	3	300	900	900
4.4	Communication and visibility	Lump sum	1	2,500	2,500	2,500
4.5	Monitoring & evaluation (Interviews to beneficiaries, questionnaires on quality and satisfaction submitted to beneficiaries & identify lesson learnt and good practices at the end of project)	travel	2	3,000	6,000	6,000
4.6	Audit	Lump sum	1	1,000	1,000	1,000
<b>TOTAL QUALITY AND ACCOUNTABILITY</b>					<b>10,400</b>	<b>10,400</b>
<b>5 LOGISTICS</b>						
5.1.2	Vehicle Rental	travel	3	2,000	6,000	6,000
5.1.3	Fuel	liters	800	1	800	800
<b>TOTAL LOGISTICS</b>					<b>6,800</b>	<b>6,800</b>
<b>TOTAL DIRECT COST</b>					<b>71,700</b>	<b>71,700</b>
<b>INDIRECT COSTS: PERSONNEL, ADMINISTRATION &amp; SUPPORT</b>						
	Office rent				-	-
	Office Utilities	months	3	100	300	300
	Office stationery				-	-
	Office Insurance				-	-
	Phone and internet charges	months	3	200	600	600
	Bank fees - Bank transfer charges				-	-
	Office Operations				900	900
<b>TOTAL INDIRECT COST: PERSONNEL, ADMIN. &amp; SUPPORT</b>					<b>900</b>	<b>900</b>
Percentage of Indirect Costs against Total Budget					1%	1%
<b>Total Budget</b>					<b>72,600</b>	<b>72,600</b>