The analysis of early warning systems and indicators foresaw a serious food crisis in 2012 in several countries in the region of Sahel. The populations at high risk are in the following countries and regions: Burkina Faso, Chad (Sahelian regions), Mali, Mauritania (severe food insecurity identified in the south-eastern areas), Niger and Senegal.

In 2011, the shortfall in agricultural production led to an increase in market prices, and contributed to the precariousness of the livelihoods of populations already living with food insecurity. This is particularly true for the 51% of the population living in extreme poverty across Sahel, whose access to nourishment has been considerably reduced by the increased price of foodstuffs, the poor resources of households and limited strategies for adapting.

The rate of malnutrition in children is extremely high and 15% over the emergency threshold in several regions of Chad and Mauritania. According to UNICEF, in 2012, 1.025.000 children under-five years old in the Sahel were threatened by acute severe malnutrition and up to 1.6 million were exposed to global acute malnutrition.

**GLOBAL OBJECTIVE**

To protect the livelihoods of the most vulnerable populations (poor and very poor people) in the areas most affected by droughts in 2012.

From 2012 to 2013, ACF has run a regional programme to respond to the 2012 food crisis in the Sahel. This programme, funded by DFID, targeted almost 25.000 households in Niger, Chad, Burkina Faso and Mauritania.

**Axes of Intervention**

**Axis 1**

Meet the minimum food needs of households with poor livelihoods during the hunger gap period.

**Axis 2**

Improve the livelihoods of pastoralists during the hunger gap period and provide support for economic recovery during rainy season.
### ACTIVITIES

**Community Analysis of risk, capacity and vulnerability**
- Carrying out a set of community analysis of risk, capacity and vulnerability (PCVA) in the most-vulnerable zones: participation and involvement of the population in using participative tools and identifying actions to implement.

**Awareness on risks, hygiene and nutrition**
- Implementation of awareness raising activities within the populations, and knowledge transfer related to the best practices on nutrition, hygiene, and risks management (e.g. cooking demonstration plot).

**Emergency-Rehabilitation-Mitigation of risks**
- Emergency responses & rehabilitation: set up Food for Work & Cash for Work (CFW) activities for income recovery and improve the harvest in the next season. The CFW has provided incomes to meet the needs of beneficiaries in foodstuffs as well as enabling them to work in their fields.

- Multi-sectorial activities to mitigate the future risks: implementation of home gardening and farming activities to improve the availability of and accessibility to a balanced diet during the hunger gap period; set up irrigation system to support seasonal agriculture, etc.

**Capacity Building & Knowledge Transfer**
- Training and promotion for sustainable livestock management: sharing information and practices within pastoralists network.

**Coordination with local institutions**
- Setting up of protocols for collaboration with technical services of states. This has enabled improvements in the viability and sustainability of activities.

### LESSONS LEARNED & RECOMMENDATIONS

**BURKINA FASO**
- Systematic participation by decentralised technical services in the implementation of the programme.
- Active participation during awareness sessions and in cooking demonstrations, which were much appreciated.
- Exchange visits have allowed different groups to exchange their mutual knowledge and practices.
- The involvement of the community in identifying risks, capacities and vulnerabilities enables acceptance of the activities.

**CHAD**
- Community distribution has enabled greater efficiency as well as greater awareness and taking of responsibility on the part of local groups and beneficiaries.
- Targeting criteria must be clearly presented and explained. The village and district chiefs have been directly involved in the identification of the most vulnerable households once the targeting criteria had been explained. Transparency is also essential.

**MAURITANIA**
- Set up new technologies: establishing hydroponic gardens was a new experience for ACF and proved completely appropriate for areas where access to water is limited.
- Need for a monitoring of the availability of water at each water point (e.g. measurement of water level on regular basis).
- It is necessary to integrate governmental structures in the conception and implementation of the project.

**NIGER**
- Implementation of composting has shown a better protection of the environment and health management.
- Need for the development of spaces for exchange and sharing of experiences.
- Need for a creation of a newsletter or an internet site to share good practices and lessons learned.
Conflicts, natural hazards and poverty have made Afghanistan one of the poorest countries in the world. Insecurity and climatic events, which affect the larger part of the country, cause significant displacement of populations and hinder the deployment of humanitarian aid. Although the global security situation has improved slightly, the conflict which is rife in the South and the East of the country has spread to most of the other Afghan provinces, notably in the North.

Consequently, 30% of the Afghan population is subject to food insecurity and access to safe water remains limited, particularly in rural areas. Under-nutrition is a persistent problem and contributes greatly to maternal and infant mortality rates. In 2010 the government put in place a programme of basic health services including nutrition. However, the results are insufficient because of the limited technical resources of the partner.

According to the 2012 global risk index, there was an extreme risk of drought and earthquake in 2013, a high risk of landslide, and a moderate risk of flooding. However the National Disaster Management Authority still faces challenges in responding to disasters, as there are needs in terms of logistics, resources and technical know-how.

Although these risks are well known to the humanitarian community, the current responses remain in the most accessible areas, leaving remote areas without support.

It was in response to these needs in Afghanistan that the Emergency Response Mechanism was launched in 2011. It was set up by a consortium of 4 international NGOs: Action Contre la Faim, Mission East, People in Need, and Solidarités International.

**GLOBAL OBJECTIVE**

To reduce the impact of crises on populations affected by natural hazards and conflicts through harmonised emergency preparedness, rapid and effective humanitarian coordination and an adapted response.

From 2012 to 2014, ACF set up a project targeting emergency response in Afghanistan funded by ECHO. Around 25,000 people benefited to this project located in the provinces of Badakhshan, Kaboul, Bamyan, Samangan, Ghor, Paktia and the south of Balkh.

**Axes of Intervention**

- **Axis 1**
  Collection and analysis of reliable information on disasters and setting up of a coordinated response with other participating parties.

- **Axis 2**
  Implementation of a rapid and effective response to the immediate needs of populations following disasters or conflicts in targeted areas.

- **Axis 3**
  Improvement of knowledge and skills and mitigation of risks of disasters for the populations benefiting from the programme.
ACTIVITIES

The Rapid Response Mechanism project provides a network of NGOs having the capacity to assess, address and monitor disaster risks and crises in vulnerable provinces in Afghanistan. This network also enables the exchange of information on access and impacts of disasters on populations.

Rapid analysis and context monitoring
- Identification of beneficiaries through rapid evaluation of needs.
- Use of data gathering tools and analysis of needs such as Household Economic Analysis approach.
- Setting up a surveillance system including indicators on water, sanitation (e.g. water-related diseases) and on food security.

Emergency Responses
- Deployment of a rapid response by integrating different sectors as water, sanitation and hygiene, food security and livelihoods, and nutrition and health (e.g. the distribution of non-food items).
- Support for rehabilitation activities (e.g. borehole drilling).

Disaster Risk Reduction Responses
- Strengthening the early warning system at the national level and relay information to vulnerable populations (e.g. sentinel sites).
- Establishment of micro-projects to reduce future risks as flooding.
People living in these areas are extremely vulnerable to climatic events such as cyclones, floods and high tides. In addition, the populations are not able to confront these risks due to a lack of skills and knowledge. In a general way, risk management is mainly carried out at the national and provincial levels, and few initiatives are taken at the local level, hindered by slow processes.

Loss of land is one of the major stakes in this country, and it is one of the main causes of vulnerability. Without land, households, particularly those managed by women, are incapable of confronting disasters, which incur damage such as the loss of home or a reduction in agricultural production, etc.

In addition, the risks are exacerbated by certain underlying factors:
- Groups have few or no strategies on disaster risk management
- Medical facilities and services, not to mention qualified staff, are rare.
- Water points are not easy to access (1km away by walk) and are contaminated, which encourages the spread of water-related diseases.
- 60% of boys leave school to work

This zone has been targeted because the villages are very much exposed to climatic hazards and food insecurity. Their vulnerability is also due to their position in relation to the sea as well as their limited capacity to react independently.

The population has indicated its willingness to acquire skills in responding to the risks of disasters and to consequently have a role in the management of risks in their region.

GLOBAL OBJECTIVE

To reduce risk and increase capacity of women and landless across the sea-bordering villages in Barguna District.

From 2011 to 2013, ACF has implemented a project to reduce the risks in the District of Barguna, in Bangladesh. This project, financed by ACF and AECID has 25,000 beneficiaries in the area of Borobogi.

Axes of Intervention

Axis 1
To reduce community and household risk by establishing sustainable community risk management systems that link to Union government, other key bodies and neighboring communities.

Axis 2
To reduce risk and build capacity of female headed households and landless living outside the embankment and through small-scale mitigation and resilience.

Axis 3
To reduce risk and foster sustainable social protection for women and girls through community based action and links to external systems.
DISASTER RISK REDUCTION PROJECT IN THE COASTAL AREA OF BOROBOGI UNION IN THE DISTRICT OF BARGUNA
BANGLADESH

ACTIVITIES

Community Analysis of risk, capacity and vulnerability

➔ Carrying out baseline and end line surveys while integrating gender issues.
➔ Carrying out community analysis of risk, capacity and vulnerability (PCVA) using participative tools and identifying actions to implement.

Raising Awareness

➔ Door to door activities with the aim of raising awareness on the project and taking awareness of the risks.
➔ Posting in public places of information documents on the risks.
➔ Organisation of cyclone simulation exercises with communities and local authorities.

Disaster risk Management

➔ Creation of women's committees: in charge of spreading targeting messages on nutrition, care practices and health, and also on the problems caused by climatic events.
➔ Creation of a village committee for Disaster Risk Management: in charge of supporting the most vulnerable to prepare for hazards, of providing timely training for the whole community, and of maintaining a link with the local authorities at district level.
➔ Development of action plans: planning for community risks and training for the carrying out of the proposition, follow-up and evaluation, advocacy, etc.

Mitigation activities

➔ Support for livelihoods activities such as support for small livestock management.
➔ Reinforcement of houses and animal's shelters.
➔ Identification of evacuation routes and safe building.

LESSON LEARNED & RECOMMENDATIONS

➔ The organisation of a women's committee has been the key element for identifying and responding to the concerns of women and raising public awareness of these kinds of problems. This has enabled a communal understanding of the vulnerabilities of women at the heart of communities and an improvement in the preparation of the women in the face of disaster.
➔ The community has to be the centre of our actions to provide acceptance, ownership and continuity of activities over the long-term period.
➔ Encourage groups to play a greater role in the recovery phase after a disaster.
➔ Ensure that committees conduct meetings with the whole community in order to maintain the engagement of populations in project activities and inform them of the progress of the different projects.
➔ Strengthening partnership with local and/or international organizations to guarantee the quality of activities and make innovations (e.g. WaterAid).
➔ Strengthening the exchange of best practices across the country and from NGOs experts in disaster risk management (NGOs, universities, research institutes, etc.), and development of a knowledge-building process.
➔ Mitigation activities should be improved: explore the local varieties of trees that can both provide income but also protect against disasters; consider putting up protective structures for small ruminants.
Bangladesh is highly exposed to a variety of risks including floods, soil erosion, cyclones, drought, cold wave, sea level rise, etc. These natural hazards frequently occur in regions where there are large numbers of vulnerable populations. The whole of the international community is in agreement to say that Bangladesh is the most vulnerable country to climate change. This means, the situation requires immediate attention on the part of international stakeholders as well as those local communities already committed to minimising the negative impacts of natural hazards.

Disaster risk management in Bangladesh has resulted in an improved institutional and political infrastructure within the country during recent years. The National Disaster Risk Management Plan (2010-2015) has also enabled Bangladesh to strengthen its strategic plan for tackling climate change. The funds allocated to reducing the risk of disasters and to climate change-related programmes have been included in the country’s national budget. Disaster management at local and national levels largely depends on regional organisational capacity and the coordination of different systems. Institutional capacity and coordination have also resulted in the establishment of more effective programmes as well as increased civil engagement achieved through improved awareness-raising policies.

Despite the Bangladeshi government having made considerable efforts in the area of disaster risk management, some shortcomings still remain. For example, the majority of policies planned at local and national level are still at draft stage, with some having been developed within a framework of bigger international initiatives. These projects are still hindered by insufficient funding as well as by inadequate management and coordination.

Moreover risk management committees at all levels do not receive enough sufficient funds to allow them to fulfil their obligations.

Strong institutional capacities at national level have not been adapted to the requirements of local and regional governments. A number of stakeholders have, in fact, implemented projects while following to their own strategies, demonstrating very limited coordination with other stakeholders. This can lead to overlapping in the areas concerned. Moreover, many villages which are difficult to access do not benefit from NGO aid.

**GLOBAL OBJECTIVE**

*Strengthening the resilience of local communities and schools by putting in place and developing disaster risk management approach.*

*De début 2013 à fin 2014, ACF a mis en place un projet de renforcement de la résilience dans les écoles et les communautés du Bangladesh. Ce projet, financé par DipECHO, compte environ 30.000 bénéficiaires dans les zones de Khulna, Barguna, Sathkhira et Netrakona. Ce projet a été réalisé dans la continuité du projet de réduction des risques dans la zone de Barguna.*
The purpose of this project was to continue the efforts made in previous years thanks to the disaster risk management project. The donor targeted support to schools through a transfer of knowledge.

**ACTIVITIES**

**Strengthening of culture of safety at schools and communities levels**
- Support to existing preparedness and response plans for their implementation, and their integration in local development strategies.
- Establishment of preparedness and response plans at schools level in coordinator with the Ministry of Education.
- Technical support to the Ministry of Education for the creation of a national DRM training module and revision of the school curriculum ton integration risk management.
- Training to teachers regarding disaster risk management
- Implementation of training and awareness sessions with students in order to use them as agents of communication within the community.
- Carrying out technical training and technical support to beneficiaries for the implementation of disaster risk reduction measures.

**Advocacy**
- Development of advocacy’s intervention for the establishment of training with the central government on good practices in disaster risk management and emergency response.
- Ensure that disaster risk management is integrated into the curriculum of the Ministry of Education.
- Ensure that marginalized and socially excluded people take part in decision-making, and are included in the design, planning and implementation of disaster risk reduction project.
For this project, the humanitarian response and risk reduction activities were integrated into the water, sanitation and hygiene (WASH) project.

The WASH stakeholders have highlighted the fact that the risk of flooding and cholera could worsen, especially during the rainy season. Rakhine State is characterised by a 7-month dry season and a season of heavy rain from April until August/September.

Cholera can affect all groups of the population including men, women and children. However, the disease tends to affect most vulnerable individuals, including the undernourished children and pregnant women. Consequently, particular attention is accorded to fulfilling the specific needs of these vulnerable groups through awareness-raising and preventive actions.

A large number of rural camps are situated in flooding areas. Significant risks of flooding and cholera epidemics have been identified in Sittwe and Pauktaw camps. In the district of Sittwe alone, there are 8 camps at risk of flooding, meaning a total of 40,000 people are at risk.

The likelihood of a resurgence of violence and civilian displacement must be taken into account. Consequently, the members of the consortium, made up of the ACF, the GRET (Research and Technological Exchange Group) and the WHH (Welthungerhilfe) have allowed for some flexibility within the project so that they can respond adequately to scenarios including flooding during the rainy season, the resettling of those displaced and newly displaced due to an violent outbreaks, cholera epidemics, etc.

GLOBAL OBJECTIVE

Contributing to reducing the risk of morbidity and mortality due to malnutrition and severe diarrhoea illnesses.

From 2013 to 2014, ACF set up a 9-month humanitarian assistance project for displaced persons and host communities in Rakhine State in Burma. This project has been integrated into WASH, nutrition and health, and mental health and care practices interventions. Funded by DFID, it has reached some 30,000 beneficiaries.

Axes of Intervention

Axis 1
Strengthening the capacity to monitor, prepare and respond to severe diarrhoea diseases.

Axis 2
Improving access to clean water for displaced persons and host communities.

Axis 3
Improving access to sanitation facilities for displaced persons and host communities.

Axis 4
Improving access to hygiene promotion for displaced persons and host communities.
ACTIVITIES RELATED TO AXIS 1 ‘PREPAREDNESS AND RESPONSE’

Preparedness for severe diarrhoea diseases

→ Implementation of a massive awareness-raising campaign through an organised series of events with the message communicated via the media and local authorities.
→ Mobilisation of village committees for the transmission of information and communication relating to behavioural change.
→ Establishment of water point and disaster risk management committees.
→ Carrying out survey to identify knowledge, attitude and practices on water, sanitation and hygiene.
→ Mobilisation of a multidisciplinary team to monitor, investigate and report on water-related diseases cases and other epidemiological situation.
→ Pre-positioning of contingency stock (e.g. hygiene kits, awareness-raising tools, water purification tablets, etc.).

Risk mitigation activities

→ Improvement of access to safe water, hygiene and sanitation services.
→ Psychological support and improvement of care practices amongst affected people.
→ Treatment of malnourished children and support to family members.

Advocacy Interventions

→ Advocating for the establishment of surveillance and early-warning systems for severe diarrhoea diseases.
→ Awareness raising among the authorities and local and national coordination platforms.

Training to committees, NGO and governments officers

→ Training sessions with the aim of improving information about and control over severe diarrhoea diseases.
→ Participation and coordination with clusters and enhancing inter-link between clusters.
SAFER COASTAL AND URBAN COMMUNITIES THROUGH INCLUSIVE DISASTER RISK REDUCTION
MYANMAR

The Myanmar Consortium for Community Resilience (MCCR), recommends strengthening disaster risk reduction capacity-building initiatives in 4 regions of Burma. This consortium is made up of 5 international NGOs (ActionAid, HelpAge, Action Against Hunger, Plan International and Oxfam), one United Nations agency (UN-Habitat) and 6 local organisations (Social Protection Policy and Research Group, Action for Social Aid, Young Women Christian Association, Myanmar Engineering Society, Myanmar Geoscience Society and Myanmar Earthquake Committee).

The central problem identified in the area is the lack of DRM institutionalisation resulting in absence of any policy on DRM at community level. There are therefore little or no links between the measures implemented by civil society and government-lead initiatives. The disaster risk reduction is not always a government priority and measures must be taken to integrate it into the national development framework.

In the absence of strong government leadership, there is a wide variety of tools and approaches used at a community level from one body to another, which makes the centralisation and transmission of information difficult.

A second problem has been identified in the area, is the lack of inclusion of vulnerable persons and marginalized groups within decision-making process and when implementing programmes.

**OVERALL OBJECTIVE**
To increase the resilience of coastal and urban communities by institutionalising an inclusive DRR approach.

From May 2014 to mid of 2016, ACF develops, though a consortium, a DRM project funded by DipECHO. This project targets around 95,000 people and 57 organisations in the regions of Ayeryawady, Yangon and Sagaing and Rakhine and Tanintharyi States.

**Axes of Intervention**

- **Axis 1**
  Increased capacity of Urban and coastal communities to prepare for a range of hazards and manage disaster risk using an inclusive approach.

- **Axis 2**
  Increased capacity of key institutional stakeholders to implement standardised and inclusive DRR tools to manage current and future risks.

- **Axis 3**
  Support to government to develop an inclusive national Community-based DRR policy.
ACTIVITIES

Community Analysis of risk, capacity and vulnerability
- Carrying out a community analysis of risk, capacity and vulnerability (PCVA) amongst exposed communities: participation and involvement of the population in using participative tools and identifying actions to implement.
- Establishment of disaster risk management committees run by women.
- Design of community preparedness and emergency response plan for each villages.
- Setting up survey on Knowledge, Attitudes and Practices in water management, hygiene and sanitation. These surveys are coupled with risk and vulnerability analysis.

Capacity-building of communities and institutions
- Empowerment of role and responsibilities of women within the communities and valuing their ideas in the decision-making process on disaster risk management.
- Training on DRM to institutions and communities.
- Technical training to set up micro-projects.
- Technical training to teachers for the development of DRM planning at schools, and inclusion of these topics in the school curriculum.
- Development of training module on Risk & Conflict Management.
- Capacity building of the ‘urban development committee’ on the prevention of seismic risks (e.g. risk assessments and planning).
- Support to DRM inter-agency working group to ensure a proper coordination, information sharing and design of a policy framework at national level.

Awareness raising on risks
- Implementation of outreach sessions on disaster risk reduction and climate change adaptation at community and school levels, as well as within local authorities.
- Organization of ‘cyclone & floods simulation exercises’.
The Gnagna province is subject to recurring alternating episodes of drought and flood. These events can lead to short, medium and long term negative consequences on the livelihoods, well-being and health of the people and their environment.

Indeed, these recurring climate crises have negatively impacting ecosystems, and consequently the economic sectors which depend directly on them, like agriculture and rearing which remain the mains livelihoods assets of the population. These events impact the food insecurity of local populations and represent an aggravating factor of the malnutrition.

Over the past fifty years, populations living in the area have been forced to develop strategies to adapt to the drought, but these strategies are more and more weakened by these recurring events.

Lack of knowledge on the part of all of the local stakeholders when it comes to climate crises and resilience measures in place to tackle risks has been observed. The existing informal warning system relies on a system of communication by mobile telephone between the various mayors and representatives of the villages. Although functional, there are inadequacies in terms of the transmission times and the type of information transmitted.

In addition, the degree to which the population is actually informed about the risks and coping mechanisms is very low.

**SPECIFIC OBJECTIVES**

- To contribute to the sustainable restoration of quality of life and economic activities, and strengthening local capacities (village, municipality, province) of climate risk management.

- To contribute to the fight against the causes of food and nutrition insecurity by strengthening livelihoods and household while increase institutional community and individual resilience.

Following the 2010 floods and the 2012 Sahel crisis, ACF has developed a disaster risk reduction strategy through a number of projects aimed at strengthening the resilience of populations to recurrent crises.

From 2011 to 2016, ACF has acquirer experience to implement multi-sectorial activities with a short and long-term vision. These projects provide technical support to more than 100,000 people at-risk, including local institutions and technical services officers.

**Axes of Intervention**

**Axis 1 SUSTAINABILITY**

Strengthening of household disaster resilience by relying on the management of crisis thanks to a social framework.

**Axis 2 AVAILABILITY AND ACCESS**

Sustainable increase and diversification of farming production and household sources of revenue.

**Axis 3 CONSUMPTION AND PRACTICE**

Increase of consumption of food rich in micro-ingredients and food diversification at household level.
ACTIVITIES

Community Analysis of risk, capacity and vulnerability

- Reliance on local authorities to identify and accompany vulnerable households.
- Carrying out community analysis of risk, capacity and vulnerability (PCVA).
- Undertaking Household Economic Analysis (HEA) to launch activities. This survey will be implemented at the end of the project in order to compare and analyse the impacts.

Awareness raising

- Raising awareness on disaster risk management and adaptation to climate change.
- Promotion of good nutrition practices.

Multi-sectorial approach

- Construction of infrastructure wood-free through Cash For Work.
- Support to inputs (seeds, mineral fertilizers and agricultural equipment) and support for a more efficient stock management.
- Development of lowlands, vegetable gardens, and rice sites and promotion of food diversification.
- Support for the sustainable increase and diversification of agricultural production (Soil and Water conservation, soil restoration, etc.) and restoration of productive capacity for small livestock.
- Promotion of consumption of foods rich in micronutrients, implementing nutritional safety-nets stimulating local industries for the benefit of the most vulnerable and food assistance in the event of economic shocks.

Building local capacity

- Strengthening the know-how, capacity and skills of partner organisations in the area of disaster risk reduction
- Establishing farmer field schools and training for technicians.
- Promotion, equipment and training relating to arable farming, forage, livestock farming and conservation.
- Support the development of activities enhancing ecosystem conservation and reducing the impact of environmental risk.
- Support for collective natural resources management to minimize the effects of climatic events.

Preparedness and responses plan related to naturals hazards

- Support the design of municipal plans for risk management.
- Implementation of ACF’s Contingency Plan to deal with natural and economic shocks.

LESSONS LEARNED

- Importance of participatory diagnostics and planning processes for the first few months of the project. The project must allow flexibility in order to take into account the results of the community analysis for the implementation of adapted activities.
- Importance of analysing the impact of the preceding interventions in targeted areas. This allows lessons to be drawn from previous experience and to define the new project by taking into account the potential risks associated with the area.
- Taking into account seasonality hardships during design, planning and implementation of interventions.
- Importance of developing alternative sources of income for agro-pastoral productions which are a way of strengthening the resilience of the beneficiaries.
- Introduction of income-generating activities: processing of non-timber forest products, pottery and masonry are activities developed during the project. They have allowed beneficiaries to rake in revenues.
- Some economic activities originally planned as a community service for 2012 have been implemented in 2011 in the form of Cash for Work to reduce the vulnerability of beneficiaries and strengthen their resilience.
Chronic drought across the entire country: low rainfall since 2007 coupled with the continual rise in commodity prices has left approximately 212,000 people vulnerable to acute food shortages and has destroyed their livelihoods. Some 132,000 people, including the refugee population, are in need of emergency food supplies. Difficulties related to accessing water for basic needs: Generally speaking, the water supply situation is critical right across the country, especially in rural areas. The main causes, beyond the climatic effects of drought, are limited water resources and low levels derived from water collection and storage facilities. Surface water is an unreliable source and only available during times of flooding and is either underdeveloped or not developed at all. Consequently, 95% of drinking water is collected from groundwater which constitutes the country’s main source of drinking water. Willingness to integrate DRM nationally: Djibouti boasts a national strategy, an inter-ministerial DRM committee in charge coordinating governmental initiatives, a technical intra-sectorial committee and the ‘SEGRC’ - a permanent coordination, implementation and support agency that falls under the jurisdiction of the Ministry for the Interior. Regional authorities are implicated and conscious of the need to develop this approach but they lack sufficient resources. Some institutions still remain which integrate DRM components into their projects: the FAO², the World Bank³ and the Ministry for Agriculture.

Main problems in the Area
1. Strong dependence on food aid (for 78% of households, food aid is the major source of nutrition – PAM 2013).
2. Isolation, scarce housing provision and limited and declining livelihoods (loss of livestock).
4. Expectation of outside aid: weak local initiatives, attitudes inconsistent with stated requirements, lack of self-management and limited community-based approach.
5. Lack of knowledge on the part of communities relating to strategies for coping with, responding to and preparing for drought.

1 - Djibouti Appel Global 2013, Nations Unies
2 - http://www.fao.org/home/fr/
3 - http://www.banquemondiale.org/

GLOBAL OBJECTIVE
To contribute to strengthening the capacity of vulnerable people in targeted areas to adapt and respond to drought risks.

Since 2012 up to now, ACF set up a community-based drought management projects. These projects are funded by ECHO and support more than 10,000 people affected by recurrent droughts in the districts of Koutabouya, Hanlé 2, Dadahalou and Bondora.
ACTIVITIES

Community Analysis of risk, capacity and vulnerability

- Carrying out a community analysis of risk, capacity and vulnerability (PCVA). This enables communities to carry out their own diagnostics leading to improved disaster risk self-management as well as the implementation of resilience measures.
- Scientific analysis of risks undertaken in collaboration with the CERD (Djibouti Centre for Study and Research).
- Study on care practices amongst women affected by droughts.

Raising awareness on risks

- Implementation of awareness campaigns targeting beneficiaries in relation to drought risk reduction and good hygiene and care practices. These campaigns target schools, health structures, etc.

Multi-sectorial approach

- Implementation of micro-project linked to land access, and natural resources management (e.g. water point rehabilitation, irrigation system, and land development).
- Development of home gardening and promotion of food diversification.
- Support for the diversification of agricultural production.

Sharing experiences

- Organization of exchange visits to share experience and technical practices to set up effective response at all levels.
- Gather information and produce documents on lessons learned on the project and transmission of information to the external network (local institutions, NGOs, regional platforms, etc.).

LESSONS LEARNED & RECOMMENDATIONS

- The Monitoring & Evaluation system allow to control the sustainability of interventions as well as the authorisation and ownership of local population and authorities.
- The implementation of participative analysis was the “strong point” of the project and led to the introduction of an innovative step in terms of disaster risk management and drought impact management. The community-based response was very strong and consistent because of the integration of these elements throughout the process.
- Participatory studies can better direct interventions on the ground. They add an innovative project in that it involves communities in the process of prioritization and decision.
Responding to the risks of drought is a cyclical process that is done in the long term to develop sustainable community capacity.

Borena zone is considered highly vulnerable to drought. The communities have few opportunities for economic activities beyond livestock rearing.

Problems in the Area

- **Drought:** recurring drought and seasonal shortages further aggravates food shortages and malnutrition. This represents a vicious circle for the pastoral groups who are facing poverty and food insecurity.
- **Environmental degradation:** Uncontrolled destruction of natural resources coupled with the emergence of inadequate plants severely affects pasture and farmland.
- **Limited access to water:** Because of low and erratic rainfall, livestock are more and more vulnerable to significant weight loss and diseases. Limited water resources increase the risk of conflicts between communities seeking to access drinking water all year long.
- **Limited access to markets:** During the dry season, the trades and exchanges systems adversely affect pastoral groups. Prices are not negotiated and the buyer decides on the price. This has an adverse effect on income levels.
- **Insufficient infrastructure:** because of weak infrastructure, pastoral groups cannot access to sufficient information to develop their economic activities.

**SPECIFIC OBJECTIVES**

- **To enhance drought risk reduction capacity through strengthened and diversified livelihoods to be better prepared and able to cope with recurrent drought.**
- **Improve health, livelihoods and resilience to shocks and stress populations in a situation of chronic food insecurity.**

Since 2011 until today, the Ethiopian Mission has established a long-term strategy to reduce the impact of recurrent drought on the population in the south of the country.

Following the 2010 severe drought in Horn of Africa, several projects have succeeded to build resilience to drought. These projects have provided technical support to more than 130,000 people at risk in the Borena zone.
COMMUNITY MANAGED DROUGHT RISK MANAGEMENT IN BORENA ZONE - ETHIOPIA

ACTIVITIES

Community Analysis of risk, capacity and vulnerability (PCVA)
- Implementation of PCVA within each community.
- Carrying out initial and final surveys in order to quantitatively evaluate the progress of practices, knowledge and attitudes among the population in relation to water, sanitation and hygiene.
- Carrying out rapid survey on Coping Strategy on food practices and livelihoods at the household level.
- Creation of disaster risk management committees and formulation of a community action plan, recognized and validated by local authorities.

Risk raise awareness campaign
- Awareness-raising sessions in schools relating to the preparedness, mitigation and prevention of drought risk. Teachers and children disseminate their knowledge throughout the communities (villages, families, etc.).
- Community-based awareness-raising initiatives relating to risk reduction practices to be implemented before, during and after a severe drought.
- Community-based awareness raising initiatives relating to hygiene practices. The sessions are implemented according to a participatory approach and involve schools, governments, committees, etc.

Community-managed and multi-sectoral approach
- Improved access and management of water and sanitation: rehabilitation of water points at schools and at community levels.
- Establishment of a spare parts procurement mechanism for repairing water points. This mechanism is managed by local businesses.
- Support for the protection, management and diversification of livelihoods and income: creation of dairy cooperatives managed by women's groups.
- Support for agricultural production and livestock: promotion of Cash for Work for the rehabilitation of village ponds and land-range management.
- Promotion of home gardening and nutrition-sensitive techniques: promotion of sweet potatoes and other vegetables and fruit with high nutritional values.
- Establishment of a pilot project for a community early warning system: disseminating key messages through the media, SMS and local institutions.
- Technical support and monitoring of the evolution of pastoral schools established by FAO.

Capacity building to communities and institutions
- Training to communities and DRM committees in relation to preparedness, emergency planning, and mitigation.
- Technical support on early warning system to governments (e.g. monitoring of rainfall patterns).
- Establishment of hygiene clubs in schools: these clubs allow children to become agents of change and to acquire the necessary tools and knowledge so that present and future generations are better equipped.
- Training to households in dietary diversification and food preparation techniques via cooking demonstrations sessions. Women who have been trained can in turn provide training to other members of the community.

Coordination & cooperation
- Organisation of technical workshops regionally among a number of stakeholders in order to share experiences and decide on best practice.
- Participation in the drought risk management platform.
- Participation in the development of technical document on preparedness, including the early warning system.

RECOMMENDATIONS

- A high level of coordination and cooperation between ACF, local partners, other NGOs and ECHO was observed. This contributed to the success of the projects. Encouraging such positive relations in future operations is recommended.
- Prevention, preparedness and mitigation are complex issues which necessitate a multi-sectorial approach in order to derive significant and sustainable effects. The DRM, food security and livelihoods, and water, sanitation and hygiene are complementary concepts allowing capacity building initiatives among local populations to be adopted in the short, medium and long term.
- The DRM committees are said to be a useful and vital interface between the government, community leaders and civil society when it comes to the collection and analysis of early warning data as well as the communication of information.
- The promotion of tubers and home gardening has been effective in reducing the vulnerability of agro-pastoral households, whilst taking into consideration their nutritional value.
- The role of women as key players is invaluable for implementing DRR initiatives. Women are instrumental in promoting the growing of manioc, rehabilitation of water points and encouraging better hygiene practices.
The Horn of Africa is regularly affected by droughts worsen the food and nutrition situation of vulnerable populations, which lead to increase of malnutrition and food insecurity. More pressure on natural resources, combined with poor infrastructure makes the inhabitants of this region particularly vulnerable to drought.

Local authorities need to build their capacity and have difficulty to respond to the needs of the population, especially in reducing the effects of drought in the region. Lack of financial, human and technical resources were identified during the field assessment and external support was requested by the rural development actors.

Following recurrent droughts, the European Union (EU) has developed an initiative ‘Increasing the resilience of the Horn of Africa’ to improve food and nutrition situation in the south and east of the country.

The SHARE initiative was created to improve disaster preparedness and establish a closer link between humanitarian aid and development cooperation.

To meet the needs of the area, ACF in consortium with Save The Children is setting up a multi-sectorial project to increase preventative measures to strengthen the resilience of households facing food insecurity, increase the coverage of drinking water, and improving knowledge of nutrition interventions with children under 5, pregnant and lactating women.

In order to improve the resilience of targeted communities, ACF focuses on strengthening early warning capabilities and improve information transfer systems between communities, municipalities and districts.

**OVERALL OBJECTIVE**

To contribute to the enhancement of communities and local government capacities in Wag Himra Zone of Amhara Region to avert the underlying causes of food and nutrition insecurity and build their resilience.

Over a period of 3 years, started in late 2013, ACF is implementing a multi-sectorial project to fight against under-nutrition while reducing the risk of droughts over the long term. This project aims to provide support to about 35,000 people in the Amhara region, though European Commission funds.

**Axes of Intervention**

**Axis 1**
To enhance food security in the target areas through supporting sustainable livelihoods development.

**Axis 2**
To strengthen the capacity of community and local government to better manage disaster risks through improved DRM knowledge, practices, structures and service provision.
ACTIVITIES

Community Analysis of risk, capacity and vulnerability

→ Evaluation of the food security situation: participatory identification of the most vulnerable groups and definition of targeting criteria for the implementation of food security activities.
→ Establishment of participatory risk, vulnerabilities and capacities analysis.
→ Development of preparedness and emergency response plans.

Multi-sectorial approach: promotion of nutrition sensitive activities

→ Development of natural resource management activities: soil and water resources management (e.g. adapted planting, rehabilitation of water points, etc.).
→ Support for the social protection program.
→ Pilot Project for the development of irrigation schemes for agricultural and fodder production.
→ Distribution of improved agricultural inputs with support for cooperatives.
→ Support to small ruminants and support to animal health projects.
→ Establishment of income generating activities (e.g. beekeeping, poultry, small business, etc.) through capacity building, linking with microfinance institutions, and identification of value chains and market linkages.
→ Establishment of nutritional and health gardening.

Build capacities and knowledge of communities and local authorities

→ Technical support to small farmers to develop good agricultural practices and improving access to new technologies.
→ Creation and / or strengthening of self-help groups.
→ Capacity building about early warning system and disaster risk management.
→ Sensitization of local partners on national policies and international convention on existing initiatives in terms of reducing drought.
→ Training and cooking demonstrations plots to the most vulnerable households: this activity can improve the nutritional impact and to ensure that food is consumed and stored correctly.

Coordination and Information Sharing

→ Organization of open door and exchanges visits between smallholders and members of governments in order to adapt agricultural practices.
→ Carrying out communication and dissemination of information to beneficiaries and local stakeholders through brochures or other local media, this helps to improve communication in rural areas.
Haiti is the poorest country in the Caribbean. Unstable politically, Haiti faces numerous climatic hazards, made worse by environmental deterioration (deforestation, uncontrolled urban development...). Since 2010, the country has been subjected to a succession of disasters and socio-economic crises which have further aggravated its already weakened structural situation. The dense population has created tensions relating to available land and forced people to move to high risk areas (landslides, floods, etc.).

The effects of the 2010 earthquake are still being felt. The exodus within the country from the capital impacted the entire country. In addition to earthquakes, the country has been impacted by recurring multi-factorial crises including cholera, national and international price hikes, drought and cyclones. These ongoing crises pose a grave threat to food supplies. The situation is especially worrying in rural areas due to the lack of basic services (health, education, water and sanitation...).

The Global Assessment Report on Disaster Risk Reduction (PNUD-2004) classes Haiti at the top of the list of countries most vulnerable to disasters. In municipalities of Artibonite, the risk of flooding, landslides, drought and cholera proved and regularly trigger humanitarian crises.

OVERALL OBJECTIVE
Implementation of a system allowing communities and institutions to manage the risks associated with different types of stresses that threaten the lives and livelihoods (preparedness, response and mitigation coupled with vulnerability’s reduction).

Axes of Intervention

Axis 1
Strengthening preparedness to emergency by supporting local stakeholders in vulnerable areas and implementing risk mitigation activities.

Axis 2
Contributing to the support of an emergency multi-sectorial response on behalf of vulnerable populations affected by a natural hazard or an epidemic through rapid intervention on WASH, nutrition and protection.

From October 2010 to March 2013, ACF implemented a community-based disaster management project in Haiti. Funded by DipECHO and UNICEF, this project targeted 350,000 beneficiaries within communities in Gonaives and Artibonite located in the west of the country.
ACTIVITES

Community Analysis of risk, capacity and vulnerability (PCVA) and Mitigation measures

- Carrying-out PCVA at community level.
- The PCVA has been coupled with a preliminary mapping study of the main natural hazards.
- Design of contingency plans for better anticipation and management of potential emergencies.
- Following the PCVA studies, micro-projects were identified targeting the rehabilitation and mitigation of floods in the area of intervention.
- Development of mitigation measures such as shovelling channels, and support for household water treatment.

Support to existing local institutions

- Creation of new brigades and municipal committees on disaster risk management, in coordination with existing structures.
- Implementation of an alert system coupled with an emergency multi-sectorial assessment in coordination with the municipal committees.
- Training of brigades and municipal committees on monitoring of the situation, early warning system, multi-sectorial assessment and emergency response.

Enhance knowledge on risks

- Awareness-raising sessions for children in schools.
- Awareness-raising in communal sections targeting members of local civil protection committees and community-based organisations.

Coordination with disaster risk management structures

- Coordination with stakeholders to strengthen pre-positioning of emergency stock at community level.
- Integration of the project within the departmental disaster risk management committee aiming of coordinating ACF-led initiatives with those of other stakeholders (Civil Protection, ACTED, etc.).

LESSONS LEARNED & RECOMMENDATIONS

- Community-based participation: the participation of community members was very high and showed the willingness and ability of the population to participate in DRM activities. This participation was also useful as a primary source of information.

- Revitalization of community-based and local committees: the project has enabled the revitalization of existing municipal committees in Haut Artibonite and Bas Nord-Ouest departments. Previously placed in trouble for lack of communication, networks were reactivated through the establishment of a forum for coordination and discussion, as well as the support through training.

- Contingency Plan: implementation of specific training to sensitize the municipal committees. These courses must be accompanied by simulation exercises to ensure proper implementation of these plans.

- Exchange of best practices: need to establish a platform for exchange and coordination, and expand awareness sessions through this communication tool.
Cholera appeared in Artibonite on the river banks in October 2010. After an acute emergency year in 2011, 2012 saw a stabilization of the epidemic. The outbreak was brought under control without being eliminated thanks to a large number of partners present on the ground to raise awareness and provide medical care.

Although showing a net diminution, Cholera still remains a major public health problem, as demonstrated by the peak at the end of 2012 and the beginning of 2013.

Towards the end of 2012 the Haitian government announced its desire to take control of the epidemic by setting up the Prevention Plan for Cholera in Haiti 2012-2022. The plan has a national scope and aims to integrate emergency elements to respond to cholera outbreak. However, the funds for the implementation of this National Plan have not yet been found.

The Artibonite was the department most affected by the epidemic in 2013. The Northwest department, whilst being less affected, suffers from its geographical isolation and the lack of players able to provide support.

OVERALL OBJECTIVE
To improve the speed of the emergency response to cholera outbreaks in the Artibonite and Northwest.

From June 2013 to April 2014, ACF has implemented a water, sanitation, and hygiene integrating preparedness and rapid response to cholera epidemics. This project, funded by UNICEF and DipECHO, has benefited about 290,000 people in the regions of the Artibonite and Northwest.

Axes of Intervention

Axis 1
Strengthen the coordination between Health and WASH actors.

Axis 2
Establish a rapid response mechanism to better manage cholera outbreaks.

Axis 3
Strengthening the knowledge of local agents.

Axis 4
Support for the economic sector related to household water treatment.
ACTIVITIES

Analysis of epidemiological data

→ Epidemiological data collection and analysis: regular monitoring of the epidemiological situation is realized. Each department is followed by a technician who provides health monitoring and works closely with the departments of the Ministry of Public Health and Population.

→ Systematic investigation of the affected community to identify the sources of contamination.

Community Awareness and Training

→ Public awareness on how to protect from cholera, especially with community leaders and distribution of prevention kits (soap, oral rehydration solution, distribution of water treatment tablets, etc.).

→ Increased knowledge of community agents: training to water and sanitation technicians, and Department Unit on the prevention of cholera, chlorination of water, health standards, protection of sources and community outreach, etc.

Humanitarian Assistance & Coordination

→ Deployment of water, sanitation and hygiene activities, such as provision of prevention kits, water treatment, isolation and treatment of faeces, protection of the drinking water system, etc.

→ Making available the chlorinating products on the local market, by setting up a product distribution chain on Water Treatment Therapists and at affordable costs.

→ Support in coordination with Health and Water partners: ACF actively participated in the coordination process with clusters and partners on Water and Health. ACF assured his role as secretary through writing minutes of meetings.
The CAR is a country where government infrastructures are very limited both in terms of resources and capabilities. People live in chronic poverty in a structural context which is rapidly degrading. Various sources noticed that the population who is living below the poverty line as being between 62% (PAM) and 67% (PNUD). These populations face a wide range of risks (insecurity, climatic hazards, epidemics, price fluctuations) and regularly find themselves in emergency situations. Conflict and post conflict situations make certain zones partially and/or completely inaccessible and contribute to weakening of livelihoods.

In December 2012, armed conflict broke out in the regions of Vakaga, Ouaka, Nana Gribizi and Kemo and the progressive occupation of certain regions after the cease-fire of 11 January 2013, caused a significant displacement of the population affected by the fighting and the destruction of property in the areas occupied by rebel forces.

To face an unstable context, the UN Humanitarian Coordinator, with support from UNICEF and ECHO have established in September 2012, the Rapid Response Mechanism (RRM) capable of providing humanitarian organizations from financial and material resources necessary to respond to humanitarian crises. The principle then lies in the pre-positioning of funds, materials and identifying partners with capability to deploy rapid response.

The interventions were carried out in close coordination and collaboration with the food security sector of the World Food Program, the protection sector through the High Commissioner for Refugees and the health sector through the World Health Organization.

The RRM works in synergy and support to clusters; it is a tool for humanitarian surveillance, early warning and response for the entire humanitarian community.

**SPECIFIC OBJECTIVES**

- Contributing to the reduction of mortality and morbidity of children, women and communities placed in a situation of acute vulnerability to natural disaster or epidemic.
- Increase the availability and reliability of information on the humanitarian situation to contribute to an early warning mechanism and allow key stakeholders to implement appropriate responses to humanitarian crises.

**In 2013, ACF implemented multi-sectorial surveillance project in the Central African Republic. This project, funded by UNICEF and ECHO, covered the needs of 20,000 persons and all the humanitarian actors in west provinces of the country.**
ACTIVITIES

Strengthen surveillance system

- Implementation of ‘EMMA’ (Emergency Market Mapping Assessment), HEA (Household Economic Analysis) and Market Assessment in the area affected by the conflict.
- Establishment of multi-sectorial assessments to identify and target the most vulnerable people in humanitarian emergencies. They are made monthly and multi-sectorial assessment reports are shared with the humanitarian community.
- Establishment of a humanitarian surveillance (displacement, food access, prevalence of malnutrition, rainfall, water related diseases, etc.).
- Support to the national and local authorities for the implementation of contingency plans.
- Harmonization of rapid monitoring and evaluation tools in consultation with key stakeholders.
- Linking surveillance systems and monitoring of population movements (dynamic and needs).

Humanitarian assistance

- Creation of a Rapid Response Mechanism Committee at the sub-prefecture.
- Support to the nutrition and health sector, and water, sanitation and hygiene including the control of epidemic risk and improving access and storage of water, waste management and access to latrines.
- Awareness of the surveillance teams created within the communities and local partners with respect to capacity and operating procedures of the Rapid Response Mechanism.
- Raising awareness and building knowledge on the use of non-food items and medical kits.

Coordination and Partnership

- Technical collaboration between multi-sector surveillance and rapid assessment teams to allow an effective and rapid monitoring of alerts.
- Establishing partnerships with key players in surveillance at national and regional level (Central Africa) to share data with other information systems such as the Integrated Food Security Phase Classification (IPC), the Food Security Monitoring System of the World Food Program (FSMS) and with existing state information system.

CHALLENGES ENCOUNTERED

With the deteriorating security situation in the country, ACF has experienced a sharp slowdown in its activities. After the coup d’Etat on 24 March 2013, the surveillance was suspended for a period of one month. The majority of the partners having suffered severe looting they were not operational for some time. The crisis has had a continuing impact on many aspects of the project, from activity planning to implementation and on overall strategy. Moreover, the crisis has complicated the coordination and strengthening of the capacities of the agents from the Ministry of Rural Development and Agriculture; resources have been reduced and contact persons are unreliable due to internal changes to their structure.

RECOMMENDATIONS

- To develop surveillance and information systems whilst linking results to rapid response mechanisms.
- To use the same language, to reinforce rapid assessments based on harmonized approaches and to enhance the sharing and dissemination and pooling of information.
Although highly contagious, cholera is a disease that is easily preventable and curable. To minimize the risk of a cholera epidemic, to control the disease in those areas where it’s endemic and reduce the number of deaths, requires the implementation of a multidisciplinary approach based on prevention, preparedness and response, systematically associated with an effective surveillance system¹.

For the last 8 years, West and Central Africa have been permanently under the threat: cholera epidemics are increasing on the continent, causing millions of deaths every year. Not only lethal but also extremely rapid, the epidemic is the first reason for emergency intervention by Action Contre la Faim (Action Against Hunger) at the same level as natural hazards².

With a total of 30,283 cholera cases and 437 deaths reported in 2012 by the Ministries of Health in Sierra Leone and Guinea, this cross-border outbreak is the most important since 1994 (according to HHA³).

Problems in the target area:

- Delay in declaring the epidemic.
- A deficient of the Early Warning System.
- Low preparedness capacity when faced with a cholera epidemic.
- Late mobilization of key players and lack of harmonization between the different strategies.
- Increased vulnerability factors in Freetown, compared to Conakry.
- Understanding the epidemiology of cholera is very limited in Sierra Leone.

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1 - ACF International Network – Document de positionnement opérationnel sur le choléra
3 - Harmonization for Health in Africa

OVERALL OBJECTIVE

To reinforce the capacities for surveillance, early warning and emergency response when faced with cholera epidemics in Guinea and Sierra Leone.

Since 2013, ACF has implemented an integrated project to a project in water, sanitation, and hygiene for a period of 10 months, in order to enhance preparedness and rapid response capacities to cholera epidemics in Guinea and Sierra Leone. This project, funded by ECHO, covers approximately 75,000 beneficiaries in the cities of Forécariah, Boké and Conakry in Guinea and in the towns of Kambia, Pujehun and Freetown in Sierra Leone.

Axis of Intervention

**Axis 1**

To reinforce epidemiological surveillance in the neighbouring districts of Pujehun and Kambia in Sierra Leone, and Forécariah and Boké in Guinea and in the urban centres in Conakry and Freetown.

**Axis 2**

To reinforce the capacity of the civil society and the Ministry of Health to respond to a cholera outbreak in the districts of Kambia in Sierra Leone, Forécariah, and Boké in Guinea and in the urban centres of Conakry and Freetown.

**Axis 3**

To improve knowledge, practices and resources relating to cholera in both the health centres and the community in the affected areas and in areas at risk.
ACTIVITIES

Needs analysis and surveillance

→ Carrying out surveys on cholera epidemics and transmission analysis in collaboration with the Ministry of Health.
→ Mapping of the epicentres of cholera epidemics in collaboration with epidemiologists.
→ Creation of a system of epidemiological surveillance and monitoring of the disease at different stages at the national, regional and in health centres.

Awareness and capacity building

→ Promotion of hygiene practices, water management and waste management.
→ Training and massive awareness among key stakeholders and populations about the risks of cholera and what to do to prevent the spread of disease.
→ Training on case detection and identification of epidemics on surveillance sites.
→ Training of civil society to cholera control activities in areas identified by the sentinel sites.

Partnerships and Technical study

→ A study was carried out in partnership with the Chrono-Environment laboratory of Franche Comté University (France). The objective was to suggest mechanisms for preparedness and response in both the short and long term. The study was led by two epidemiologists and an engineer on water, sanitation and hygiene.
→ Cross-border meetings were organized in the coastal districts and near the borders.

LESSONS LEARNED & RECOMMENDATIONS

→ Civil society, WHO Health Organization and UNICEF members should be formed to develop a community approach to setting up surveillance and epidemic control activities.
→ Technical teams based in health centres should be trained in case detection, isolation, etc.
→ The responses to cholera must be coupled with epidemiological studies to ensure targeted and tailored responses.
→ Rapid responses projects must be followed by activities in the short and the long term to reduce the incidence of cholera.

→ Consider establishing partnerships / consortium with experts on-site (e.g. Urban WASH consortium).
→ Surveillance systems need to be strengthened, including through the establishment of sentinel site, laboratory monitoring by a national laboratory, mapping / geographic information system, etc.
→ A historical review of a cholera outbreak in Sierra Leone should thus be conducted to identify which carry out the preparedness, surveillance and prevention.
→ Cross-border surveillance should be strengthened between Guinea, Sierra Leone, Liberia and Guinea Bissau.
It was essential to develop projects in Somalia which focused on resilience due to the environmental changes affecting the country and the region. ACF is a member of the Somalia Resilience consortium whose members (ACF, ADRA, CARE, COOPI, DRC, Oxfam and World Vision) have more than 5 years experiences of the Somalian situation. This consortium was formed to strengthen families’ and communities’ resilience and to improve their livelihoods by implementing a large-scale, long-term, and joint project amongst vulnerable rural and peri-urban communities.

Building resilience to drought in Somalia is a priority to avoid a repeat of 2011 famine. Communities need to diversify and adapt their livelihoods in order to adapt to future droughts. The approach developed by the consortium is to improve and encourage local capacities and community participation.

**OVERALL OBJECTIVE**

To enhance the resilient productive capacities of pastoral, agro-pastoral and peri-urban households and community groups in selected locations.

Since 2013, ACF is a member of the SomRep consortium that implements a 3-year project to reinforce the resilience of communities to cope with the risks of drought in Somalia. This project, funded by USAID and SIDA, has approximately 45,000 beneficiaries in the Bakool region and the El Barde district.

**Axes of Intervention**

- **Axis 1**: To strengthen existing livelihoods and improve livelihood assets and outcomes in the course of normal seasonal cycles.
- **Axis 2**: To implement and communicate about best practices between the Government, the UN and NGOs in order to have a significant impact.
- **Axis 3**: Coordination between the Government, the UN and the NGOs in order to strengthen the resilience of communities.
- **Axis 4**: Adequate duration of funding and efficient support from the Government to sustainably build resilience at community level.
ACTIVITIES

The consortium promotes the sharing of information, cooperation and joint advocacy initiatives between local and international NGOs working in Somalia through the following axes:

- Being a forum to actively support members to promote dialogue, collaboration, learning experiences and exchange of information.
- Represent the Consortium members with governments, UN agencies, donor groups and multilateral organizations at the local, national and international.
- Facilitate and support advocacy initiatives, including public awareness on the programming in Somalia.
- Ensure synergy of objectives and activities of the consortium with the Social Protection Project.

Interventions on resilience to shocks

- In terms of distribution, activities are divided into: 20% health, 20% to food security, 15% social protection, 10% water, sanitation and hygiene and 10% livelihoods, 10% education, 5% nutrition, and 10% other topics.
- Activities in food security and livelihoods are targeted support for agricultural production and market access, and support for land management and livestock management.
- In terms of access to water, rehabilitation of water points are made and the rehabilitation of water sources for livestock.

Advocacy

- Advocacy strategy has identified four major areas of engagement: 1) The protection of civilians, the rights of refugees and displaced persons; 2) Humanitarian operations, and access to aid assistance; 3) peace and conflict resolution, and 4) the resilience and development over the long term.
Natural hazards, notably such as droughts and floods, are very common in Zimbabwe. In addition, climate change contributes to an increased frequency of climatic hazards with wide ranging impacts on both the social and the economic situation. This has a direct impact on the living conditions and livelihoods of the populations. In addition, the weakening of the institutions and infrastructure of the country, together with widespread poverty, have limited the capacity of the institutions and communities to respond to disasters and to mitigate their effects.

Zimbabwe is in a semi-arid region where rainfall varies enormously from one extreme to the other. Zimbabwe as a whole has unreliable rainfall and is affected by between one and three severe droughts every ten years, which represent a risk to the subsistence systems of small farmers dependent on rainfall for their crops.

Droughts and floods have seriously affected community practices in terms of hygiene and access to water. Water may be contaminated by flooding or underground reserves may be insufficient. The lack of access to adapted sources of water together with the poor sanitation facilities forms a significant hazard to the health of the communities. One third of Zimbabwans in rural areas continue to drink from unprotected water sources and are thus exposed to diseases such as cholera. In 2008-2009 cholera epidemic affected 98,591 persons with around 4,000 deaths.

The Civil Protection Unit is the inter-institutional government agency responsible for helping communities to prepare for disasters. Despite the inter-institutional collaboration, this unit does not have the capacity to manage, train and raise awareness of the populations concerning disaster risk management across the country.

Within the communities themselves, there is an obvious lack of preparedness to disaster. Some NGOs in the country have started conducting training on disaster risk management.

**OVERALL OBJECTIVE**

To enhance the resilience of vulnerable households and communities to drought through increased sustainable and diversified agricultural production.

Since 2012, ACF is implementing a 3 years project to reduce vulnerabilities and strengthen the resilience of communities in the province of Manicaland, Zimbabwe. This project, funded by OFDA, has almost 50,000 beneficiaries within the local population of Chipinge district.

**Axes of Intervention**

**Axis 1**

To improve the capacities of institutions and communities to identify hazards, mitigate and coordinate risk-reduction interventions.

**Axis 2**

To reduce underlying risk factors in vulnerable communities.
ACTIVITIES

Community Analysis of risk, capacity and vulnerability
- Carrying out a set of community analysis of risk, capacity and vulnerability (PCVA).
- Establishment of preparedness and responses planning to drought in the districts and villages.
- Creation of village committee on disaster risk management.
- Collection and exchange data within communities through communal committees.

Capacity building
- Setting up technical workshops on risks at community and district levels.
- Training of Trainers: these trainers will set up key activities on disaster risk management.
- Technical training on agriculture, and management of natural resources.

Multi-sectorial activities
- Establishment of drought preparedness and mitigation through agricultural projects, improving access to water, livestock management, etc.

Partnership
- Project implemented in consortium with the International Rescue Committee and the Institute of Water and Sanitation Development.
- Collaboration with the civil protection department, the Council for nutrition and food, the local authorities and communities in order to ensure a culture of safety, identifying risks and respond to reduce the vulnerability.

Raising awareness on risks
- Design a Manual on Disaster Preparedness in coordination with the Civil Protection Department.

LESSONS LEARNED & RECOMMENDATIONS

- It is necessary to have a disaster risk management manual and/or guideline for training to enable the District Civil Protection Committee to standardize training and facilitate monitoring.
- It is necessary to integrate disaster preparedness and response plan into other projects such as those managed by the World Food Programme in Chipinge District. The integration of these plans allows the community to materialize their actions, and mitigate potentials risks and protect their environment.
- The integration of the private sector in the strategy of the Civil Protection can enables the creation of an opportunity to share resources.
- Departments and local authorities are more efficient in terms of disaster risk management if there is a work made by the Department of the civil protection to coordinate the often divergent efforts of the various departments.