



**Action by Churches Together**

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Coordinating Office

# Appeal

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Haiti

## Relief to Victims of Civil Unrest – LAHT-41

Appeal Target: US\$ 475,355

***Balance Requested from ACT Alliance US\$ 390,655***

Geneva, 22 March 2004

Dear Colleagues,

In early 2003 the United Nations described the situation in Haiti as a silent emergency in view of the chronic socio-economic and governance problems. It spoke of *'an increasing segment of the population [being] faced with growing poverty and scarcity, bringing them to a critical threshold of vulnerability ... The situation in Haiti appears explosive. Stress due to a constant decline in living conditions is added to an aggravated political climate ... Serious social unrest is possible'* Today, after months of political instability and violence, culminating in the departure of President Aristide from office, it now says that the situation has become a 'full-blown crisis'. Despite the arrival of international troops and the appointment of a new President and Prime Minister, armed groups are in control of much of the country, particularly in the north, and incidents of looting and attacks continue in Port-au-Prince.

The violence has resulted in an unknown numbers of deaths, generating fear and uncertainty. Humanitarian space has been repeatedly violated and most hospitals have ceased to function. Beyond this, the situation has created an acute humanitarian crisis because of the disruption of normal communications and economic activities. The UN Office for the Co-ordination of Humanitarian Affairs (OCHA) has estimated that 3 million people (37% of the total population) have been affected by the crisis. The majority of these people live in Port-au-Prince, Gonaïves, Cap Haïtien, Saint Marc, Port-de-Paix (North West department) and Hinche. More than half of them are children under 18 years old, and an estimated 700,000 are women of childbearing age. Priority concerns they have identified are: security, humanitarian access, food and medical aid, fuel, health care and epidemiological risk.

ACT members **Lutheran World Federation (LWF)** and **Christian Aid (CAID)** have been responding to this crisis through their partners in Haiti. **However, the current appeal includes only the LWF proposal as the CAID proposal is not finalised yet.** LWF is proposing to respond to the current crisis through:

- First aid and legal assistance
- Food security
- Health assistance
- Agricultural recovery and income generating activities
- Psychosocial assistance and Conflict resolution

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ACT is a worldwide network of churches and related agencies meeting human need through coordinated emergency response.

The ACT Coordinating Office is based with the World Council of Churches (WCC) and the Lutheran World Federation (LWF) in Switzerland.

The appeal includes a mid-term review of the activities by external consultants, part of a capacity assessment as basis for a capacity building program for ACT members and partners in Haiti.

**Project Completion Date:**

LWF - 31 March 2005

**Summary of Appeal Targets, Pledges/Contributions Received and Balance Requested**

	<b>LWF</b>	<b>Evaluation</b>	<b>ACT Co-ord.</b>	<b>Total Target US\$</b>
Appeal Targets	439,355	30,000	6,000	475,355
<b>Less: Pledges/Contr. Recd</b>	84,700	0	0	84,700
<b>Balance Requested from ACT Alliance</b>	<b>354,655</b>	<b>30,000</b>	<b>6,000</b>	<b>390,655</b>

Thor-Arne Prois  
Director, ACT Co-ordinating Office

Full details of programme and budget are on following pages.

## BACKGROUND

In early 2003 the United Nations described the situation in Haiti as a silent emergency in view of the chronic socio-economic and governance problems. It spoke of *‘an increasing segment of the population [being] faced with growing poverty and scarcity, bringing them to a critical threshold of vulnerability ... The situation in Haiti appears explosive. Stress due to a constant decline in living conditions is added to an aggravated political climate ... Serious social unrest is possible’*<sup>1</sup>. Today, after months of political instability and violence, culminating in the departure of President Aristide from office, it now says that the situation has become a ‘full-blown crisis’. Despite the arrival of international troops and the appointment of a new President and Prime Minister, armed groups are in control of much of the country, particularly in the north, and incidents of looting and attacks continue in Port-au-Prince.

The violence has resulted in an unknown numbers of deaths, generating fear and uncertainty, as well as up to \$300 million in damaged property<sup>2</sup>. Humanitarian space has been repeatedly violated and most hospitals have ceased to function. Beyond this, the situation has created an acute humanitarian crisis because of the disruption of normal communications and economic activities. The UN Office for the Co-ordination of Humanitarian Affairs (OCHA) has estimated that 3 million people (37% of the total population) have been affected by the crisis. The majority of these people live in Port-au-Prince, Gonaïves, Cap Haïtien, Saint Marc, Port-de-Paix (North West department) and Hinche. More than half of them are children under 18 years old, and an estimated 700,000 are women of childbearing age. Priority concerns they have identified are: security, humanitarian access, food and medical aid, fuel, health care, and epidemiological risk.

The high level of vulnerability of the majority of the population – 48% of whom already had an insufficient income to be able to feed themselves adequately – means that a shock of any kind can force them to sell their remaining assets and push them into destitution. Peasant farmers and workers in the informal sector, all of whom must sell their goods on a day-to-day basis in order to survive, have been particularly badly hit.

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<sup>1</sup> OCHA Flash Appeal 2004 for Haiti, 9 March 2004, Executive Summary  
<sup>2</sup> ‘Uprising’s Damage’, Miami Herald, March 10 2004

## I. REQUESTING ACT MEMBER

### – Lutheran World Federation/World Service Department - Haiti Program

## II. IMPLEMENTING ACT MEMBER & PARTNER INFORMATION

Lutheran World Federation/Department for World Service activities in Haiti started in 1983 as a support to political refugees in the Caribbean regions as well as in the USA. The program has 25 staff (8 working in program related activities). Areas of intervention include poverty alleviation through institutional strengthening, community development, networking and advocacy. The areas of intervention include Districts of South East, West, Grand Anse.

Previous emergency intervention includes relief and rehabilitation assistance to Hurricane George victims(1998) and assistance to victims of human rights abuses (RRF 2004).

### **ACT member's implementing partners**

Fondation Nouvelle Grand Anse (FNGA) - Grand Anse District - FNGA founded in 1994 and registered in 1996 aims at contributing to the development of the District of the Grand Anse. Areas of intervention include fishery, pig raising, sugar production, education, technical assistance (formation) and non-formal training. Its operational area is the district of Grand Anse.

Experience in emergency relief includes distribution of food and medical aid as well as reconstruction after hurricane Gordon (1994).

Haiti MED (West district) Haiti Med started work in 1991 with the support of Haitian Doctors working in Germany. 1994 Haiti Med/Haiti was formed aimed at reinforcing the medical structure in Haiti.

It focuses on medical assistance, consultations, laboratory analysis and the promotion of traditional medicine. Haiti Med has health centres in Ti Tanyen (Cabaret), Cite Castro and Cite Siclair (Delmas, PaP). These two centres provide services for a population of around 15,000. Haiti Med has 5 nurses, 2 doctors, 2 laboratory technicians and 4 support staff.

National Coalition for Haitian Rights (NCHR) - The National Coalition for Haitian Rights (NCHR) is a non-profit, non-governmental organisation, created in the United States in 1982. Since its creation NCHR has been engaged in litigation action as well as legal defence training in the United States, working towards halting deportations and guaranteeing legal status for Haitian refugees fleeing from the Duvalier dictatorship. Following NCHR's observation missions and immediately after the coup d'état of 1991, massive and systematic human rights violations led NCHR to open an office in Haiti in April 1992. Its task was to carry out investigations, assist victims and increase pressure on countries with significant influence in the politics of Haiti.

NCHR has 17 office staff and 18 field staff who are involved in monitoring of Human Rights, legal assistance, human rights training and investigation.

Federation des Organisations des Planteurs de l'Arrondissement de Belle Anse -South East District (FOPLAB) - FOPLAB was founded in 1999 and comprised 16 grassroots organisations. Today it counts 60 organisations totalling 3,000 members. FOPLAB has an executive committee of 11 members, elected for 3 years by a congress composed of 200 members coming from three communal areas. In these areas the population totals about 50,000.

FOPLAB has a staff of 32 working in the area of micro-credit, small animal husbandry, institutional reinforcement and potable water. Its working area is the District of Belle Anse

In addition the **Federation of Protestant Churches and the Service Chrétien** (as former ACT members) are working within the ACT network in Haiti. LWF, together with the two organisations, has identified the following implementing partners:

Pierre Payen Hospital (Artibonite District) - Founded in 1970 to supply medical care to rural communities. The hospital has 50 staff (physicians, nurses, laboratory specialists, a pharmacy) and focuses on paediatrics, surgery and maternity care. Operational area is south of St Marc.

Beraca Hospital (North West District) - Founded in 1948 to supply medical care to rural communities, it focuses on paediatrics, surgery and maternity care. The hospital has 100 staff (physicians, nurses, laboratory analysis, specialists, pharmacy). Its area of intervention is the east side of North West District.

The League of Evangelical Churches ALEG (Artibonite District) founded in 1986 to help assist Protestant churches undertake common activities in Human Rights defence, legal assistance, education and biblical doctrine. ALEG has 25 staff and works in the city of Gonaïves.

Baptist Convention of Haiti - A convention of Baptist Churches located in Cap Haitien (North district). The convention runs several health facilities, educational institutions and agricultural programs. For the purpose of the present appeal they will concentrate their response in the north district where out of the 80 church members 20 are active.

### **III. DESCRIPTION of the SITUATION in the AREA of PROPOSED RESPONSE**

#### **Health**

Health and food remain the main humanitarian concerns. Due to the volatile situation as well as violence at some health centres throughout the country, medical workers are afraid to report to work and most hospitals have closed. The situation worsened due to lack of electricity and water triggered by fuel shortages. Essential medicines and vaccines are being distributed on a limited basis. The affected population is estimated at over 1.3 million. The main areas affected are: Port-au-Prince, Gonaïves, Cap Haïtien, Saint Marc, Hinche and some areas in the North West district.

As a result of the present situation, the Minister of Health has set up a steering committee comprising all partners in the health sector, including WHO, UNFPA and UNICEF, to co-ordinate humanitarian aid. The three agencies are preparing to provide medical supplies at the national level and a public information effort to facilitate access to health services. Vulnerable populations, particularly women and children victims of violence, will be targeted.

#### **Location for proposed response**

Pending a comprehensive assessments of the needs (which was undertaken in the 9 Districts from 10 March by UNICEF, WHO/PAHO), ACT Haiti decided to provide an emergency response based on the most urgent requirements of partners to cope with the additional influx of population in need of health assistance. The support is directed to health centres and hospitals managed by ACT Haiti partners. They are located in the North West, the North, the West, the Artibonite and the Grand Anse Districts.

The health situation in the **North District** is, even under normal conditions, precarious with only one bed for 1,000 inhabitants. The total population amounts to about 800,000. In the **North West** the situation is even

worse, with a majority of the population (85%) living in rural areas. As far as the health services are concerned less than one bed per 1,000 habitants is available. In the **Artibonite** the population is over 1 million, with a health coverage of 6 beds per 1,000 inhabitants. St. Marc and Gonaive have been in the centre of the conflict with hundreds of people wounded. Hospital and health centres have been rapidly overwhelmed by people. In the **Grand Anse**, the over all population is 650,000 with 6 beds per 1,000 inhabitants. Since 29 February, when roads were blocked, the Grand Anse is completely isolated and the health services are deteriorating rapidly. There are about 3 million inhabitants in the **West (Port-au-Prince) District**. As of the end of February the number of wounded people arriving at hospitals was increasing, quickly surpassing hospital capacities. In addition, power shortages hampered normal functioning and morgues had to be emptied. In the Central Hospital 700 bodies had to be cremated.

### **First Aid, legal assistance, psychosocial assistance and conflict resolution**

The tally of damages, losses, and victims from the past several months is staggering. Thousands of individuals and families have become displaced – both internally and externally (“boat people”), some *forced* to leave and others seeing no other option *but* to leave. An estimated one hundred people lost their lives, and several hundreds of homes and businesses pillaged and/or burned to the ground. NCHR has not been witness to this sort of violence and displacement of Haitian citizens since the coup d’état years of 1991 – 1994.

Over 1,400 Haitians have attempted to seek refuge in neighbouring countries but the majority have been sent back. Assessments are ongoing to provide more precise figures on the amount and the particular status of people to be considered as displaced.

In this context of violence legal assistance to victims appears to be essential as massacres, rape, looting and other kind of physical and mental aggression were widespread. Violence has also split rural and urban communities, therefore reconciliation is part of the emergency work

### **Location for proposed response**

- The National Coalition for Haitian rights (NCHR) will implement activities dealing with first aid and legal assistance to victims of the conflict in all **9 Districts**.
- In the **South East** District FOPLAB will give legal assistance to victims of the conflict and will also undertake activities related to conflict resolution.
- In the **Grand Anse** ACT Haiti partner FNGA foresees training legal advisors from 10 farmer’s organisations. FNGA is also engaged in the reintegration process with the above mentioned organisations.
- The League of Evangelical Churches (ALEG) are present in St. Marc and Gonaive (Artibonite) where they will undertake conflict resolution activities.

### **Food Security**

Over 3,800,000 people are unable to secure their minimum food requirements, and national food production is still decreasing due to insufficient investment, lack of infrastructure and access to the means of production all over the country. Agriculture, the main source of income, has been adversely affected by drought in the **North West** over the last four years, and by floods in the north-east over the last season. As a result, three quarters of rural families are food insecure compared to one third in urban areas. The number of malnourished children in rural areas is double that of urban areas. The recent estimates of the FAO seem to indicate a deficit in food production of about 20% of the total needs.

Food security has been seriously undermined during this crisis. Transport and distribution problems have disrupted food supplies in general and humanitarian food aid in particular. Food stocks were looted in a number of locations. Remaining stocks cannot be transported nor can new supplies be brought in until they can be

adequately protected. Food prices have more than doubled. The international food aid program, serving 9 % of the population, has virtually ground to a halt during the emergency.

### Location for proposed Response

The choice of areas to work in is related to the ACT partners presence and the intensity of the needs on the ground. Reports from Protestant Churches from La Gonave (**West District**) are of great concern. Thousands of people are not eating on a daily basis. The most affected locations are on the south-eastern coasts of the island, since no boats are travelling back and forth from Point-a-Raquette due to lack of fuel. On the island food is more or less not available due to the fact that it is in the dry season, and the price for the little food available has doubled. Moreover, there is a lack of food in Mirogoane, the main city delivering food and other items to the island under normal circumstances.

In the District of **Grand Anse** agricultural production is the main source of income. 85% out of the total of 500,000 inhabitants are living in rural areas. Traditionally reserves are usually limited in light of the nature of the production. The present crisis (tension and insecurity) has a direct impact on the services to the farmers and will provoke food shortages in the District as a result of poor production. In the Grand Anse five vulnerable zones have been selected.

The same scheme is applicable in Belle Anse (**District South East**), were ACT Haiti has selected 17 of the most vulnerable villages.

## IV. TARGETED BENEFICIARIES

### First aid and legal assistance

Implementing partner	District	Beneficiaries	Type of population	Activities
NCHR	All 9 districts	200	Rural & Urban	General assistance, first aid & legal assistance to victims of political violence

### Medicines and medical equipment

Implementing partner	Health Centre or hospital	Beneficiaries	Type of Population	District
Haiti MED	Cite Siclair	7,500	Rural & sub-urban	West
	Ti Tanyen	7,500	Rural & sub-urban	West
FNGA	Health Centre Bonbon	500	Rural & Urban	Grand Anse
	Health Centre Anse du Clerc	500	Rural and Urban	Grand Anse
	Health Centre Grand Vincent	500	Rural & Urban	Grand Anse
	Health Centre Jeremie	500	Rural & Urban	Grand Anse
	Health Centre Decade	500	Rural and Urban	Grand Anse
SCH	Dispensaire De Bienfaisance De Danda	16,800	Rural & Urban	North
	Centre Vision D'espoir	19,200	Rural and Urban	North
	Centre Ophthalmologique Du Cap-Haïtien	15,600	Rural and Urban	North
	Centre Medical Pour Tous	13,200	Rural & Urban	North
	Commission Sante Baptiste Du Cap-Haitien	2,400	Rural & Urban	North
FPH	Clinique Baptiste Du Haut-Limbe	19,200	Rural & Urban	North
	Pierre Payen Hospital	20,000	Rural & Sub-urban	Artibonite
	Beraca Hospital	24,000	Rural & Sub-urban	North West

The implementing institutions are all partners of the ACT Haiti members. The hospitals and centres selected are those that, after a first survey, expressed the most urgent need for assistance and have the capacity to implement the activities.

### Food security

Implementing partner	District	Beneficiaries Families*	Type of population	Activities
FOPLAB	South East District	1,500	Rural	tools and seeds
Service Chretien	Island La Gonave	1,500	Rural	tools and seeds
FNGA	Grand Anse District	750	Rural	tools, seeds and animals
<b>Total</b>		<b>3,750</b>		

\*A family in Haiti statistically counts 5 -7 people

### Psychosocial assistance and conflict resolution activities

Implementing partner	District	Beneficiaries	Type of population	Activities
FOPLAB	South East	2,400	Rural	– Legal assistance, – Psychological & social – accompaniment, Conflict resolution
FNGA	Grand Anse	200	Rural & Urban	– Legal assistance – psychological & social accompaniment, – conflict resolution
ALEG	Artibonite	1,000	Urban	– Psychological & social accompaniment, – conflict resolution

### Income generating activities

Implementing partner	District	Beneficiaries	Type of population	Activities
FNGA	Grand Anse	150	Rural and Urban	Support of income generating activities

The implementing institutions are all partners of the ACT Haiti members. The institutions selected are those with the capacity to respond. They are covering areas that are not within the focus of UN activities.

## V. PROPOSED EMERGENCY ASSISTANCE & IMPLEMENTATION

**Goal** - To respond to the most immediate needs of the Haitian population (crisis), and to establish the basis for rehabilitation as well as social and economic recovery (post-crisis) in the following areas of intervention:

### Objectives

- To provide support to the population directly affected by the political violence in all 9 districts.
- To provide health support in Cap Haitien – North District, St Marc – Artibonite District, Mare Rouge – North West District, Port au Prince – West District.
- To support the rehabilitation of food security activities in the rural areas of in La Gonave Island, North West, South East Province, Grand’ Anse.

## Activities

### *FIRST AID & LEGAL ASSISTANCE*

The support to affected people through violence is based on the assumption that violence among the different groups is still ongoing, therefore human rights violations continue to occur. The judicial system is totally dysfunctional and local NGOs have taken responsibility to accompany individuals in **the legal process**. Prevailing impunity is an impeding factor. Trials are taking at least one year and legal assistance is extremely expensive.

### *MEDICINES & MEDICAL EQUIPMENT*

Affected people are partly excluded from medical care and assistance due to the lack of access caused by the violence and political turmoil. Primary and secondary roads are blocked and hospitals were objects of aggressions during the fighting. Still today the security situation hinders people from going to clinics in urban areas. The few working hospitals are overburdened with patients and are lacking drugs and equipment.

ACT Haiti, through its partners, has chosen health centres in rural and urban areas that are still able to attend to victims of the armed conflict. They also lack drugs and equipment to assist the population according to minimum standards. Furthermore, the cost of medicine has increased along with the demand.

Due to the actual security situation it is still difficult to get casualty figures, but as soon as the situation allows current data will be updated to reflect the situation.

### *FOOD SECURITY*

Food security is threatened due to the fact that local markets are inaccessible for purchase and sale, as a consequence local reserves including **seeds** are consumed by the affected population. If seeds do not arrive on time (March to June) this year the harvest will be jeopardised. Food distribution remains a necessity in certain areas of the country (particularly in the North West, where scarcity of food is endemic) in order to bridge the gap between planting and harvesting and to allow a smooth transition. Access to affected areas due to insecurity is still a hampering factor.

### *PSYCHOSOCIAL ASSISTANCE & CONFLICT RESOLUTION*

Under the extremely polarised society activities related to non-violent conflict resolution become important. Politics divides rural communities to an extent that it hampers the articulation of their vital interests.

### *INCOME GENERATING ACTIVITIES*

The lack of work opportunities for the population, particularly the youngsters, will be addressed in order to ensure the ending of the cycle violence.

## Implementation methodology

**FIRST AID AND LEGAL ASSISTANCE-** People injured during the political violence will be given first aid assistance. As some of them are being prosecuted they will receive protective shelter and if needed assistance to travel. Legal assistance will be provided to those which basic fundamental rights has been violated.

**MEDICINES & MEDICAL EQUIPMENT -** The medical assistance will be provided through financial support to the implementing partners who run the diverse health centres or hospitals. They will be enabled to buy the necessary medical items and drugs locally in order to be able to respond to the most urgent needs.

**FOOD SECURITY -**Seeds, tools, animals and food will be provided to the affected families.



rehabilitation process												
Support conflict resolution processes through seminars & workshops		X	X	X	X	X	X	X	X	X	X	
Distribution of seeds & tools		X	X				X	X	X			
Monitoring	X	X	X	X	X	X	X	X	X	X	X	
External Evaluation											X	

**Transition or Exit strategy**

- ◆ Assumptions and risks: The assistance should not break existing supply/production structures, namely as far as food supply is concerned; in this line assistance should be provided and managed through existing local structures (sustainability).
- ◆ Response strategy: In this perspective, the ACT response has been:
  - To implement activities through local partners well represented in the working areas.
  - To tackle issues aiming basically at allowing affected population to:
    - recover full potential: **Health** - medical assistance and food supply – in the short term, and to
    - prepare the future: **Food Production**– seeds and tools –, and **rebuild ties** within the communities– conflict resolution work – to keep the minimum standards.

**VI. ADMINISTRATION & FINANCE**

The Finance department of LWF Haiti will take responsibility for administration and finance. Standardised contracts between ACT members and implementing partners will assure transparency and clarity, monitoring and reporting structures. Money transfer to partners in Haiti is done in form of cheques. Flow of information is granted through the management structure that foresees the Program Co-ordinator as the focal point for information sharing.

The Program Co-ordinator and the accountant under the supervision of the LWF Finance manager will be responsible for the financial reporting. Respective agreements between LWF Haiti and FPH and SCH will be signed.

The funding agreement will be signed by the LWF Haiti Representative representing ACT Haiti.

A separate account for the ACT appeal funds will be established upon positive responses to the appeal.

**VII. MONITORING, REPORTING & EVALUATIONS**

For implementation LWF will assign one Program Co-ordinator. In view of a limited management capacity of some implementing partners additional project management personal are foreseen. Therefore, 5 Project Managers will be hired and assigned as follows: one for FNGA, (Grand Anse), one for FOPLAB (South East), one for FPH (Artibonite), one for SCH (La Gonave and Cap Haitien) and one Haiti Med (West).

They will ensure adequate implementation of activities and financial management in each project area. Each of them will have the support of one logistician, who will support the project managers in stock management and delivery

The Project Managers will report to the Programme Co-ordinator, who will be based at the LWF office in Petion-Ville . The Programme Co-ordinator will be supported by an accountant.

LWF, FPH and SCH will be responsible for field visits to its partners at least every three month. **LWF assumes the responsibility for the financial and narrative reporting, according to ACT guidelines of all implementing partners.**

### Reporting Schedule:

First interim report - 30 June 2004  
 Second interim report - 30 September 2004  
 Third interim report - 31 December 2004  
 Final narrative & financial reports to be received by ACT CO within 3 months of closing date of 31 March 2005.

There will be an external evaluation for the whole ACT appeal as per ACT regulations.

## VIII. CO-ORDINATION

Regular contact through meetings of the ACT Committee Haiti will be used to update other members on project progress and ensure co-ordination.

Global co-ordination of humanitarian assistance for Haiti is under the auspices of OCHA. Regular co-ordination meetings including all aspects of security are organized by the UN office in Port-au-Prince. ACT Haiti will co-ordinate its humanitarian assistance with OCHA including transport of goods to the provinces.

## IX. BUDGET

<u>INCOME</u>	<u>US\$</u>
Christian Aid	29,200
ACT Netherlands	<u>55,500</u>
<b>TOTAL INCOME</b>	<b>84,700</b>

### ESTIMATED EXPENDITURE

<u>Description</u>	<u>Type of Unit</u>	<u>No of Units</u>	<u>Unit Cost US\$</u>	<u>Budget US\$</u>
<b>DIRECT ASSISTANCE</b>				
<b><u>Crisis phase</u></b>				
<b>First aid and legal assistance</b>				
Food, housing & clothing for victims of political violence	persons	180	75	13,500
Secure accommodation for victims of political violence(10 days)	Persons/days	600	45	27,000
Medical assistance for victims of political violence	Lump sum			5,000
Legal assistance and documentation	Lump sum			<u>10,000</u>
<b>Subtotal</b>				<b>55,500</b>
<b><u>Medicines and Medical equipment</u></b>				
<b>laboratory equipment - 5 health centers and hospitals</b>				
gas fridge	fridge	5	1,500	7,500
microscope	microscope	5	815	4,075
centrifuges		5	652	3,260
rotator		5	350	1,750

<u>Description</u>	<u>Type of Unit</u>	<u>No of Units</u>	<u>Unit Cost US\$</u>	<u>Budget US\$</u>
shaker		5	233	1,165
Hematimeter		5	20	100
HIV test set	Set	3,500	3	10,500
RBR test set	Set	3,500	1	3,500
Generator Honda KW 2.8	Generator	5	1,000	5,000
<b>Subtotal</b>				<b>36,850</b>
<b>Medicines - 15 health centers and hospitals</b>				
Analgesics	center	15	115	1,725
Antibiotics	center	15	298	4,463
Vitamins and Minerals	center	15	115	1,725
Liquids	center	15	298	4,463
Diverse	center	15	115	1,725
<b>Subtotal</b>				<b>14,100</b>
<b>Medical equipment</b>				
Doppler	center	15	210	3,150
pen lights	center	15	14	210
Ophthalmoscope	center	15	252	3,780
hospital beds	beds	15	280	4,200
Serum hanger	3/center	45	20	900
bed sheets	12/center	180	5	900
bed sheets especial	12/center	180	5	900
pads 6/center	108	3	324	
Courtains	20/center	300	3	900
Courtains closed	20/center	300	3	900
tables center	15	87	1,305	
Thermometer	3/center	45	7	315
small Thermometer	30/center	450	1	360
Surgery instruments	center	15	1,312	19,680
Catheter	200/center	3,000	1	3,000
tape indicator	3/center	54	4	216
syringe	item	17,250	0	1,725
antiseptic solution	3 galones/center	54	13	702
Stitch	center	15	112	1,680
Masks	center	15	93	1,395
Sterilizer	center	15	872	13,080
Gas stove	center	15	87	1,305
Dressing material	center	15	581	8,715
Anastesie local	center	15	35	525
special lamp	center	15	143	2,145
special pots	25/center	375	1	300
Diverse	center	15	580	8,700
<b>Subtotal</b>				<b>81,312</b>
<b>Direct Program Related Costs</b>				
<b>Personnel</b>				
Project manager (Haiti Med, FPH, SCH, FNGA)	month	48	500	24,000
Logistician (Haiti Med, FPH, SCH, FNGA)	month	48	200	9,600
<b>Communication</b>				
Radio (walkie talkie)	unit	10	150	1,500
Telephone fees	month	120	30	3,600

<u>Description</u>	<u>Type of Unit</u>	<u>No of Units</u>	<u>Unit Cost US\$</u>	<u>Budget US\$</u>
<b>Transport</b>				
Fees for Haiti Med	Day	30	25	750
Fees for FPH	Day	30	25	750
Fees for SCH	Day	30	25	750
Fees for FNGA	Day	30	25	750
<b>Sub Total</b>				<b>41,700</b>
<b><u>Post Crisis Phase</u></b>				
<b>Seeds and tools and animals</b>				
FOPLAB	Family	1,500	15	22,500
Service Chretien	Family	1,500	15	22,500
FNGA	Family	750	15	11,250
<b>Subtotal</b>				<b>56,250</b>
<b>Training - Conflict resolution</b>				
FOPLAB (South East)	Seminar	48	250	12,000
ALEG (Artibonite)	Seminar	40	250	10,000
<b>Subtotal</b>				<b>22,000</b>
<b>Rehabilitation</b>				
Income generating initiatives (FNGA)	individuals	150	150	22,500
<b>Subtotal</b>				<b>22,500</b>
<b><u>Direct Programme Related Costs</u></b>				
<b>Personnel Cost</b>				
Project Manager (FOPLAB)	Month	12	500	6,000
Logistician (FOPLAB)	Month	12	200	2,400
Training Animators (conflict resolution)	M/day	40	150	6,000
Animator (FOPLAB)	Month	48	300	14,400
Animator (ALEG)	Month	48	300	14,400
<b>Communication</b>				
Radio (Walkie Talkie)	Unit	4	150	600
Telephone fees	Cards	24	30	720
<b>Transport</b>				
Fees for FNGA	Days	60	25	1,500
Fees for FOPLAB	Days	60	25	1,500
Fees for ALEG	Days	60	25	1,500
<b>Sub Total</b>				<b>49,020</b>
<b>TOTAL DIRECT ASSISTANCE</b>				<b><u>379,232</u></b>
<b>TRANSPORT, WAREHOUSING &amp; HANDLING</b>				
<b>Transport</b>				
Hire/ Rental of Vehicles	days	8	150	1,200
Fuel		8	50	400
International Travel-Dominican Republic	days	8	200	1,600
<b>Warehousing</b>				
Rental of warehouse	month	1	800	800
Wages for Security/ Guards	month	48	100	4,800
<b>Handling</b>				
Wages for labourers	month	48	50	2,400
<b>TOTAL TRANSPORT, WAREHOUSING &amp; HANDLING</b>				<b>11,200</b>

<u>Description</u>	<u>Type of Unit</u>	<u>No of Units</u>	<u>Unit Cost US\$</u>	<u>Budget US\$</u>
<b>PERSONNEL, ADMINISTRATION, OPERATIONS &amp; SUPPORT</b>				
<b>Staff Salaries</b>				
Program Coordinator	month	12	1,200	14,400
Finance Manager 10%	month	1.20	4,000	4,800
Accountant	month	12	800	9,600
Consultants	M/day	30	150	4,500
<b>Staff Travel</b>				
Per Diems	Days	60	50	3,000
<b>Office Operations</b>				
Office rent				0
Office Utilities 10%	month	1.20	800	960
Office stationery 10%	month	1.20	1,000	1,200
<b>Communications</b>				
1 Computer and printer		1	2,000	2,000
Telephone and fax 10%	month	1.20	750	<u>900</u>
<b>TOTAL PERSONNEL, ADMIN &amp; SUPPORT</b>				<b>41,360</b>
<b>AUDIT &amp; MONITORING</b>				
Audit of ACT Funds	Lump sum			3,500
Monitoring & Evaluation	Lump sum			<u>4,063</u>
<b>TOTAL AUDIT &amp; MONITORING</b>				<b>7,563</b>
<b>TOTAL ESTIMATED EXPENDITURE</b>				<b>439,355</b>
Less Income				<u>84,700</u>
<b>BALANCE REQUESTED FROM ACT ALLIANCE</b>				<b>354,655</b>

## **REVIEW - CAPACITY ASSESSMENT**

A mid term review of the implementation of the current appeal is foreseen. The aim of this review is to provide inputs to the implementing members and partners on the implementation process as well as to complete a capacity assessment of ACT members and partners that will be the basis for an ACT capacity building program in Haiti.

This review will complement the efforts started by the ACT members in Haiti during 2003 to assess their capacities and their partners capacities in responding to emergency situations. Christian Aid, with the support of an external consultant, assessed the capacities of some of their partners and provided some recommendations to the ACT forum in Haiti. LWF, with the support of an external consultant, did a mapping of the disaster response capacities in the country.

Due to the highly vulnerable situation of the country, ACT members in Haiti have increased their co-ordination efforts and agreed to finalise the capacity assessment process to initiate a co-ordinated capacity building program for themselves and their partners.

**BUDGET**

**U\$ 30,0000**