

**Quarterly Project Progress Report from UNDP Armenia**

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| Basic information | | | | | | | |
| Project Title: | Strengthening Security, Stability and Resilience of the Bordering Communities in Vayots Dzor, Gegharkunik and Syunik Regions. | | | | | | |
| Implementing organisation/s: | **UNDP and UNICEF** | | | | | | |
| Country/ies –region/s covered | Republic Armenia: Vayots Dzor, Gegharkunik and Syunik Regions | | | | | | |
| Timeframe of the project  From mm/yy to mm/yy | July-September, 2020 | | **Quarter number** | | | Three-Month Project | |
| Original Total Budget for FY (£): | GBP 278,424 | **Original Budget for current quarter (£):** | | GBP 278,424 | **Actual amount spent in current quarter (£):** | | GBP269,071[[1]](#footnote-2) |

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| 1. **1. Progress in Project Implementation** |
| **Context update** |
| For Armenia the Nagorno Karabakh (NK) conflict remains a major source of tension and instability, which risks spilling over beyond the region. Residents of regions adjacent to conflict zones routinely experience various forms of deprivations. These range from exposure to intermittent military/border guards’ clashes, severe lack of livelihood opportunities, denied access to basic public services and social protection.  The Azerbaijani side has undertaken an attack in the direction of Nagorno Karabakh on September 27th, 2020. On October 1, the Azerbaijani armed forces used artillery in the direction of Shatvan village of the Gegharkunik region of the Republic of Armenia, as well as launched a missile attack from a combat UAVs at Mets Masrik settlement.  COVID-19 created new vulnerabilities in the Armenian society and amplified existing ones. For the border and conflict-affected regions, it amplified lingering vulnerabilities such as weak governance, socioeconomic vulnerabilities (among which is lack of access to services) and exclusion of women and youth (who, in turn are important actors of peace building). All this, combined with absence of response mechanisms to disaster risks and shocks, undermines the community resilience and directly contributes to instability and violence in conflict affected communities and hinders prospects for long-lasting peace.  Since the onset of the armed conflict in Nagorno Karabakh Armenia has witnessed a steady rise in the number of COVID-19 infections which now stands at 23% fuelled by the movement of people in and out of the country and lack of observance of preventative measures at gatherings and aid drives.As of October 8thArmenia confirmed 718 new cases of COVID-19 in a 24-hour period, bringing the national tally of active cases to7,855 a with 45,312 recoveries and 1004 deaths to date.  The Project represents a joint UNDP-UNICEF effort to advance peace and stability in the bordering communities of Gegharkunik, Vayots Dzor and Syunik regions (directly affected by the 30-year Nagorno Karabakh conflict), by targeting the root causes of instability and violence, and weathering the impacts of COVID-19. |
| **Key achievements of the Project** |
| Within short period of time (almost 3 months) the Project was able to introduce, test and conduct large-scope studies in Gegharkunik, Syunik and Vayots Dzor regions in the fields of socioeconomic impact assessment of COVID-19 in the bordering target regions, Local Level Risk Management as well as to build capacities among CSOs and local government officials on future-resilient policies through series of actions towards future scenario design and participatory mapping of early signals of economic and security risks. The Project has also initiated establishment ofLLRM community-based task forceintroducing institutional change at the ground in the field of LLRM. At the same time, the Project has built capacities of the local counterparts on further deployment of the provided research tools and mechanisms. The Project was also keen to address innovative skims associated with the introduction of on-line tools and platforms which are of extreme need during COVID-19 crises and are also seen among post-recovery response measures.  The planned results were exceeded – both in terms of reach and coverage for capacity building and awareness raising interventions. Importantly, the capacity building interventions by UNICEF, both on provision of social services during emergencies and on disaster risk management, resulted in building professional networks for further sustainable cooperation between social service workforce (SSW) professionals in the borderline communities of Gegharkunik, Syunik and Vayots Dzor. The capacity of these professionals to provide mental health and Psychosocial support (MHPSS) to the population was enhanced and became vitally important for the population of the borderline communities who together with the spontaneous arrivals are affected by the armed conflict in Nagorno Karabakh. The assessments were completed and provide valuable data for further planning and implementation of interventions aimed at strengthening security, stability and resilience in the target regions. All the materials (including video and PSA materials) developed in the course of the project are and will be used by the CSO partners beyond the scope of the project, thus multiplying the effect and ensuring coverage of more beneficiaries in other borderline communities and regions of Armenia. |

1. **Detailed Assessment of Progress against Outcome and Outputs during reporting period**

Update the sections next to “Achieved” with progress made quarterly against the relevant milestones.

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| **Results Framework: Outcome-level** | | | | | | |
| **Strategic Focus 1:** Supporting diplomatic efforts to reduce outbreaks of violence and build space for dialogue including by maintaining international engagement on regional security issues and help prepare for long-term political resolutions. | | | | | | |
| **Outcome** | | **Assumptions** | | | | |
| **Outcome (Result) 1: Improved governance on national, regional and local levels through facilitated evidence-based decision making** | | a) Availability of data significantly improves Government decision-making and response to COVDI-19 thus improving Government performance.  a) Improved government performance contributes to internal peace, stability and government legitimacy raising the efficiency of the measures against COVID-19.  *Review these assumptions quarterly; are they still valid?* | | | | |
| **4** | **Baseline** (of the outcome at the beginning of Year 1) | **July-September, 2020 (Quarter 2)** | | | | |
|  | 0 |  |  |  |  | |
| ***Achieved progress***  *Update these rows quarterly*  *Describe progress made each quarter against planned milestones or why you did not meet stated milestones. Results must be disaggregated by gender.* |  |  | | | |
| **Source of evidence** | Quick public survey in a representative sample of target communities.  *Provide evidence of these changes quarterly* | | | | |
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| **Results Framework: Output-level** | | | | | | |
| **Outcome / Result.*Improved governance on national, regional and local level through facilitated evidence-based decision-making.*** | | | | | | |
| **Outputs**  **Output 1.1.: Data is available to inform decision-making on national, regional and local level through assessments and analysis initiated by UNDP and UNICEF in the target regions with strong integration of security, resilience, gender and youth dimensions.** | | | **Assumptions**  Availability of data significantly improves Government decision-making and response to COVDI-19 thus improving Government performance.  a) Improved government performance contributes to internal peace, stability and government legitimacy raising the efficiency of the measures against COVID-19. | | | |
| **Output 1.1.: Data is available to inform decision-making on national, regional and local level through assessments initiated by UNDP and UNICEF in the target regions with strong integration of security, resilience, gender and youth dimensions.** | | | *Assumptions are valid.* | | | |
| **Indicators** | **Baseline** (of output at the beginning of Year 1) | | **Milestone 1** | **July-September, 2020 (Quarter 2)** | | |
| **Indicator 1.1.1(UNDP)**  SEIA for three regions with deep analysis on the bordering communities finalized, reports developed with disaggregated data, dashboard launched | Pilot stage of SEIA completed | | -All the assessments are completed  -The results, recommendations are concluded in final reports, translated and transferred to the Government and Donor  -Presentations are prepared and made  -Data (gender disaggregated) visualization Dashboard is prepared | -SEIA for 3 regions in 9 consolidated communities and 62 settlements are conducted  -Recommendations are developed  -Translation from Armenian into English is ongoing  - Gender disaggregated visualization Dashboard is prepared | | |
| ***Achieved progress***  *Update these rows quarterly*  *Describe progress made each quarter against planned milestones or why you did not meet stated milestones. Results must be disaggregated by gender.* | | *What is your assessment of the direct results of the project in this quarter? Provide substantive qualitative and quantitative overview of the project’s implementation for the reporting period. Include observations on the performance and the achievement of each output (quantify where possible).* | Output is achieved, SEIA Report with policy recommendations is in place. | | |
| **Source of evidence** | Assessment report for three regions with policy recommendations | | | | | |
| **Indicator 1.1.2 (UNICEF)**  Rapid assessment of vulnerability conducted; gender and age disaggregated data available from the assessment | Not conducted | Assessment conducted, gender and age disaggregated vulnerability data analyzed for 3 regions, policy recommendations developed. | |  |  | Assessment conducted, gender and age disaggregated vulnerability data analysed for 3 regions, policy recommendations provided to the Government. |
| ***Achieved progress***  *Update these rows quarterly*  *Describe progress made each quarter against planned milestones or why you did not meet stated milestones. Results must be disaggregated by gender.* | *What is your assessment of the direct results of the project in this quarter? Provide substantive qualitative and quantitative overview of the project’s implementation for the reporting period. Include observations on the performance and the achievement of each output (quantify where possible).* | | Rapid assessment of vulnerability for 3 target regions is conducted, corresponding Report with policy recommendations is in place, gender and age disaggregated vulnerability data analyzed for 3 regions. | | |
|  | Assessment report for 3 regions with policy recommendations | | | | | |
| **Indicator 1.1.3 (UNDP, UNICEF)-**Joint summary report of COVID-19 impact assessment done by UNDP and UNICEF is prepared  A virtual presentation of the joint report is held | Not prepared | Joint report is prepared  Joint virtual presentation is held | |  | | |
| ***Achieved progress***  *Update these rows quarterly*  *Describe progress made each quarter against planned milestones or why you did not meet stated milestones. Results must be disaggregated by gender.* | *What is your assessment of the direct results of the project in this quarter? Provide substantive qualitative and quantitative overview of the project’s implementation for the reporting period. Include observations on the performance and the achievement of each output (quantify where possible).* | | Joint report is under preparation. Joint virtual presentation is pending and is planned for the end of October, 2020 due to the shortage of time (2.5 months) allocated for the data gatherig, inputting, alayases, report preparation and presentations of the results. | | |
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| **Indicator 1.1.4 (UNDP)-**Analysis is done, white paper with policy recommendations is prepared | Not conducted | Analysis is done, development scenarios developed in 2 consolidated communities  White paper with policy recommendations is prepared | |  | | |
| ***Achieved progress***  *Update these rows quarterly*  *Describe progress made each quarter against planned milestones or why you did not meet stated milestones. Results must be disaggregated by gender.* | *What is your assessment of the direct results of the project in this quarter? Provide substantive qualitative and quantitative overview of the project’s implementation for the reporting period. Include observations on the performance and the achievement of each output (quantify where possible).* | | Analysis is done, development scenarios are tailored for 2 communities: Sisian and Areni; White papers with  policy recommendations are prepared. | | |
|  | Community development scenarios, white paper with reocmmendations based on the analysis. | | | | | |
| **Indicator 1.1.5 (UNICEF)-**Comprehensive assessment of community-based support services conducted on quality, range and coverage, reflecting gender specificities | Not conducted | Methodology, tools and instruments developed, and pilot assessment conducted in one region. | |  | | |
| ***Achieved progress***  *Update these rows quarterly*  *Describe progress made each quarter against planned milestones or why you did not meet stated milestones. Results must be disaggregated by gender.* | *What is your assessment of the direct results of the project in this quarter? Provide substantive qualitative and quantitative overview of the project’s implementation for the reporting period. Include observations on the performance and the achievement of each output (quantify where possible).* | | Methodology, tools and instruments developed, pilot assessment of the quality, range and coverage of community-based services in Gegharkunik region has been conducted. | | |
|  | Assessment reporton the quality, range and coverage of community-based services | | | | | |

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| **Results Framework: Outcome-level (The Outcome level results framework will be revised based on the assessments and lessons learnt of short-term implementation phase)** | | | | |
| **Strategic Focus 2:*Working with governments, local and international partners and civil society to support the implementation of reforms, strengthen state (and non-state) institutions (including security actors) and improve conditions for civil society.*** | | | | |
| **Outcome 2: Increased resilience and socio-economic security of the bordering communities in Gegharkunik, Syunik and Vayots Dzor regions.** | | **Assumptions**  **a) Availability of data significantly improves Government decision-making and response to COVDI-19 thus improving Government performance.**  **b) Improved government performance contributes to internal peace, stability and government legitimacy raising the efficiency of the measures against COVID-19.**  **c) Economically integrated citizens are more watchful of Government responsiveness.**  **d) Socioeconomic security and disaster preparedness provide stability facilitating the normal functioning of state institutions and civil society.**  **e) Socioeconomic wellbeing and resilience to shocks of the communities directly contribute to sustaining peace and stability on the long run.**  **f) Socioeconomic inclusion of the women and youth enhances the constructive role that they can play in security and peace.**  **g) Accessibility of psychosocial support services for the population in need reduces violence, aggression, intolerance and social stigma – factors that create an environment for internal conflicts and pose risks in terms of community resilience and preparedness to emergency situations and external conflicts** | | |
| **Outcome 2: Increased resilience and socio-economic security of the bordering communities in Gegharkunik, Syunik and Vayots Dzor regions.** | | ***Assumptions are valid.*** | | |
| **Indicator** | **Baseline (of the outcome at the beginning of Year 1)** | **Milestone 1 (Quarter 1)** |  |
|  | 0 |  |  |
|  | ***Achieved progress***  *Update these rows quarterly*  *Describe progress made each quarter against planned milestones or why you did not meet stated milestones. Results must be disaggregated by gender.* | *What is your assessment of the direct results of the project in this quarter? Provide substantive qualitative and quantitative overview of the project’s implementation for the reporting period. Include observations on the performance and the achievement of each output (quantify where possible).* |  |
| **Source of evidence** | **Survey of the beneficiary communities.** | | |

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| **Results Framework: Output-level** | | | | | | | | | | | |
| **Outcome 2: Increased resilience and socio-economic security of the bordering communities in Gegharkunik, Syunik and Vayots Dzor regions.** | | | | | | | | | | | |
| **Outputs**  **Output 2.1 Disaster response mechanisms are established at the community and school levels.**  **Output 2.2 Professionals engaged in state-run and state-supported services for the most vulnerable children and families, as well as civil society organisations, are trained to provide quality services, providing mental health and psychosocial support and alternative care services in borderline communities.**  **Output 2.3 Alternative models designed towards improving public and social service delivery in the bordering communities of Syunik, Gegharkunik and Vayots Dzor.**  **Output 2.4 Enhanced capacities of the population in bordering areas, especially youth and women, for facilitated entry into the labor market through upskilling and reskilling initiatives.**  **Output 2.5 Increased economic stability of the target areas through income generation opportunities for the vulnerable groups, including youth and women.** | | **Assumptions**  **d) Socioeconomic security and disaster preparedness provide stability facilitating the normal functioning of state institutions and civil society.**  **e) Socioeconomic wellbeing and resilience to shocks of the communities directly contribute to sustaining peace and stability on the long run.**  **g) Accessibility of psychosocial support services for the population in need reduces violence, aggression, intolerance and social stigma – factors that create an environment for internal conflicts and pose risks in terms of community resilience and preparedness to emergency situations and external conflicts** | | | | | | | | | |
|  | | ***Review these assumptions quarterly; are they still valid?*** | | | | | | | | | |
| **Indicators** | **Baseline (of output at the beginning of Year 1)** | **Milestone 1**  **(Quarter 1)** | | | | | **Quarter 2** | | | | |
|  | **0** |  | | | | |  | |  | |  |
| ***Achieved progress***  ***Update these rows quarterly***  ***Describe progress made each quarter against planned milestones or why you did not meet stated milestones. Results must be disaggregated by gender.*** | ***What is your assessment of the direct results of the project in this quarter? Provide substantive qualitative and quantitative overview of the project’s implementation for the reporting period. Include observations on the performance and the achievement of each output (quantify where possible).*** | | | | |  | | | | |
| **Source of evidence** | ***Platform analytics*** | | | | | | | | | | |
| **Indicator 2.1.1 (UNDP)**  Gender based disaster risk management assessment of 21 selected most vulnerable settlements conducted; reports prepared with gender and age disaggregated data | Not conducted | | 21 | |  | | | | | | |
| ***Achieved progress***  *Update these rows quarterly*  *Describe progress made each quarter against planned milestones or why you did not meet stated milestones. Results must be disaggregated by gender.* | | *What is your assessment of the direct results of the project in this quarter? Provide substantive qualitative and quantitative overview of the project’s implementation for the reporting period. Include observations on the performance and the achievement of each output (quantify where possible).* | | Gender based disaster risk management assessment of 21 selected most vulnerable settlements representing 3 target regions conducted; reports prepared. | | | | | | |
|  | Assessment report for 3 regions with policy recommendations | | | | | | | | | | |
| **Indicator 2.1.2 (UNICEF)**  Number of schools with School Disaster Management Plans in place, including response to the COVID-19 pandemic. | 0 | | 30 | |  | | | | | | |
| ***Achieved progress***  ***Update these rows quarterly***  ***Describe progress made each quarter against planned milestones or why you did not meet stated milestones. Results must be disaggregated by gender.*** | | ***What is your assessment of the direct results of the project in this quarter? Provide substantive qualitative and quantitative overview of the project’s implementation for the reporting period. Include observations on the performance and the achievement of each output (quantify where possible).*** | | School Disaster Management Plans for 15schools are in place, 30 schoolsprepared for school reopening by equipping with COVID-19 Response supplies and are functioning according to Government’s COVID-19 guideline for schools. | | | | | | |
|  | **School Disaster Risk Management Plans** | | | | | | | | | | |
|  | **Assessment report*s*** | | | | | | | | | | |
| **Indicator 2.2.1 (UNICEF)**   1. Gender responsive and age appropriate materials, tools and instruments with focus on provision of MHPSS in the context of COVID-19 crisis are developed for professionals. 2. Number of professionals trained. | 1. Not developed 2. 0 3. 0 | | | a) Developed  b) 90  c) 0 | |  | | | | | |
| ***Achieved progress***  ***Update these rows quarterly***  ***Describe progress made each quarter against planned milestones or why you did not meet stated milestones. Results must be disaggregated by gender.*** | | | ***What is your assessment of the direct results of the project in this quarter? Provide substantive qualitative and quantitative overview of the project’s implementation for the reporting period. Include observations on the performance and the achievement of each output (quantify where possible).*** | | Gender responsive and age appropriate materials, tools and instruments with focus on provision of MHPSS in the context of COVID-19 crisis were developed for professionals.  175professionals received capacity building interventions. | | | | | |
| Materials, tools and instruments | | | | | | | | | | |
| **Indicator 2.2.2 (UNICEF)**  Number of calls received through helpline. | 0 | | | 200 | |  | |  | |  | |
| ***Achieved progress***  *Update these rows quarterly*  *Describe progress made each quarter against planned milestones or why you did not meet stated milestones. Results must be disaggregated by gender.* | | | *What is your assessment of the direct results of the project in this quarter? Provide substantive qualitative and quantitative overview of the project’s implementation for the reporting period. Include observations on the performance and the achievement of each output (quantify where possible).* | | 158 calls received by the helpline; 100 calls received by AASW mentors on their phone numbers. | | | | | |
| Awareness raising and training materials, sign-up sheets, implementation reports, evaluation by the professionals trained, photos | | | | | | | | | | |
| **Indicator 2.2.3 (UNICEF)**  Number of parents with raised awareness and training in emergency foster care | 10 | | | 30 parents with raised awareness | |  | | | | | |
| ***Achieved progress***  ***Update these rows quarterly***  ***Describe progress made each quarter against planned milestones or why you did not meet stated milestones. Results must be disaggregated by gender.*** | | | ***What is your assessment of the direct results of the project in this quarter? Provide substantive qualitative and quantitative overview of the project’s implementation for the reporting period. Include observations on the performance and the achievement of each output (quantify where possible).*** | | 415parents/guardians with raised awareness on emergency foster care, how to register and what the responsibilities are | | | | | |
| Awareness raising and training materials, sign-up sheets, implementation reports, photos | | | | | | | | | | |
| Project records, expert study and report | | | | | | | | | | |
|  | Project records, beneficiary reports | | | | | | | | | | |

1. **Progress Against Project Activities**

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| **Output Number** | **Activity** | **Progress and modifications** | **Progress** | **Source of evidence** | **Actual expenditure** |
| *Provide update on activities, including observations on the process and results (please quantify where possible and disaggregated by gender).*  *Have you implemented everything as planned (at the end of last quarter), and if not, explain the reason.*  *Specify if there were any changes in relation to initial plan (number, duration and frequency of activities, planned budget and actual expenditure).* | *Mark whether the activity is* ***completed****,* ***in progress,*** *or* ***Notcompleted*** | *For example, reports, interviews, social media, analytical data, newspaper clips, quotes etc.* | *This should match the Quarterly Financial Report.* |
| **Output 1.1.: Data is available to inform decision-making on national, regional and local level through assessments and analysis initiated by UNDP and UNICEF in the target regions with strong integration of security, resilience, gender and youth dimensions.** | **Activity 1.1.1 (UNDP)** Socioeconomic impact assessment of COVID-19 in the bordering communities of Gegharkunik, Syunik and Vayots Dzor regions. | * Socio-economic impact assessment-Local Level Risk Management (SEIA-LLRM) joint methodology, questioner and data collection tools are developed, refined and piloted in target 14 settlements * Economic impact assessment of COVID-19 for the 62 settlements of the 9 consolidated communities is finalized * Development of a WEB-based software administrative combined tool for Local Level Risk Assessment and SEIA module with query and collected data graphic visualization is finalized | Completed | Reports, interviews, analytical data, on-line survey instruments. | **46,043.00 GBP** |
| Activity 1.1.2 **(UNICEF)**Rapid assessment of vulnerability of families/households to the socio-economic impact of COVID-19 analyzed for Syunik, Gegharkunik and Vayots Dzor regions | Assessment of aggravated vulnerabilities as a result of the COVID-19 crises in a representative sample from three target regions was completed. Socioeconomic consequences of the pandemic and management measures were analysed against the socio-demographic characteristics of the families. | Completed | Report | **4,495.27 GBP** |
| **Activity 1.1.3 (UNDP, UNICEF)**Prepare a joint summary report and virtual presentation of main findings and recommendations of the assessments conducted by UNDP and UNICEF | Development of the summary report will be completed upon presentation and validation of findings with the key stakeholders. In the current situation it is not possible as both the stakeholders are not available, and a presentation of the study results may be sensitive. | In progress | Summary report | **833,00.00 GBP** |
| **Activity 1.1.4 (UNDP**) Analysis of development trends under COVID-19 and design of development scenarios through scenario building exercise in 2 consolidated communities of Gegharkunik, Vayots Dzor and Syunik. | * Areni and Sisian were identified as the most appropriate for the pilot study. * Data gathering to map the identified comminutes is finalized (qualitative methods of data gathering were applied: focus groups with target groups, interviews with LG, youth, entrepreneurs and other stakeholders were conducted during the visits to the communities) * The initial results and data were presented to selected group of experts for validation and further ideation. * Works aimed at visualization of the results into a visual future map of Sisianand Areni are finalized * The data is being processed to be articulated into a White Paper. * White paper on Future scenario development for Areni and Sisian is developed | Completed | White Papers are in place, analytical data, infographics | **56,731.00 GBP** |
| **Activity 1.1.5 (UNICEF)**Comprehensive assessment of the quality, range and coverage of regional and community-based support services. | Methodology, tools and instruments were developed for a comprehensive assessment of the quality, range and coverage of regional and community-based support services and their capacity to respond to the needs during the COVID-19 situation. The assessments were piloted in Gegharkunik region taking all precautions of COVID-19 pandemic into consideration. The study analyzed existing mechanisms for provision of services through state-run institutions and mechanisms of delegation of those services to civil society organisations, as well as into the quality, range and coverage of those services to identify the gaps in accessibility and effectiveness of the services for the most vulnerable population in need - families with children in difficult life circumstances. The findings will be used for advocacy with the national and local government and in planning of interventions aiming at enhancement of the community-based services in Phase II. | Completed | Report | **18,204.82 GBP** |
| **Output 2.1 Disaster response mechanisms are established on the community level and in schools.** | **Activity 2.1.1 (UNDP)** Ggender-sensitive Local level Risk Management (LLRM) methodology will be applied to comprehensively assess disaster (including conflict-related) risks in the target bordering communities. | * LLRM based qualitative assessment methodology to complement the SEIA survey in the pilot 21 communities is in place * The Toolbox for LLRM qualitative survey is aligned to complement the SEIA survey * Training for the representatives of 21 settlements including community center representatives conducted * LLRM community-based task force is established. | Completed | Reports, interviews, analytical data, on-line survey instruments. | **37,628.00 GBP** |
| **Activity 2.1.2 (UNICEF):** The School Disaster Risk Management Methodology will be applied to assess and develop the crisis management capacities in the schools of borderline communities | The following 30 schools were selected as targets of the project: Shaghat, Kajaran No. 1, Kajaran No. 2, Geghi, Agarak, Chiva, Elpin, Gomk, Martiros, Sers, Bardzruni, Rind, Areni, Khachik, Ttujur, Vahan, Artanish, Jil, Sotk, Kutakan, Geghamasar, Areguni  secondary schools and Mutsk, Salvard, Arevis, Lernadzor, Karchevan, Gnishik, Chambarak N1 basic schools.  "A Guide to Basic Actions for the Prevention and Control of COVID-19 in Schools",  “Standard Procedures for the Prevention and Control of School COVID-19”,   COVID-19 Prevention and Control Basic Action Guidelines, Standard Operating Procedures, School DRR Plan Development Courses, as well as training agendas.  The training packages, agenda of the COVID-19 prevention guidelines in schools have been developed, the necessary documents for the implementation of the courses have been presented to the participating school headmasters in a zoom meeting prior to the school interventions. The guideline in the standard practice procedure pays special attention to gender issues as well as adult health issues.  15 two-day interactive School Disaster Management and Covid-19 Response Planning seminars were conducted in Chiva, Shaghat, Mutsk, Gomk, Martiros, Sers, Bardzruni, Agarak, Geghi, Kajaran No. 1, Kajaran No. 2 secondary schools and Salvard, Arevis, Karchjan, Lernadzor basic schools.  The trainings highlighted the importance of adolescent participation in solving school problems, establishing a school DRM  board, collecting general information about the school, assessing hazards, vulnerability and capacities, building visual examination, evacuation plans, prevention and control of COVID-19 in schools, as well as the standard operating procedures for COVID-19. Four persons from each school (in total 63 school headmasters and teachers - 31 female and 32 male) participated in the training. The participants:  •Obtained detailed information and practiced how to organize the school disaster risk reduction process to ensure the safety of all school students and staff from disasters threatening their school and community. They incorporated COVID-19 response into their disaster management plans. All 15 schools developed their School Disaster Management plans.  •Effective teaching of safety and resilience in the classroomsand their practical skills in DRM and COVID-19 response were strengthened. .  As a result of the trainings and support the school administrations and teachers prioritize more disaster risk management as they received thorough knowledge and skills about disaster risk reduction, hazard, vulnerability, risks, including COVID-19 pandemic.  All 30 schools, in order to meet the Commandant Office requirements and guidelines for school reopening,  received personal protective equipment: disposable masks, rubber gloves, wet alcohol-based wipes, alco-sprays and cloths (for cleaning the area), wet wipes (with alcohol base), non-contact thermometers, protective uniforms, cleaning sprayers (16 litres), chlorine tablets, protecting face shields, shoes covers, alcohol enriched wet napkins with alcohol base.  Monitoring visits were carried out to Chiva, Sers, Bardzruni, Arevis and  Salvard schools and the following achievements were identified:   * the involved schools have updated and comprehensive School Disaster Risk Management and COVID-19  Response plans and  capacity to implement the actions identified in the plan, * the schools received COVID-19 response tools for preparing school re-opening on September 15, 2020, * Regional/Marz Education and Territorial Administration Departments in Syunik and Vayots Dzor Marzes highly appreciate the provided capacity development and support to remote bordering schools. * the Syunik Regional Administration is planning to allocate resources for constructing Arevis Basic school as the school administration as a result of the training found out that the current facility cannot be utilized as a school premise due to its unsafe conditions, * the schools need further capacity development in first aid skills and how to provide psychosocial support to students. | Completed | Project implementation report; 15 School Disaster Management and COVID-19 Response Plans. Sign-up sheet of 30 schools received COVID-19 essential supplies to prepare for school re-opening. | **14,661.18 GBP** |
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| **Output 2.2: Professionals engaged in state-run and state-supported services for the most vulnerable children and families, as well as civil society organizations, are trained to provide quality services, providing mental health and psychosocial support and alternative care services in borderline communities.** | **Activity 2.2.1(UNICEF)** Tools/guidelines/capacity building materials developed and piloted during the capacity building for professionals engaged in state-run or state-supported organizations delivering mental health and psychosocial support services to the population of the target borderline communities. | To accomplish the planned activities, UNICEF signed contract with four CSOs to develop tools, guidance, capacity building materials and to implement training, coaching, and mentoring activities in selected communities of the target regions.  Throughout the reporting period (July 1/2020 to September 30/2020) the following activities were successfully implemented by the CSOs with the following results:   * 8 syllabuses for e-learning training courses and 5 info sheets (tips) have been developed to introduce how to work with children in emergencies. * A comprehensive manual has been developed for SSW on psychological first aid for children and techniques of group work with children and their families, including tools and instruments for group activities on mental health and psychosocial support * 3 video lectures have been developed to sensitize SSW) on developmental, personal and educational needs of children, including in emergency situations. * A methodical guide and training module on emergency response, toolkit on social service resources and a referral protocol have been developed. * 7 videos and 3 booklets and flyers have been developed for parents, children and adolescents targeting COVID-19 related stress and anxiety management, self-support and child support needs with brief educational content, situational examples, illustrations and other easy-to-grasp and use content. The materials are intended to support the work of SSW professionals and peer support volunteers with parents, children and adolescents respectively. * 86 SSW professionals from the three targeted regions have been trained to provide psycho-social support to families and children in the context of COVID-19. * According to the feedback survey results, 86,4% of participants consider training sessions useful for their professional activity. * 72 teachers from the border communities of Gegharkunik, Syunik and Vayots Dzor regions were trained to be able to identify the needs and problems of the children during emergency situations and provide psychological first aid. * 103 SSW professionals participated in 45 supervision sessions, and 50 professionals participated in 45 sessions of Balint group sessions, and 20 sessions of individual counselling were provided to professionals. * From the perspective of enhancing the efficiency of their professional competences 91% of the SSWs that filled the feedback surveys rate the Balint group sessions in the range of 8-10 where 1 being not productive and 10 being very productive). 95,4% of the SSWs rate the Supervision sessions in the range of 7-10. And finally, 86,4% of SSWs assessed the effectiveness of Individual counselling, from the perspective of enhancing the efficiency of their professional competences in the range of 9-10. * 99 SSW professionals (instead of the planned 90) have been trained on crisis intervention and inter-sectoral collaboration in the situation of COVID-19.   27 SSW specialists from 9 border communities (instead of planned 5) have received offline and online coaching sessions as a follow-up practical support to the training to enable them to adequately respond to the needs of their clients in times of crisis. | Completed and exceeded the initial plan. | - Reports from the IPs    - Programmatic visits and direct observations, photos    - The course syllabuses, info sheets, videos and the manuals, booklets and flyers approved by the donor and published online and/or printed    - The sign-up sheets, screenshots of the training participants and results of the feedback surveys completed by the participants | **12,950 GBP** |
| **Activity 2.2.2 (UNICEF)** Establishment of a helpline to strengthen delivery of mental health and psychosocial support to the most vulnerable population in borderline communities. | With the aim of providing emergency support through individual coaching/supervision to social workers a helpline (+ 374 55 086111) was established under the auspices of the Armenian Association of Social Workers (AASW). AASW team developed a leaflet with all contact information included and shared through the AASW FB page, emails as well as during offline events (training and meetings) to increase awareness about the helpline among the professionals.  During the reporting period 158 calls were received to the helpline number and relevant consultations provided. Around 100 calls were received on the mobile numbers of the mentors and relevant consultations provided. As AASW and UNICEF continue to promote the helpline, the process will be continue, and the number of the calls will increase as the helpline will be more known among the professionals.  The following main issues were addressedduring the calls of the helpline:   * Complex cases: how to handle, how to refer, whom to refer, how to follow-up; who is in charge, etc. * Emergency Foster Care: who can be a foster parent, how to proceed with the process, what are the criteria for becoming a foster family; * Training: during many of the calls beneficiaries raised the need for additional training and asked about training opportunities/available courses. * State support: some of the calls referred to the procedures and criteria for the involvement in state social services. * Membership to AASW: Some social workers expressed their interest to become members of AASW and receive continued supervision and tailored support. | Completed | Report from the IP including the helpline info-sheet /  The helpline leaflet posted on IPs official FB page. | **13,500 GBP** |
| **Activity 2.2.3 (UNICEF)** Recruitment and training of foster families for emergency alternative care arrangements. | AASW also worked onhelping children at risk in the target regions to ensure that they will grow up in a loving, safe family environment, by establishing a network of emergency foster care families.  The contracted CSO initially planned to reach out to 50 potential foster parents from 5 border communities. However, throughout the reporting period overall 415 potential foster families were reached from 22 communities. Within the reporting period 14 families expressed their willingness to become a foster family. The PSA on emergency foster care was produced to widen the scope of awareness raising. The PSA can be used to promote emergency foster care in all regions of the country.  Media coverage on emergency foster care was ensured in the targeted regions through:   * Kyavar TV in Gegharqunik * Zangezur TV in Syunik * Vayots Dzor Local Government’s official page (no TV in place) and   AASW FB page  The Ministry of Labour and Social Affairs has expressed interest in promoting the PSA on behalf of the state as social ad through TV channels beyond the scope of the project. | Completed and exceeded the initial plan | Reports from the IPs  Programmatic visits and direct observations, photos  Posts in social media and TV reportages  The sign-up sheets from trainings  Data on the families that expressed their willingness to become a foster family | **23,698.42 GBP** |

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| Based on what you have achieved this quarter, does your Activity Based Budget/ABB and Action Plan (content, timeline etc.) need to be updated? | **Yes/No** |
| If YES, please, explain the modifications briefly here, and update the Action Plan and ABB accordingly and attach to the Quarterly report |  |

1. **Review Risk:**

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| **Risks** | **Impact** | **Likelihood** | **Mitigation plan** | **Post-mitigation Impact** | **Post-mitigation Likelihood** |
| * Increasing numbers of new COVID-19 cases may lead to another wave of imposing lockdown and mobility restrictions, which may affect all activities, requiring face-to-face interaction | High | High | All the communication, surveys and interviews will be transmitted to online modality. Focus groups will be replaced with additional key informant interviews and desk review | Low | High |
| * Crisis response by the Government will require additional budgetary allocations and state-run and state supported organisations may be underfunded, which might affect sustainability of the project results | Medium | Medium | Implementing parties will work with the respective ministries to secure minimum sustainability for the services to be targeted during the project | Low | Low |
| * The socioeconomic vulnerabilities overburden women, which may hinder their wide participation in the Project restricting the gender focus of the Project. which cannot be addressed within its scope and timeframe. | Medium | Low | Apply agile implementation modality through adjusting the communication and engagement tools, space and time, so that women engagement is facilitated. | Low | Low |
| * The gender focus of the Project may create adverse effects, challenging the gender norms in the target communities. | Medium | Low | The Project will use nuanced and considerate approach, as well as communication strategy while advancing the gender dimension of the project not to create sensitivities. | Low | Low |
| * Violent escalation of the conflict is in place, which will make it hard, if not impossible to ensure filed trips including M&E missions | High | High | The implementing agencies should follow the business continuity plan and the security advisory. | High | High |
| * Project may create high expectations in the communities,which cannot be addressed within its scope and timeframe | Medium | Medium | The Project will be clear in communicating the goals and the scope of support intended within the scope of the project, carefully choosing the messaging and wording for each target audience. | Low | Low |

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| 1. Value for money |
| Please demonstrate evidence as to how your project activities have demonstrated value-for-money? |
| UNDP and UNICEF have outsourced the implementation to well-known local companies and CSOs for provision of different types of services including data collection, analyses, assessments as well as attracted highly qualified national experts who proved to provide with timely and high-quality results as per the respective TORs based on the financial offers for the similar by scope and nature assignments in the local market. UNICEF partnered with the most prominent CSOs in the field, which were able to add their in-kind and professional contribution to the project and exceed the planned results at no additional cost. |
| Is your budget still appropriate? Are there any financial risks to report? If you didn’t spend what you had predicted, please provide a narrative on the reasons for this? Please also be ready to provide evidence of expenditure (receipts) to the Project Officer at the end of the quarter. If there are any reasons why this is not possible or any discrepancies to report, please do so here. |
| Budget is appropriate. The budget expenditure accounts to 269,071.00 GBP as of September 30, 2020, which is subject to further adjustment by UNDP in respect to final operational costs to be duly reflected by the end of 2020 as per the UNDP financial procedures. |

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| 1. **Monitoring, Evaluation and Learning (MEL)** |
| What activities have you carried out for **monitoring and evaluation** purposes (meetings, telephone calls, site visits, literature reviews, meetings with experts etc.), and how you ensure **gender** and **conflict-sensitivity** of your M&E (including updating project relevant conflict sensitivity issues)**?** Does your activities on M&E constitute at least 3-5% spend of your project this quarter? |
| In accordance with UNDP’s programming policies and procedures, the Project monitored through the following monitoring and evaluation:   * Progress data against Project’s results indicators was collected and analyzed to assess the progress of the project in achieving the agreed outputs. * Status Report on the Project implementation has been prepared and shared with the UK Embassy Project team * Specificrisks that may threaten achievement of the intended results have been monitored through UNDP Results-based management system * Field visit missions have been undertaken with preparation of filed mission reports to inform proper decision-making.   UNICEF conducted project monitoring in accordance with UNICEF policies and procedures, and applied continuous measurement and improvement of the programme performance when needed throughout the implementation, including verifying activities, assessing contribution to results, testing programme assumptions, tracking changing risks, and engaging stakeholders. Both the vulnerability assessment and community-based services assessment will serve as baselines for the project’s further interventions in the Project’s 2ndphase.  The following tools and methods for MEL have been applied within the Project implementation framework: focus groups discussions, group interviews, document review/ desk research; updated, localised and incorporated questionnaires/surveys; beneficiary feedbacks (to track and record changing perceptions and attitudes of project beneficiaries), assessments inclduing Vulnerability assessment; Comprehensive assessment of community-based services in three regions; Pre/Post training tests where applicable; Assessment of the crisis management capacities in schools according to School Disaster Risk Management Methodology; Document review (List of training participants; Helpline registry; School Disaster Risk Management Plans). |
| **What lessons have you identified this quarter and what have you done as a result of each lesson** |
| * Settlement-based CSOs as a rule have week capacities. It will be important to capacitate them further andwork with regional CSOs as well. * Project interventions at the community/settlement level raised expectations of the local communities to receive tangible activitiesbeyond conducted data gathering exercises and comprehensive needs assessments activities. * Data gathering for the implementation of a large-scope surveys/assessments required more time than initially envisaged, due to the difficulties in obtaining contact information of the required interviewees as per the Surveys set sampling and data quality requirements and due to the limitations imposed by the COVID-19 pandemic. * The mix of online and face-to-face capacity building interventions has proven to be effective. While online modality allowed to cover many beneficiaries in the situation of COVID-19, increase the value for money, and provided room for flexibility to accommodate the timing limitations and schedules of participants from regions, the face-to-face mode appeared to be more powerful in cases where not only the knowledge was being transferred, but the capacity building intervention also targeted practices and perceptions of participants and became more interactive. In the future a mix of these two approaches should be utilized. * Working with populations in regions, the timing of the activities needs to be properly planned taking into consideration the routine of rural settlements (e.g. crops collection time, when people will be available). Activities should not be planned for periods with heavy load of agricultural work, which limits people’s possibility to participate due to their work and other responsibilities, including for women as primary care takers of their children and other family members. * Many school administrators reported that they know about their safety and vulnerability issues, but the school disaster management tools help them to come up with specific safety issues and plans to address them helping them to fulfil their responsibility to ensure safety of children in educational institutions.   All the above-mentioned lessons learnt will be considered and addressed in the Project’s 2nd phase. |
| **If there have been any changes to the project (*outputs, activities, budgets, duration etc*) (or to the wider context) in the reporting period? Is the project still viable?** |
| No changes have been made to the Project in the reporting period, the Projectwas implemented as planned. |

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| 1. **Sustainability** |
| Participatory and needs-based approacheswere in place throughout 3-monthsProject implementation during the 1stphase and local ownership of the achieved results was built at regional and community levels. All the products created under the Project have either national/regional or local ownership ensuring their longevity and potential replication. The Project results contributed to the development of the Project’s 2ndphase as well as assure further longevity of the Project interventions after the Project lifecycle. The response strategies and decisions that will be based on the Project led assessments will be responsive to local needs providing long-lasting positive impacts on the resilience, security and wellbeing of the local population in remote and conflict-affected communities.  Overall, the Project's logic addresses issues of Peace, Security and Governance; Strengthening Resilience and Response to Crises including COVID-19 pandemic and helping the most vulnerable with a special focus on children, youth and women. The Project is also well aligned with the SDGs, particularly having greatest relevance to the SDG 3,5, 11, 16 and 17 for all the target regions.  The Project’s sustainability is ensured by its inclusiveness, participation and local ownership. It responded to some of the most urgent needs on national/regional and local levels with tools and approaches which have been tested on the ground and proved efficient and effective solutions. In addition, the strong partnership with the local and national government, harmonisation with national priorities are seen among strong factorscontributing to its sustainability.  Most of the Project’s results is aimed atbuilding resilience of communities and schools, and offer coping strategies under stress of shock of conflicts and disasters. Thus, in the case of the resent escalated armed conflict in Nagorno Karabakh, the Project’s results might contribute to the overall response and recovery strategy in the targetedthree bordering regions. |
| **Please give any other relevant information** |
| Considering the recent escalation of Azerbaijan over Nagorno Karabakh, the continuation of the Project logic and proposed practical steps at the level of communities and settlements of the three targeted regions is timely and responsive to the needs of the affected communities. |

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| 1. **Visibility and communications plan** |
| Please list and assess the visibility of your activities (including whether you have highlighted the UK support for the project); if you have chosen not to make activities visible, please explain why. |
| Project visibility activities are planned for the end of October, 2020 due to the shortage of time ( 2.5 months for the Project actual implementation) allocated for the update of the Survey/Studies/Assessments’ and preparation of reports with recommendations as well as their tailored presentations, coordinated by UNDP and UNICEF.  Throughout the course of the project, CSO partners of UNICEF have disseminated information on the project activities where needed through their social media channels, as agreed with, and approved by the UK Embassy.  The regional authority of Gegharkunik has disseminated press releases about the scope of the project activities in Gegharkunik.  Awareness raising activities on foster care were covered by local media (listed above in the report for Activity 2.2.3). Dissemination of the PSA is pending to be done through the Public TV of Armenia (it was suspended due to the limitations on the Public TV in relation to the declaredMartial law, but it will be resumed once the limitations are ceased). |
| Add any (web-)links to online (or other) reports referencing your project and provide further evidence of positive or negative feedback and coverage (including any social media, analytical data, newspaper clips, quotes from relevant stakeholders about the project and its benefits etc.) |
| NA at this stage of the Project implementation. |

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| **Signature** |  |
| **Name** |  |
| **Position** |  |
| **Date** |  |

***Now submit this form to your contact at the British Embassy to complete the final section:***

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| **Project Officer Comments** | | |
| Having read this report are you satisfied this is a fair and accurate description of progress to date? |  |
| Do you believe the project is still viable? |  |
| Please provide some feedback on visibility of activities conducted during reporting period |  |
| Comment on risks, including what steps you have taken to manage current or new risks; and whether you have escalated risks to the Programme manager |  |
| Is the plan for the next quarter realistic and appropriate? |  |
| \*If the answer to any of these questions is **No** please provide details: | | |

Signature…………………………………………………..

Name………………………………………………………..

Position……………………………………………………..

Post………………………………………………………….

Date…………………………………………………………..

*This form should now be saved on Sharepoint.*

1. Exact figure will be provided by UNDP by the end of2020 subject to final adjustments as per UNDP financial procedures. [↑](#footnote-ref-2)