**World Connect – Haiti Projects – Request for Proposals**

The World Connect Haiti Projects cycle is open though **December 31, 2016** or until available funding is exhausted. Applications will be reviewed on a rolling basis.

We invite applications for small projects, maximum 5,000 USD. Specifically, we’re looking to drive funding towards community-based, Haitian-led organizations working on response and recovery efforts in the aftermath of Hurricane Matthew, and organizations working with Haitians or Dominicans of Haitian ancestry who either voluntarily repatriated or were forcibly expelled from the Dominican Republic in response to changes in Dominican citizenship law following a recent Dominican Supreme Court ruling. We will also consider projects from community-based and civil society organizations in the Dominican Republic focused on advocacy and legal efforts in support of Haitian migrants and Dominicans of Haitian ancestry.

The Haiti Project cycle is an effort by World Connect to establish and support long-term partnerships for relief and development with local organizations in Haiti. All approved project partners will be eligible for a small amount of unrestricted, core operational support *in addition to* approved project funding, and will be eligible to participate in future World Connect project cycles. In Haiti, World Connect relies on Established Intermediary Partners (EIPs) to help us identify promising local organizations and leaders. EIPs should be listed in the application where necessary, but their role in project implementation and management (if any) should be supportive and secondary.

*\*Please submit a budget highlighting the expected grant and community contributions, cash and in-kind. Project Leaders are expected to keep track of spending and submit receipts at the end of the project.*

*\*\*Photos and videos are incredible tools to help us tell the story of your project. We understand the sensitive nature of the projects that might be proposed and will protect privacy and focus on agency in our storytelling.*

*\*\*\*For organizations working on response and recovery efforts in the aftermath of Hurricane Matthew, please refer to the Core Humanitarian Standard at the end of the application to guide your project development.*

***Applications should be sent to applications@worldconnect-us.org.***

**World Connect – Haiti Projects Grant Application**

***Application Instructions****: Please answer all questions and input your answers in the       areas. This document is locked for editing outside of the       areas.*

Project Title: The Southeast Clean Water Project (Post-Matthew Relief)

Department: Southeast Arrondissement: All 3 arrondissements in the Southeast

Commune: Jacmel, Bainet, Marigot Communal Section: All 50 "Sections Communales" in the Southeast region

Locate the community on a Google Map (as closely as you can) and share the link, or tell us exactly what to search for: https://www.google.com/maps/place/Sud-Est+Department,+Haiti/@18.2067163,-72.9291311,9z/data=!3m1!4b1!4m5!3m4!1s0x8eb9b09020946fc3:0xcbb8dfdb9ebfe609!8m2!3d18.2783598!4d-72.3547915

Community Organization

*\*World Connect defines a Community Organization as a local, in-country committee or group, formal or informal, that serves as the primary implementing partner on each project. We prioritize working with host-country national, community-based organizations, based in or working regularly in the primary project site.*

Name of Community Organization: Haiti Philanthropy, Inc. / Ayiti Filantropi (creole)

Total number of active members, volunteers, or employees:

Men 25+ 3

Women 25+ 2

Boys < 24

Girls < 24

What year was the Community Organization founded and what is its origin story?

In 2011, I started a small water project (The Southeast Clean Water Project) in the Southeat of Haiti. It entailed installing chlorinators, a device used for the disinfection of of community water sources, in order to protect rural residents of the region from waterborne illnesses. Through various partnerships with local stakeholders and community leaders, the project reached nearly 300,000 people in the region.

In 2013, I launched Haiti Philanthropy, Inc., a registered 501 (c)(3) non-profit entity in the United States, as the umbrella organization, funding arm and sister organization of the locally based Ayiti Filantropi organization and its grassroots efforts. In October 2013, the Southeast Clean Water Project was honored at the Clinton Global Initiative for its breakthrough cross-sector collaboration model and impact.

What is the mission of the organization?

Haiti Philanthopy's mission is to invest into people living in settings of extreme poverty through a direct partnership with them and pragmatic engagement with their local public agencies and institutions. As partners to the poor, we use our expertise and discernment to design conscious and spontaneous solutions and take context-specific purposive action to advance socio-economic development in the most impoverished areas of Haiti.

**What are the organization’s primary programs/activities?**

Haiti Philanthropy currently has 3 ongoing projects: 1) The Southeast Clean Water Project 2) The Chlorine Bank 3) The "Atelier de Commerce Equitable" (translation: The Fair Business Workshop).

1) The Southeast Clean Water project entails installing chlorinators and other similar disinfection technology in order to protect the population from waterborne illnesses, notably cholera. Furthermore, this project entails building water infrastructure in impoverished communities. For example, in 2015, in a partnership with the La Colombe Coffee company, we built a 30,000 gallon rainwater harvesting reservoir in the community of Anse-A-Pitre in the Southeast region. This is the first and only reservoir of this sort in the region. This newly built reservoir provides water for community and helps farmers increase their coffee output.

2) The Chlorine Bank - In February 2016, Haiti Philanthropy, Inc. launched a chlorine distribution center in the Southeast of Haiti. The ambitious project, known as the “chlorine bank”, aims at increasing access to chlorine tablets in the region. More precisely, the chlorine bank purchases chlorine in bulk from American vendors, then re-sells it at a 50% subsidized rate to the local community water agencies and water committees who manage chlorinators and other water purification infrasturcture in the region. The funds are then used to re-purchase chlorine in bulk.

This is an ambitious project and an attempt to build momentum for a sustainable water treatment solution. However, it must be noted that efforts to have communities pay for water supply are nascent and contentious, and without a system for cost-recovery and accountability of responsibilities, it will be a challenge for the clean water systems to function sustainably and reliably.

There is currently significant tension in the Southeast about paying for water, and there is an expectation among the population that water (including water treatment) should be free. A system to purchase, transport, and distribute chlorine tablets to the Chlorinators – that is sensitive to the local

cultural context – is needed to ensure Chlorinator sustainability.

The policy goal of the chlorine bank is to effectively contain and eliminate the cholera epidemic by making chlorine available to local hospitals, water agencies in the region and the communities that have received a chlorinator. The chlorine bank imports chlorine tablets in bulk (purchasing in bulk is cheaper). Then, the bank distributes makes the chlorine tablets available to different stakeholders at a 50% subsidized rate. The leftover funds are re-invested into the bank to purchase additional chlorine to further the clean water sustainability goals of the communities. Clean water and other hygiene best practices can help improve health outcomes in the Southeast of Haiti.

3) The Atelier de Commerce Equitable (ACE) (The Equitable Commerce Workshop) is a startup vendor of common food, beverages and other locally made products to local area hotels and restaurateurs. Our vending service offers a huge variety of products that allows local area hotels, restaurants and small and medium enterprises to efficiently acquire and stock the products needed to serve their clientele. We aim to be a one-stop shop for restaurateurs and other actors in the hospitality industry, from taking inventory, to delivering and stocking their products so that they do not have to think about it.

A.C.E. aims to transform the vendor-client relationship by taking full advantage of available technologies to digitize the interaction between customer and vendor by allowing local area hotels and restaurants to place their orders online and by telephone.

The main goal of this project is to leverage social entrepreneurship to create local jobs and re-invest the benefits into the various water projects that we undertake. Some of the funds are also used to subsidize school fees for children in the Southeast region.

The informal economy in rural areas of Haiti is crucial to economic growth. A.C.E. has employed 3 local employees thus far and aims to create more local jobs.

Is the organization legally registered in Haiti or elsewhere?  Yes  No

*If yes, please provide its registration information. If no, please explain why registration is not necessary.*

Haiti Philanthropy, Inc. is a registered 501c3 in the United States. In Haiti, its official status is pending at the Ministry of External Cooperation (3 years now).

Does the organization have an elected governing body?  Yes  No

*If no, please describe how the organization makes decisions.*

All projects are conceived at the local level after meetings between by the team in Haiti. During the meetings, recommendations from the local communities in which we serve are taken into consideration based on merit, needs and funding.

At the organizational level, the staff makes its decisions based on consensus and voting. However, when an objection is raised, we have a special provision that may be triggered. This decision-making procedure is commonly referred as "negative consensus". In short, if a consensus is reached that is contrary to the decision reached, the decision may be annulled and other alternatives are put forward.

Overall, the consensus of local staffers and local stakehodlers is the the predominant driver of the decision making procedure of the organization at the local level.

Do women hold 50% or more of leadership positions?  Yes  No

*Please describe the number and types of positions held by women.*

Haiti Philanthropy has 5 employees. 3 men and 2 women. We are aiming for gender parity, but we are not there yet.

Does the organization have a bank account that can receive international wire transfers?

Yes  No

Is the organization affiliated or working with government at any level?  Yes  No

*If yes, please describe. If no, why?*

We are mindful that NGOs can often undermine the mandate of government to serve the needs of its population. As such, we certainly believe that there is an inherent responsibility for philanthropic organizations to be transparent and coordinate efforts with local government agencies. However, it does not mean that we must follow their lead in the course of implementing our projects.

Philanthropy is not government, and we would be forfeiting our main advantage if we get too intimate with government. In a recent piece, Chester Finn of the Fordham Foundation echoed this sentiment when he said that government and philanthropy should cherish their differences. Mr. Finn went on to say that our greatest asset as philanthropists is our independence, the singular ability to do things that government cannot do. Occasionally that means testing something that, if successful, government may then take on.

At Haiti Philanthropy, we are faced with the everyday difficulty of Haiti's slippery political context. We are very pragmatic in our efforts to coordinate our actions with all stakeholders, including government. But we also know that this pragmatism must be matched by realism. The greatest risk would be to let government call the shots.

Project Leader

*\*The Project Leader must be a host-country national who is responsible for leading the project side-by-side with, or even out front of, of the Established Intermediary Partner.*

First Name: Ephezien Last Name: Pierre-Antoine Date of Birth: 06/17/1965 Gender:  Male  Female

*\*Must match information exactly as shown on a government-issued ID*

Phone: 509-4646-7860 Email:       Local Address: 179 Rue Faubert

**Please provide a rationale for why you are qualified to lead this project, listing any additional relevant experience, skills, or certifications.** Ephezien is the project leader in the Southeast of Haiti. He has 20 years experience working in rural Haiti as a community organizer, accountant and church leader. He heads our team of water technicians, handles our finances and drafts our reports.

How long have you been living and/or working in the primary project site? Ephezien has led the project since the start -- 4 years leading the project in Haiti.

When do you expect to no longer be living and/or working in the primary project site? Ephezien lives and works in Haiti full-time.

Established Intermediary Partner

*\*The role of the established intermediary partner is to be supportive to local leaders, to facilitate discussion and participation, to share skills and experiences, and to be a bridge for communication and reporting between local leaders and World Connect.*

First Name: Wesley Last Name: Laine Date of Birth: 01/30/88 Gender:  Male  Female

*\*Must match information exactly as shown on a government-issued ID*

Phone: 617-803-3531 Email: e.wesleylaine@gmail.com Local Address: 179 Rue Faubert, Petion-Ville, Haiti.

**Please provide a rationale for why you are qualified to lead this project, listing any additional relevant experience, skills, or certifications.** I am entering my 7th year in development work. I started out as an intern in Washington, DC for the non-profit International Action in 2009. Later, I became program manager for the same organization. Moreover, during my tenure at International Action, I left the office in DC and relocated to Port-au-Prince where I spent two years working in humanitarian relief with the internally displaced. In 2013, I launched Haiti Philanthropy, Inc. In addition to being honored for its breakthrough projects in Haiti at the Clinton Global Initiative, our project was also selected for the Davis Peace Prize.

I left Haiti to pursue my graduate (M.A. in International Policy, Middlebury Institute '14) and law studies (Economic Law, Sciences Po Paris '16 and LL.M. at the Harvard Law School '17). As the founder of Haiti Philanthropy, I am an active participant in all aspets of our projects. I travel to Haiti multiples time a year.

How long have you been living and/or working in the primary project site? I started and worked on the project for 2 years in Haiti. For the past couple years, I've been in and out of Haiti.

When do you expect to no longer be living and/or working in the primary project site? Haiti is my home. I will always an active participant in development projects as long as economic injustice and poverty exists.

1. **When will this project start and what is its estimated duration in months?**

If selected, this project will start the December 15th and will end on February 27th.

1. **Please provide a description of the affected community/ies and individuals who will be impacted by this project. Focus on characteristics such as climate, topography, water sources, sources of local employment/income, relevant cultural traditions, challenges people face in general, and what challenges they are facing at this particular time.**

A month after hurricane Matthew, the number of cholera cases has spiked in rural Haiti. This spike is largely due to poor access to potable water and proper sanitation. On balance, despite the lack of data, it seems eminently reasonable to assert that the the large-scale social forces that so often determine who gets sick and dies from cholera are evident and can be mitigated. More precisely, it is social and economic forces that dictate the selection of households affected and likely to die—the rural poor in remote areas.

There is a tight link between natural disasters and poverty. This is true in at least two senses: first, that natural disasters are more frequent in developing countries, and second, that the poor in any society exposed to natural hazards are more likely to suffer damages. We've seen this firsthand in the the Southeast Haiti, where homes and crops have been destroyed by hurricane Matthew. The affected population are those who live well below the poverty line, in homes that were not hurricane resistant.

The Southeast Department is one of 10 Departments in Haiti, and has an area of 2,023 square kilometers. It has a population of 632,601 as of March 2015, 85% of whom live in rural areas. The capital city of the Department, Jacmel, is on the western edge of the Department. Outside of Jacmel, much of the Department is rural and mountainous. The majority of the population in the Department receives water from mountain springs, from large reservoirs with gravity-fed piped distribution systems that flow to kiosks in populated centers. These water systems were built by a variety of organizations over the past

decades. With the formation of DINEPA (National Directorate for Water Supply and Sanitation) in 2009, legal management of these systems was handed over to DINEPA; in practice, who provides on the-ground management of these systems remains variable.

In Haiti, only 49% of rural and 88% of urban households have access to an improved water source (Cayemittes et al. 2013). Additionally, in a 2012 study, Escherichia coli (E. coli) was detected in half (50.9%) of the improved water sources tested in Artibonite, Haiti (Patrick et al. 2013). During this particular post-hurricane matthew period, cholera victims are often those who are living in settings of chronic poverty, which are, by definition, settings of structural violence.

Our response to the spike in cholera cases aims to utilize water technology and the praxis of public health to reduce vulnerability to cholera and other diarrheal diseases in areas affected by hurricane Matthew.

1. **Please provide a detailed description of the project. Include a discussion of how the focus/idea of the project was determined and prioritized and who was included in this process.**

The long-term solution necessary to prevent cholera and ensure equitable access to safe drinking water is the development of piped, treated infrastructure systems that deliver safe drinking water directly to users homes. Until such time as infrastructure in Haiti is developed, household water treatment (HWT) has been widely promoted to treat drinking water in Haiti. In 2012, 71% of Haitians reported treating their drinking water at the household level; with 97% of those respondents reporting using chlorine-based products (Cayemittes et al. 2013). In a 2010 evaluation of a chlorine distribution program with training and follow-up, 56% of participants had free chlorine residual (FCR) in their drinking water and children <5 years old had 59% reduced odds of diarrhea. (Harshfield et al. 2012). In contrast, after chlorine tablets were distributed with mass-marketing behavior change messages to rural households in Artibonite, Haiti, just 9.9% of households had stored water containing FCR (Patrick et al. 2013). These results suggest that when sufficient training, follow-up, and supply chain are provided, chlorine can

be used at the household level to improve drinking water quality and reduce diarrheal disease in Haiti.

However, this burden of training, follow-up, and supply chain is a high one. Recently, water treatment at

the source (as an in between option between infrastructure and HWT), has been more widely promoted. Water treatment at the source has the potential to provide safe drinking water at lower cost, and with greater and more equitable access and increased consistency of treatment, than the promotion of HWT. Using chlorination at the source (“source chlorination”) has the additional benefit of providing residual protection during transport and storage of drinking water in the home.

Post-Matthew Cholera Response:

In the aftermath of hurricane Matthew, several areas in the Southeast Department are experiencing a resurgence in cholera cases. Securing and managing access to clean water is a major challenge for several affected communities. Hence, our team has identified 7 reservoirs in 7 communities in the Southeast of Haiti that need to be repaired and require a chlorinator to improve the water source. Furthermore, we have identified 3 communities in need of water tanks and kiosks in order to gain access to clean water.

Specs of the chlorinators:

Chlorinators are automatic, gravity-fed tablet-feeders that are installed inline in a water system with intermittent or continuous flow. As water flows through the Chlorinator, it comes into contact with the tablets in the canister. The tablets slowly dissolve, chlorinating the water before it flows into and mixes with the water in the reservoir. As lower tablets dissolve, additional tablets in the canister fall into place and continue to chlorinate the water. As the tablets dissolve slowly, the Chlorinators could theoretically run continuously for several weeks without requiring maintenance.

Community training:

In public health, it is widely proven that knowledge can transform behavior. Hence, educating the population to protect itself against the dangers of cholera is critical to their personal and community health. If selected as a recipient of the grant, resources will also be used to implement a 4-week public health campaign in the Southeast Department of Haiti. More specifically, in addition to installation of chlorinators and water tanks to purify the community water supply, the team will implement an intensive education and prevention campaign through public health workshops. Through these workshops moderated by our technicians and the local water agency’s personnel, all residents of selected communities will receive education on the cholera transmission cycle and will learn about all appropriate prevention techniques and where to access the inputs necessary to put them into practice. The workshops will be adapted from existing cholera prevention material, developed by the Centers for Disease Control, already used in Haiti since 2011. Moreover, a video in Haitian créole titled “the story of cholera” produced by the Global Health Media Project will also be used.

[http://globalhealthmedia.org/story-of-cholera/videos/cholera-haitian-creole/]

1. **How does the project build upon the efforts of the local community and other local groups, such as neighborhood associations, women’s groups, health clinics, local government, etc., which are not the listed Community Organization partner on this application?**

Water commitees in different villages in the Southeast are very familiar with our projects and are keen on working with us. They have been the driving force of the success we've had fighting cholera in the region. We've also installed chlorinators in local clinics, prisons and hospitals in the region.

1. **Are there other (non-local) aid/development organizations working in the affected community/ies? If so, which and what are they working on? Please list all that you know of and any contact information you may have.**

The main non-local partners in the regions are Care international, Save the Children and CARITAS.

1. **How will success be measured for this project? Please let us know how you intend to measure and report on the impact of the project quantitatively and qualitatively.**

In addition to testimonials and monitoring of cholera cases in the local clinics, we welcome additional monitoring from public health graduate students. We've actively sought funding partners for the monitoring and evaluation of our clean water projects.

1. **Describe in detail the roles and responsibilities of each of the key participants below in managing *the design and implementation*of the project:**

Community Organization: Ayiti Filantropi

Project Leader: Ephezien Pierre-Antoine - Leader of the proram in the Southeast of Haiti. Responsible for day to day implementation.

Established Intermediary Partner: Wesley Laine - Founder of Haiti Philanthropy, Inc. (I plan on being in Haiti for the first half of the implementation of the project in December and early January)

1. **Describe in detail the roles and responsibilities of each of the key participants below in managing *the finances* of the project:**

Community Organization: Haiti Philanthropy, Inc.

Project Leader: Wesley Laine

Established Intermediary Partner: Haiti Philanthropy, Inc. issues a tax deductible receipt to the granting organization and wires the funds to Haiti for the implmentation of the project. The local team executes the project, collects all receipts and other record-keeping essentials for the drafting of the final report.

1. **Please provide an overview of what sustainability will look like in the context of this project.**

In an emergency response program, the goal is to reach the affected population with services they need as rapidly as possible. Recipients in emergency response programs are not expected to pay for these services, and in general these services are not expected to be sustainably maintained after the emergency ends. Recently, there has been research and interest in the concept of “linking relief and rehabilitation to development” (LRRD) emergency programming, While there is significant interest in LRRD programming, particularly in the WASH sector, there are few programs that have successfully made this transition.

The main challenge to LRRD programming is that the goals of emergency response and sustainability are quite different. The goals of sustainable programming are to have institutional, management, financial, and technical structures established such that the program continues. In a complex emergency context such as Haiti, where the situation is continuously evolving and government structures are nascent, it can be difficult to link emergency response programs into government or formal institutions that can provide management in a cost-recovery framework.

However, Haiti Philanthropy established a chlorine bank to ensure that there is a reliable outlet to provide chlorine and continuity to our clean water program. This is a work in progress. Our main institutional partner for the chlorine bank is the American Chemistry Council based in Washington, DC.

1. **Is there anything else we need to know about the Community Organization or the project?**

We remain at your disposal for additional information.

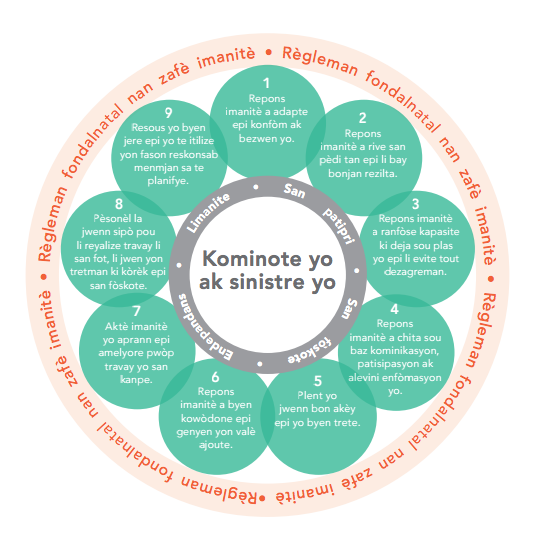
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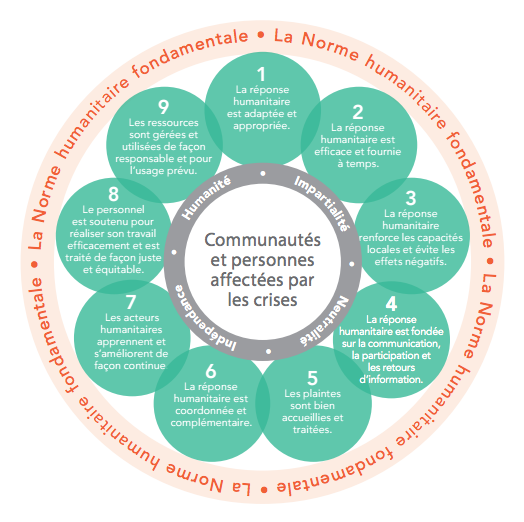
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