


## CARE International in the Balkans – On the Edge – Floods response – May to September 2014

	<b>CARE Country Office:</b>	<b>BALKANS</b>	<b>Date of this Report:</b>	<b>19-SEP-2014</b>
	<b>Emergency Response:</b>	<b>FLOODS SURVIVORS SUPPORT – MAY 2014 – SEP 2014</b>	<b>Completed by:</b>	<b>Uwe Korus, Monitoring, Evaluation &amp; Accountability Coordinator - CEG</b>

**Key messages:**

When a decision was made to respond to floods affecting over 3 million in Bosnia and Serbia in May 2014, CARE in the Balkans faced serious challenges which the team managed with a commendable collective commitment and high individual dedication. The decision by CARE to respond to the floods was justified by the scale of the disaster, the serious negative effects on CARE's impact groups and the inability of governmental and non-governmental actors to respond efficiently and adequately. However, the full implementation of this decision in line with CARE standards, protocols and targets was hindered by:

- The recent downsizing of CARE's presence in the Balkans and its programmatic shift to a partnership focused development program
- Insufficient review and adjustment of response capacities and absence of an operational Emergency Response Team
- Limited access of CARE to institutional donors which did not perceive CARE as their partner of choice for an emergency response

Going forward, CARE members engaged in the Balkans need to analyse the implications of an evolving operational model on emergency response capacity and preparedness. Based on this analysis an Emergency Preparedness Planning (EPP) process needs to be implemented that involves CARE members and partners agreeing on roles and responsibilities, levels of expectations and investments, while taking into account the limited presence of CARE staff and infrastructure in the Balkans as well as limited access to institutional donors. High synergies between development programming and emergency preparedness (e.g. DRR) should increase efficiency of emergency responses with a clear focus on support to highly vulnerable groups.

This review was conducted by the CI - Monitoring, Evaluation and Accountability Coordinator (MEAC-CEG) in September 8-12, 2014. He would like to thank the CARE team in the Balkans for the support received and their responsiveness during the review and the subsequent preparation of the report.

## I. Introduction

CARE International in the Balkans made a commendable effort to respond to the floods in mid-May 2014 despite recent heavy down-sizing of the CO structure and ongoing re-orientation of the operational model to a 'lite' footprint and partnership-centred model. With more than 3.1 million people affected



mainly in Bosnia-Herzegovina and Serbia, CARE classified the emergency a Type 2 within a few days of the rapid onset followed by a decision by the Lead Member (CARE Deutschland-Luxemburg – CDL) and the CARE Emergency Group (CEG) to keep the actual response by CARE to a small scale adapted to capacities of partners and to the opportunities for CDL to mobilize adequate resources.

CARE's response since May 20, 2014 includes provision of equipment and tools, distribution of NFIs including hygiene items, food and vouchers to approximately 1000 households (or 5,000 people) affected by the floods and scattered over several regions and municipalities in Bosnia-Herzegovina. Interventions in Serbia include distribution of baby-food immediately after the floods as well as cleaning and livelihood support to some highly vulnerable families.

Of the initial funding target of \$300,000 for the first 6 months of the response and \$1,200,000 for subsequent 6 months CARE reached respectively 65% and 58% as of the date of the review. At this time CARE had not conducted a review of these funding targets or of an appropriate fundraising strategy.

The limitations of this Rapid Response Review, which was conducted by the Monitoring, Evaluation and Accountability Coordinator of the CARE Emergency Group (MEAC-CEG) in September 8-12, 2014, reflect also the limitations of the scope and scale of CARE's response and the resources available:

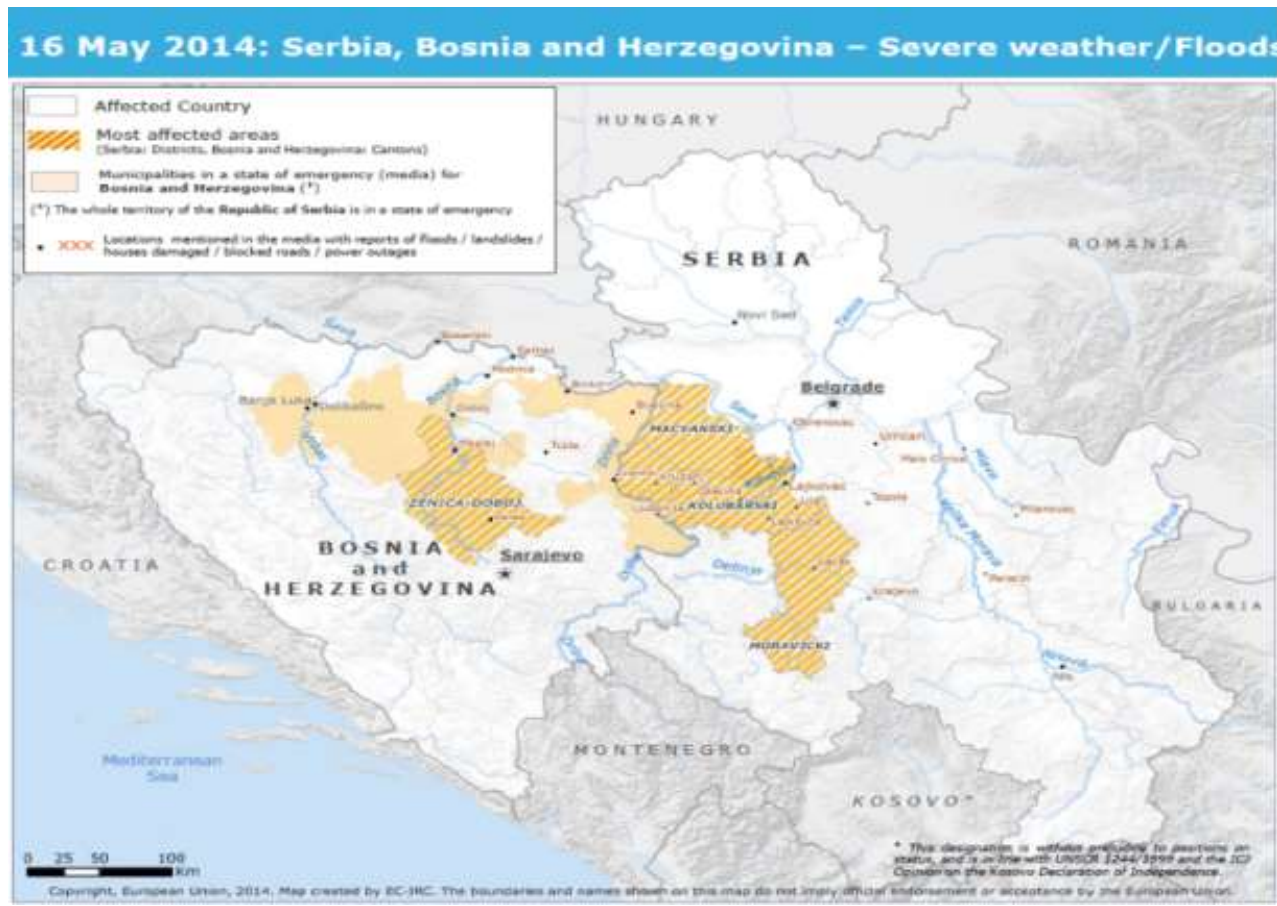
- Limited time (three days including Rapid Accountability Review)
- Limited inclusion of stakeholders (4 FGD with beneficiaries and local partners, two CARE staff and partner reps).
- Review of documentation (strategy, proposals, and reports).

For the analysis of key issues and the formulation of recommendations the report takes into account:

- Findings from document review, staff interviews, field meetings (1 ½ days) and self-assessment (½ day) against HAF benchmarks and targets.
- Findings and recommendations from CARE and partners' staff based on potential emergency scenarios (½ day).

The report also takes into account some issues raised during a subsequent EPP exercise as far as those that are related to the ongoing response.

CARE International in the Balkans – On the Edge – Floods response – May to September 2014



A. Key issues and recommendations against CARE HAF benchmarks

1. HAF Benchmark 1: Leadership

While the CARE Balkans team has a strong affinity to accountability principles and a good understanding of basic accountability mechanisms in emergency responses there has been no specific allocation of resources or attribution of functions to specific accountability efforts and measures.

CARE International leadership (e.g. CARE DL, Secretariat, CEG) did not provide any particular support to the response team with regards to establishing or implementing accountability related expectations or performance targets. The response team provided regular (initially weekly) situation reports to CCG but would have expected more clarity about lines of authority with regards to quality management and control.

Apart from a HAF training provided by initial response TL (deployed by CARE Canada) in May

2014, this review in September 2014 was the first structured assessment of CARE’s response performance against HAF benchmarks and performance targets.

Recommendations:

- Support from CDL and CEG to CARE team in the Balkans especially with regards to stricter and more efficient application of CARE emergency response protocols as well as implementation and monitoring of HAF benchmarks and performance targets.
- Plan for participation of senior staff from CARE in the Balkans in emergency leadership and operational capacity building opportunities (e.g. ELMP, CHEOPS).
- Initiate linkages (e.g. learning and operational exchanges) between Balkans team and Syria crisis response team as part of EPP process (e.g. join Syria Response M&E learning group, temporary deployments of CARE Balkans staff to Syria response teams as experimental learning opportunities etc.).

**CARE International in the Balkans – On the Edge – Floods response – May to September 2014****2. HAF Benchmark 2: Assessment**

The response team invested significant effort in collecting and analysing all accessible data despite many contextual constraints in the governmental information management. It used all its formal and informal networks to triangulate data, consistent disaggregation by sex and age, coherent targeting in coordination with standing partners (esp. economic empowerment associations). The latter benefited from the capacity building provided by CARE over the last couple of years as far as project monitoring is concerned to maintain coherent data collection and reporting. Assessment details are being shared with other stakeholders, although no coherent coordination mechanisms exist between stakeholders despite efforts by CARE.

The key elements of the response strategy developed by CARE within 10 days of the response start have largely been implemented. However, a thorough review of the strategy and early adaptation of the interventions might have facilitated an enhancement of operational efficiencies especially with regards to geographic spread and diversity of interventions.

**Recommendations:**

- *Establish timing and parameters for early efficiency checks*
- *Support development of efficient coordination mechanisms at local levels (community, municipality) in order to facilitate collaboration and enhance assessments and operational efficiency in future responses*

**3. HAF Benchmark 3: Design & Monitoring**

Overall, the response team used all available information to regularly adjust targeting, report on progress and changing priorities. A strategy was prepared in May and updated in September in light of the limited available funding. Team members have been trained in basic technical standards (e.g. Sphere) and consistently track inputs and outputs. Partners have regularly opportunity to discuss design issues and capacity bottlenecks. However, CARE and partner representatives recognize that many implementation details had to be decided ad hoc without consistent review processes, largely based on personal experience and intuition.

**Recommendations:**

- *Initiate EPP process that allows for proactive design of key interventions based on international standards, CARE's humanitarian strategic priorities and the programmatic and operational orientation of CARE in the Balkans.*
- *Link development program and disaster risk related monitoring assessments and analysis of economic and social vulnerability of specific impact groups (e.g. Roma, women heads of households) as well as environmental vulnerability of specific communities (e.g. CVCA with communities in settlements near/in riverbeds).*
- *Develop DRR programming pathways especially with and for impact groups of social economic empowerment program as well as with local partners (especially volunteer groups) .*

**4. HAF Benchmarks 4-6: Information Sharing / Participation / Feedback & Complaints**

During the review CARE organized 4 Focus Group Discussions and a self-assessment by staff from CARE and partners with a specific focus on the three key accountability standards for the relationships between emergency responders and the affected population. The results are summarized in the following table which reflects a typical picture of those relations in similar rapid onset responses by a CARE CO: high transparency, openness and active listening with beneficiaries and partners that mitigate limited capacities and skills in the team for consistent management of feedback as well as limited room for full participation of beneficiaries in detailed decision making.

CARE International in the Balkans – On the Edge – Floods response – May to September 2014

	☹️	😐	😊	😄	
Info-Sharing	1	2	6	8	3
Participation	2	7	8	10	3
Decision making	1	10	2	4	3
Feedback & Complaints	1	5	10	9	7

Respondents in the FGD especially appreciated:

- ✓ Accuracy and timeliness of information shared
- ✓ Respectful communication style
- ✓ ‘open door / open ear’ culture
- ✓ Hotline offer (although not much used)
- ✓ Follow-up on suggestions
- ✓ Fair decisions

However, respondents would like to better understand some of the decision making processes, targeting criteria and opportunities for them to participate and contribute. In addition, some respondents believe that CARE could have used available information and knowledge to give more visibility to the situation of some communities and social-economic groups with the intent to attract more public attention in and outside the country, and to CARE’s position as humanitarian actor in the region.

Although it was not possible to conduct a more consistent review of the efficiency of the feedback mechanisms at least one case of serious social tension created by potentially inconsistent targeting was detected which the ongoing feedback mechanisms had not captured.

**Recommendations:**

- Follow-up planning with partners in order to prepare for efficient participatory decision making mechanisms during emergency responses at local level
- Develop structured feedback mechanisms that offer channels and level of confidentiality that is appropriate to specific target groups and takes into account local social-political dynamics.
- Follow-up training of CARE and partner staff in efficient feedback management in emergencies
- Include appropriate communication strategy in EPP

**5. HAF Benchmark 7: Reviews and Learning**

This review is the first and only planned assessment with an external view of CARE’s performance in the flood response in the Balkans almost 4 months after the start of the response. In a response to a Type 2 emergency the CO in collaboration with the Lead Member and the CCG is expected to plan for timely and consistent review mechanisms and events. In this response a rapid real time evaluation of the initial live-saving and early recovery interventions could have been included in funding proposals and allowed for early dissemination of lessons and results and thus also visibility with donors.

**Recommendations:**

- Establish a Emergency Preparedness Coordination Group for the Balkans – composed of representatives from CARE DL, AUT and NOR – that not only provides strategic guidance during a response to larger emergencies (ERAC for Type 2 or 4) but also guides learning and preparedness processes.

**CARE International in the Balkans – On the Edge – Floods response – May to September 2014****6. HAF Benchmark 8: People**

“No plan, No money, No staff for the response” – this is how one of the participants of the review meeting described the situation of the CARE office in the Balkans at the beginning of the response. This is not surprising as the team had been downsized considerably over the past two years and there had been no operational EPP. With the concurrent shift to a partnership approach the CARE office had neither an operational Emergency Response Team of its own (as recommended by CARE’s ER guidelines) nor had it established a clear division of responsibilities and functions with its partners involved in the ongoing socio-economic development programs. Consequently CARE and partner staff was not prepared for a response to a Type 2 emergency. At the same time the emergency response also offered opportunities for forging new partnerships especially with volunteer groups and other CBOs.

CARE and partners mobilized all available staff in Bosnia (some affected themselves by the floods) as well as CARE staff in Serbia and Croatia. A Team Leader was deployed from the CARE RRT within 10 days of the start of the response and a permanent TL was hired about 1 month later. Some participants expressed some disappointment that there has been not more support through deployable human resources from the CARE members actually engaged in the Balkans starting with CARE DL as the lead member, CARE Austria and CARE Norway.

In the meantime the CARE staff in place had to develop administrative, reporting and budget management procedures for the ER with relatively little outside support and without sufficient knowledge of existing protocols and guidance. Many members of the CARE team were able to compensate some of these gaps with their many years of experience including some smaller emergency responses and from their intimate understanding of CARE’s vision. Still, most of them and basically all staff from partners was not familiar with the practicable application of many humanitarian principles. Staff mentioned CARE Emergency Response Fund and CEG reporting protocols as particularly demanding especially in the initial phase of the response.

Nevertheless the review within the limitations of its scope did not reveal any fundamental violations or negligence of humanitarian principles including accountability standards by the CARE staff. All staff proved also their high awareness and vigilance of low transparency and risk of misappropriation of funds by governmental services and a number of non-governmental institutions and actors. During the response review some concerns were raised that while there have been no major incidents so far, the response team does not regularly review safety measures and proactively manage potential security risks for staff. Some staff felt vulnerable to threats by local officials questioning the mandate and permission for CARE to operate as an emergency relief actor.

**Recommendations:**

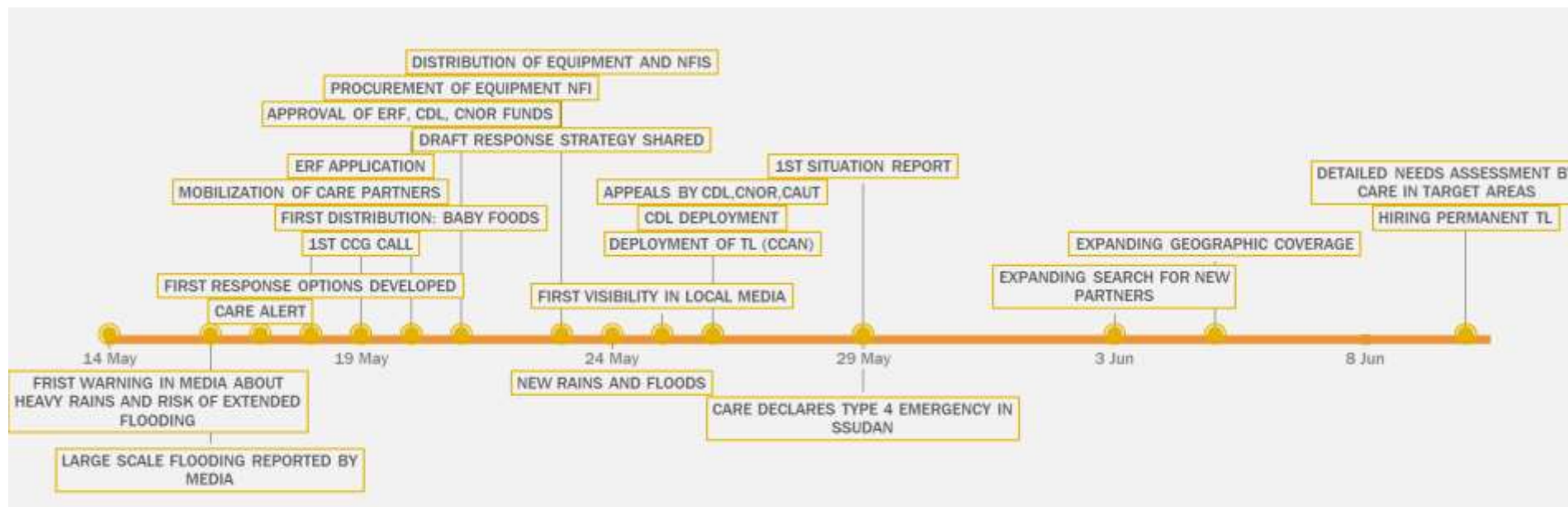
- *In addition to nominating senior staff from the CARE in the Balkans team to established CEG training opportunities (ELMP, CHEOPS), CARE DL needs to start more systematic orientation of staff and partners in humanitarian principles and emergency response protocols.*
- *In order to use scarce capacity building resources efficiently CARE in the Balkans should engage partner in EPP processes and internal training events including program and program support aspects as appropriate.*
- *Safety and security risk review as part of EPP process especially in light of a partnership centred model*

CARE International in the Balkans – On the Edge – Floods response – May to September 2014

B. Key issues and recommendations against CARE HAF performance Targets

1. HAF Performance Target 1: Timeliness of the response

The CARE response to the Balkans floods has been fairly timely at all levels of the organisation with regards to timeframes laid out by CARE International’s protocols especially for 1st 48-72hrs in a fast onset emergency: rapid communication and mobilization of CARE resources (funds, staff), rapid needs assessment, initial live-saving response, consistent reporting and sharing of information.



However there have been some challenges and shortcomings:

Successes with regards to timeliness	Challenges with regards to timeliness
<ul style="list-style-type: none"> <li>✓ Timely alert and initial decision making steps</li> <li>✓ Timely development of response options and draft response strategy</li> <li>✓ Rapid mobilization of unrestricted (ERF) funds from CI, CNOR, CDL</li> <li>✓ Rapid initial action</li> <li>✓ Early visibility in local media</li> <li>✓ Timely deployment of TL (CCAN)</li> </ul>	<ul style="list-style-type: none"> <li>○ No ERT established and absence of rapid capacity assessment</li> <li>○ Late international media visibility and public appeals</li> <li>○ No high level visit and public visibility of CARE leaders</li> <li>○ Limited direct support by CDL with regards to program support functions at start-up phase</li> <li>○ Delayed review of response efficiency and finalization of response strategy</li> </ul>

Recommendations:

- *Identify composition of ERT (potentially including partners) and train ERT members in CARE protocols and their application as well as opportunities for timely support*

## CARE International in the Balkans – On the Edge – Floods response – May to September 2014

### 2. HAF Performance Target 2: Quality of the response

While the scale of CARE's response is very limited (less than 1% of the affected population) all respondents in the FGD praised the relevance (and timeliness!) of CARE's response even if they had not been direct beneficiaries. CARE in the Balkans swiftly developed response options and translated those into proposals.

The deployed team leader offered an early training on the HAF however to only a few CARE staff<sup>1</sup> and none of the partners participated in that training. Most respondents in this review (most CARE staff and basically all partners) also did not show any knowledge of existing key quality guidance from CARE or other agencies with the exception of some SPHERE standards<sup>2</sup>.

The response team produced some of the gender related documentation required by the ERF and general CARE Gender guidance but there has been no consistent gender analysis throughout the response. SADD are available from most assessments (e.g. detailed household composition data) and for most beneficiary groups. For targeting the scarce resources in an efficient way CARE in the Balkans established and fairly strictly applied vulnerability criteria (see box). In line with those criteria the response team also decided relatively early in the response to shift from blanket distribution (e.g. baby food) to highly targeted interventions (e.g. comprehensive package for few households). However, the draft strategy does not make any reference to linking the early recovery interventions with the ongoing social-economic empowerment programming with marginalized vulnerable groups.

#### CARE in the Balkans Vulnerability Criteria

1. Households whose houses and land were damaged as a result of the flooding
2. Households with higher number of family members
3. Households with members who are children (<5s) and with vulnerabilities (chronic illnesses, Pregnant Lactating Women (PLWs), people Living With Disabilities (PLWDs) and elderly >60/65
4. Single-headed households (men, women, child <18 years old)
5. Level of assistance received

#### Recommendations:

- *Develop strategy for transitional / early recovery programming at scale with particular focus on groups with high social-economic vulnerability*

### 3. HAF performance target 3: Core Sector Competencies

The response team requested and received some support from CARE's sector specialist teams (e.g. WASH) but only remotely while at the same time there was very little coordination between actors in country (e.g. cluster mechanisms not activated, UN coordination meetings with low efficiency) which would have enabled the response team to prioritize and rationalize some of their technical choices (e.g. type of equipment, composition of kits and food packages). The small scale of the response also limited CARE's capacity to mobilize and maintain specialist expertise.

#### Recommendations:

- *Develop standing relationship with relevant CARE sector teams based on high priority sector selection in EPP (to be developed).*
- *Establish and agree with partners on performance targets (quality and quantity) for future responses and mobilize adequate support capacity throughout CARE as well as with peers.*

<sup>1</sup> Only three out of 20 participants in the review workshop had participated in that initial training

<sup>2</sup> Some respondents made reference to SPHERE but the review did not allow for a more in depth assessment of knowledge and understanding



**CARE International in the Balkans – On the Edge – Floods response – May to September 2014**

**4. HAF performance Targets 4 & 5: Funding & Cost Recovery**

Despite moderate and appropriate funding targets being set by the response team at the start of the response CARE in the Balkans, CARE DL and only a few other CARE members (CARE Norway and Austria) were able to mobilize very limited restricted resources. Appeals also did not yield much public response. CARE ERF of € 50,000 was approved about 3 weeks after the disaster to cover the costs of the distribution of food and non-food items, as well as the costs of an Emergency Response Coordinator, whose responsibilities included writing proposals to various donors. At the time of this report external funding did not allow for recovery of ERF funds.

By deploying international staff member also in order to sustain relationships with potential donors and engaging in various public communication initiatives

CARE was able to reach 65% and 58% respectively so far of the initial funding targets of \$300,000 for the first 6 months (May – November 2014) of the response and \$1,200,000 for subsequent 6

USD currency	(a) Funding target	(b) Funding confirmed	(c) Funding not yet confirmed	Funding gap—difference between (a) and (b)
Phase 1 (months 1–6)	\$300,000	\$177,140		\$122,860
Phase 2 (months 7 –12)	\$1,200,000	\$695,800		\$504,200
<b>Total</b>	<b>\$1,500,000</b>	<b>\$872,940</b>		<b>\$627,060</b>

months CARE (ref: sitrep # 6, 2014-08-12 and communication from CARE Regional Director). Despite continuous fundraising efforts by some CARE members (CDL, CAUT, CFR) these funding targets are unlikely to be reached but had not been revised at the time of this review.

Assuming that funding streams for disaster responses in the Balkans in future will not defer much from this particular crisis (i.e. most institutional bilateral and multilateral funding going to national governments and institutions such as UN and ICRC related agencies) CARE will have to tailor its future responses to the limited resources available and seek unconventional sources of funding where possible such as private sector actors.

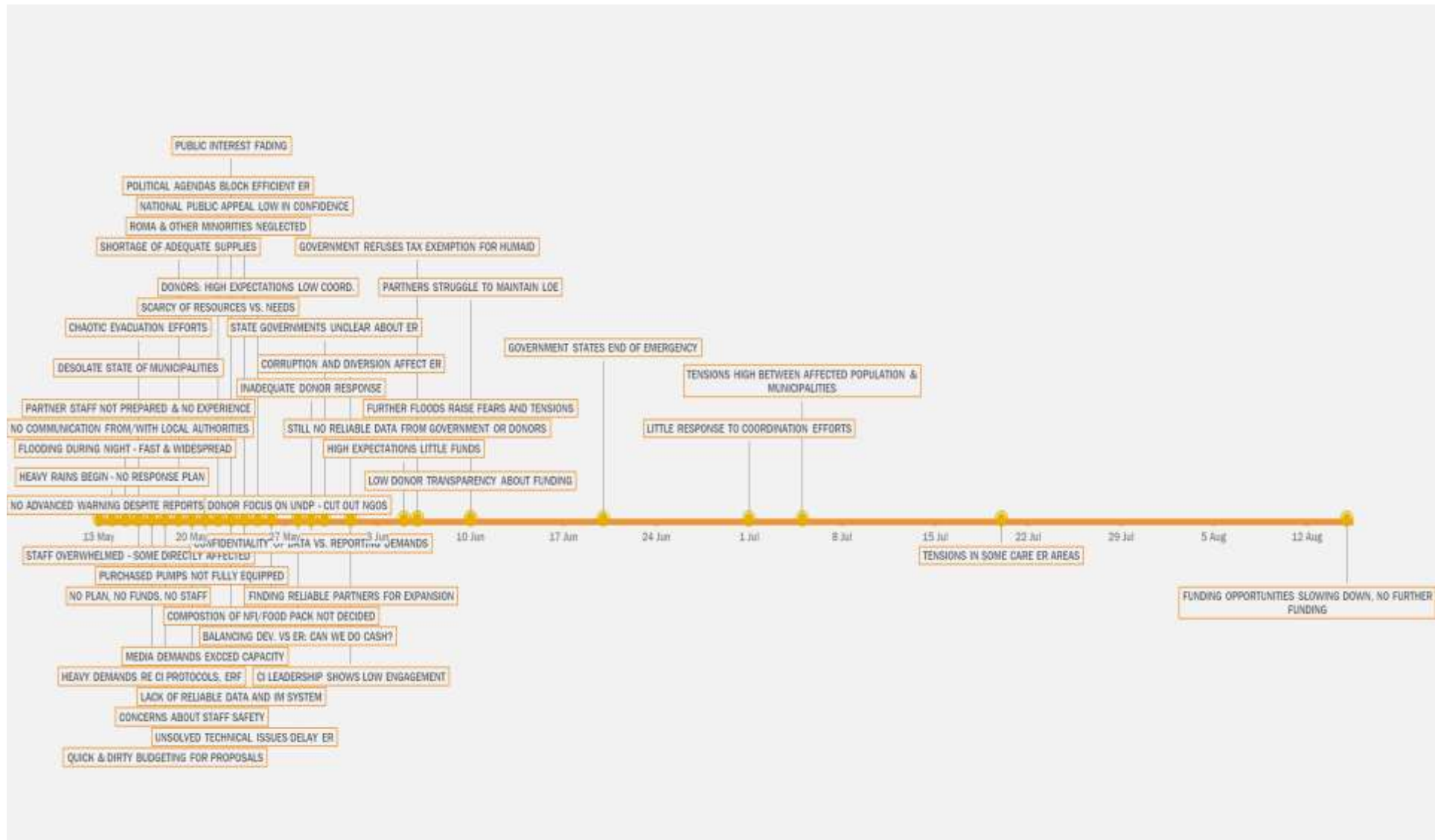
**Recommendations:**

- *As part of EPP process, establish fundraising options and strategy with realistic targets that involves interested CARE members as well as local partners and engages also unconventional donors in advance (e.g. companies, Balkan diaspora in Western Europe etc.).*
- *Enable and expand EPP implementation through linkages to DRR (to be developed)programming and ongoing social-economic empowerment programming*
- *Establish response scenarios that are in line with likely (limited) funding opportunities e.g. strategic and material support to partners, limited geographic focus and/or highly specific targeting, and investment of unrestricted resources in communication and coordination efforts during the response etc.*

**ANNEXES:**

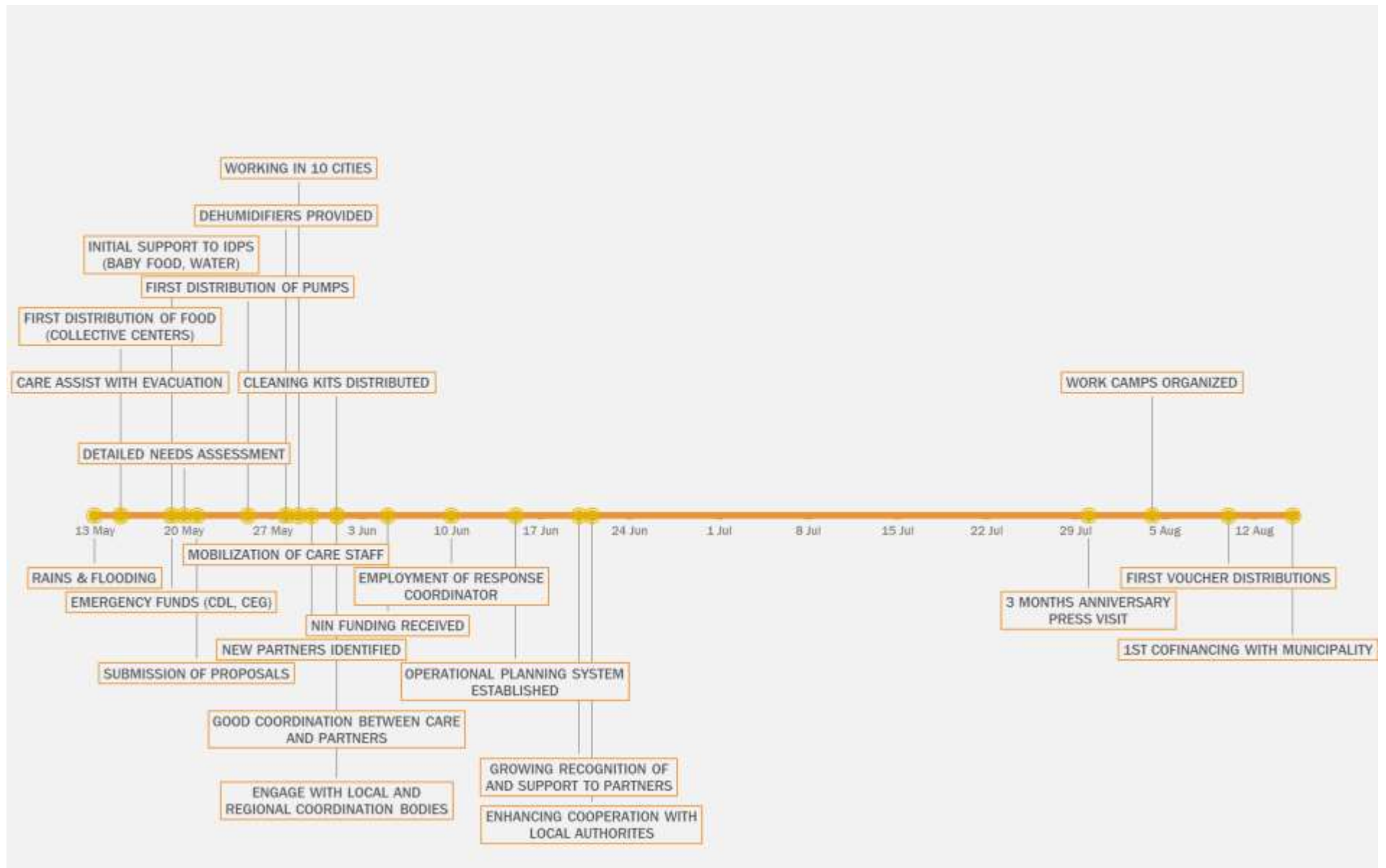
CARE International in the Balkans – On the Edge – Floods response – May to September 2014

Annex 1: CHALLENGES IN CARE BALKAN – BOSNIA FLOOD RESPONSE (by response review workshop participants – Sarajevo Sep 2014)



CARE International in the Balkans – On the Edge – Floods response – May to September 2014

Annex 2: SUCCESSES OF CARE BALKAN – BOSNIA FLOOD RESPONSE (by response review workshop participants – Sarajevo Sep 2014)



**CARE International in the Balkans – On the Edge – Floods response – May to September 2014**

**Annex 3: Draft recommendations (by response review workshop participants – Sarajevo Sep 2014)**

<b>EXPECTED CHANGE / ACTION</b>	<b>WHO</b>	<b>WHAT (Outcome)</b>	<b>WHY</b>
CARE [in Balkans] should design model of formal structure for emergency response with clear roles and responsibilities including partners	CARE Management	Faster reaction / action to disasters	Enhanced efficiency of response
Better Coordination	CARE & Partners	Better results / support	No overlapping (geographic, sectors)
Better preparedness and faster response	Local authorities and civil aid agencies, private sector	Reduce damage to communities in case of flooding	Reduction of humanitarian assistance needed
Prepare mapping of resources / contacts / partner network across region (including local civil protection units, authorities etc.)	CARE	better system to mobilize actors in case of emergency	Reduce reaction time and enhance coordination at start of response
Increased allocation of bilateral funding for NGO preparedness and response	Donors	Better accountability / quality / transparency of response	NGOs are more cost efficient and accountable
Rising capacity of CARE staff and main partners in emergency response	CARE DeLux, CARE International	Quicker response and higher impact; enhanced reputation	
CARE in Balkans has rapid response mechanism in place which can be adapted to local context	CARE Balkans	CARE core team supporting local partners in response	Low level of preparedness of CARE and partners
Increased awareness of citizens			
Improve information management (channels, points of contacts, forms, questions, means)	CARE & partners	Better information flow and informed decisions	Weak link in initial response: municipalities and governmental agencies

The recommendations in this report are drawing from these draft recommendations but do not necessarily directly quote or copy them.

CARE International in the Balkans – On the Edge – Floods response – May to September 2014

Annex 4: Program of response review

When	What	Details	Responsible	Facilitator	Participants	Where	Comments/Preparation
<b>Monday</b>	<b>Day 1: Arrival</b>						
12:30	Arrival in Sarajevo		Sumka		Reini, Felix, Uwe, Kjell?	airport	transfer from airport to office
	Debrief		Sumka	Felix		Office	
2pm	Go to Bjeljina		Sumka		with other CARE staff?	office	transportation to be organized
	meet volunteer group - Gorsko Oko in Kladanj		Valentina				
2:30 PM	Arrival Reini - travel to Bjeljina		Sumka			TBC	
	over night in Bjeljina	TBD	Valentina		with other CARE staff?	TBD	needs hotel accommodation booking
<b>Tuesday</b>	<b>Day 2: Field</b>						
9- 11 am	Focus Group Discussions (2)	Women/Men, Beneficiaries/Municipalities/ Partners	Valentina	Uwe, Vesna, Zvezdana	external participants, Sumka,	Bjeljina	Valentina to contact Uwe for guidance on organizing focus groups, Need translators (2)
11am-1pm	Focus Group Discussions (2)		Valentina			Bjeljina	
2pm	Travel back to Sarajevo		Sumka				
	overnight in Sarajevo	TBD	Sumka		Reini, Felix, Uwe, Kjell?	TBD	
<b>Wed</b>	<b>Day 3: Accountability, Quality, Findings</b>						
8:30-9:30am	refresher/brief about HAF	interactive presentation	Uwe	Uwe	Larger Group (20)	Meeting Room	
9:30-10:30a	Timeline, success & challenges HAF Benchmarks & response	plenary	Uwe	Uwe	Larger Group (20)	Meeting Room	
10:30am-1p	Targets: self assessment and findings	group works	Uwe	Uwe	Larger Group (20)	Meeting Room	by Benchmark, self assessments and immediate feedback from external group; Time Management important
		plenary	Reini, Kjell?, Uwe				food to be provided at location
1-2 pm	lunch break		Sumka		Larger Group (20)		
2-3pm	emergency scenarios	group works / plenary	Felix/Sumka	Uwe	Larger Group (20)	Meeting Room	Sumka, Zvezdana, Valentina, Felix to skype Thursday 10:30 for ideas/outline (pre-agree on disaster scenarios and response scenarios)
3-5pm	key recommendations	group works / plenary		Uwe	Larger Group (20)	Meeting Room	
<b>Thursday</b>	<b>Day 4 : EPP</b>				Felix check with Peter if he can attend and facilitate this day		
8-10am	Response Scenarios / options	group works / plenary	Felix	Peter	Smaller Group (10)	Meeting Room	Sumka, Zvezdana, Valentina, Felix to skype Thursday 10:30 for ideas/outline (pre-agree on disaster scenarios and response scenarios)
11am-noon	Performance targets for Balkan emergency response	group works / plenary	Uwe	Peter	Smaller Group (10)		to be formulated against CI performance indicators
noon-1pm	Preparedness: Key concepts / components / requirements	interactive presentation	Uwe/Reini	Peter	Smaller Group (10)	Meeting Room	
1-2 pm	lunch break		Sumka		Smaller Group (10)		food to be provided at location
2-5pm	CARE Balkans EPP: cornerstones / response parameters, next steps		Felix	Peter	Smaller Group (10)	Meeting Room	
5-5:30 pm	wrap up		Uwe				
<b>Friday</b>	<b>Day 5</b>						
	debriefing with SMT	if appropriate / needed	Uwe	Felix, Reini, Peter	SMT		
	departure		Sumka				

**CARE International in the Balkans – On the Edge – Floods response – May to September 2014**

**Annex 5: Participants of Response review meetings**

<b>Emergency Response Assessment and Planning</b>				
Hotel Saraj, Sarajevo, BiH; September 10 - 11, 2014				
<b>List of participants - 10 Sep</b>				
<b>#</b>	<b>First name</b>	<b>Last name</b>	<b>Organization</b>	<b>Position</b>
1	Felix	Wolff	CARE Deutschland	
2	Uwe	Korus	CARE International	
3	Kjell	Stokvik	CARE Norway	
4	Reinhard	Tinker	CARE Austria	
5	Sumka	Bučan	CARE Balkans	Regional director
6	Zvezdana	Batković	CARE Balkans	Regional Gender Program Coordinator
7	Maja	Petek	CARE Balkans	Project officer
8	Dubravka	Kovačević	CARE Balkans	Project manager
9	Sabahudin	Halkić	CARE Balkans	Procurement officer
10	Naida	Kudušić	CARE Balkans	Project coordinator
11	Ševko	Bajić	CARE Balkans	Project manager
12	Valentina	Pellizzer	CARE Balkans	Emergence Response officer
13	Anes	Beširević	CARE Balkans	Accounting Manager
14	Samir	Perenda	CARE Balkans	Financial officer
15	Branislav	Tanasijević	CARE Balkans	Project manager
16	Saša	Petković	CARE Balkans	Project manager
17	Marina	Starčević - Cviko	CARE Balkans	Project Manager
18	Vesna	Jovanović	CARE Balkans	Regional Social and Economic Inclusion Program Coordinator
19	Branko	Spasić	Youth Fondation Obrenovac, Serbia	
20	Larisa	Kovačević	WRA "Better Future", BiH	
21	Dragan	Joković	Otaharin, BiH	
<b>List of participants - 11 Sep</b>				
<b>#</b>	<b>First name</b>	<b>Last name</b>	<b>Organization</b>	<b>Position</b>
1	Felix	Wolff	CARE Deutschland	
2	Peter	Runge	CARE Deutschland	
3	Uwe	Korus	CARE International	
4	Kjell	Stokvik	CARE Norway	
5	Reinhard	Tinker	CARE Austria	
6	Sumka	Bučan	CARE Balkans	Regional director
7	Zvezdana	Batković	CARE Balkans	Regional Gender Program Coordinator
8	Ševko	Bajić	CARE Balkans	Project manager
9	Branislav	Tanasijević	CARE Balkans	Project manager
10	Valentina	Pellizzer	CARE Balkans	Emergence Response officer

Pictures



**Riverbed damage in Jadar river valley...**

**Bottom left:** Home garden destroyed by flooding near Bratunac (village Jadar)

**Bottom right:** remaining foundations of Meeting Room of Women Association Jadar destroyed by flooding

CARE International in the Balkans – On the Edge – Floods response – May to September 2014



Focus Group discussions with recipients and participants of CARE's flood response in Bosnia:

Left and bottom: participants from Konjevic Polje village near Bratunac

Right: participants in Bjeljina

© Uwe Korus / CARE  
September 2014

