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**HUMANITARIAN IMPLEMENTATION PLAN (HIP)****YEMEN**

**The activities proposed hereafter are still subject to the adoption of the financing decision ECHO/WWD/ BUD/2014/01000**

AMOUNT: EUR 33 000 000

**1. CONTEXT**

**Yemen ranks as the poorest country in the Middle East and North Africa region** and is one of the poorest in the world (160th out of 187 countries in the UNDP Human Development Index<sup>1</sup>). According to the 2012 Global Hunger Index the country is the 10th most food insecure in the world (70<sup>th</sup> out of 79 countries<sup>2</sup>). The UN estimates that 13.1 million Yemenis are in need of humanitarian assistance<sup>3</sup>. DG ECHO's Integrated Analysis Framework for 2013-14 identified high humanitarian needs in Yemen. The vulnerability of the population affected by the crisis is assessed to be very high.

Since its unification in 1990, Yemen has been affected by civil strife, political instability and prolonged internal armed conflicts, poor economic performance, rampant poverty, persistently high levels of malnutrition and food insecurity. With a population of 24 million and a population growth rate estimated at 3% per year<sup>4</sup>, public services, including health, education and social welfare, remain insufficient and physical access to the widely dispersed communities in many parts of the country is another challenge. In addition, refugees, migrants and asylum seekers from the Horn of Africa continue to arrive in Yemen on their way to countries in the Gulf, most notably Saudi Arabia. These challenges are compounded by the scarcity of natural resources, particularly of water<sup>5</sup> with Yemen being amongst the most water-deprived countries in the world.

All of these, combined with still high food prices on the international market, significantly increased **humanitarian needs and chronic vulnerability** among populations everywhere in Yemen. According to WFP, the main causes of the current food insecurity continue to include limited sources of income for the urban poor, fragile livelihood systems in rural areas, volatility of international prices and internal conflict.

In addition, the 2012 upsurge of conflict in Abyan in the South has caused widespread damage to public and private property and infrastructure, and large-scale displacement, while the protracted conflict in the north with Houthi rebels continues. The ensuing political transition process is moving ahead but can be jeopardized by many factors<sup>6</sup>.

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<sup>1</sup> <http://hdrstats.undp.org/en/indicators/103106.html>

<sup>2</sup> <http://www.ifpri.org/publication/2012-global-hunger-index>

<sup>3</sup> <http://reliefweb.int/report/yemen/yemen-humanitarian-response-plan-mid-year-review-2013>

<sup>4</sup> [data.worldbank.org/indicator/SP.POP.GROW](http://data.worldbank.org/indicator/SP.POP.GROW)

<sup>5</sup> [www.american.edu/cas/.../Global\\_Majority\\_e\\_Journal\\_1-1\\_Glass.pdf](http://www.american.edu/cas/.../Global_Majority_e_Journal_1-1_Glass.pdf)

<sup>6</sup> Among which: institutional weaknesses including government presence throughout the country, rule of law, security systems; generalized insecurity, abduction and kidnapping including expatriates; criminality; tribal conflicts.

## 2. HUMANITARIAN NEEDS

### 1) Affected people/ potential beneficiaries:

The Yemen Humanitarian Response Plan (YHRP) of 2013 indicates that half of the Yemeni population (13.1 million out of 24 million) has no access to clean water and sanitation; 10.5 million have limited access to food and 6.4 million have no access to health care. One million children under age 5 suffer from acute malnutrition, of whom a quarter is severely malnourished and in need of urgent lifesaving therapeutic nutrition. **The YHRP requires USD<sup>7</sup> 702 million** including USD 208 million for the most urgent needs. On 2 September 2013, the Plan was funded at 44% of its requirements<sup>8</sup>, while two UN-administered pool funds have accumulated USD 22.75 million<sup>9</sup>.

The main **concerns for DG ECHO** are the population affected by **acute malnutrition and related food insecurity**, the large number of **internally displaced** and recent **returnees** as well as a growing number of **refugees** and other victims of forced displacement including **migrants** expelled from the Kingdom of Saudi Arabia and highly vulnerable ones from the Horn of Africa.

### 2) Description of the most acute humanitarian needs:

#### i. Population affected by acute malnutrition and related food insecurity

According to the food security and agriculture cluster<sup>10</sup>, **over 10.5 million people**, representing nearly 45% of the total Yemeni population, **need food or agriculture assistance**. The Food Consumer Price Index (FCPI) has risen from 126 to 163 between April 2011 and June 2013, while the Coping Strategy Index (CSI) in 2013 has improved by 6% compared to 2012.

Some districts in the coastal governorates (such as Hajjah and Hodeidah governorates) show critical level of acute malnutrition with Severe Acute Malnutrition (SAM) rates close to 10% and Global Acute Malnutrition (GAM) rates up to 30%. The 2013 YHRP reports that approximately **one million children under five** are suffering from **acute malnutrition**, including **250 000** who are **severely affected** and are at risk of death without treatment. Compounded by persistently high levels of food insecurity and the lack of adequate response countrywide, Yemen is facing a protracted humanitarian crisis.

#### ii. Population affected by conflict and victims of forced displacement

As a result of the prolonged armed conflict that took place **in the North** between 2004 and 2011, an estimated **292 000** people remain **internally displaced** and their return to areas of origin continues to be challenged by a **volatile security context**. **In the South**, more than **160 000 people** displaced in 2011-2012

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<sup>7</sup> United States Dollar

<sup>8</sup> [http://fts.unocha.org/reports/daily/ocha\\_R32sum\\_A993\\_\\_2\\_September\\_2013\\_\(16\\_03\).pdf](http://fts.unocha.org/reports/daily/ocha_R32sum_A993__2_September_2013_(16_03).pdf)

<sup>9</sup> [http://fts.unocha.org/reports/daily/ocha\\_RPool6\\_Y2013\\_\\_1309021603.pdf](http://fts.unocha.org/reports/daily/ocha_RPool6_Y2013__1309021603.pdf)

<sup>10</sup> <http://reliefweb.int/report/yemen/yemen-humanitarian-response-plan-mid-year-review-2013>

**returned** to their areas of origin in Abyan governorate and neighboring areas thanks to a conducive security situation<sup>11</sup>. Restoration of basic services and support to livelihood is necessary in all those areas affected by conflict.

Migrants and asylum seekers from the Horn of Africa continue arriving in Yemen on their way to Gulf countries, mainly to the Kingdom of Saudi Arabia (KSA). Yemen has traditionally adopted an open door policy to Somalis granting them *prima facie* refugee status, and years of migration have resulted in **239 000 registered refugees**<sup>12</sup>. But the majority of the migrants are illegal economic migrants from Ethiopia who are often abused by smugglers and traffickers, who are also at risk of detention and deportation if caught by the authorities. The number of arriving migrants has increased over the past two years. Besides, **some 35 000 migrants**, victims of traffickers or expelled from KSA since April 2013 as a result of a change in foreign workers legislation in the Gulf country, **are extremely vulnerable**<sup>13</sup>.

### 3. HUMANITARIAN RESPONSE

#### 1) National / local response and involvement

The Government of Yemen has limited capacities to respond to the humanitarian needs of its population. Shortage or lack of basic services, such as health care (including nutritional care) is a countrywide phenomenon. Nutritional support to malnourished children by the Ministry of Public Health and Population (MoPHP) falls short of the needs. UNICEF<sup>14</sup> reported 96 322 admissions into the Community Management Acute Malnutrition (CMAM) program from 2011 until mid-2013<sup>15</sup>, with a cure rate of 54% and a defaulter rate of 43%. The Executive Unit<sup>16</sup> manages assistance to people victim of forced displacement with the support of UNHCR and depends on international aid. But ordinary Yemenis continue to provide aid directly to displaced persons through family and communal networks.

#### 2) International Humanitarian Response

Several regional organizations such as the Gulf Cooperation Council and the Organisation of Islamic Cooperation have offices in Yemen. Various Governments in the Gulf region are funding Yemeni organizations outside the YHRP or are actively involved in bilateral programs with the Government of Yemen. Gulf countries have also pledged more than USD 1 billion for humanitarian aid as a part of the USD 7.9 billion pledged at the Friends of Yemen conference held in London in March 2013. However, the full commitment and allocations of these pledges remain unclear.

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<sup>11</sup> Ibidem

<sup>12</sup> UN-OCHA Humanitarian Update 07 August 2013

<sup>13</sup> IOM Situation report 16 June 2013

<sup>14</sup> United Nations Children's Fund

<sup>15</sup> Interim data provided by UNICEF on the CMAM.

<sup>16</sup> The Executive Unit (directly under the Prime Ministers supervision) is the government body responsible for the management of displaced persons

According to OCHA<sup>17</sup>, USD 82.8 million of the YHRP is funded by the EU and its Member States, with a similar amount allocated by the United States<sup>18</sup>.

### 3) Constraints and DG ECHO response capacity

#### i. Access and humanitarian space.

Uncertainty over the process and outcome of the on-going National Dialogue Conference (NDC) has fuelled a state of lawlessness with enhanced opportunities for criminal elements. Everywhere car-jacking, kidnapping and other criminal acts are common. Tribal divisions have deepened also, especially in the oil producing areas in the centre of the country. Access to regions under control of the Houthi communities in the North remains limited and activities in full accordance with humanitarian principles continue to be complicated due to interference of the de facto authorities in this area. Similarly, access to the Southern governorates is difficult as a result of the activities of Al Qaeda in the Arabian Peninsula (AQAP), tribal frictions and the presence of remnants of explosives, landmines and booby-traps.

#### ii. Partners

The presence of international humanitarian agencies in Yemen has expanded with more than 55 INGOs<sup>19</sup> registered in 2013. Notwithstanding, the recruitment and deployment of international staff remain problematic, partially due to concerns over their security and safety.

#### iii. Absorption capacity and efficiency

While the presence of agencies has increased, the pace of implementation of programmes and agencies' absorption capacities and ability to deliver quality aid continue to be of concern. This is due to the difficulty to recruit quality staff and to retain it, as well as to the inability to properly assess needs, to monitor and to evaluate projects.

DG ECHO attaches fundamental importance to ensuring aid effectiveness, sound financial management and respect of humanitarian principles, which implies **monitoring of the action during the lifetime of the project** by DG ECHO's representatives. DG ECHO also considers that assessment and monitoring of projects by its Partners are keys for the quality of its humanitarian interventions, and expects first-hand security assessments from its Partners prior to carrying out its own monitoring mission.

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<sup>17</sup> Office for the Coordination of Humanitarian Affairs

<sup>18</sup> [http://fts.unocha.org/reports/daily/ocha\\_R24\\_E16273\\_\\_\\_1308140100.pdf](http://fts.unocha.org/reports/daily/ocha_R24_E16273___1308140100.pdf)

<sup>19</sup> International non-governmental organization

- 4) Envisaged DG ECHO response and expected results of humanitarian aid interventions.

DG ECHO will encourage its partners to develop their context's analysis and adapt their approach to the type of needs (i.e. acute or chronic malnutrition, food insecurity or "safety net" approach, livelihood support); to scale up their presence in the field while improving the quality of their actions; to strengthen their engagement with government services and development actors for a joint contribution to the national Food Security and Nutrition Policies.

Unless efforts are made to address the structural poverty and chronic vulnerability that characterize Yemen, fragility and humanitarian needs will continue. Yemen will most likely be considered as a **flagship country** under the "action plan for resilience in crisis prone countries 2013-2020". While DG ECHO's objective is to save lives and reduce suffering of the most vulnerable, the interventions will contribute to, or facilitate, building their resilience, particularly towards malnutrition. DG ECHO will also advocate for increasing complementarity between humanitarian aid and long-term structural assistance.

The proposed humanitarian response includes the following activities:

**1. For communities affected by acute malnutrition and related food insecurity, the comprehensive approaches will include:**

- Further scaling up support to CMAM programs and provision of food assistance to ensure access to safe and nutritious food at household level
- Access to health services including primary healthcare supporting referral mechanisms to emergency obstetric and pediatric care; coordination, surveillance and case management in case of disease outbreaks.
- Access to water and Sanitation (WASH), foreseen complementary to nutrition activities: water trucking; rehabilitation and/or reconstruction of water wells and networks; sanitation (latrines, hygiene kits).
- Recovery of livelihoods, improving access to livelihood assets, protecting and preventing livelihood erosion and negative coping strategies, and ensuring the transition towards long-term nutritional support programmes, to set the basis for increased resilience.

**2. For communities affected by conflict or in search of durable solutions and for victims of forced displacement:**

- General food distribution as well as cash and vouchers distribution and livelihood support:
- Shelter and Non-Food Items; basic camp management and maintenance support; distribution of tents; semi-permanent shelter units; distribution of non-food items and assistance packages.

- Emergency rehabilitation of health structure destroyed/damaged by conflict can be envisaged as part of basic services provision; coordination, surveillance and case management in case of disease outbreaks;.
- Water supply through water trucking; rehabilitation and/or reconstruction of water wells and networks; sanitation (latrines, hygiene kits).

### **3. Protection and gender in the delivery of humanitarian assistance:**

- Registration, profiling and verification of victims of forced displacement; camp site design/planning and coordination; assistance and protection to victims of forced displacement; protection monitoring with a focus on children and women; support to refugees in urban settings with a package of assistance including vocational training and protection services.
- Mines risk awareness; mine clearance/removal of unexploded ordnance can be considered as long as they concentrate on facilitating the immediate access for humanitarians to communities affected by conflict, while looking for durable solutions.

### **4. Humanitarian coordination:**

- Support to humanitarian coordination mechanisms including information management; monitoring and assessment of the humanitarian access and response; advocacy for the respect of International Humanitarian Law and humanitarian access.
- Coordination with development actors and government services; enhance coherence with longer term capacity building processes and programmes.

#### Expected results of humanitarian aid interventions

- a) Improving nutritional status and food security of the population most affected by acute malnutrition and related food insecurity, especially young children;
- b) Providing emergency food and non-food assistance to population (IDPs and residents) affected by armed conflict, refugees and other victims of forced displacement;
- c) Improving access to health care, water and sanitation to the population most affected by acute malnutrition or conflict and forced displacement;
- d) Enhanced protection for those affected by conflict and forced displacement and promotion of the application and respect of humanitarian principles;
- e) Emergency response in case of natural disasters and/or disease outbreaks;
- f) Promotion of sustainable return or permanent resettlement of IDPs, refugees and other victims of forced displacement in safety and dignity;

- g) Enhanced coordination of humanitarian action, focusing on priorities and information management in Yemen, and provision of reliable safety and security support to international NGOs for their personnel and operations;
- h) Enhanced coordination and complementarity of humanitarian actions with development and national actions. Increased sustainability of humanitarian interventions. Reduced future humanitarian needs in intervention areas and earlier more effective response.

Effective coordination is essential. DG ECHO supports the **Inter-Agency Standing Committee's Transformative Agenda (ITA)** and encourages partners to demonstrate their engagement in implementing its objectives, to take part in coordination mechanisms (e.g. Humanitarian Country Team/Clusters) and to allocate resources to foster the ITA roll-out.

Partners will be expected to ensure full compliance with **visibility** requirements and to acknowledge the funding role of the EU/DG ECHO, as set out in the applicable contractual arrangements.

#### 4. LRRD, COORDINATION AND TRANSITION

Addressing the main structural causes leading to vulnerability of the population, poverty and economic conditions will help contributing to long term solutions and to building resilience. This will largely depend on the success of the political transition and stabilization process the EU is actively supporting.

##### 1) Other DG ECHO interventions

In case of natural disasters or epidemics, according to the needs, other humanitarian actions could be financed either through the Disaster Relief Emergency Fund (DREF) or under the HIP for small scale humanitarian response or the HIP for epidemics.

##### 2) Other services/donors availability

Closer collaboration will be sought with development actors and regional organizations in the field of nutrition and food security as well as achieving durable solutions for the displaced (internal and international). The national 'Safety Nets' is supported by the World Bank, EU Member States, the European Commission and Gulf Countries, that are providing budget and technical expertise to the Social Welfare Fund (SWF) and the Social Fund for Development (SFD).

##### 3) Other concomitant EU interventions

Nutrition: EU annual action programme includes two components that will complement nutrition activities funded by DG ECHO at community and health unit levels: EUR10 million to support population livelihood and resilience, EUR18 million to improve the delivery of primary health care services and to develop the Ministry of Health capacities at various levels. In addition, EUR 9 million have been

mobilized from the Food Security Thematic Programme (FSTP) to reinforce the Ministry of Health capacity in nutrition

Food aid: The EU funding to WFP were frozen in 2009 and will be released in 2013 for the WFP blanket feeding operation for children under 2 in two governorates, operation otherwise funded by DG ECHO.

Food security information system: The Food Security Information System (FSIS) funded by the EU has embodied the Integrated Phasing Classification (IPC) instrument funded by DG ECHO in 2011/2012 and implemented by FAO. The process that had started with DG ECHO will continue with EU funds (€7 million) for the next three years. The EU is supporting the newly established Food Security Secretariat – launched in May 2013 – within the Ministry of Planning and International Cooperation.

4) Exit scenarios

**The protracted crisis in Yemen will only be overcome through implementation of long-term solutions strengthening resilience of the most vulnerable population.** At present, DG ECHO should continue building on already existing synergies between DEVCO and DG ECHO interventions, while maintaining sufficient flexibility to adapt its interventions to a highly volatile and continuously changing context.