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# HUMANITARIAN IMPLEMENTATION PLAN (HIP) YEMEN

AMOUNT: EUR 50 000 000

#### 00. MAJOR CHANGES SINCE PREVIOUS VERSION OF THE HIP

#### December 2015 – Modification No. 2

The current conflict has significantly exacerbated the humanitarian situation in Yemen, which was already in a dire state before the outbreak of hostilities in March 2015. People previously suffering from food insecurity, malnutrition and lack of access to primary health care are now also affected by conflict and displacement. Nine months into the conflict, the humanitarian crisis has reached alarming proportions and humanitarian organisations are openly describing the situation as catastrophic. According to the 2016 Humanitarian Needs Overview (HNO), the number of people in need of humanitarian aid has increased from 15.9 million in late 2014 to 21.2 million in October 2015, i.e. 82% of the Yemeni population. By now, 14.4 million people are food insecure; 19.3 million lack access to water and sanitation; 14.1 million are in need of health care; 3 million need nutrition support and 2.8 million need shelter/non-food items. More than 2.3 million people are internally displaced.

Government institutions are no longer able to deliver basic services to people in need, including provision of basic health care and nutrition services, water and electricity supply and social safety nets. Yemen is running out of essential supplies and fuel. The severity of the situation is reflected in UNs classification of it as a Level 3 crisis in July (one of only four Level 3 crises world-wide). In spite of the enormous humanitarian needs, the 2015 Humanitarian Response Plan of USD 1.6 billion is only funded at 51%.

With the additional funding of EUR 17 000 000, ECHO will prioritize life-saving support in the sectors of health, wash, nutrition and food security, which have been particularly affected by the conflict and the collapse of government services.

#### July 2015 – Modification No. 1

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Following the Houthi take-over of Sana'a in September 2014, the dissolution of the government in January 2015, and the escape of President Hadi to Aden in February 2015, Yemen has been experiencing a period of severe political instability and conflict. In March 2015, President Hadi fled to Saudi Arabia and called for a military intervention to restore his legitimate government. Saudi Arabia, with the support of a coalition of nine Arab states, launched an air campaign of Yemen on 26 March. Since then, the conflict has spread to 21 out of 22 governorates with airstrikes targeting Houthi/pro-Saleh forces and military infrastructure; Houthis and pro-Saleh forces fighting pro-Hadi forces and Popular Resistance Committees in the south; on-the-ground fighting spreading to the major cities of Aden and Taiz; and a gradual expansion of Islamist forces, including AQAP and IS.

Four months into the conflict, the humanitarian crisis has reached alarming proportions and humanitarian organisations are openly describing the situation as catastrophic. Yemen is running out of essential supplies and fuel. Basic public services are reaching

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breaking point and WHO is warning that health care services are at the verge of collapse. According to the revised Humanitarian Needs Overview (June 2015), 21.1 million people (80% of the total population) are now in need of humanitarian assistance; 12.2 million people have been directly affected by the conflict, of whom more than 1.2 million have been forced from their homes; 15.2 million people are in need of healthcare; 12.9 million people are food insecure; 1.5 million women and children are in need of nutrition services; and 20.4 million people are in need of water and sanitation. The gravity of the situation is reflected in the UN decision to declare it on 1 July a Level 3 emergency along with Syria, Iraq and South Sudan.

Large-scale internal displacement is taking place within Yemen due to airstrikes, localized conflict as well as the designation of Sa'ada and north Hajjah as military zones. According to the Task Force on Population Movements, 1 267 590 people have been internally displaced as of 6 July. In addition, Yemenis, Ethiopians and Somalis continue to make the sea crossing from Yemen towards the Horn of Africa. According to UNHCR, as of 10 July over 51 646 people of mixed nationalities have left Yemen for Djibouti, Ethiopia, Oman, Saudi Arabia, Somalia, and Sudan mainly by sea or overland.

Access constraints, both to Yemen and inside the country, are unprecedented and currently represent one of the main challenges to relief operations. The air and sea blockade imposed by the Coalition has meant only limited humanitarian and commercial supplies have been allowed into the country. Moving supplies inside Yemen is equally challenging as a result of increasing fragmentation of military power and allegiances, with proliferation of armed groups and strengthening of tribal, political and regional divide. As a result, humanitarian partners need to engage in negotiations with a number of actors and groups on the ground to move aid inside the country.

The revised Yemen Humanitarian Response Plan (YHRP) for 2015 --launched in Geneva on 19 June-- reflects the increased need for humanitarian assistance. Funding requirement for the revised plan amounts to USD 1.6 billion of which USD 758 million are allocated to critical life-saving activities.

In view of the dramatic deterioration of the humanitarian situation in Yemen recorded since the escalation of the conflict in March 2015, the European Commission decided to increase by EUR 8 000 000 the budget of the HIP 2015 for the Yemen Crisis. This additional funding will be mainly used to respond to emerging needs as a result of the conflict including pre-existing crises (food insecurity, malnutrition, lack of access to primary healthcare) that have been aggravated by the conflict.

#### 1. CONTEXT

Yemen ranks as the poorest country in the Middle East and in the North Africa region and is one of the poorest countries in the world (154<sup>th</sup> out of 187 countries in line with the UNDP Human Development Index<sup>1</sup>). According to the 2013 Global Hunger Index the country is the 7<sup>th</sup> most food insecure in the world (72<sup>nd</sup> out of 78 countries<sup>2</sup>).

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<sup>&</sup>lt;sup>1</sup> http://hdr.undp.org/en/content/table-1-human-development-index-and-its-components

<sup>&</sup>lt;sup>2</sup> http://www.ifpri.org/sites/default/files/publications/ghi13.pdf

Since its unification in 1990, Yemen has been affected by civil strife, political instability and prolonged internal armed conflicts, combined with poor economic performance, rampant poverty, persistently high levels of malnutrition and food insecurity. Following the uprising in 2011, Yemen has embarked on a political transition based on an agreement brokered by the Gulf Cooperation Council (GCC) in November 2011. The National Dialogue Conference, launched in March 2013, concluded its deliberations in January 2014 with a decision to transform Yemen into a Federal State. A Constitution Drafting Committee was appointed in March 2014 and a reshuffle of government members followed. Since then the progress has been slow. As part of a set of structural reforms negotiated with the IMF, the Government decided to lift the fuel subsidies on 30 July. The following hike in prices spurred a series of anti-government protests in Sana'a led by Al Houthi Shia minority. Tensions are growing and the political transition is at a critical cross-roads.

The fragile political process has not translated into visible improvements for ordinary Yemenis. The country has some of the worst social indicators in the world and a young and rapidly growing population of about 24.4 million people<sup>3</sup>. With a population growth rate of 2.3% per year<sup>4</sup>, public services, including health, education and social welfare remain insufficient and access to the widely dispersed communities in many parts of the country represents a major challenge. Food insecurity levels remain alarming and the country is facing an unprecedented nutritional emergency with over 1 million children acutely malnourished and 2.2 million chronically malnourished. Refugees, migrants and asylum seekers from the Horn of Africa continue to arrive in Yemen on their way to the Gulf countries, mostly the Kingdom of Saudi Arabia (KSA). In addition, due to changes in the foreign workers legislation of KSA, more than 550 000 Yemeni migrant workers have been expelled by the country since April 2013, and are no longer able to send remittances to their families (the overall loss in remittances is estimated around USD 15 million so far). The scarcity of natural resources, particularly water, adds to the overall vulnerability of the country.

All these factors, combined with the increasing trend in food prices and fuel price volatility, as well as the irregular assistance provided by the Yemeni Social Welfare Fund, significantly increased humanitarian needs and chronic vulnerability everywhere in Yemen. At the same time, state services are largely ineffective with only partial coverage and insufficient human resources.

The underlying causes of food insecurity are likely to persist in the medium and long term. Besides, the current level of indebtedness, in a context of little income opportunities and high households' vulnerability, compounded by the removal of fuel subsidies and competition over limited resources, could easily lead to an aggravation of food insecurity in the next months and make households even more vulnerable to shocks. The number of internally displaced people (IDPs) is estimated around 340 000. By 2013 some 170 000 displaced persons had returned to Abyan Governorate after an upsurge of conflict in previous year that had caused large-scale displacement as well as widespread

<sup>&</sup>lt;sup>3</sup> Source: The World Bank (<a href="http://data.worldbank.org/country/yemen-republic">http://data.worldbank.org/country/yemen-republic</a>). Approximately 67–70 % of the Yemen's population is under the age of 25 (UNDP - Yemen Multi-dimensional livelihood assessment in conflict affected areas, 2014)

<sup>&</sup>lt;sup>4</sup> *Source*: The World Bank (http://data.worldbank.org/indicator/SP.POP.GROW). ECHO/YEM/BUD/2015/91000

damage to infrastructure and public and private property. The protracted conflict in the North with the Houthi has entered a new phase with an increase in clashes extending well beyond the governorate of Sa'ada. New waves of conflict in Amran and in Al Jawf resulted into increased displacement inside the same governorates and in the surrounding ones. Similarly, episodes of tension in the South, marked by the activities of opponent parties and armed groups, continue to pose challenges to the political and social dynamics and the living conditions of thousands of Yemenis.

The UN estimates that 58 per cent of the population (14.7 million people) is in need of humanitarian assistance<sup>5</sup>. Yemen scores 3/3, the most severe level, on the Vulnerability and Crisis Index of the European Commission's Directorate General for Humanitarian Aid and Civil Protection (ECHO) and remains a forgotten crisis in 2015 for the fifth consecutive year.

#### 2. HUMANITARIAN NEEDS

## 1) Affected people / potential beneficiaries

The 2014 Yemen Humanitarian Response Plan (YHRP) indicates that half of the Yemeni population (13.1 million out of 24.4 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. Over one million children under the age of 5 suffer from acute malnutrition; a quarter of them is severely malnourished and in need of urgent lifesaving therapeutic care.

## 2) Description of the most acute humanitarian needs

The main needs concern on one side communities affected by acute malnutrition in areas where GAM rates are most alarming; on the other one, the large number of internally displaced people and recent returnees as well as asylum seekers and vulnerable migrants from the Horn of Africa and migrants in need of primary assistance expelled from KSA.

# i. Communities affected by acute malnutrition

While a general improvement of the food security situation in Yemen has been recorded in 2014 (from 45% national food insecurity rate in 2011 to 41% in 2014<sup>6</sup>), chronic and acute malnutrition remain highest. With 58% of children stunted, Yemen has the world's second highest rate of chronic malnutrition, second only to Afghanistan. Poor feeding practices, lack of education, high rate of morbidity from childhood illnesses, widespread food insecurity, poor hygiene and sanitation, limited access to health and nutrition services are among the main contributing factors. High rates of acute malnutrition are particularly alarming among children under 5 and pregnant and lactating women (PLW). In 2014, 1 060 000 children 6-59 months are estimated to be acutely malnourished and approximately 280 000 severely acutely malnourished.

<sup>&</sup>lt;sup>5</sup> Yemen Humanitarian Response Plan 2014

<sup>&</sup>lt;sup>6</sup> WFP Yemen - CFSS Preliminary findings, July 2014.

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## ii. Populations 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 340 000 people remain internally displaced while an additional 65 000 have been displaced since 2012, according to UN sources. Meanwhile, approximately 160 000 internally displaced people have returned to their areas of origin in the southern Abyan governorate and neighboring areas as security improved. While basic services (health, water, food, shelter) are required for all groups of the Yemeni population affected by conflict, assistance in the north should adjust to a situation of protracted internal displacement still affecting roughly 340 000 persons whose return to areas of origin is challenged by an uncertain security context. In the south, where conditions have been conducive for the return of the majority of IDPs, restoration of basic services and livelihood support is required.

Years of migration from the Horn of Africa to Yemen resulted in more than 250 000 registered refugees in the country<sup>8</sup>. Yemen has traditionally adopted an open door policy to Somalis granting them *prima facie* refugee status. The flow of migrants continued in the past two years with an increased proportion of Ethiopians. IOM estimates that there are approximately 65 000 vulnerable migrants in the country<sup>9</sup>, often abused and smuggled by human traffickers. Contextually, more than 550 000 Yemeni migrant workers have been expelled from KSA since April 2013<sup>10</sup>.

### 3. HUMANITARIAN RESPONSE

## 1) National / local response and involvement

The government's response to humanitarian needs remains inadequate due to limited capacity and resources. Shortage or lack of basic services, such as health care (including nutritional care) is a countrywide phenomenon. According to the national Nutrition Information System, the number of severe acute malnourished children enrolled into a nutrition therapeutic programme has more than doubled from 84 230 children in 2012 to over 160 000 in 2013. Despite this, nutritional support to malnourished children by the Ministry of Public Health and Population (MoPHP) falls short of the needs. The Executive Unit for IDPs<sup>11</sup> performs mainly coordination functions and operates with the technical support of UNHCR. In the absence of external assistance, displaced people are supported mostly through family and community networks.

# 2) International Humanitarian Response

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<sup>&</sup>lt;sup>7</sup> WFP Yemen - CFSS Preliminary findings, July 2014

<sup>&</sup>lt;sup>8</sup> UN-OCHA Humanitarian Dashboard (June 2014).

<sup>&</sup>lt;sup>9</sup> IOM Situation report (16 June 2014).

 $<sup>^{10}</sup>$  UN-OCHA Humanitarian Bulletin Issue 27 | 13 May<br/>– 5 June 2014

<sup>&</sup>lt;sup>11</sup> The Executive Unit for IDPs (directly under the Prime Ministers supervision) is the government body responsible for the management of internally displaced persons.

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The Yemen Humanitarian Response Plan (YHRP) requires USD 592 million. As of August 2014, the Plan was funded at 41% of its requirements<sup>12</sup>, while the UN-administered ERF accumulated USD 7 million.

According to OCHA, as of August 2014 the EU (European Commission and member states) financial support to the YHRP was approximately USD 117.8 million, while the United States allocation amounted to USD 77.8 million<sup>13</sup>.

Several regional organizations, such as the Gulf Cooperation Council and the Organisation of Islamic Cooperation, have offices in Yemen. Various countries in the Gulf region are funding Yemeni organizations outside the YHRP or are actively involved in bilateral programmes 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 meeting in 2012. Full disbursement of funding commitments is nevertheless still pending. In spite of the international attention to the political transition process and to the US-led war on terror and fight against Al-Qaeda in the Arabian Peninsula (AQAP), Yemen remains a forgotten crisis, in line with ECHO's rating.

### 3) Constraints and ECHO response capacity

Access and humanitarian space

Following the conclusion of the National Dialogue Conference (NDC) in January 2014 and the appointment of the constitution Drafting Committee in March 2014, security conditions have experienced a progressive deterioration. A state of lawlessness has been recorded in cities as well as in the outlying areas of the different governorates, with enhanced opportunities for criminal elements. Car-jacking, kidnapping and other criminal acts have become common. Tribal divisions further deepened, especially in the oil producing areas in the centre of the country. The Al Houthi's control significantly expanded in the North further limiting access. Similarly, access to the southern governorates remains difficult as a result of AQAP's activities. In addition, the armed wing of the Al Hirak (pro south secession) movement has become more active in the southern governorates, ensuing in open armed conflict with the YAF. Tribal frictions remain at the national level while the presence of remnants of explosives, landmines and booby-traps hinders humanitarian access in the north and the south.

# Partners' absorption capacity on the ground and efficiency of operations

The presence of international humanitarian agencies in Yemen has further expanded with more some 60 INGOs registered in 2014. The increased number of humanitarian agencies has led to a wider territorial expansion in the provision of aid. Nevertheless, this expansion did not correspond to an improvement in performance during emergencies: access and its negotiation process remains of high concern as well as quality of aid provided. The recruitment and deployment of international staff, increasingly problematic, result in high turnover and limitations in available expertise by further impacting on the quality of assistance. Local powers' interference and dynamics in the provision of aid, and humanitarian actors' capacity to maintain neutrality and

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<sup>&</sup>lt;sup>12</sup> Financial Tracking Service Yemen 2014 (http://fts.unocha.org).

<sup>&</sup>lt;sup>13</sup> http://fts.unocha.org/reports/daily/ocha\_R24\_E16436\_\_\_1407241129.pdf ECHO/YEM/BUD/2015/91000

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independence in their operations represent issues of additional concern. Human resources limitations (both in terms of quality of available expertise and contract duration), and increased dependence on national partners to assess, monitor and evaluate operations will need to be closely monitored in 2015 as directly impacting on quality of aid delivered. Furthermore, visa restrictions applied by the government to INGOs and UN partners is already hampering the capacity of organizations to deploy adequate resources to manage programmes.

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

In line with the humanitarian situation of the country and key humanitarian needs, ECHO response in Yemen will be by its nature multi-sectoral, focusing on highly vulnerable geographical areas and populations. Partners' humanitarian responses are expected to be defined in line with the specific needs and profile of the targeted communities.

Yemen has been designated by the EU as a flagship country for resilience under the "Action Plan for resilience in crisis prone countries 2013-2020". While maintaining its primary focus on life saving activities, ECHO will continue to mainstream resilience and endeavour to ensure effective synergies between humanitarian and development actions tackling chronic vulnerabilities. From ECHO perspective, addressing the most pressing humanitarian needs remain the essential precondition to lay the foundation for a successful resilience building strategy.

The proposed humanitarian response includes the following activities and expected results:

<u>Nutrition and food security</u>: comprehensive approaches to reduce acute malnutrition for all target groups residing in areas where GAM rates are the highest (primarily in the coastal governorates). This includes further scaling up support to CMAM programmes, as well as provision of food assistance and livelihoods to ensure access to safe and nutritious food at household level. For conflict affected communities and victims of forced displacement general food distribution (HFA) is foreseen. Cash and vouchers distribution and livelihoods projects are envisaged both for communities affected by acute malnutrition and conflict in search of durable solutions.

- → Expected results:
- improved nutritional status of communities affected by acute malnutrition, particularly children under the age of five and pregnant and lactating women;
- improved food availability and access to the most vulnerable populations affected by armed conflicts (IDPs, returnees and host communities), asylum seekers and other victims of forced displacement.

<u>Health</u>: access to health services including primary healthcare; referral mechanisms, such as a referral to emergency obstetric and pediatric care; coordination, surveillance and case management in case of disease outbreaks; training and provision of equipment for emergency first aid; emergency rehabilitation of health structure destroyed/damaged by conflict.

Water and Sanitation (WASH): water supply through water trucking, rehabilitation and/or reconstruction of water and sanitation facilities in clinics (water system, latrines,

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distribution of hygiene kits). Rehabilitation/reconstruction of water wells and networks in response to the conflict related consequences.

- → Expected results:
- improved access to health care, and water and sanitation for acutely malnourished individuals, conceived as integral components of multi-sectoral interventions addressing under-nutrition;
- access to health, and water and sanitation services ensured to cover the basic needs of populations affected by conflict and forced displacement.

<u>Shelter and Non-Food Items</u>: basic camp management and maintenance support; distribution of tents; semi-permanent shelter units; distribution of non-food items and assistance packages to victims of forced displacements in search of durable solutions.

- → Expected result:
- emergency shelter ensured for populations affected by conflict and forced displacement.

<u>Protection and gender in the delivery of humanitarian assistance</u>: 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.

- → Expected result:
- enhanced protection for populations affected by conflict and forced displacement, and promotion of application and respect of IHL and humanitarian principles.

<u>Humanitarian coordination</u>: advocacy for respect of International Humanitarian Law (IHL) and for humanitarian access; support to humanitarian coordination mechanisms including information management; monitoring and assessment of humanitarian access and response in Yemen.

#### Expected result:

- Enhanced coordination of humanitarian actions with a focus on humanitarian priorities and information management, and provision of safety and security assistance to international NGOs.
- Greater awareness at political level of humanitarian issues and facilitation of a more enabling environment for humanitarian activities.

Effective coordination is essential. 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 allocate resources to foster the ITA rollout.

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

## 4. LRRD, COORDINATION AND TRANSITION

Mainstreaming resilience remains a key component of ECHO strategy for Yemen. To this aim, effective synergies will be ensured between humanitarian and development actors through strengthened coordination and participation to the DEVCO<sup>14</sup>-led joint programming process for Yemen and joint analysis frameworks.

While addressing the most pressing humanitarian needs remain the main objective of ECHO response in Yemen, resilience opportunities will be systematically identified and factored in life-saving interventions whenever relevant and efficiently attainable.

# 1) Other services/donors availability

Closer collaboration will continue to be sought with development actors and regional organizations in the fields of nutrition and food security as well as to achieve durable solutions for the displaced population (internal and international). DEVCO, EU Member States (MS), the World Bank and Gulf Countries are providing budget and technical support to national safety nets/social protection systems such as the Social Welfare Fund (SWF) and the Social Fund for Development (SFD). DEVCO is currently leading a Joint Programming process focusing on resilience with EU MS.

# 2) Other concomitant EU interventions

<u>Nutrition</u>: DEVCO 2014 Annual Action Programme for Yemen (part 2) includes two components that could potentially complement nutrition interventions funded by ECHO at community and health unit levels, namely a EUR 16 million programme "Enhancing rural resilience through the creation of a Community Health Workers Network", and a EUR 35 million programme "Enhancing rural resilience in Yemen" through support to sustainable livelihoods. An additional project aimed at enhancing resilience through strengthening of nutrition systems is also envisaged.<sup>15</sup>

<u>Food security information system</u>: the Food Security Information System (FSIS) funded by DEVCO has embodied the Integrated Phasing Classification (IPC) instrument funded by ECHO in 2011/2012 and implemented by FAO. The process started with ECHO's assistance will therefore continue with DEVCO funds (EUR 7 million) for the next three years. Furthermore, DEVCO is supporting the newly established Food Security Secretariat --launched in May 2013-- within the Ministry of Planning and International Cooperation.

#### 3) Exit scenarios

It is premature to outline an exit scenario while the humanitarian crisis is increasing in number and severity. Further instability and internal conflicts may be envisaged in the coming months as the political transition process advances. In this context, it is essential for ECHO to maintain sufficient flexibility to adapt its actions to a highly volatile and continuously changing context.

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<sup>&</sup>lt;sup>15</sup> Contract ref. DCI-MED/2013/24-505.

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The underlying causes of the Yemen crisis need to be addressed in a comprehensive manner by humanitarian and development actors. ECHO is therefore endeavouring to ensure effective synergies with development interventions in order to tackle chronic vulnerabilities and contribute to the implementation of long-term solutions.