

TECHNICAL ANNEX

Yemen

FINANCIAL, ADMINISTRATIVE AND OPERATIONAL INFORMATION

The provisions of the financing decision ECHO/WWD/BUD/2023/01000 and the General Conditions of the Agreement with the European Commission shall take precedence over the provisions in this document.

The activities proposed hereafter are subject to any terms and conditions that may be included in the related Humanitarian Implementation Plan (HIP).

1. CONTACTS

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2. FINANCIAL INFO

Indicative Allocation²: EUR 145 119 246 of which an indicative amount of EUR 12 750 000 for Education in Emergencies.

In line with DG ECHO's commitment under the Grand Bargain initiative, pilot Programmatic Partnerships have been launched in 2020, 2021 and 2022 with a limited number of partners, including two of them in Yemen (i.e., IFRC and OCHA). An indicative amount of **EUR 2 000 000** will be dedicated to these Programmatic Partnerships in 2023. In addition, new Programmatic Partnerships could be signed in 2023³. Part of the allocation of this HIP could therefore also be attributed to these new Programmatic Partnerships.

Indicative breakdown per Actions as per Worldwide Decision (in euros)⁴:

Country	Action (a) Man-made crises and natural hazards	Action (b) Initial emergency response/small-scale/epidemics	Action (c) Disaster Preparedness	Actions (d) to (f) Transport / Complementary activities	TOTAL
YEMEN	142 370 000		2 630 000		145 000 000
Programmatic Partnership Communication & Coordination	119 246				119 246
Total					145 119 246

3. PROPOSAL ASSESSMENT

a) Co-financing:

Under the EU Financial Regulation, grants must involve co-financing; as a result, the resources necessary to carry out the action must not be provided entirely by the

² The Commission reserves the right not to award all or part of the funds made or to be made available under the HIP to which this Annex relates, or to allocate part of the funding to interventions with a regional or multi-country approach.

³ More information can be found in the 'Guidance to Partners – DG ECHO Programmatic partnerships 2023'<https://www.dgecho-partners-helpdesk.eu/ngo/humanitarian-partnership-2021-2027/programmatic-partnership>

⁴ For flexibility and fast responsiveness purposes, this breakdown can be adjusted within certain limits based on newly arising needs.

grant. An action may only be financed in full by the grant where this is essential for it to be carried out. In such a case, justification must be provided in the Single Form (section 10.4).

b) Financial support to third parties (implementing partners)

Pursuant to Art. 204 FR, for the implementation of actions under this HIP, partners may provide financial support to third parties, e.g. implementing partners. This financial support can only exceed EUR 60 000 if the objectives of the action would otherwise be impossible or excessively difficult to achieve. Such situations can occur in cases where only a limited number of non-profit non-governmental organisations have the capacity, skills or expertise to contribute to the implementation of the action or are established in the country of operation or in the region(s) where the action takes place.

Ensuring broad geographical/worldwide coverage while minimising costs and avoiding duplications concerning in particular presence in country, prompted many humanitarian organisations to network, e.g. through families or confederations. In such a context, the situations referred to above would imply that the partner would rely on other members of the network. In such cases, justification must be provided in the Single Form.

c) Alternative arrangements

In case of country or crisis-specific issues or unforeseeable circumstances, which arise during the implementation of the action, the Commission (DG ECHO) may issue specific ad-hoc instructions which partners must follow. Partners may also introduce via the Single Form duly justified requests for alternative arrangements to be agreed by the Commission (DG ECHO) in accordance with Annex 5 to the Grant Agreement.

d) Field office costs

Costs for use of the field office during the action are eligible and may be declared as unit cost according to usual cost accounting practices, if they fulfil the general eligibility conditions for such unit costs and the amount per unit is calculated:

- i. using the actual costs for the field office recorded in the beneficiary's accounts, attributed at the rate of office use and excluding any cost which are ineligible or already included in other budget categories; the actual costs may be adjusted on the basis of budgeted or estimated elements, if they are relevant for calculating the costs, reasonable and correspond to objective and verifiable information

and

- ii. according to usual cost accounting practices which are applied in a consistent manner, based on objective criteria, regardless of the source of funding.

e) Actions embedded in multi-year strategies

Funding under this HIP may be used to finance actions implemented in the framework of multi-year strategies, as and when provided for in the HIP.

f) Regional and multi-country actions

Regional/multi-country actions can be supported under this HIP (and where relevant in conjunction with other HIPs⁵), where they are proven more suitable/effective than country-based interventions to respond to identified needs, taking into account the operating context, the strategy and the priorities set out in the HIP (or respective HIPs), the operational guidelines provided in section 4.1.2. of this Annex, as well as the applicant organisation's capacities. The proposals should specify the breakdown between the different country allocations.

4. ADMINISTRATIVE INFO

Allocation round 1

- a) Indicative amount: up to EUR 110 000 000.
- b) Costs will be eligible from 01/01/2023⁶
- c) The initial duration for the Action may be up to 24 months or more, including for actions on Disaster Preparedness and Education in Emergencies, as well as in other sectors when a multi-year duration would increase the efficiency and effectiveness of the action. Follow-up actions, which continue/extend ongoing operations financed under the 2021-2027 Multiannual Financial Framework (MFF), can be submitted as modification requests for the ongoing action with a time extension of up to 24 months and a total duration of the modified action of up to 48 months. The same approach may also be used to the extent appropriate in furtherance of any multi-year strategies provided for by the HIP (see point 3e)⁷. Education in Emergencies actions should have an initial duration of at least 24 months unless there is a needs- or context-based justification for a shorter duration.
- d) Potential partners⁸: All DG ECHO Partners.
- e) Information to be provided: Single Form or modifications requests of on-going actions⁹.
- f) Indicative date for receipt of the above requested information: by 20/12/2022.

⁵ For multi country actions falling under more than one HIP, partners are requested to submit only one proposal in APPEL. The single form should refer to the HIP that covers the majority of targeted countries.

⁶ The eligibility date of the Action is not linked to the date of receipt of the Single Form. It is either the eligibility date set in the Single form or the eligibility date of the HIP, whatever occurs latest. In case of amendments to existing agreements, the eligible date will however be the eligible date set in the initial agreement.

⁷ Additional guidance may be issued by DG ECHO in this respect, as appropriate.

⁸ Unless otherwise specified potential NGO partners refer to certified partner organisations.

⁹ Single Forms will be submitted to DG ECHO using APPEL.

Allocation round 2

- a) Indicative amount: up to EUR 26 000 000.
- b) Costs will be eligible from 01/01/2023¹⁰.
- c) The initial duration for the Action may be up to 24 months.
Potential partners: All DG ECHO Partners
- d) Information to be provided: DG ECHO will consider for funding proposals from partners submitted for allocation round 1 in December 2022.

Allocation round 3

- a. Indicative amount: up to EUR 1 944 790
- b. Cost will be eligible¹¹ from 01/06/2023
- c. Potential partner: IFRC. The funding will be allocated to the pilot Programmatic Partnership action ‘Accelerating local action in humanitarian and health crises’ in the following countries: South Sudan, Uganda
- d. Information to be provided: Single form⁴.

Allocation round 4

- a. Indicative amount: up to EUR 7 174 456
- b. Cost will be eligible¹² from 01/10/2023.
- c. The initial duration for the Action may be up to 24 months. Follow-up actions, which continue/extend ongoing operations financed under the 2021-2027 Multiannual Financial Framework (MFF), can be submitted as modification requests for the ongoing action with a time extension of up to 24 months and a total duration of the modified action of up to 48 months.
- d. Potential partners: the UN World Food Programme (WFP) has been preselected given their mandate and proven distinct capacity across the country for the provision of life-saving food and nutrition assistance to severely food insecure crisis-affected households.
- e. Information to be provided: Single Form or Modification request of on-going actions¹³.

¹⁰ The eligibility date of the Action is not linked to the date of receipt of the Single Form. It is either the eligibility date set in the Single form or the eligibility date of the HIP, whatever occurs latest. In case of amendments to existing agreements, the eligible date will however be the eligible date set in the initial agreement.

¹¹ *Idem*

¹² *Idem*

¹³ Single Forms will be submitted to DG ECHO using APPEL.

4.1. Operational requirements:

4.1.1. Assessment criteria:

- 1) Relevance
 - How relevant is the proposed intervention; is it compliant with the objectives of the HIP?
 - Has a joint needs assessment been used for the proposed intervention (if existing)? Have other recent and comprehensive needs assessments been used?
 - Has the proposed intervention been coordinated with other humanitarian actors?
- 2) Capacity and expertise
 - Does the partner, with its implementing partners, have sufficient expertise (country/region and/or technical)?
 - How does the partner contribute to developing/strengthening local capacity?
- 3) Methodology and feasibility
 - Quality of the proposed response strategy, including intervention logic/log frame, output & outcome indicators, risks and challenges.
 - Feasibility, including security and access constraints.
 - Quality of the monitoring arrangements.
- 4) Coordination and relevant post-intervention elements
 - Extent to which the proposed intervention is to be implemented in coordination with other humanitarian actors and actions (including, where relevant, the use of single interoperable registries of beneficiaries).
 - Extent to which the proposed intervention contributes to resilience and sustainability.
- 5) Cost-effectiveness/efficiency/transparency
 - Does the proposed intervention display an appropriate relationship between the resources to employed, the activities to be undertaken and the objectives to be achieved?
 - Is the breakdown of costs sufficiently documented/explained?¹⁴

In case of actions ongoing in the field, where DG ECHO is requested to fund the continuation thereof, a field visit may be conducted by DG ECHO field expert (TA) to determine the feasibility and quality of the follow-up action proposed.

¹⁴ In accordance with the relevant section of the Single Form guidelines (section10)

No award will be made to NGO partner organisations which have not complied with their obligations concerning the submission of audited financial statements (i.e., which would not have submitted those in due time to the Commission without a proper justification) or which would appear not to offer sufficient guarantee as to their financial capacity to implement the proposed actions (in light of their liquidity and independency ratios as appearing from their latest available annual statutory accounts certified by an approved external auditor).

4.1.2. *Specific operational guidelines and operational assessment criteria:*

This section outlines the specific operational guidelines that DG ECHO partners need to take into account in the design of humanitarian operations supported by DG ECHO. It also lists and explains the assessment criteria – based on those outlined in section 4.1.1 - that DG ECHO will apply in the specific context of the HIP to which this Technical Annex relates when assessing proposals submitted in response to the related HIP.

The HIP Policy Annex should be consulted in parallel.

For 2023, DG ECHO operational guidelines for Yemen remain structured around a two-point entry strategy:

- 1) Integrated response to populations directly exposed to conflict, disasters caused by natural hazards, and displacement. DG ECHO will prioritise emerging needs resulting from ongoing violence and sudden disasters while continuing to address acute needs of the most vulnerable hosting communities and protracted IDPs.
- 2) Integrated response to the health, nutrition (CMAM and IYCF¹⁵) and food security crises, including WASH to prevent transmission of epidemics and malnutrition.

4.1.2.1. General Priorities

Targeting

Under entry point 1, three priority groups are identified:

- i. Populations currently living in active conflict areas.
- ii. Populations in the acute phase of forced displacement (within 3 months).
- iii. Populations settled in IDP sites where gaps in lifesaving, essential service provision and disaster preparedness have been independently identified.

Actions designed *in support of populations in IDP sites* should ensure the provision of essential services during displacement, using an area-based approach and prioritizing access to adequate information and protection assistance. Depending on evolving displacement dynamics and scenarios, it is possible to envisage prioritized activities supporting *principled durable solutions*, including return.

Under entry point 2, DG ECHO will prioritise areas where acute malnutrition/food insecurity indicators surpass the emergency nutrition thresholds, with priority given to under-served locations within IPC 4+ and/or inter-cluster severity mapping 4 or worse.

¹⁵ Community-based Management of Acute Malnutrition; Infant and Young Child Feeding.

Proposals must align with system-wide joint assessments including IPC reports and with the inter-cluster severity mapping.

Transfer Modalities

The choice of transfer modalities should be informed by a needs-based response and risk analysis, incorporating joint and timely market analysis as well as operational and environmental analyses. The use of cash should systematically be considered, across the variety of response mechanisms funded by DG ECHO (anticipatory action, rapid response mechanisms, emergency responses, crisis modifiers, and shock-responsive social protection). All cash interventions should comply with [DG ECHO's cash thematic policy](#) (including the sector-specific considerations included in its Annex 3). In addition, programmes above EUR 10 million should comply with the large-scale cash guidance note.

DG ECHO promotes the adoption of a common system and/or coordinated programming approaches to reduce fragmentation and avoid duplication. This includes better operational coordination, coordinated approaches to vulnerability-based targeting, data interoperability to facilitate deduplication and referrals (respecting data protection requirements), a common payment mechanism, a common feedback mechanism and a common results framework. DG ECHO will systematically assess the cost-efficiency of different modalities, using the Total Cost to Transfer Ratio (TCTR), alongside the analysis of effectiveness.

DG ECHO promotes, wherever appropriate, a single multipurpose cash (MPC) payment to meet recurrent basic needs and timely referral pathways to meet specific multi-sectoral outcomes. The value of cash assistance should be adequate to cover or contribute to emergency basic needs and should be complemented by other relevant sectoral interventions which cannot be met through cash. Cash assistance should be risk informed and targeted based on socio-economic vulnerability, and the protection concerns of individuals and groups. The sectoral outcomes of cash programmes should be monitored against defined objectives in a consistent way. The monitoring of MPC interventions should comply with the cross-cutting and sector-specific Grand Bargain MPC outcome indicators. Multi-sectoral market analysis and monitoring should be ensured, in real time, to inform and adapt assistance, irrespective of the modality. In contexts of high inflation and currency depreciation, partners should put in place sound trigger mechanisms to adapt assistance based on market monitoring data, and design programmes from the outset to anticipate potential inflationary shocks. DG ECHO maintains its commitment to providing cash, even in contexts of high inflation, provided that programming can be adequately adapted, in line with the “Good Practice Review on cash in contexts of high inflation/depreciation”¹⁶. Whenever duly justified to mitigate market price volatility, partners are encouraged to include contingencies to adapt the transfer value, increase coverage, and/or change to an alternative modality to preserve household purchasing power capacity. DG ECHO expects Cash Working Groups to provide coordinated guidance on the above, under the leadership of the inter-sector/inter-cluster and in collaboration with relevant sectoral working groups.

¹⁶ <https://www.calpnetwork.org/publication/good-practice-review-on-cash-assistance-in-contextsof-high-inflation-and-depreciation/>

Cross-cutting priorities

All proposals must address the following requirements:

- DG ECHO supports an integrated and area-based approach. Integration of services can be achieved through one organisation, with proven sector expertise for all sectors proposed and/or through coordination or integration with other organisations. Proposals shall demonstrate sectorial capacity within integrated sectors of intervention and engaged referral pathways for complementary assistance, when relevant.
- DG ECHO expects all partners to demonstrate how the proposed actions contribute to system-wide Centrality of Protection and its contextual priorities, regardless the sector of intervention.
- Affected populations, host communities and relevant stakeholders shall be consulted and participate in the decision-making processes, planning and implementation. Community participation and ownership, including marginalized groups, shall be fostered across supported actions, possibly through various levels of engagement (e.g. household level, site committees, local authorities).
- Interventions should aim to reinforce existing local capacities (including targeted populations and local authorities), enhance contingency capabilities and promote self-reliance.
- To support the continuity of services and reduce transmission risks, partners should embed COVID-19 and cholera risk mitigation measures.
- Localised independent assessment(s) to supplement system wide assessments (e.g. IPC, SMART, MCLA, etc.) for all sectors shall be included in the proposal. Partners are also encouraged to improve the utilisation of data from existing projects.
- Include a transparent targeting strategy that shows how the most vulnerable are being prioritised. Additionally, proposals shall develop beneficiaries' inclusion and exclusion factors (e.g. triggers, beneficiary identification/verification, monitoring, etc.). DG ECHO expects partners to ensure meaningful inclusion of extremely vulnerable and marginalised groups such as migrants, refugees and asylum seekers, People Living with Disabilities (PLWD), Muhamasheen, women and girls and elderly, etc. into all DG ECHO-funded humanitarian assistance.
- Interventions shall be guided by clear access strategies maximising proximity to beneficiaries, adapting the delivery modalities to the security situation and seeking to increase access.
- Be informed by a localized comprehensive risk analysis, including a conflict sensitivity analysis -threats, hazards, vulnerabilities and capacities- (e.g. factor in recurrent natural disasters including flooding in preparedness and response plan). Strategies to mitigate identified risks shall be included in proposals and regularly monitored throughout implementation.
- Embed Accountability to Affected Populations (AAP) in all programmes. Specific attention should be given to ensure safeguarding¹⁷.

¹⁷ Safeguarding is defined as all actions taken by organisations to protect their personnel from harm and to prevent them from harming others.

- Include a monitoring strategy. Primacy is given to direct monitoring of DG ECHO funded actions. Remotely managed actions are considered as a last resort measure and only justified to address critical humanitarian needs. Such extreme measure must be formally agreed with DG ECHO. If security/access allows transition towards standard assistance modalities, the latter should be pursued.
- Systematically consider basic environmental impact of the proposed action and provide tailored risk mitigation plans. In addition, demonstrate that conflict sensitivities have been considered and addressed in relation to scarcity of natural resources and their planned use.
- Partners shall explain their participation and engagement with the humanitarian coordination structure at national and local levels as relevant to each sector of intervention proposed.
- Define appropriate exit strategies and handover, including options for graduation or transfer to development programmes, where applicable.

All proposals are strongly encouraged to address the following depending on the programme design:

- Partnerships with local humanitarian actors shall be structured under principled and accountable localisation efforts that are complementary to DG ECHO strategy in Yemen. DG ECHO supports its partners in developing qualitative partnerships with local organisations and actions can include capacity building activities. Enhanced localisation initiatives could be sector specific depending on localisation assessments.
- Advocacy efforts to highlight and address the needs of the affected population, as well as to enhance the humanitarian space, shall be integrated.
- Crisis Modifiers (CM) should be considered, when relevant, with clearly defined shocks and triggers.

Visibility and Communication

Partners must ensure, through proactive communication on EU-funded actions, that the public is aware of how the EU is helping and how funding is used, with the objective of fostering continued strong support for humanitarian aid among key stakeholders and the general public. Detailed information on DG ECHO’s visibility requirements can be found in the “Communication and Visibility Manual for European Union-funded Humanitarian Aid Actions”.

Standard visibility is a contractual obligation for all DG ECHO-funded projects. Partners must ensure EU visibility through the prominent display of the EU emblem with accompanying text, as specified in Section 12.1.A of the Single Form, as well as communication actions throughout the project duration with broad dissemination, as specified in Section 12.1.B of the Single Form.

In addition to standard visibility, partners with strong and ambitious communication plans are encouraged to apply for above-standard visibility. DG ECHO may provide additional funding should a partner wish to carry out communication actions with wide outreach to the European public and media. For above standard visibility, a separate communications plan, costed, with an estimated audience reach and timeline, must be submitted as an annex to the Single Form.

Multi-year financing

DG ECHO is committed to increasing multi-year financing (i.e., 24 months or longer). Sectors to be considered for multi-year financing in Yemen include the following priorities:

- Education in Emergencies.
- Disaster Preparedness.
- Initiatives addressing interoperability and deduplication of assistance.
- Protection, including capacity building of national actors in providing GBV services and the reintegration of children as relevant.

Additionally, partners can propose multi-year actions for other sectors when a multi-year duration would increase the efficiency and effectiveness of the action compared to actions of shorter duration.

4.1.2.2. Sector-Specific Priorities

Food Security (FS)

As needs are multiple, food assistance shall be part of a basic needs approach. Needs and future risks shall be identified through a combination of food security analysis and multi-disciplinary early warning systems (e.g., climate outlook, price trends) to allow to prepare for and act early.

Key elements of the FS programme include:

- An integrated approach aiming at reducing prevalence of food insecurity in locations classified as IPC4+. Support tackling severe levels of household food insecurity, based on the main outcome indicators (i.e., Food Consumption Score, Coping Strategy Index), should be provided through the most suitable modalities (e.g. cash, voucher, in-kind). Partners shall base the design of their interventions on joint, impartial and evidence-based needs assessments and response analysis.
- An appropriate description of the targeting (which should be at households level and based on vulnerability).
- A close coordination with the Food Security & Agriculture Cluster (FSAC) and Cash & Market Working Group (CMWG) is required, including for the development of comprehensive standardised and institutionalised referral pathways especially to livelihood, protection, nutrition and health services.
- An appropriate description of a preparedness and emergency response capacity for shocks (based on learning and experience), feeding into the work of the FSAC & CMWG on strengthening collective preparedness efforts.
- A description of how the proposals will improve interoperability between humanitarian actors to facilitate layering and referrals.
- A separate budget line –when relevant - factoring inflation as a potential shock, based on market analysis and recommendations coming from CMWG (i.e., where inflation is expected to be above 10% in the coming year, the definition of the contingency amount needs to be standardised based on actual inflation trends and outlook).
- A description of how the proposal will contribute to and use market monitoring data.

DG ECHO is committed to continue supporting unconditional and unrestricted cash transfers despite inflation of food and other key commodities based on comprehensive analysis informing the transfer modality and especially the strategy to adapt the modality according to contextual changes. Specific considerations include 1) quality, breadth, and frequency of multi-sectoral market analysis; 2) analysis of impact of inflation on different modalities; and 3) considerations for adaptation of food assistance modality to inflation including analysis of increasing adequacy vs coverage, considering how to continue to maintain cost-efficiency and food security outcomes. DG ECHO and like-willing donors aim to consolidate a Multipurpose Cash Assistance (MPCA) programme of sufficient scale to address basic needs (including food security and related multi-faceted needs) of the most vulnerable people.

DG ECHO may consider small-scale initiatives aiming to provide **Emergency Livelihood Support** to populations in addition to humanitarian assistance. Livelihood components in proposals shall consider the following priorities:

- Purpose: To contribute to self-sufficiency of beneficiaries in a timeframe of 12 months.
- Targeting: Support at household level for a limited number of vulnerable households with well identified existing livelihood capacities/skills and well-defined selection criteria. It is encouraged to undertake livelihood profiles of IDPs and hosting communities to inform the modalities of relevant support.
- Range of activities considered: It may include different sectors of activity relevant in urban and rural contexts. DG ECHO prioritizes a cash+ approach informed by a comprehensive market analysis, that combines cash transfers with productive assets, inputs, and/or technical training to enhance the livelihoods and productive capacities of poor and vulnerable households, including agricultural-based livelihoods.
- Partners are strongly encouraged to include a detailed learning and documentation component, test different approaches (e.g., volume of assistance, beneficiaries' livelihood profiles, productive contexts, etc) and document the impact of the intervention with an aim of future upscaling of successful approaches and transfer cases towards development operations.

Protection

Key elements of the Protection programme include:

- DG ECHO supports the promotion of International Humanitarian Law (IHL) at various levels through direct engagement and evidence-based humanitarian advocacy. Additionally, DG ECHO supports partners' contribution to joint advocacy efforts enhancing protection space in-country.
- Joint and integrated protection programming¹⁸ is encouraged particularly when aimed at enhancing the identification of protection cases and delivery of related assistance (e.g., integrated protection and health/nutrition programmes,) as well as reducing protection risks (e.g., MPCA, on top of covering basic needs, could potentially contribute to mitigate protection-related negative coping mechanisms).

¹⁸ Integrated protection programming will employ responses from one or more traditional assistance sectors (shelter, WASH, health, food assistance, nutrition, etc.) in order to achieve a protection outcome.

- Protection monitoring: DG ECHO encourages the systematic collection and analysis of information to identify protection trends for populations of concern with the purpose of informing effective response as well as advocacy. Protection monitoring activities should always be complemented by the direct or indirect provision of assistance to beneficiaries through multisector response activities (including protection). Emphasis should be put on the provision of information about existing services and referrals for cases in need of specialised services.
- Addressing Psychosocial (PSS) needs remains a priority for DG ECHO. All partners must ensure that, as a minimum, Psychological First Aid is mainstreamed in their humanitarian actions. All proposals with a PSS component must: 1) specify the level of service provision (level 1 – 3 IASC MHPSS pyramid) as well as the profile and capacities of staff; 2) ensure availability of timely and effective referrals to specialised mental health services (level 4 IASC MHPSS pyramid) and; 3) monitor the improvement of beneficiaries' psychosocial well-being.
- Case Management: partners are expected to develop/update localised multi-sector service mapping (ensuring quality of assistance is taken into account) as well as referral mechanisms. Priority will be given to actions focusing on 'high risk' cases. Technical supervision of case worker must be included.
- In line with DG ECHO Cash Policy, the provision of cash to achieve protection outcomes will be considered only when i) the causal link between cash transfers and protection outcomes is clearly outlined; ii) cash is part of a broader protection response (accompaniment, legal assistance and case management).
- Legal counselling and legal assistance, with a priority given to identity and HLP related documents, especially when linked to eviction threats.
- All partners are expected to assess the added value of direct service provision versus working through national actors, in view of enhancing both the sustainability of protection assistance as well as contributing to maintaining/expanding operational space of Yemeni civil society.
- Activities related to humanitarian mine action should be implemented in line with the humanitarian principles and can include humanitarian demining in populated areas affected by the conflict or around basic civil infrastructure (e.g., schools), mine risk education, awareness campaigns and mine action capacity-building support.

Integrated Health and Nutrition

Key elements of the health and nutrition sectors include:

- Health interventions should be approached in a comprehensive way and must be nutrition and protection-sensitive at all levels of care. All interventions require novel solutions in the context of Yemen while at the same time recognising and valuing the role of local actors who are critical to improve timely and appropriate health service delivery.
- It is a priority the support to primary and secondary care health facilities providing comprehensive health services including sexual, reproductive, maternal, child and adolescent health and nutrition interventions in locations with high vulnerability, according to severity mapping and/or displaced population (following a catchment area or area-based approach for service provision). Health operations should support

identification and treatment of acute malnutrition with and without medical complications.

- The first 1 000 days of life, from conception to 2 years, is critical in all interventions related to mother and child health and nutrition. Lifesaving women's and children's health services need to be delivered in this conflict setting, which includes interventions addressing stillbirths. Ensuring access to Expanded Programme of Immunisation (EPI) services and mother and child health among others is critical. Reinforcement of referral pathways and continuum of care between in and outpatient facilities should be ensured and duly monitored.
- Provision of conditional cash and/or in-kind assistance must be linked to a nutrition outcome combined with risk mitigation efforts and EPI. DG ECHO will support operations targeting the most-at-risk households, against identified and agreed selection criteria, including households with pregnant and lactating mothers, children under five years and acutely undernourished SAM/MAM cases.
- Acute malnutrition responses are required to routinely assess programme performance and define CMAM program quality improvement measures (including supportive supervision and/or on the job training) based on analysed bottlenecks for Nutrition program Information System and the recommendations of the Community-based Management of Acute Malnutrition (CMAM) evaluation.
- Partners should adhere to the nutrition cluster CMAM caseload estimation methodology and provide evidence-based justification for specific deviations from the cluster recommendations.
- Emergency health care, including first aid, emergency pre-hospital and hospital services are also a priority for DG ECHO, including the establishment of tailored referral pathways securing the chain of emergency/trauma care and physical and functional rehabilitation for people with disability (PWD).
- DG ECHO supports outbreak preparedness and response, including surveillance and EWARN for highly infectious and vaccine preventable diseases. Response mechanism should be coordinated and can include aspects of health determinants (i.e., WASH, vector control, environmental issues).
- Mental Health (MH) services must be provided through qualified and trained professional staff. Capacity building for local health professionals, such as mhGAP is highly encouraged as well as clinical mental health scale up and further geographical roll out. Only clearly identified mental health interventions will be considered following the MHPSS IASC guideline and in line with the World Bank and WHO initiative on inclusion of MHPSS in MSP. A referral system needs to be clearly demonstrated in the proposal. This includes also referral related to protection cases. Non-specialised PSS and specialised MH interventions should be clearly mapped out in the areas of intervention.
- Reinforcement of inter-sectoral coordination (nutrition and food security clusters and/or cash working group) should be ensured to maximise coverage and attainment of the desired nutritional impact. The use of cash for nutrition is to be guided by the definition of the intended nutritional outcome and impact, noting the limited evidence base on the use of cash for nutrition, and should therefore not be a stand-alone intervention but combined with other activities.
- Reinforced data collection and analysis (including from ongoing or previous responses) to inform local drivers of acute malnutrition/food insecurity and associated

epidemic outbreaks. The use of epidemiological data shall guide community-based programming.

- Integration of clinical management for GBV services into health is expected by all health partners enabling GBV survivors' access to safe and timely medical and psychological assistance. Child protection considerations are particularly important in relation to prevention and treatment of malnutrition and children treated during epidemic outbreaks. Health and nutrition partners should be aware of child protection concerns in their respective areas of operation when programming. Partners should ensure children are cared for by parents/caregivers to the extent possible, prevent or mitigate family separation due to treatment and ensure holistic care for caregivers.
- Partners should demonstrate the complementarity of their proposed action with other large-scale programmes (such as the World Bank funded health projects).

Water, Sanitation and Hygiene (WASH) and Shelter and Settlement (S&S)

General considerations for WASH/S&S are the following:

- In IDP sites, particular consideration should be given to up-grading existing emergency WASH/S&S services/facilities (e.g., from emergency shelter/latrines to transitional solutions).
- WASH actions should address needs comprehensively, as a part of a broad multi-sector public health approach (i.e., access to clean water in sufficient quantity, safe management of excreta/solid waste, adapted hygiene promotion and NFI provision), and promote responsible water extraction, conservation and (re)use, particularly in water-scarce contexts.
- WASH/S&S actions should deliver sectoral inputs/services/facilities in line with applicable humanitarian standards, whether a stand-alone result or in support of other sectors.
- Non-acute emergency WASH/S&S actions require a basic environmental assessment/screening and the implementation of corresponding mitigation analysis/measures.
- WASH/S&S actions are expected to support local resources/capacity and promote community-mobilisation in their design and implementation, enhancing quality control and accountability.

WASH:

- Water supply:
 - Priority is given to the 'optimisation' of existing water supply systems and sources, based on technically sound rehabilitation, local capacity building and risk mitigation. Where appropriate, renewable/hybrid power sources should be considered for water pumping to promote durability, autonomy, cost-efficiency and limited environmental impact. Particular attention should be paid to quality and local availability of equipment/spare parts, system dimensioning, water loss/leakage reduction, water extraction monitoring and usage and tariffs. Detailed technical diagnostic of current level of functionality of the management model is required, and how the proposed action would tackle it. Formal involvement of the local authorities and operators should be promoted throughout the project cycle.

Exit strategy/hand over strategy should be based on realistic assumptions including capacities and constraints for operation, maintenance and management. The expected improvements in the management model should be fully justified.

- Development of new water sources should only be considered as a measure of last resort. If required, it should be based on a sound feasibility study including all relevant information (i.e., water consumption demand, water quality results, aquifer recharge capacity, risk mitigation measures and based on a master plan with design criterion, technical orientation, eco-technical comparative analysis of options and detailed calendar).
- Excreta disposal:
 - Actions should include a cost comparative analysis of the potential toilet/latrine solutions and design options, promote household/facility self-reliant solutions in terms of operation and maintenance.
 - Desludging should be only considered as a last resort. The environmental impact of the final disposal of the faeces must be assessed and, if needed, risk mitigation measures should be incorporated. Only quick impact action on sewage collection or treatment system should be considered, case by case based on the public health risks, and with partners demonstrating capacity for this type of action.
- Hygiene promotion (HP):
 - Actions may consider the provision of household level WASH NFI to ensure drinking water safety at point of consumption, complemented with public health messaging on main water borne/faecal oral risk reduction. HP strategy should be contextualised and based on evidence of success and lesson learnt from alternative approaches, and with the support of experienced CHW/HP staff.
- Shelter & Settlements:
 - S&S/WASH actions should be settlement informed, contribute to protection outcomes, including Housing Land and Property (HLP) considerations where relevant.
 - Technical assistance for shelter repair/upgrading and shelter kits should be part of the response, including sharing the technics/learnings with beneficiaries, in a capacity building approach.
 - Proposals shall include details on quality control measures on construction materials and cost-benefit analysis factoring in the lifespan of shelter items. Findings should be used to define potential actions to improve the supply chain at various level including the composition of shelter kits or shelter design.

CCCM (Camp Coordination and Camp Management)

- CCCM actions (fixed or mobile) will provide basic site level coordination and community/humanitarian actors' mobilisation. CCCM actors should liaise effectively with local representatives as well as sector specific agencies. Timely monitoring and reporting of critical needs in IDP sites should be provided to sector lead organisations per site (regular mapping of services available, service providers and gaps). Proposals shall include referral systems and follow up of service provision.

- Integration of Protection and Housing, Land and Property (HLP) services within deployed CCCM capacities is to be pursued, as well as co-location and joint delivery by CCCM actors of required sectorial services, within the organisation area of expertise or in coordination with other service providers (e.g., infrastructure).
- CCCM partners are expected to ensure provision of basic psychological first aid, identification of multi-sectorial needs. CCCM actors shall also support the transfer from RRM to other services.
- CCCM partners should include a solid risk analysis for sites and mainstream emergency preparedness and prevention measures especially in relation to flooding and fire prevention.

Education in Emergencies (EiE)

- For EiE actions, priority will be given to projects targeting at least 50 % girls, unless there is a context-based justification for different targeting.
- The priority target for EiE are displaced children in IDP sites with inclusion of host communities, as per localized context.
- EiE actions will target out-of-school children, with the aim to provide safe and sustained access to quality education. Priority will be on modalities in line with applicable education sector frameworks, including non-formal education, to provide relevant and effective pathways to (re)enter formal education. Targeted approaches to ensure retention and progression, safe transition to formal education and learning outcomes according to defined standards will need to be demonstrated.
- Non-academic barriers to education may be addressed, in line with DG ECHO EiE policy, with a solid theory of change, demonstrating contribution to education outcomes. Localised assessments in areas of operation are required to identify the barriers and appropriate contextualized responses, considering applicable education sector standards.
- Integrated EiE and child protection actions are encouraged, ensuring child protection risks are timely and effectively addressed by qualified actors (either directly, when partners have demonstrated relevant capacities, or through referrals). Protection activities must be built upon a sound risk analysis and should address the most life-threatening protection risks (e.g., psycho-social support, safe schools).
- Actions should complement, and be in synergy with, other humanitarian and development programmes, ensure conflict sensitivity and do no harm.

Disaster Preparedness (DP)

Mainstreamed DP:

- DG ECHO will continue to support anticipatory, flexible and rapid response mechanisms to effectively mitigate the effects of sudden onset hazards. Both rapid and flexible mechanisms should be based on a multi-risk analysis, with the development of worst and most likely scenarios, and allow for an initial response to be activated within 72hrs.
- In areas frequently and severely affected by conflict and insecurity, shocks of natural origin and forced displacements, a Rapid Response Mechanism (RRM) should provide the timely initial lifesaving assistance to the affected populations. The minimum

response package should focus on the most pressing needs and cover at least one month of assistance. Effective referral pathways for the continuation of assistance should be in place and regularly monitored. Regular post-monitoring should inform the use, adequacy and efficacy of the assistance provided. Issues of scale, triggers and modality of assistance will be carefully considered to maximise cost-effectiveness.

- In other areas potentially at risk of extreme climate events, epidemics and displacements, partners are encouraged to introduce Crisis Modifiers (CM) to be able to quickly mobilise resources from on-going actions and respond to any new emerging shocks (a crisis within a crisis) occurring in their area of operations. CM should be triggered based on pre-agreed thresholds to provide initial lifesaving multisector response in the aftermath of a rapid onset crisis. Partners are invited to dedicate a specific result to the CM, under the DRR/DP sector.

Targeted DP:

- DG ECHO's will continue to strengthen flood preparedness in areas at risk while fostering durable solutions to mitigate the risks of water scarcity and the adverse effects of climate change. As part of this, DG ECHO will support operational research on water scarcity to inform durable solutions. The targeted DP approach should strengthen contingency planning against floods while supporting local authorities at governorate, district and community levels to plan and prepare for emergency responses.
- Targeted DP funded actions in Yemen should encompass the following objectives:
 - Improvement of preparedness systems through capacity-building and tools (e.g., SOPs, etc), including, awareness, early warning systems and rapid response mechanisms to floods in areas at risk.
 - Increased awareness and understanding of the risks of water scarcity by humanitarian actors and local stakeholders. Evidence based risk analysis and lessons learned are shared with humanitarian and development stakeholders.
- Durable solutions and saving water practices should be integrated into humanitarian and development WASH programming in areas at risk in Yemen.
- DP funded actions will have to ensure close linkages to the WASH cluster while promoting synergies with other on-going initiatives regarding safe water management in Yemen.

Climate change adaptation and environmental considerations

- Partners shall explain how their proposal adapts responses to climate change as well as reducing environmental degradation. Such actions also contribute to the European Commission's overall implementation of the European Green Deal¹⁹.
- All partners are expected to include context-specific measures to reduce the environmental footprint of the proposed actions, while preserving their effectiveness, in compliance with the minimum environmental requirements set out in the DG ECHO Environmental Guidance for humanitarian projects²⁰.

¹⁹ https://ec.europa.eu/info/strategy/priorities-2019-2024/european-green-deal_en

²⁰ https://civil-protection-humanitarian-aid.ec.europa.eu/what/humanitarian-aid/climate-change-and-environment_en

Coordination

- Support for coordination can be considered, at various levels (e.g., national, sub-national, hub etc), based on demonstrated priority gaps and tangible outputs/outcomes. Priority should be given to gaps that are in line with DG ECHO strategy in support to collective responses.

Logistics and common services

- Regarding logistics (meaning the entire supply chain), DG ECHO will support strategic solutions such as common services, joint procurement, etc, when needed to increase cost-efficiency and effectiveness of the response, in line with DG ECHO's Humanitarian Logistics Policy²¹. DG ECHO also encourages the application of the Humanitarian Logistics Policy more widely, in particular key considerations set out in Annex 1: Framework for Operations.
- Support for common services including air, logistics (e.g., warehousing, joint procurement, etc.) and security. Priority is given to system-wide support and activities addressing priority gaps identified by the logistics cluster.

European Humanitarian Response Capacity (EHRC)

- The EHRC aims at supporting the delivery of humanitarian assistance in a gap-filling approach. Under the EHRC the Commission disposes of several tools that can be activated in case of sudden onset disasters, e.g. a series of Common Logistics Services (including air operations, warehousing services, last-mile ground transportation, etc), or a stockpile of emergency WASH and shelter items that can be pre-positioned in regional warehouses worldwide.
- DG ECHO might propose directly to one or more partners to manage some of the Common Logistics Services or be in charge of the distribution of the emergency relief items. The choice of the partner will be taken on the basis of a diverse set of criteria, such as presence in the affected area, experience and expertise available. Since the EHRC is an emergency response capacity, decisions of activation will be swiftly taken in a consultative way.

Nexus

Partners shall explain in their proposals how the DG ECHO supported action will contribute to the following priority areas for Nexus, including detailing graduation and/or exit strategies, as well as the existence of other sources of funding complementing the action proposed to DG ECHO:

- **Food security and nutrition.** Show how food and nutrition assistance through in-kind, cash and voucher assistance, including MPCA would contribute to improved

²¹ [Humanitarian Logistics Policy \(europa.eu\)](https://european-council.europa.eu/media/en/press-communications/infographic/infographic-humanitarian-logistics-policy-2023-01-11-01.pdf)

self-reliance and strengthen synergies for livelihoods restoration and diversification for crisis affected communities.

- **Multi-purpose cash assistance.** Show the complementarities and synergies with existing social safety nets/social protection programmes, including the steps to be taken to put in place the interoperability requirements such as shared registries, transfer values, targeting, and transfer mechanisms/systems.
- **WASH/Disaster Risk Reduction and public health:** Explain the linkage of emergency WASH support with long term initiatives addressing damaged infrastructure, severe water scarcity and climate change impacts.
- **Education:** Explain the linkage of education in emergency actions (targeting most at risk, out of school children) with continued education, especially formal (at individual, school and other levels).
- **Protection:** Explain the cooperation and coordination on Children in Armed Conflict (CAAC), including linking the humanitarian agenda of children in armed conflict with the policy agenda supporting frameworks and roadmaps for implementation. Joint efforts to contribute to the implementation of EU Gender Action Plan III are encouraged.