

**ANNUAL REPORT OF
THE RESIDENT/HUMANITARIAN COORDINATOR
ON THE USE OF CERF GRANTS**

Country	Republic of Yemen
Resident/Humanitarian Coordinator	Mr. Pratibha Mehta
Reporting Period	January – December 2008

I. Executive Summary

The re-emergence of the conflict in Sa’ada in 2007, the floods in Hadhramout in October 2008, and food insecurity due to high food prices combined to slow the Government of Yemen’s efforts in the fight against poverty,, leaving hundreds of thousands of people in urgent need of aid.

The reoccurrence of the conflict in Sada’a has affected some 130,000 people since 2004. Internally displaced persons (IDPs) and returnees are in need of temporary shelters, food, education, water, health, sanitation and non-food items (including blankets, cooking utensils, mattresses, etc). Most displaced families live in school buildings, makeshift or unfinished structures. The water and sanitation conditions in all locations are very poor resulting to an increase of diarrhoea cases as well as other waterborne diseases.

To support the Government of Yemen in meeting immediate humanitarian needs in Sa’ada governorate, the United Nations Country Team (UNCT) appealed for CERF funding from the rapid response window. A series of assessments identified humanitarian priority needs as follows: protection; nutrition; education; and food. The 2008 CERF grants for Sa’ada supported the priority areas through the implementation of United Nations High Commissioner for Refugees (UNHCR), the United Nations Children’s Fund (UNICEF) and United Nations World Food Programme (WFP) selected projects which were completed by May 2008, with the exception of UNHCR project which was completed in July 2008.

Further, the Governorates of Hadhramout and Al-Mahra were hit by severe floods caused by rains in October, 2008. Flash floods and surging waters killed at least 73 persons and displace an additional 20,000 to 25,000 people. Essential infrastructure, including health centres and educational facilities, were severely damaged, in governorates that were disease-prone to begin with.

In response to the situation in Hadhramout, the UNCT prepared and launched the Yemen Floods Response Plan, which received approximately 40 percent of the funding required. Based on the plan, UN Agencies and NGOs agreed to address major gaps in the following sectors: shelter/NFIs, health, WASH, food, education, and protection. The CERF grants for Hadhramout concentrated on priority areas and were implemented by several different United Nations agencies before February 2009.

With regards to the food crisis, a rapid assessment carried out by WFP in June 2008 showed that 43 percent of the surveyed households were either moderately or severely food insecure. As a coping mechanism, 39 percent of the households had to decrease their health expenditures. An additional report from the Joint UN/INGO Rapid Needs Assessment in Sa’ada Governorate in August 2008 showed that acute moderate malnutrition prevailed in 36 percent of

the under five children, and that 5 percent of the children were severely malnourished. Following the Government's request for the humanitarian community to help lessen the impact of the high food prices in the country, the UNCT developed a comprehensive proposal for food security, which formed the basis for the decision-making on prioritized areas of intervention, guided by the CERF life-saving criteria. A request for funding from CERF's Rapid Response window was submitted and included project proposals in the health, nutrition and agriculture sectors.

The CERF application and implementation processes catalyzed coordination within the UN system and amongst its implementing partners. 2008 therefore witnessed major improvements in the overall coordination of responses to emergencies. Through the UN Interagency Preparedness and Response Team (UNEPRT) and sector coordination among the different partners, minimal duplication and overlap occurred. Additionally, with the surge support capacity and support from United Nations Disaster Assessment and Coordination teams personnel, a temporary Joint UN support and coordination hub in Seiyun (Hadhramout Governorate) was established to ensure an effective, coordinated response.

Summary of the CERF money requested and received status

Total amount of humanitarian funding required and received during the reporting year	REQUIRED:	\$ 37,844,702		
	RECEIVED:	\$ 30,844,702		
Total amount requested from CERF	FUNDS (IN TOTAL REQUESTED):	\$ 8,193,847		
Total amount of CERF funding received by funding window	RAPID RESPONSE:	\$ 8,193,847		
	UNDERFUNDED:	N/A		
	GRAND TOTAL:	\$ 8,193,847		
Total amount of CERF funding for direct UN agency / IOM implementation and total amount forwarded to implementing partners	UN AGENCIES/IOM:	\$ 7,240,166		
	NGOS:	\$ 953,681		
	GOVERNMENT:	\$		
	OTHER:	\$		
	TOTAL(Must equal the total CERF funding allocated):	\$ 8,193,847		
Approximate total number of beneficiaries reached with CERF funding (disaggregated by sex/age if possible)	TOTAL	under 5 years of age	Female (If available)	Male (If available)
	Sa'ada:			
	Protection: UNHCR - 77,000 UNICEF - 3,000	UNHCR - 6,639	UNHCR - 8,637 UNICEF - 1,800	UNHCR - 8,002 UNICEF - 1,200
	Education: UNICEF - 40,000		UNICEF - 20,000	UNICEF - 20,000
	Nutrition: UNICEF - 1,824	UNICEF - 1,824		
	Food: WFP - 76,752	WFP - 25,884	WFP - 38,847	WFP - 37,905
	Hadhramout:			
	Health: UNICEF - 150,000 WHO - 1,851,422 UNFPA: 3,000	UNICEF - 150,000	UNFPA - 3,000	
	WASH: UNICEF - 22,496	UNICEF - 3,374		
	Protection: UNHCR - 20,000 UNFPA - 1,500		UNFPA - 1,500	

	Food: WFP - 25,000	WFP - 5,075	WFP - 12,450	WFP - 12,550
	Shelter: IOM - 1,200 IDP Families		IOM - 3,391	
	Food Security: Food: WFP - 377,482 persons		WFP - 187,609	WFP - 189,873
	Nutrition: UNICEF - 100,000			
	Health: WHO - 150,000			
Geographic areas of implementation targeted with CERF funding (please be specific)	Governorates of Sa'ada, Hadhramout, Al-Mahra, Amran, Hajja, Al Baida, Al Jawf, Apyan, Hodeida and Shebwa			

II. Background

Assistance to War Affected Persons – Sa'ada

The social and political scars left by the 1994 civil war have not fully healed in Sa'ada; the re-emergence of the conflict in 2004 has since displaced over 130,000 persons. Fighting intensified in January 2007, resulting in new displacement. Some of the affected families were housed with their relatives and friends. But many others ended up in IDP camps or small settlements in Sa'ada city and its surrounding areas. In July 2007, a ceasefire was mediated by Qatar, though it did not endure long. Although a large proportion of families who fled their homes during the fighting returned to their areas of origin, many remain in displacement; those who returned to their villages have found homes and farms destroyed.

Assessments conducted in October 2007 by WFP and UNHCR found that 80-90 percent of IDPs required food aid to meet their daily food needs to tackle the high rate of acute moderate malnutrition; temporary shelters (tents and shelter tool kits) and non-food items such as blankets and mattresses especially to protect the IDPs from the harsh winter conditions. The health care needs identified by the Joint UN Emergency Needs Assessment Mission of May 2007 included medical supplies, equipment and services to respond quickly to communicable diseases or life threatening health conditions. Psycho-social care and awareness-raising of protection issues were also identified as required interventions for women and children who had been traumatised by the violence. Furthermore, regular needs assessments were to be undertaken with the authorities, to identify factors hindering IDP children from enrolling in school.

Due to the recurrence of chronic emergency in Sa'ada governorate, UN regular resources and national resources were not sufficient to meet the humanitarian needs of the affected population. The UNCT identified the priority areas based on life-saving criteria and with the support of the conducted rapid needs assessments. In order to ensure timely and effective delivery of the prioritized life-saving interventions, under the coordination of the RC, the UNCT developed a CERF request to help the UNCT support the Government of Yemen in dealing with the humanitarian effects of the emergency.

CERF project proposals were prepared based on two needs assessments that were completed in early 2008 as well as the findings of the UN Joint Rapid Needs Assessment conducted in

May 2007. Findings and recommendations were submitted to the UN Emergency Preparedness and Response Team (UNEPRT) and other stakeholders including ICRC, local and International NGOs, and government authorities. The findings of the Charitable Association of Social Welfare (CSSW)'s rapid analysis of the situation of affected populations in Sa'ada. Finally, findings of a joint WHO and the Ministry of Public Health and Population (MoPH&P) mission undertaken in August 2007 were also taken into account. Based on these assessments, the priority areas were identified together by UN Emergency Preparedness and Response Team, involving major international NGOs, using CERF's life-saving criteria as a guide. The recommendations were brought forward to the UNCT and were endorsed by the RC and UNCT.

Assistance to Floods Affected Families – Hadhramout

The governorates of Hadhramout and Al-Mahara experienced severe flooding caused by rains on 24-25 October. The President declared both governorates disaster zones. Flash floods and surging waters killed at least 73 persons and forced an additional 20,000 to 25,000 people into displacement; out of which, 25 percent of this population at risk were women of reproductive age and 1 in 5 were estimated to be pregnant. At least 3,264 predominantly mud-brick houses have been totally destroyed or damaged beyond repair, while hundreds of others became uninhabitable. In addition to houses, several health facilities and an estimated 181 schools were damaged or destroyed. The flooding and consequences, such as loss of livelihoods, impacted an estimated 650,000 people (half of Hadhramout Governorate's population), as surging water caused extensive damage to the local agriculture and honey production, washing away crops, palm trees and soil from the fields. To aggravate the situation, the floods occurred in disease-prone areas of Hadhramout and Al-Mahara, meaning that the areas of measles, disease surveillance and quick response to outbreaks, clean water supply and emergency medicine and medical supply also needed to be prioritized.

In response to the situation, the UNCT prepared and launched the Yemen Floods Response Plan, which over its lifespan (November 2008 – April 2009) was funded approximately 40 percent. The joint UN/IOM/ECHO joint team assessment carried out in November 2008 and other surveys fed the development of the Yemen Floods Response Plan, which was put together by the UN with the input from two international NGOs; the plan focused primarily on short-term humanitarian assistance, while addressing the outstanding gaps in the immediate assistance and initiating the first activities related to the post-floods early recovery.

Based on the plan, the UN Agencies and NGOs agreed to address major gaps in the following sectors: shelter/NFIs, health, WASH, food, education and protection. Such wide sectoral coverage of the CERF Rapid Response Grants was necessary due to the sudden-onset characteristics of this disaster: a series of floods waves, measuring up to 18m, rushed down Wadi Hadhramout valley in a matter of few hours, destroying mud-brick houses in a matter of minutes.

The UNCT agreed to use a cluster-based approach (without its formal activation) and tasked each cluster lead to determine the priorities of each cluster through respective consultations. OCHA staff deployed in the framework of the UNDAC Mission assisted the RC and UNCT in prioritizing and preparing CERF proposals.

Food Security Support to Vulnerable Groups Affected by High Food Prices

According to an *assessment of poverty in Yemen in 2007* report, 34.8 percent of the population live below the poverty line, while the poverty rate is especially high in 8 governorates (Amran, Al-Baida, Hodeidah, Hajja, Hadhramout, Al-Jawf, Shabwah and Abyan). The presence of conflict in Sa'ada governorate has resulted in a large number of IDPs, and difficult of access, placing people in Sa'ada at high risk of malnutrition. Overall, around seven (7) out of 20 million people in Yemen live in poverty.

As mentioned earlier, a rapid assessment of *the effects of soaring food prices on poor segments of the Yemeni population*, carried out by WFP in June 2008, showed that 43 percent of the surveyed households were either moderately or severely food insecure. As a result, the

assessment found, 39 percent of the households had to decrease their health expenditures as a coping mechanism. An additional report from the Joint UN/INGO Rapid Needs Assessment Mission to Sa'ada Governorate in August 2008 showed that acute moderate malnutrition count for 36 percent of the under five children, while 5 percent of the children were severely malnourished.

Inadequate food intake and disease are the immediate determinants of malnutrition, although lack of awareness is the most important cause linked to the low nutritional status among women, including their poor education, feeding patterns and hygiene.

A High-Level Forum on the Food Crisis, chaired by the Deputy Prime Minister (who is also the Minister of Planning), was established and composed of the Ministers of Finance, Trade and Industry, Agriculture, Health and Social Welfare as well as the UN System (FAO, WFP, UNHCR, UNICEF, UNDP, WHO and the UNRC), World Bank, interested donor representatives, local and international NGOs. In the first meeting of the forum in 2008, the government indicated that the extent of the problem was such that national efforts alone would not suffice to cover the needed interventions.

Based on the above, the UNCT agreed that a Taskforce of 6 agencies (UNICEF, WHO, UNHCR, WFP, UNDP and FAO), headed by FAO, were to develop a comprehensive proposal for food security which would be used for resource mobilization, including CERF, as per the CERF's response to the Effects of Current Food Price Crisis Criteria and Considerations (May 2008).

As a further reaction to the Food Crisis in Yemen, the Deputy Prime Minister (also Minister of Planning and International Cooperation) set up a Joint Task Force with the task to develop an action plan for a comprehensive response covering immediate, short term and longer term interventions, including monitoring the implementation of a coordinated package of agreed interventions. The task force was composed of relevant governmental entities (Ministry of Agriculture, Trade and Commerce, Health and Planning), the UN system (WFP, FAO and UNICEF), the World Bank, bilaterals and local and international NGOs. The report of the mentioned Task Force and the comprehensive UN proposal for Food Security developed by a UN Taskforce of 6 agencies were the basis for the decision-making on prioritized areas of intervention, guided by the CERF life-saving criteria. The UN Taskforce presented the identified priority areas and respective allocation of CERF funds for discussion and endorsement of the UNCT. The UNCT endorsed the recommendations and a consolidated proposal was put together thereafter for submission to CERF.

III. Implementation and results

1. Coordination and implementation arrangements

Assistance to War Affected Persons – Sa'ada

The UN Inter-agency Emergency Preparedness and Response Team (UNEPRT) worked cooperatively to ensure the efficient implementation of interagency planned emergency preparedness and response activities and meetings were held on a monthly basis for information sharing, and overall coordination within the UN system. As the sector approach was still not fully developed in Yemen at that time, each agency was responsible for coordinating the humanitarian activities as per their mandate with respective implementing partners, which included their government counterpart, Local and International NGOs. WFP played a leading role in Sa'ada in providing its UN sister organizations with the necessary logistical help to expand their aid to the affected people.

Assistance to Floods Affected Families – Hadhramout

Soon after the floods in Hadhramout, the government requested the RC to undertake a needs assessment in the governorate. The United Nations Emergency Preparedness Response Team (UNEPRT) held few meetings to discuss and conduct the interagency needs assessment

and planned interventions by agency. A matrix with the different interventions by agencies and NGOs was developed.

In addition, and with the support of the officers and SURGE capacity provided by UNDAC/OCHA to the RC Office, the United Nations established a temporary Joint UN Support and Coordination hub in Seiyun (Hadhramout governorate) to ensure overall coordinated response by the United Nations, NGOs, the Government and other counterparts. Meetings facilitated by the OCHA coordination officers were a platform for information sharing on disaster response, and ensured a coherent and suitable response. Daily interagency coordination meetings were held at the immediate relief phase and sectoral group meetings were held on weekly bases.

Food Security Support to Vulnerable Groups Affected by High Food Prices

In June 2008, UNCT discussed the rising food prices issues during its retreat, which followed a discussion led by the UN on the subject in the Regular Donor Forum co-chaired by the UNRC and the World Bank Country Director. The international NGO community was also active in advocating for immediate response to the crisis and together with its national partners.

The earlier mentioned Joint Task Force on the food crisis, chaired by the Deputy Prime Minister/Minister of Planning, also provided a platform for the UN system and stakeholders to discuss share and decide on immediate humanitarian interventions.

The findings of the above were discussed in the UNCT and led to the identification and development of the priority activity/project proposals for this area, thus taking into account the shared views and concerns of the UN partners. Each involved agency was responsible for ensuring coordination and implementation with its relevant implementing partner.

2. Project activities and results, including actual beneficiaries

CERF grants disbursed through the sector approach enabled agencies and their partners to procure additional supplies and facilitated the implementation of interventions in the life-saving prioritized areas.

Assistance to War Affected Persons – Sa'ada

Protection

The CERF-funded activities contributed to the psychological recovery of IDP children in 3 IDP camps: AL-Anad, Sam and AL-Ehsa. The activities aimed at raising the awareness of IDP children and their families about the hazards of child trafficking, child labour and early marriage. Other issues also included reproductive health, personal hygiene and birth registration. A livelihood skills training for women aimed to provide them with skills, which could eventually enable them to generate incomes; this was deemed important as many IDP women are the only breadwinners of their families. Child Protection activities have limited funding sources; the activities supported by the CERF funds were complemented by other UNICEF regular resources, therefore the CERF fund enabled a wider coverage of activities.

Nutrition

Since the nutrition project had limited funding, the CERF fund enabled UNICEF to cover a wider range of activities, providing an opportunity to discover other areas for expansion and service provision. Later on, UNICEF complemented the nutrition activities through a contribution from the thematic fund.

Education

The CERF funds enabled the IDP children of Sa'ada to get necessary psycho-educational and recreational activities. The provision of educational supplies also enabled the education office to expand the education coverage to the conflict affected children of Sa'ada which is a necessary protective environment in such a complex emergency. The psycho-educational activities have

resulted in giving hope for the IDP children for the first time since they and their families were displaced to Sa'ada.

Food

Thanks to the CERF grant, WFP was able to provide 3,134 MT of food to 76,752 beneficiaries.

Assistance to Floods Affected Families – Hadhramout

Shelter

The CERF grants allowed IOM to assist some 1,180 affected families (a total of about 16,900 people) in the Al Qaten, Shibam, Seiyun, Tarim and Sah Districts of Hardamout. Additionally, reconstruction assistance was provided in cash for work modality for 100 households who made 2,000 mud bricks for reconstruction of their own houses.

UNHCR was able to purchase and distribute 2,775 emergency shelter kits; out of which 1,125 tents had been procured through the grant received from CERF. A total of 1,125 flood affected families benefited from the emergency shelter programme.

Health

The CERF funds were used to:

- Fund the operational cost of the measles campaign in Hadhramout governorate, 16 districts in the coastal areas and 14 districts in Wadi Hadhramout area. Vaccination coverage reached 87 to 89 percent coverage rates in both Wadi Hadhramout/desert and the coastal areas.
- Establish a disease surveillance system, as the stagnant flood waters created high risk of malaria and meningitis;
- Provide proper water supply systems and storage for all affected health care facilities.
- Improve sanitation facilities in health centres damaged by the floods.
- Train 20 personnel in the maintenance of drinking water supply projects
- Provide health facilities in the two (Hadhramout and Al-Mahra) affected governorates with emergency medical supplies and equipment.

Water, Sanitation and Hygiene (WASH)

- Some 951 Ceramic filters were procured for IDPs who were without a safe water supply source and fetching water manually from open sources and living in remote areas. 201 of these filters were funded by CERF.
- 138 mobile Latrines were procured to be distributed to schools and IDP community locations. 50 percent of these latrines were funded by CERF. The distribution of these latrines was ongoing at the time of this report, but was expected to be completed by end of March, 2009.
- During the immediate relief phase, using UNCEF resources, UNICEF managed to address the immediate relief needs of provision of 30 mobile latrines to schools occupied by IDPs and IDP settlements. The provision of seventy nine water tanks (2000 Litres each), 2600 Hygiene kits, one million purification tablets contributed to prevent water born disease outbreaks in the areas affected by floods at the immediate relief phase. CERF funds played an important role on complementing what was started through rehabilitation of two damaged water supply schemes and the provision of latrines to restore hygienic sanitation to schools and IDP communities.

Food:

The CERF grant allowed WFP to purchase 527.79 MT of food (out of a total 539.88 MT distributed) in order to meet the life-saving needs of 25,000 displaced and severely affected by

floods, without a pipeline break. Moreover, it allowed the operation to repay commodities loaned from other projects and avoid breaks in distribution for girls' education and refugee assistance.

Protection

With the support of the CERF grant, all 20,000 affected families registered with the local authorities in Hadhramout were able to have their lost documents replaced upon approaching the civil registration office.

Food Security Support to Vulnerable Groups Affected by High Food Prices

Health

The CERF funds were used to:

- Cover needs of drugs for treatment of under five children with recurrent diseases associated with malnutrition.
- Establish a Therapeutic Feeding Centre (TFC) in the central governorate hospital. It also help pay for the training of 6 personnel in the identification, classification, guidelines and treatment of severe malnutrition with complications. Finally, CERF money funded the supply of all equipment and treatment.
- Establish Outpatient Therapeutic Programmes (OTP) in the governorates for the screening of children for severe malnutrition. Patients with complications to be transferred to Central Hospital, patients without complications to be treated through the programme with Plumpy'nut, supplied by UNICEF and paid for by the CERF contribution. Training of trainers also took place, as well as the training of OTP staff and volunteers from each village.
- Set up a Mobile Clinical Unit to service remote districts and villages.

Nutrition

- CERF funding helped to kick-start a new operation to address food security and malnutrition in the country. The funds were used in the financing of the General Food Distribution component. This component's goal is to save lives and reduce acute malnutrition caused by shock to below emergency level, preventing deterioration of the nutritional status of the affected population, with special attention to children and vulnerable women.
- CERF funding purchased 1,900 MT of wheat flour – the first tranche of the GFD component –serving as a partial food rations to assist families in meeting their food gap. 54,000 households in the poorest and most food insecure districts of the country benefited from this wheat flour.
- CERF funding covered around 4.3 percent of the overall budget of the WFP operation and enabled WFP to rapidly purchase and deliver the urgently needed food assistance. Pending arrival of the wheat flour and ration cards have been shared with all beneficiaries, and it was expected that the distribution of the wheat flour purchased with CERF funding should reach families in April.

Agriculture

(A no-cost extension request has been submitted by the RC to the CERF Secretariat)

Food

The CERF funding purchased 1,900 MT of wheat flour, which served as a partial food rations to assist families in meeting their food gap. Some 54,000 households in the poorest and most food insecure districts of the country benefitted from this wheat flour.

3. Partnerships

The CERF Grant ensured adequate and timely provision of life-saving needs on the target areas, which could not have been as successful without the collaboration of the UN partners. In Sa'ada, the Islamic Relief Yemen, Sa'ada Women's Charitable Association, Yemeni Red

Crescent, the charitable Society of Social Welfare, MSF and ICRS, were fundamental for the delivery of CERF funded interventions. In Hadhramout, the Administration for Refugees and Returnees Affairs, CARE, OXFAM GB, ARRA, SOUL branch in Seyun, SHS, Ministry of Public Health and Population, GARWP, amongst others helped the UN system achieve the results captured in this report.

To respond to the food crisis, an emergency capacity building plan was developed with all stakeholders working in nutrition, under the leadership of the Ministry of Public Health and Population, and including local NGOs, the Red Crescent, WFP, WHO and UNICEF.

For all three emergencies, partnerships were developed based on their own sectoral, specialized and geographical coverage. The interagency coordination meetings and sectoral group meetings facilitated effective coordination and participation, sharing of reports, plans, and achievements by the respective agencies/projects and local authorities. Local NGOs were very active in meetings and were effective in delivering supplies to the affected areas and in the collection and sharing of information about the affected population. Sector meetings supported deliberations concerning operational thematic issues on the ground, which ultimately improved the performance of the agencies working on the sector and guaranteed complementarity, reduced duplication of efforts, and enhanced an efficient humanitarian response.

4. Gender-mainstreaming

Considering the social and cultural setting in Yemen with regards to gender, the UN system devoted special attention to women's needs as part of an effort to also encourage gender equity. With the support of the CERF funds, the following interventions were put in place to ensure that women in vulnerable situations were protected and their needs prioritised:

- WFP encouraged the active participation of women in project planning, implementation, and evaluation. However, active participation was limited due to cultural sensitivities which restrict the movement of women and limit the registration of women as heads-of-household. According to the national census, 49 percent of Yemen's population is women; considering that the WFP food ration is given per family, approximately 50 percent of food is consumed by women; therefore 50 percent of the budget was spent on women.
- UNICEF's implementing partner in Sa'ada was Sa'ada Women's Charitable Association which is an active NGO exclusively run by women. The Association was contracted to conduct a variety of educational, psychosocial and recreational activities in order to ensure that these interventions accessed women and girls, and that they were not excluded due to social and cultural reasons. The association members were briefed on the importance of fully integrating women and girls' in all activities supported by CERF funding through the NGO. As gender mainstreaming is a high priority for this NGO (as per its mandate), women and girls represented more than 50 percent of the beneficiaries. All teachers and social workers who were trained on psycho-education activities were females, and as a result they were able to interact with mothers and girls easily. Also literacy courses targeted 120 women and girls.
- UNICEF, in an effort to address sanitation and personal hygiene needs, provided mobile latrines to the affected communities in Hadhramout, with special focus to the needs of women and children. CERF funding was used to cover a significant part of the cost. The remaining costs were covered by other non-CERF funding to ensure that the needs of women and children were fully addressed and that all men, women and children had equal access to services.
- UNHCR assisted in the distribution of NFIs and Shelter Kits (tents) during the emergency phase with focus on people with special needs. As a result, a list of the people with special needs, including single women, women headed families and girls, was prioritized. The team monitored the access of the women and girls to basic assistance on a daily basis and

ensured protection in a timely manner. The items were distributed equally, with an estimated 50 percent of the beneficiaries being women and girls. The teams also conducted awareness raising activities with the community, IPs and authorities with regards to people with special needs and their access to the services with out discrimination.

- With the support of the CERF funds, IOM conducted 15 participatory workshops on IDP needs in 5 districts of Hadhramout and a minimum of one workshop was exclusively for IDP women. In addition, a database of 3,391 female IDPs was created, counselling and assistance provided in case by case basis; 44 Female surveyors were trained and assistance network developed.
- In disaster responses, the needs for food, shelter and injuries managements are prioritized and the needs of women, particularly with regard to reproductive health, are often marginalized. In the flood affected areas of Hadhramout almost 20,000-25,000 persons were estimated to be displaced, of which 25 percent were women of reproductive age and 1 in 5 were estimated to be pregnant. According to the findings, Reproductive Health services, especially in the IDP settlements, were non-existent. Pregnant women were particularly vulnerable due to widespread disruption of health services and a potentially increased case-load. With the support of the CERF funds, UNFPA established mobile clinics that provided FP and/or maternal health services.

5. Monitoring and evaluation

Upon distribution of the CERF grants to the different agencies, project implementation commenced under specific agreed arrangements between the agencies and their respective counterparts. Under the umbrella of the UNEPRT, information was shared on constraints, achievements and general updates based on evaluations and discussions held with implementing counterparts, and vice-versa.

Assistance to War Affected Persons – Sa'ada

The monitoring and evaluation of the emergency response in Sa'ada faced a number of difficulties due to the resurgence of the conflict during the reporting period. For instance, UNICEF has not been allowed to access Sa'ada following the last UN assessment visit in February due to security reasons. For UNICEF, monitoring and evaluation was limited to regular phone calls (when lines were functioning) and activity reports.

UNHCR on the other hand, developed a remote management strategy which enabled regular contacts with field staff, implementing and other stakeholders regarding the implementation of activities and provided guidance to breach gaps.

In addition, since June 2007 WFP has had an office in Sa'ada town for regular monitoring and contact with beneficiaries. However, due to the weakened security situation, in 2007 and 2008 monitoring remained limited to output indicators as the setting in Sa'ada governorate (i.e. conflict and inaccessibility issues) did not allow for outcome monitoring.

Inter-agency coordination meetings were conducted both in Sana'a and field level as a means of information sharing to avoid duplication in the provision of assistance to IDPs.

Joint inter-agency assessments to identify gaps and appropriate mechanism of response were also part of the UNCT efforts to ensure a one-UN monitoring in the target areas and respective sectors.

Assistance to Floods Affected Families – Hadhramout

Some of the monitoring and evaluation practices adopted by the UN system for Hadhramout, as was in the case of UNICEF, included the deployment of a team of local and international staff

immediately after the onset of the flood emergency to coordinate with the other partners and UN agencies and to monitor the delivery of relief items, recruitment of international WES consultant to be based in Seyun for four months since Jan 09 to monitor implementation of the projects, regular visits to project sites to monitor and follow up on the work during the various stages of assessment and implementation.

IOM for instance continued reporting to headquarters and counterparts, sharing information gathered on its own assessment and identifying gaps on aid deliver.

WFP established an office in Seiyun (Hadhramout) in the immediate aftermath in order to register beneficiaries and manage distribution. However, due to the nature of the operation and the short duration of only 2 months in 2008, monitoring was only focused on output indicators.

UNFPA recruited a national consultant to conduct several assessments in Seyun to make sure that interventions were based on real needs of the target group. This consultant and UNFPA project staff attended all interventions, meaning trainings and distribution of dignity kits. In addition, monitoring reports were required from implementing partners regularly; the national consultant provided regular evaluation reports.

For the case of UNHCR, a team consisted of UNHCR staff and its implementing partner SHS carried out monitoring missions regularly during the overall period of the intervention.

In addition, UN joint missions and joint capacity building activities were conducted to ensure that all protection interventions were monitored in a coordinated manner.

Food Security Support to Vulnerable Groups Affected by High Food Prices

WHO was able to conduct supervisory visits throughout the project implementation to both TFCs and OTPs in the target governorates to ensure their proper setting up and also quality training on early detection and management of severe malnutrition cases.

Monitoring of the EMOP's progress was implemented using WFP monitoring and evaluation (M&E) guidelines, a performance monitoring plan based on the EMOP's logical framework. WFP Yemen used the existing capacity with the counterparts of the current country programme to facilitate this EMOP. The General Food Distribution Component was implemented using schools as a platform; therefore WFP collaborated with local councils and the Ministry of Education for implementation and monitoring. WFP Yemen maintained a regular distribution monitoring to ensure that the food reached the desired recipients, and to acquire the basic data to report on the output indicators. WFP is in the process of implementing a quarterly post-distribution monitoring to collect data on the outcomes of this EMOP.

The Ministry of Health was the lead in addressing severe child malnutrition through implementing the Community Management of Severe Acute Malnutrition. UNICEF supported the Ministry of Health in the monitoring and evaluation by conducting field supervisory visits to project sites. In parallel, UNICEF developed a monthly report already used by 4 TFCs and 16 OTP that already set up in 4 governorates.

IV. Results

Sector/ Cluster	CERF projects per sector	Amount disbursed (US\$)	Number of Beneficiaries	Implementing Partners	Expected Results/Outcomes	Actual results and improvements for the target beneficiaries
Food	08-WFP- 014 Food assistance for internally displaced persons, returnees and the war effected population in Sa'ada governorate	2.2 million	Total: 76,752 Male: <5: 13,132 5-18: 11,968 >18: 12,805 Total M:37,905 Female: <5: 12,752 5-18: 12,805 >18: 13,290 Total F: 38,847	<ul style="list-style-type: none"> ▪ IRY ▪ (Islamic Relief Yemen) 	<ul style="list-style-type: none"> ▪ Save lives in crisis situations and maintain/improve the food security and nutrition status of beneficiaries ▪ Reach all those in need of food assistance 	<ul style="list-style-type: none"> ▪ In 2008, 76,752 war affected persons benefited from over 5,745 MT of food ▪ The majority of WFP food was provided to families living in displacement that had been left with little or no belongings and savings during the prolonged conflict. For internally displaced persons – particularly those in the camps and Malaheet area – assistance was life saving. For those families who were able to return to their places of origin, WFP food helped maintain the food security and nutritional status of families as they attempted to rebuild their homes and livelihoods.
Protection/ NFIs	08-HCR-003 Protection of IDPs and Returnees in Sa'ada Governorate	104,038	77,000	<ul style="list-style-type: none"> ▪ UNHCR Sana'a and Filed Office Sa'ada 	<ul style="list-style-type: none"> ▪ UNHCR established presence through operational Field Office in Sa'ada with essential staff to provide administrative support to the IDPs Operation 	<ul style="list-style-type: none"> ▪ UNHCR presence enabled provision of protection and assistance to some 77,000 IDPs in Sa'ada governorate. ▪ DP were able to access information and services through collaborative effort made by UNHCR, WFP, UNICEF, YRC , INGOs and government authorities.
Protection	08-HCR-003 Protection of IDPs and Returnees in Sa'ada Governorate	73,281	77,000 IDPs in Sa'ada s	<ul style="list-style-type: none"> ▪ Al Amal ▪ UNHCR Sana'a and Aden ▪ SMS 	<ul style="list-style-type: none"> ▪ Necessary items timely delivered for people of concern able to meet their basic need through provision of NFIs 	<ul style="list-style-type: none"> ▪ The assorted NFIs (7,910 mattresses, 3,000 jerrycans, 27,360 soap bars, 3,530 powder soap, 4,200 sanitary napkins, 1,900 tents, 9,900 blankets, 2,100 kitchen sets, 1,047 stoves) were procured and delivered in a timely manner. 90 percent of these NFIs were distributed while 10 percent are reserved to respond to emergency cases, especially the affected population in the Amran and Al Jarwf Governorates. ▪ All 3,000 identified vulnerable households benefited from the distribution of WFP monthly food ration ▪ Procured tents and NFIs were transported internationally and locally from Aden, Sana'a, Sa'ada and the distribution points.

Protection	08-HCR-003 Protection of IDPs and Returnees in Sa'ada Governorate	61,026	77,000 IDPs in Sa'ada	<ul style="list-style-type: none"> UNHCR HQs Geneva 	<ul style="list-style-type: none"> Effective delivery of protection and assistance to IDP and other people of concern in Sa'ada governorate 	<ul style="list-style-type: none"> 77,000 identified IDPs were able to benefit from HQ support towards the delivery of protection, information, counselling and awareness to meet their basic needs.
Protection/ NFIs	Non-food Items (NFIs)/ 08-HCR-003 (Protection of IDPs and Returnees in Sa'ada Governorate)	218,150	6,320 HH (2,528 males, 3,792 females)	<ul style="list-style-type: none"> AI - Atmel Charitable Community for Social Welfare (ACCSW) 	<ul style="list-style-type: none"> Non-food items, including mattresses, blankets, tents, and stoves procured, delivered and distributed based on an assessment of needs, to vulnerable IDPs and returnees in close coordination with other actors in the field Distribute sanitary pads and soap to women of childbearing age to improve their personal hygiene standard. 	<ul style="list-style-type: none"> 6,320 vulnerable IDPs households in six camps and 11 settlements were identified and benefited from the distribution of assorted NFIs Two warehouses rented for the storage of NFIs in Sa'ada and Sanaa and managed by AI Amel One video recorder rented and digital camera procured by Amel and was used to document all IDPs activities including the distribution of NFIs
Protection	Income Generation/08-HCR-003 (Protection of IDPs and Returnees in Sa'ada Governorate)	27,027	80 IDPs (50 female, 30 males)	<ul style="list-style-type: none"> Sa'ada Charitable Women Association (SCWA) 	<ul style="list-style-type: none"> Cash for work is provided to those who assist in the erection of tents for vulnerable families as a means to generate income to support their livelihood 	<ul style="list-style-type: none"> 80 IDPs were provided cash in terms of training in basic skills (carpentry, embroidery, and sewing) and start-up kits for their initiative in assisting in the erection of tents for vulnerable families.
Protection	08-HCR-003 Protection of IDPs and Returnees in Sa'ada Governorate		77,000 IDPs in Sa'ada	<ul style="list-style-type: none"> Operational support of IPs were included under the sector activities for Protection (SCWA) and Transport and warehousing and distribution transport sector (AL Amal) 	<ul style="list-style-type: none"> Coordination with partners reinforced through a series of collaborative efforts and training; and adequate operational support provided for effective functioning 	<ul style="list-style-type: none"> Few actors were working in Sa'ada, NRC, CARE, DRC using other resources. UNHCR signed sub agreement with local partners early May, knowing in advance the limited capacity and the lack of knowledge of UNHCR procedure. The AI Amel Foundation for the storage, handling and distribution of NFIs, while the Sa'ada Charitable Women's Association (SCWA) for registration, profiling, management of the counselling & information centre (ICC) and income generating activities. Due to security situation proper training could not be carried out for the IP during the first semester. Regular telephone conversations took place, to support the Field Office and the two NGOs who were quite dedicated but certainly needed more capacity building.

						<ul style="list-style-type: none"> UNHCR also collaborated with WFP for the provision of food to IDPs, UNICEF in the area of protection and WATSAN, YRC in camp coordination and camp management as well as other international and local NGOs.
Protection	08-CEF-009B Protection of children affected by armed conflict	74,990	1,000	<ul style="list-style-type: none"> Sa'ada Women's Association 	<ul style="list-style-type: none"> Provide psycho-educational support for the IDP children Schools in affected areas provided with recreational boxes to be use with school children Conduct awareness package on a variety of relevant issues such as girls education, early marriage, and children trafficking for IDP families 	<ul style="list-style-type: none"> Psychosocial support to IDP children Increased awareness among IDP parents and children about specific issues such as girl's education, early marriage, and children trafficking for IDP families.
Protection/ Legal Assistance	Protection/08-HCR-003 (Protection of IDPs and Returnees in Sa'ada Governorate)	14,828	22,156 IDPs registered and profiled (males and females of all ages)	<ul style="list-style-type: none"> Sa'ada Charitable Women Association (SCWA) 	<ul style="list-style-type: none"> Registration and deregistration procedures established, profiling of IDPs and identification of risks IDPs having access to being enrolled in school IDPs having access to the legal aid centre and receive proper advice Local staff and member of the government attending workshop on IDP principles, right and their duty Women feel safe in the 	<ul style="list-style-type: none"> Registration/profiled of 22,156 IDPs in six camps and seven local settlements conducted and documented. One legal aid centre established with 250 IDPs the visits of inquiring about available assistance and services recorded. Of these, 155 were assisted, (51 received NFIs, 20 with food assistance, 30 medical referrals and 49 received counselling and legal services (42 psychosocial, 4 SGBV counselling, 3 legal)). One workshop was held for local authorities on the guiding principle of IDPs and one CCCM training conducted for all stakeholders involved in camp management. Two populated camps hosting IDPs were electrified and risk on women minimized. Information dissemination through meetings conducted by SWCA and targeted 120 IDP households, mainly women. The issues relating to SGBV, prevention and response were highlighted at all sessions. Reduction in the cases of SGBV was recorded and changes made in the lives of IDP families concerning gender issues. 1,896 women identified and assisted with

					<p>camps during darkness thanks to the lighting system</p> <ul style="list-style-type: none"> SOPs for SGBV and distribution of Sanitary napkins are in place 	<p>sanitary napkins.</p>
Education	<p>08-CEF-009A</p> <p>Educational support for Sa'ada governorate</p>	<p>97,360</p>	<p>40,000 school students, 400 displaced children & 1706 children in destroyed schools.</p>	<ul style="list-style-type: none"> Sa'ada Education Office Sa'ada Women Charitable Association Islamic Relief. 	<ul style="list-style-type: none"> 40,000 students in 116 schools in the affected areas will be provided with school kits and stationery The tents are supporting temporary schools 300-400 IDP children will be provided with psycho-educational activities 300-400 IDP children will have access to education while in the camps 	<ul style="list-style-type: none"> The following supplies were provided 55 Tents for temporary schools and counselling rooms (19 have been installed) 529 School-in-a-box kit for 80 students each (delivered in the warehouses of Sa'ada Education Office and to be distributed for the second term of the academic year 2008 – 2009) 63 Recreation kits 50 ECD kits 13,993 School bags for students 400 children (200 boys and 200 girls) were reached by psycho-education programme 120 women and girls completed the literary training course The CERF funds enabled the IDP children of Sa'ada to get necessary psycho-educational and recreational activities. The provision of educational supplies also enabled the education office to expand the education coverage to the conflict affected children of Sa'ada which is a necessary protective environment in such a complex emergency. The psycho-educational activities have resulted in a giving hope for the IDP children for the first time since they and their families were displaced to Sa'ada.
Nutrition	<p>08-CEF-009C</p> <p>Community based Therapeutic care programme for under five children</p>	<p>380,000</p>	<p>1,824 U5 children affected by malnutrition in Sa'ada</p>	<ul style="list-style-type: none"> CSSW 	<ul style="list-style-type: none"> Contribute to the reduction of under five morbidity and mortality caused by malnutrition 	<ul style="list-style-type: none"> Procurement of essential medicine to manage cases of malnourished children Procurement of nutrition measuring tools (scales, height board, and MUAC) and nutrition kit Procurement of ready to use therapeutic food Support the printing of IEC materials, stationary for the better advocacy and monitoring of the project

Assistance to Floods Affected Families – Hadhramout

Sector/ Cluster	CERF projects per sector (Add project nr and title)	Amount disbursed (US\$)	Number of Beneficiaries (by sex/age)	Implementing Partners	Expected Results/Outcomes	Actual results and improvements for the target beneficiaries
Food	08-WFP-074 Support to people affected by floods in Southern Yemen	400,000	Total: 25,000 Male: <5: 2,575 5-18: 4,325 >18: 5,650 Total M:12,550 Female: <5: 2,500 5-18: 4,150 >18: 5,800 Total F: 12,450	▪ N/A	▪ To provide adequate food energy consumption (kcal) over the assistance period for targeted beneficiaries	▪ 539.88 MT of WFP food provided to 25,000 severely affected persons. ▪ Based on assessments, the continuous flow of food had a major impact on the food consumption and nutrition status of IDPs in the flood hit areas. According to a UNICEF rapid assessment of the nutrition status of IDPs, malnutrition rates for children under the age of 5 were lower than the national average. Moreover, WFP in-depth assessment found that the food consumption scores among families was above excellent due to the outpouring of food assistance to the area.
HEALTH	08-WHO-068 Emergency requirements of the health sector for Hadhramout and Al Mahra governorates, Yemen	313,200	11,679 children vaccinated against measles in Al Mahra (from WHO share of funds) 1,269,245 target population for medical supply	▪ MOPHP	▪ Epidemic-prone areas were affected by flood waters ▪ The lack of emergency health care provisions ▪ 96 health facilities' water supply systems were damaged, contaminated or destroyed including sewage and septic tanks, pipes and bathrooms.	▪ To increase vaccination coverage and decrease immunity gap among target groups in the flood affected areas; ▪ To early detect any abnormal trend of epidemic prone diseases; ▪ To timely respond to any emergency health situations; ▪ To strengthen the local capacity in needs assessment and responding to emergencies.

	08-CEF-088A Emergency requirements for conducting Measles campaign for Hadhramout and al-Mahara Governorates	215,000	150,000 Children (9mo-5 years)	<ul style="list-style-type: none"> Ministry of public health and population 	<ul style="list-style-type: none"> Increase immunisation coverage against measles to above 80 percent in all districts in Hadhramout to avoid any measles epidemics following the floods 	<ul style="list-style-type: none"> The Measles campaign was conducted and achieved 87 percent and 89 percent coverage rates in both Sayoun and Mukala.
Health	08-FPA-042 Providing of RH services in flood affected areas	51,355	3,000 women from the flood affected areas and IDP clusters	<ul style="list-style-type: none"> Health Office in Syoon 	<ul style="list-style-type: none"> 3 RH Coordinators + 7 Reproductive Health focal point in the 7 affected districts and for the 13 IDP clusters are established 	<ul style="list-style-type: none"> 3 RH Coordinators selected in January 2009 to coordinate the RH emergency activities in the flood affected areas, in addition to 7 Reproductive Health focal points in the 7 affected districts and for the 13 IDP clusters. HO together with the coordinators developed distribution plan for RH Kits into health facilities working in the flood affected areas and drew a road map for outreaching activities to provide RG services through the mobile clinic to the 13 IDP clusters
	08-FPA-042 Providing of RH services in flood affected areas				<ul style="list-style-type: none"> 3 mobile teams are established 	<ul style="list-style-type: none"> According to plan developed by the HO, 13 services delivery points, 8 for 2 mobile clinics (4 each) and 5 for one mobile clinic, and announced for population week ahead before starting the outreaching activities Each mobile team was established to be composed of: <ul style="list-style-type: none"> Driver 1 Gyne & Obst or GP 1 Midwife The number of beneficiaries from the mobile clinic by the end of February reach <ul style="list-style-type: none"> 1,000 women have received FP or maternal health services 2000 women have received Primary Health services

	08-FPA-042 Providing of RH services in flood affected areas				<ul style="list-style-type: none"> ▪ RH Kits are transported in distributed the health facilities in the targeted areas 	<ul style="list-style-type: none"> ▪ 60 kits were transported to Wadi Hadwamout. The RH kits arrived Sayoon were distributed to health facilities in the flood affected areas according to distribution plan made by HO. ▪ Instead of distribution of the kit as on package for each kit, the Kits were opened at the Health office and their contents are distributed to the health facilities as per their needs
	08-FPA-042 Providing of RH services in flood affected areas				<ul style="list-style-type: none"> ▪ Needs assessment were conducted in all health facilities which provide RH services. 	<ul style="list-style-type: none"> ▪ TOR was developed and contract was signed between the HO and one of the local experts (Ahlam Babreak) to conduct the assessment. The assessment process was started and currently under implementation
	08-FPA-042 Providing of RH services in flood affected areas			<ul style="list-style-type: none"> ▪ Health Office in Al-Mukalla 	<ul style="list-style-type: none"> ▪ 1 RH Coordinators + 5 Reproductive Health focal point in the 7 affected districts and for the 13 IDP clusters are established ▪ 3 mobile teams are established ▪ RH Kits are transported in distributed the health facilities in the targeted areas 	<ul style="list-style-type: none"> ▪ No activities have implemented in Mukalla Governorate as the CERF fund was not available till the mid of the March. The fund has just released

<p>Water and Sanitation</p>	<p>08-CEF-088A Emergency requirements in Water & sanitation sector for Hadhramout Governorate/Yemen</p>	<p>248,131</p>	<p>22,496</p>	<ul style="list-style-type: none"> ▪ GARWP, local NGOs 	<ul style="list-style-type: none"> ▪ Appropriate technologies and interventions are addressed. ▪ The affected people are well informed on the hygienic practices ▪ the most affected people are served by adequate water and sanitation services 	<ul style="list-style-type: none"> ▪ The affected water schemes identified and prioritized ▪ The affected populations have access to minimum safe potable water. ▪ The affected populations have access to adequate sanitation services. ▪ The affected population is received knowledge on appropriate hygiene practices
<p>Protection/ NFIs</p>	<p>08-HCR-041 "Emergency Assistance to flood affected population in Eastern Yemen"</p>	<p>133,892</p>	<p>5,172 HHS estimated to be 20,000 persons</p>	<ul style="list-style-type: none"> ▪ UNHCR/ SHS 	<ul style="list-style-type: none"> ▪ Local and international procurement of NFIs process on a timely manner. ▪ Ensure to access to basic assistance and services provided to the most vulnerable groups. ▪ Carry out regular assessments, monitoring and data and information of the affected population. 	<ul style="list-style-type: none"> ▪ 3,023 flood affected HHs in seven districts of Hadhramout governorate had been provided with NFIs. The item provided include mattresses, blankets, jerrycans, kitchen sets, plastic sheets, kerosene lamps, toilet & laundry soaps and sanitary napkins. ▪ 2,149 affected HHs had been provided with similar NFIs in four districts of Al-Mahra governorate. ▪ During the emergency intervention, priority was given to reach the most vulnerable groups such as the marginalized minorities, women headed families and refugees.
<p>Protection</p>	<p>08-HCR-041 "Emergency Assistance to flood affected population in Eastern Yemen"</p>		<p>20,000 persons</p>	<ul style="list-style-type: none"> ▪ UNHCR/ UNICEF 	<ul style="list-style-type: none"> ▪ Ensure that access to basic assistance of all affected people in a transparent way and without discrimination 	<ul style="list-style-type: none"> ▪ Protection working group was formed and held regular meetings twice per week in order to discuss and solve protection related issues. ▪ UNHCR played a leading role in the protection working group

					<ul style="list-style-type: none"> targeting children, elderly and persons with disabilities Assist families and individuals in restoring lost documents and recovering lost documents. 	<ul style="list-style-type: none"> All affected families registered with the local authorities in Hadhramout were able to have their lost documents replaced upon approaching the civil registration office.
	08-HCR-041 Emergency Assistance to flood affected population in Eastern Yemen		26,040	<ul style="list-style-type: none"> UNHCR HQ 	<ul style="list-style-type: none"> Effective delivery of protection and assistance to the flood victims in Hadhramout 	<ul style="list-style-type: none"> Some 6,297 flood affected families were able to benefit from HQ support towards the delivery of protection, basic NFIs to meet their emergency needs.
	08-HCR-041 Emergency Assistance to flood affected population in Eastern Yemen	2,000		<ul style="list-style-type: none"> UNHCR Sana'a 	<ul style="list-style-type: none"> Deployment of UNHCR staff for the emergency intervention from SO Aden and RO Sana'a 	<ul style="list-style-type: none"> UNHCR staff presence enabled the provision of the emergency assistance and protection to flood victims in Hadhramout and Al-Mahra governorate.
Protection	08-IOM-030 Emergency Shelter Assistance and IDP Management in Hadhramout		1,200 IDP Families	<ul style="list-style-type: none"> The Islamic Society and the Pen Proponent Forum of Al Qaten 	<ul style="list-style-type: none"> Assist IDP Families to determine their immediate needs and facilitate their participation on the emergency phase by organizing open workshops in five districts of Hadhramout. Targeted population 1,000 families 	<ul style="list-style-type: none"> 15 open Workshops in 5 Districts of Hadhramout with the participation of 500 IDP women and 700 IDP men. Comprehensive list of IDP needs and community priorities consolidated in each District. Information shared with NGOs and UN Agencies
	08-IOM-030 Emergency Shelter Assistance and IDP Management in Hadhramout		3,391 IDP Women	<ul style="list-style-type: none"> University of Hadhramout Female students and graduates; The Women Society of Tarim and Shibam 	<ul style="list-style-type: none"> Provide direct counselling and referral while creating a database of IDP Women affected by floods in Hadhramout Wadi. Targeted population: 2,000 	<ul style="list-style-type: none"> Database of 3,391 female IDPs created, counselling and assistance provided in case by case basis, 44 Female surveyors trained and assistance network developed

					Women	
Shelter	08-HCR-041 "Emergency Assistance to flood affected population in Eastern Yemen"	236,108	1,125 households	<ul style="list-style-type: none"> ▪ UNHCR/ SHS 	<ul style="list-style-type: none"> ▪ International of emergency tents ▪ Distribution of emergency tents to the most affected population ▪ Respond to the basic shelter needs of the flood affected HHs ▪ Improve the condition of living of the affected people 	<ul style="list-style-type: none"> ▪ 2,775 emergency shelter kits (tents) purchased and distributed; out of this, 1,125 tents had been procured through the grant received from CERF. ▪ A total number of 1,125 flood affected families benefited from the emergency shelter.
	08-IOM-030 Emergency Shelter Assistance and IDP Management in Hadhramout	224,191	1,181 IDP Families	<ul style="list-style-type: none"> ▪ IOM Direct Assistance 	<ul style="list-style-type: none"> ▪ Improve shelter conditions of flood affected families in 5 Districts of Hadhramout, assist on reconstruction efforts of at least 1,000 houses 	<ul style="list-style-type: none"> ▪ Surveyed all Districts in Hadhramout Wadi, database of affected population created and shared with GoY & NGOs, 16,900 people of 1,181 Families directly assisted by distribution of shelter and reconstruction related NFIs,
	08-IOM-030 Emergency Shelter Assistance and IDP Management in Hadhramout		300 IDP Children	<ul style="list-style-type: none"> ▪ IOM Direct Assistance and The Pen Proponent Forum of Al Qaten 	<ul style="list-style-type: none"> ▪ Providing clothing assistance while encouraging children distress expression by plastic activities. 	<ul style="list-style-type: none"> ▪ Clothes for 300 children of families affected by floods distributed
	08-IOM-030 Emergency Shelter Assistance and IDP Management in Hadhramout		200 IDP Children, 50 IDP Families	<ul style="list-style-type: none"> ▪ Land Authority of Shibam District Government 	<ul style="list-style-type: none"> ▪ Reparation Of Fatima School in Shibam District of Hadhramout Governorate 	<ul style="list-style-type: none"> ▪ Improved the living condition of IDPs hosted at the school and ameliorate the infrastructure for 200 IDP children of primary school age.
	08-IOM-030 Emergency Shelter Assistance and IDP Management in Hadhramout		960 IDP Families	<ul style="list-style-type: none"> ▪ IOM Direct Assistance 	<ul style="list-style-type: none"> ▪ Assist shelter reconstruction and community based repairs by provision of brick mould machines and cement. Targeted population 1,000 IDP families 	<ul style="list-style-type: none"> ▪ 100 jobless HoH from IDP families received 22,000 YR and two bags of cement for making 2,000 mud bricks each, to be used on the reconstruction of their own houses.

Food Security Support to Vulnerable Groups Affected by High Food Prices

Sector/ Cluster	CERF projects per sector	Amount disbursed (US\$)	No. of Beneficiaries	Implementing Partners and funds disbursed	Baseline indicators	Expected Results/Outcomes	Actual results and improvements for the target beneficiaries
Health	08-WHO-067 Emergency health response to the food price crises in Yemen	200,000	150,000 vulnerable people (under 5, pregnant, and lactating mothers, patients with chronic diseases etc.)	MOPHP	<p>In 2003, 46 percent of children were underweight</p> <ul style="list-style-type: none"> ▪ In 2007, 34.8 percent of the population lived below the poverty line ▪ A 2008 Rapid Assessment Survey carried out in Sayoun found Severe Acute Malnutrition (SAM) = 0.50 percent, Moderate Acute Malnutrition (MAM) = 4.90 percent, Global Acute Malnutrition (GAM) = 5.40 percent ▪ Significant increases in food prices over the last couple of years increasing the difficulty of maintaining adequate nutrition 	<ul style="list-style-type: none"> ▪ Reduced case fatality rate due to malnutrition and associated diseases, namely acute diarrhoea, ARI and malaria ▪ Enhanced capacity and performance against life threatening diseases ▪ Improved system of early case detection and referral. 	<ul style="list-style-type: none"> ▪ Establishment of 9 Therapeutic Feeding Centres (TFC) in the central governorate hospitals ▪ Training of 6 personnel from each hospital to run the programme and identify and treat severe malnourished patients. ▪ Establishment of 9 Outpatient Therapeutic Programmes (OTP) complimented by UNICEF supplies. ▪ Running of one Mobile Clinic for treatment of malnourished patients.

Nutrition	08-CEF-083 Medication and Rehydration Solution for Severely Malnourished Children under five years of age nation wide in Yemen	438,826.25	100,000	MOH	<ul style="list-style-type: none"> ▪ Contribution in the reduction of mortality among malnourished children due to infections by providing essential medications 	<ul style="list-style-type: none"> ▪ Medications were procured and are arriving regularly 	<ul style="list-style-type: none"> ▪ Medications were procured and are arriving regularly
Food	08-WFP-070 Targeted food support to vulnerable groups affected by high food prices	1.3 million	377,482 total: 189,873 male 187,609 female	Ministry of Education	<ul style="list-style-type: none"> ▪ Save lives and reduce acute malnutrition caused by shock to below emergency level, preventing deterioration of the nutritional status of the affected population 	<ul style="list-style-type: none"> ▪ The CERF funding purchased 1,900 MT of wheat flour – the first tranche of the GFD component – and will serve as a partial food rations to assist families in meeting their food gap. 54,000 households in the poorest and most food insecure districts of the country will benefit from this wheat flour. 	<ul style="list-style-type: none"> ▪ The CERF funding purchased 1,900 MT of wheat flour – the first tranche of the GFD component – and will serve as a partial food rations to assist families in meeting their food gap. 54,000 households in the poorest and most food insecure districts of the country will benefit from this wheat flour.
Agriculture	08-FAO-038 Input supply to poor farmers	499 999	<i>approx. 14 800</i>	Ministry of Agriculture and Irrigation, Agriculture Research and Extension Authority	<ul style="list-style-type: none"> ▪ cereal seeds delivered to beneficiaries 	<ul style="list-style-type: none"> ▪ Increase the yield and production of cereals in the affected governorates, thus improving the food security level of the poor farmers/beneficiaries; ▪ Strengthened 	<ul style="list-style-type: none"> ▪ The project is ongoing in 2009, with seed expected to be delivered to beneficiaries within the end of June 2009. ▪ A no-cost extension of the project has been requested due to delays encountered with the procurement of seed (directly from the Government, as they are the sole source supplier for improved cereal varieties in the country) and in signature of a letter of agreement (LoA) with an implementing

						<p>technical knowledge and skills of the farmers/beneficiary families on agricultural practices;</p> <ul style="list-style-type: none"> ▪ Appropriate crops/cropping systems introduced and yield increased; ▪ Income to support basic needs. 	<p>partner. This request has been made to the RC – pending agreement the RC will formally submit the no-cost extension request to OCHA/CERF for approval.</p>
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CERF IN ACTION

Assistance to War Affected Persons – Sa'ada

Protection Sector

The prolonged conflict in Sa'ada Governorate coupled with inaccessibility to the affected population led to a deteriorating humanitarian situation which left IDPs hopeless and was only relying on humanitarian support. With the provision of the 2008 CERF grant, IDPs and other affected population found some relief to their devastating plight.

Over 50,000 IDPs residing in camps, urban and rural areas were provided protection and other assistance including NFIs, capacity building and grants to sustain their livelihood.



As a result of the funds provided, over 6,000 vulnerable IDPs households in six camps and 8 settlements were assisted which improve their living conditions and brought relieve on the local community.



The photographs show distribution of NFIs to IDPs and a single female-headed household with eight dependants who for the first time received assistance after several months of displacement.

Assistance to Floods Affected Families – Hadhramout

Food Sector

In October 2008, a tropical storm and subsequent floods affected the homes and livelihoods of thousands of families. Preliminary assessments suggested some 20,000 to 25,000 persons had lost their homes and belongings. Within 48 hours, ready-to-eat food had been transferred to the area and distributed to families. Within the first week, WFP was distributing a full food basket to families living in settlements across the region after their homes had been completely destroyed and belongings lost. However, funding and commodities were being borrowed from other operation and without additional funding WFP would be unable to continue providing food to those in need.

WFP had originally planned to assist some 20,000 persons based on preliminary estimates from the October rapid needs assessment mission. However, as time passed and previously inaccessible areas cut off by flooding were reached, it was clear that there were increased needs. The CERF grant allowed WFP to purchase 527.79 MT of food (out of a total 539.88 MT distributed) in order to meet the increased needs of 25,000 displaced and severely affected by floods without a pipeline break.

In the immediate aftermath of the crisis, aid agencies were cut off from families in remote areas due to floods and the destruction of roads. As water receded over the days and weeks, WFP was able to reach pockets of families in desperate need of assistance across remote valleys and mountain tops. On 18 November a local community leader informed WFP that 100 families were displaced on the top of a mountain called Hareer, some 150 Km away, in desperate need of assistance. WFP followed the Sheikh on an unpaved road over hostile desert. After nearly three hours of tortuous journey from Sah to Hareer, WFP staff finally reached the destination and was warmly welcomed by the community who had not seen a humanitarian agency since the floods had washed away their homes, belongings, and livelihoods. By the time WFP arrived, the community had already been on the hill for three weeks, inaccessible to humanitarian organizations.



WFP delivering food to flood victims in Qatan district – Nov 2008

Families were depending on any food items they were able to rescue from the floods, the few food items they were able to rescue from the floods, such as rice, or any dates they had been able to pick after the floods receded. WFP assured the community that the agency would provide families with food items as well as convey their needs to other organizations back in Seiyun. Returning the following day with food for families, over the 8 hour drive from Seiyun to Hareer, the truck carrying WFP food aid suffered two punctures. Regardless of the logistical challenges faced, within less than 48 hours displaced families in Hareer had received food,

shelter and non-food items. In recounting the story, WFP staff recalled how gratifying it was to realize the difference they had made in the lives of the Hareer community. These families had been barely surviving and would have been forced to migrate in search of food and shelter had WFP and the Sheikh not climbed the mountain to bring desperately needed assistance.

Assistance to Floods Affected Families – Hadhramout

Health Sector

After the flood waters abated, 96 hospitals, health centres, and units, in the affected areas were left with either no functioning water supply or storage system, or equally problematic, a contaminated or damaged system. The quick response by WHO thanks to the availability of CERF funds made the provision of 125 water tanks of various sizes possible to support affected health care facilities. Not only were the tanks provided to health facilities requiring them, all connections and fittings were carried out to ensure the functionality of the supply system. It was

a truly marvellous accomplishment and prevented from outbreaks of many water-borne and hygiene-related diseases.



Annex: Acronyms and Abbreviations

ARRA	Administration for Refugees and Returnees Affairs
ACCSW	Al - Amel Charitable Community for Social Welfare
CSSW	Charitable Association of Social Welfare
CERF	Central Emergency Response Fund
ICC	Counselling & Information Centre
CTC	Community Therapeutic Care
D.O	Designated Officer
DRC	Danish Refugee Council
ERC	Emergency Response Coordinator
ECHO	European Commission Humanitarian Aid Office
ECD	Early Childhood development
FAO	Food for Agriculture Organization (of the United Nations)
GARWP	General Authority for Rural Water Projects
GFD	General Food Distribution
IRY	Islamic Relief Yemen
IEC	Information-Education-communication
IDP	Internally Displaced Persons
INGO	International Non-Governmental Organizations
IOM	International Organization for Migration
MSF	Medicins Sans Frontiers (Doctors without Borders)
MoPH&P	Ministry of Public Health and Population
M&E	Monitoring and Evaluation
MUAC	Middle Upper Arm Circumference
NFIs	Non Food Items
NGOs	Non-Governmental Organizations
NNGOs	National Non-Governmental Organizations
NRC	Norwegian Refugee Council
OCHA	Office for Coordination and Humanitarian Affairs
OTP	Outpatient Therapeutic Programmes
RC	Resident Coordinator
SCWA	Sa'ada Charitable Women Association
SGBV	Sexual Gender Based Violence
TFC	Therapeutic Feeding Centres
UN	United Nations
UNCT	United Nations Country Team
UNDP	United Nations Development Programme
UNDSS	United Nations Division for Safety and Security
UNDAC	United Nations Disaster and Assessment Coordination
UNEPRT	UN Inter-agency Emergency Preparedness and Response Team
UNFPA	United Nations Population Fund
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations Children's Fund
USAID	United States of America International Development
WASH	Water and Sanitation
WES	Water and Environmental Sanitation
WATSAN	Water and Sanitation
WFP	World Food Programme (of the United Nations)
WHO	World Health Organization (of the United Nations)
YRC	Yemen Red Crescent