

# UNICEF HUMANITARIAN ACTION YEMEN IN 2009



Core Country Data	
Population under 18 (thousands)	11,729
U5 mortality rate	73
Infant mortality rate	55
Maternal mortality ratio (2000–2007, reported)	370
Primary school enrolment ratio (2000–2007, net, male/female)	85/65
% U1 fully immunized (DPT3)	87
% population using improved drinking-water sources	66
% U5 suffering moderate and severe underweight/stunting	46/53

Source: *The State of the World's Children 2009*

The Republic of Yemen located in the south-west of the Arabian Peninsula has been experiencing emergencies during 2008 on three fronts: (1) the conflict in the northern Governorate of Sa'ada; (2) the impact of current global price increases on the national economy; and (3) the impact of a severe tropical storm on the south-east of the country, particularly Hadramout and Al-Mahara Governorates. All of these are having a strong impact on vulnerable women and children in the country where 40 per cent of the total population live below the poverty line. In Sa'ada, 70 per cent of an estimated 170,000 internally displaced persons are women and children.

Summary of UNICEF Emergency Needs for 2009*	
Sector	US\$
Health and Nutrition	950,000
Water, Sanitation and Hygiene	220,000
Education	780,000
Child Protection	100,000
<b>Total**</b>	<b>2,050,000***</b>

\* Funds received against this appeal will be used to respond to both the immediate and medium-term needs of children and women as outlined above. If UNICEF should receive funds in excess of the medium-term funding requirements for this emergency, UNICEF will use those funds to support other underfunded emergencies.

\*\* The total includes a maximum recovery rate of 7 per cent. The actual recovery rate on contributions will be calculated in accordance with UNICEF Executive Board Decision 2006/7 dated 9 June 2006.

\*\*\* The emergency needs reflected in the HAR are in addition to UNICEF's needs of US\$ 2.5 million outlined in the UN floods response plan.

## 1. CRITICAL ISSUES FOR CHILDREN AND WOMEN

The conflict in Sa'ada Governorate, which is 240 kilometres from the capital Sana'a, started in 2004 and has been ongoing despite many mediation efforts. The latest ceasefire was declared in June 2008. Of the Governorate's population of 700,000, it is estimated that over 130,000 are displaced throughout the region, mainly in seven camps or with host families within and around Sa'ada. Women and children comprise a high percentage (over 70 per cent) of those affected and dwelling in the camps. With the destruction of many basic facilities, such as health, nutrition and education across the Governorate, access to services is affected. Opportunities for many livelihoods have diminished due to the conflict, and poverty levels have risen.

The global trend of increasing food prices during 2008 has severely affected Yemen – one of the poorest countries in the region. This situation is exacerbated by key health and nutrition indicators for women and children, which are already some of the worst in the world. The Family Health Survey (2003) showed stunting at 53 per cent, wasting at 12.4 per cent (120,000 children under age five are severely wasted) and underweight at 45.6 per cent. The 2006 World Food Programme/ UNICEF survey conducted in five districts indicated anaemia to be 81.5 per cent among children under age five; 73.1 per cent among pregnant women; and 83 per cent among lactating women. Children under age five are the most vulnerable segment of the population and are more at risk of malnutrition when availability and access to food are compromised at the community level.

A strong tropical storm blew across southern Yemen in the last week of October 2008 and hit the two south-east Governorates of Hadramout and Al-Mahara. Sixty-eight deaths were reported, 2,000 houses damaged and over 100 institutions affected, including infrastructure such as power and phone lines, roads and water systems in various locations of the two Governorates. Some 25,000 to 30,000 people (3,500 families) have been displaced with the overall number of persons affected (especially those whose livelihoods were destroyed) rising to 700,000. A total of 79 health facilities, including hospitals and health centres, and 14 schools comprising 62 classrooms were partially or severely damaged in both Governorates. Seventy-five per cent of the damage was sustained by the Wadi region of Hadramout, mainly the historic area of Seyoun. A rapid assessment undertaken by a joint UN team in the immediate aftermath of the storm confirmed that around 20,000 to 22,000 people were displaced. The priority needs are food, clean water, prevention of waterborne diseases and repair of damaged water systems, medicines, shelter, and restoration of livelihoods and rehabilitation of basic services, like schooling, as flood victims have taken shelter in public buildings including schools. The World Bank's assessment of the damage to infrastructure and shelter will complement the joint UN team assessment on humanitarian needs.

## 2. KEY ACTIONS AND ACHIEVEMENTS IN 2008

After a rapid assessment undertaken in Sa'ada Governorate by a joint UN team during cessation of hostilities in May–June 2007, UNICEF worked through local and international NGOs on the ground in the areas of nutrition, water, sanitation and hygiene, education and protection. Partners included the Charitable Society for Social Welfare (CSSW), Yemeni Red Crescent, Islamic Relief, the Charitable Society of Yemeni Doctors, and Sa'ada Women's Association. Following training of health staff in the main government hospital, NGOs and volunteers in the management of severe acute malnutrition at community and facility levels and with the establishment of three outpatient therapeutic centres, 1,029 children under age five were screened, 158 referred to the outpatient therapeutic programme (OTP) and 17 to therapeutic feeding centres.

In water, sanitation and hygiene (WASH), 32 latrines and 5 wash basins were constructed in the two camps serving mainly women and children. Twenty-four volunteers were trained in correct hygiene practices in order to reach internally displaced persons (IDPs). The distribution of blankets and shoes benefited 1,814 young children and 847 children aged 1 month–12 years in time for the onset of winter. School kits and bags benefited 40,000 students. Awareness-raising sessions on girls' education, early marriage and child trafficking were organized for 3,000 parents in the camps. Psycho-educational support was provided to 400 internally displaced children and literacy skills and awareness on child protection issues to 100 internally displaced girls.

As regards child protection, a psychosocial needs assessment of children, adolescents and families was undertaken as well as field research on children affected by armed conflict, which will form the basis for future programme interventions. First-level psychosocial interventions targeting displaced children have been undertaken in early 2008.

For the ongoing crisis precipitated by high food prices, UNICEF focused its efforts on addressing the management of severely acutely malnourished children under age five through the establishment of community therapeutic care (CTC) centres with the aim to go to scale within the next year. Based on the 2003 Pan Arab Project for Family Health (PAPFAM) survey, some 120,000 children nationwide are estimated to be severely acutely malnourished. UNICEF supported the Government in

developing its Emergency Nutrition Action Plan mid-2008, which includes the establishment of 13 therapeutic feeding centres (TFCs) offering inpatient care in main referral hospitals nationwide and outpatient therapeutic programmes (OTPs) in each of the country's 334 districts. Capacity-building of health professionals and community volunteers is part of the strategy. In October 2008, an international nutrition expert trained 180 key government health professionals, university professors, NGOs (CSSW), hospitals and health centres. The establishment of OTPs and TFCs will be prioritized in Governorates experiencing emergencies such as Hadramout, al-Mahara and Sa'ada, as well as those with the highest severe acute malnutrition indicators. UNICEF is procuring partial quantities of ready-to-use therapeutic food (RUTF) needed for a six-month period, drugs, therapeutic milk and rehydration solutions for complicated malnutrition cases as well as anthropometric tools to go to scale with interventions. Furthermore, within the next six months, UNICEF will be facilitating the local production of RUTF in Yemen, thus considerably reducing future production and freight costs.

In the two flood-affected Governorates of Hadramout and Al-Mahara, UNICEF is taking the lead in the nutrition, WASH, education and child protection sectors. To this end, UNICEF is providing supplies for 1,000 families, including 50 water tanks (2m<sup>3</sup> capacity), 7,500 blankets, 2,000 twenty-litre jerrycans, 1,000 plastic jugs for water, 2,600 hygiene kits and 900 boxes of water purification tablets (containing 9 million tablets). The prevention of waterborne diseases is a key lifesaving priority in the immediate emergency phase. Distribution is undertaken through government systems and selected NGOs, such as the Yemeni Red Crescent, with reliable networks on the ground. UNICEF is advocating for available impregnated mosquito nets to be redirected from current Ministry of Health supplies to malaria-prone areas in the two Governorates. The need to repair water systems in rural areas is another priority. Seventy-two tents are being provided for temporary learning spaces (schools) pending Government decision to establish camps for IDPs without shelter, or continue to allow people to live in the schools until homes are repaired in affected areas. Initial supplies, such as 70 'school-in-a-box' kits and basic stationery are also being provided for affected schoolchildren.

### 3. PLANNED HUMANITARIAN ACTION FOR 2009

#### Coordination and Partnership

The UN Emergency Planning and Response Team chaired by the World Food Programme (WFP) on behalf of the UN Resident Coordinator is the main UN coordination mechanism. Cluster-based approach principles are currently being followed by the concerned UN agencies working with Government and civil society organizations in emergency situations. The official adoption of the approach will be formalized as soon as the joint UN Emergency Contingency Plan is finalized.

#### Linkages of HAR with the Regular Programme

The activities proposed above in all three scenarios are accelerated interventions from the regular programmes of young child survival and development, education and protection, and are adapted for the particular situation. They will contribute to the key results of the Regular Programme.

UNICEF supports activities in the different emergency scenarios detailed above. Those for Hadramout complement the activities contained in the UN response plan for immediate and early recovery. UNICEF's overall goal in emergencies is to contribute in collaboration with key partners to ensuring that women and children access their rights to basic services and protection.

#### Health and Nutrition (US\$ 950,000)

For 2009, the overall goal is to minimize the impact of the ongoing crisis on the health and nutritional status of children under age five and to ensure that pregnant women in affected areas are identified and provided with micronutrient supplementation. Some 200,000 IDPs (25,000 in Hadramout and 170,000 in Sa'ada), host communities and impoverished persons will benefit from the following key activities:

- Procure and distribute essential emergency drugs and equipment to cover the needs of the 200,000 IDPs during three months;
- Continue supporting the three therapeutic feeding centres and 16 OTPs previously established; establish 11 new TFCs and 338 OTPs for the management of 120,000 children suffering from severe acute malnutrition;

- Train 44 trainers and 660 doctors and nurses in the management of severe acute malnutrition in OTPs; 20 doctors and 40 nurses in the management of complicated cases of severe acute malnutrition in TFCs; and 6,000 community volunteers in screening for severe acute malnutrition at household level;
- Support the implementation of nutrition surveys (one in February and one in August 2009) in five areas of Yemen;
- Procure and administer twice a year vitamin A to all children under age five (8 million doses);
- Engage in social mobilization campaigns to promote appropriate infant and young child feeding behaviour as well as immediate and exclusive breastfeeding.

### **Water, Sanitation and Hygiene (US\$ 220,000)**

For 2009, the overall WASH aim is to ensure that children and women have safe and reliable access to culturally appropriate, secure, sanitary and user- and gender-friendly sanitation facilities and that they receive critical information on how to prevent child mortality, especially from diarrhoeal disease; and to ensure sanitation facilities for 20 per cent of affected schools in Hadramout and access to clean drinking water and sanitation facilities among 10,000 to 14,000 IDPs (2,000 families) and returnees in Sa'ada. Specific actions include, but are not limited to:

- Set up effective leadership for WASH cluster/inter-agency coordination, and ensure children's and women's special needs regarding water, sanitation and hygiene are met through the recruitment of an international WASH specialist for a six-month period;
- Ensure that women and children have safe and reliable access to sufficient water of appropriate quality and quantity for drinking, cooking and maintaining good hygiene;
- Undertake water treatment at household level among returnees facing drinking-water problems in Sa'ada Governorate through the provision of household water filters;
- Support hygiene promotion in accessible schools and returnee communities, especially among returnees, local councillors and influential leaders, and provide hygiene kits;
- Construct/rehabilitate gender-responsive sanitary facilities in 30 schools in Sa'ada, giving priority to girls' schools (benefiting approximately 1,000 girls);
- Promote hygiene education and hygiene awareness programmes in these 30 schools and neighbouring communities in Hadramout in order to complement existing water and sanitation services.

### **Education (US\$ 780,000)**

For 2009, the overall goal is to create a network of stakeholders and partners in education that are active in emergency situations by (a) establishing coordination mechanisms with education partners to support Government; (b) raising awareness on the cluster-based approach/tools and standards among partners; and (c) setting up monitoring and evaluation mechanisms with education partners.

#### **Conflict in Sa'ada**

For 2009, the overall goal is to respond to the educational needs of 50,000 internally displaced and returnee children and 500 teachers in Sa'ada through the following key activities:

- Supply basic scholastic materials, including notebooks, pencils and erasers, for 50,000 primary schoolchildren;
- Procure and distribute recreational kits and school supplies for 25,000 children;
- Train 500 primary schoolteachers, with particular attention to psycho-educational support, HIV/AIDS prevention and peace education in collaboration with relevant agencies;
- Build the capacity of local education authorities to conduct needs assessments, supply distribution and monitoring;
- Distribute self-learning materials for 3,000 internally displaced children.

### **High food prices**

For 2009, the overall goal is to raise awareness and highlight the negative impact of high food prices on school enrolment in Yemen. Some 500 school councils involving parents and school personnel of 10 Governorates will benefit through the following key activities:

- Conduct impact assessment in selected Governorates to get a field evidence base of the impact of food prices on enrolment and retention of children in schools, especially girls;
- Engage in advocacy activities highlighting the impact of high food prices on enrolment and retention rates in schools and finding local solutions to address the consequences of early drop-out, such as early marriage and trafficking;
- Organize advocacy meetings with the Girls' Coordination Councils in 22 Governorates to develop local plans in partnership with civil society organizations and private sector to minimize the impact of high food prices.

### **Child Protection (US\$ 100,000)**

For 2009, the overall goal is to scale up psychosocial response to at least 5,000 children affected by the conflict in Sa'ada and the floods in Hadramout through the following key activities:

- Set up a network of professionals involved in psychosocial interventions (based on the Young Men's Christian Association (YMCA) model in the Occupied Palestinian Territory). The network would become the basis for a referral system to monitor abuse;
- Set up at least five child-friendly spaces;
- Support recreational and psychosocial activities for at least 5,000 children.

Other child protection interventions in Sa'ada:

- Advocate for child rights, including the implementation of the Optional Protocol to the Convention on the Rights of the Child on the involvement of children in armed conflict;
- Raise awareness on the impact of traditional practices, such as early marriage;
- Undertake a rapid assessment on child trafficking;
- Support the registration of at least 5,000 children;
- Support the identification, registration and family tracing of unaccompanied minors;
- Advocate for the care and protection of orphaned and other vulnerable children;
- Undertake capacity-building of at least 90 service providers in using play therapy.